



PROGRAM EMERGENCY RESPONSE PLAN

Program Name:	PAI-Oakdale
Program Address:	6866 33 rd St. N, Suite 150 Oakdale, MN 55128
Program Emergency Response Plan Prepared By:	Lindsay Hiland, Program Director
Date Plan was Developed:	9/23/2022

Instructions:

The purpose of this form is to prepare for response to emergency situations. This document is intended to outline emergency procedures which staff will implement. Complete the physical plant assessment, attach current evacuation plans, and describe the emergency procedures. These procedures are to be followed during designated safety drills and in actual emergency situations.

This form must be completed for each program location. Once approved, the *Program Emergency Response Plan* (PERP) will be posted and available to all staff. This document is to be reviewed and updated annually by the Program Director and approved by the Vice President of Operations.

Physical Plant Assessment:

Briefly describe the physical plan and its surroundings, as relates to overall safety and security.

Location:

Oakdale is located in a business park adjacent to other businesses. Our shared parking lot can be quite busy including semi-truck traffic due to business loading docks near the back entrance. Trucks will drive alongside the Oakdale center and past the front entrance.

Entrances and Exits:

There are two entrances/exits at oakdale. The front entrance located on the east side of the building, entrance is fully accessible (zero grade) and is the only entrance/exit that is regularly used by participants. Busses load/unload at the front entrance. The rear entrance is located on the west side or back of the building. There is a set of stairs and a ramp going down to the ground level used by participants only as an emergency exit.

Exterior Lighting:

The Oakdale parking lot is lit with street lamps and there is a light in the front entranceway as well.

Security:

Both entrances to the building are armed with an alarm which is monitored by Wellington Security. The rear entrance is kept locked during business hours. Program Supervisors, Directors, and staff that are scheduled to arrive earlier have keys and the alarm code to enter Oakdale. Doors are unlocked during normal program hours and locked during all other hours.



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Fire Monitoring, Alarm(s), and Suppression:

Security system monitored by Wellington Security. 911 will be called by the alarm company if the monitoring system is set off. The Oakdale site is outfitted in with an automatic ceiling sprinkler system. There are audio and visual alarms to alert in the event of a fire. There are a total of three fire extinguishers in the building: one by the main front entrance/exit, one by the rear entrance/exit, and a third in the laundry room.

There are two fire hydrants near PAI-Oakdale. The nearest hydrant is located across from the main entrance in the front of the building, on the east side of the building. The second hydrant is located on the west of the building along the edge of the parking lot. The fire department has access to the PAI-Oakdale building via the shared parking, using either of the two parking lot entrances off of the culidsac.

Location of Emergency Shut-offs:

Maintenance closet located half way down the main hall on the north wall.

Location of Electrical Panels:

In maintenance closet by the rear (west) entrance.

Location of First Aid Kit(s):

Each program room has a first aid kit as well as a kit in the Designated Coordinator office.

Location of AED(s):

None.

Location of Flashlights:

Each program room has a flashlight and there is one in the conference room. There are additional flashlights located in the front storage closet

Location of Emergency Weather Radio:

Designated Coordinator Office.

Emergency and Non-Emergency Phone Numbers:

Emergencies:	CALL 911
Mental Health Crisis Intervention Team: Washington County Crisis Response	651-275-7400
Closest Emergency Care Center/Hospital: St. John's – 1575 Beam Ave. St. Paul	651-232-7348
Closest Urgent Care Center: The Urgency Room - 7115 Tamarack Rd.	651-789-7000
Emergency Transportation Services: N/A	N/A
Police Department (Non-Emergency): Oakdale Police Department	651-739-5086
Fire Department (Non-Emergency): Oakdale Fire Department	651-739-5086
Poison Control:	800-222-1222



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County Emergency Management: Washington County	651-430-6000
Temporary Shelter: N/A	N/A
Other: Click or tap here to enter text.	Click or tap here to enter text.

Program-Related Emergency Phone Numbers:

Designated Coordinator: Ashleigh Shirley	715-410-5113
Designated Coordinator: Cortney Kelley	612-619-6801
Designated Program Emergency Contact: Lindsay Hiland, Program Director	651-336-6323
Assigned Nurse or Nurse Consultant: Toni Anderson	651-336-6323
Nurse Emergency Contact: HCS on-call	612-990-9352
Other: Alicia McCallum, Chief Operations Officer	763-691-4049
Other: Mike Miner, President	651-724-4410

Utility Emergency Contacts:

Gas Company: Xcel Energy	Customer Svcs: 800-895-4999 Report a Leak: 800-895-2999
Electric Power Company: Xcel Energy	800-895-1999
Telephone Company: Comcast Business	800-391-3000
Maintenance: John Meagher	715-377-2605
Alarm Company: Wellington Security	612-822-4094
Other: Link Logistics Real Estate	612-448-2843

Emergency Response Procedures:

For each situation, describe:

- Who is responsible for sounding an alert and how the alert will be communicated.
- What actions will be taken and the role/position responsible for each. Think specifically about medication, equipment, emergency contact information, that needs to be gathered in the event of an evacuation or relocation; who will be notified by whom; who will be responsible for checking that evacuation was complete; who will be responsible for attending to whom note any specific procedures for evacuation of persons with limited mobility and who will be responsible.
- Where are people to go. What is the designated safe meeting space.



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- *How will an “all-clear” announcement or relocation decision be made.*
- *In the case of a power failure, note if any individuals cannot be served safely during an extended outage and what protocol is to be followed.*

Utility Failures (Gas Leak, Power Failure, Water Failure, or Flood)

1. During a power failure, all staff will remain with persons served. If persons are not in the immediate area at the program, staff will locate them and bring them to the central program area.
2. The power company will be contacted by cell phone to determine estimated length of the power outage. If estimated to last less than two hours, the manager or designee will be contacted to determine what actions will be taken. If the power outage is to last more than two hours, staff will transport the persons to a safe area or location as previously established by the manager.
3. If gas is smelled or a gas leak is suspected, staff will evacuate persons to the northeast parking lot.
4. The gas company will be immediately notified and instructions followed.
5. No one will be permitted to use lighters, matches, or any open flame during this time. All electrical and battery operated appliances and machinery will be turned off until the all clear has been provided.
6. The manager or designee will be notified of the gas leak. This call will be made by staff from the safe area using a cell phone or from a neighbor’s phone.
7. If relocation to a designated safe area such as an emergency shelter is necessary, staff will follow the procedures in the Temporary Shelter and Location section below.

Bomb Threat

1. Upon receiving a bomb threat, staff at the program site should pull the fire alarm, if available.
2. Staff will ensure that everyone leaves the building and assembles in the northeast parking lot.
3. Staff will immediately call “911” from a neighbor’s telephone or a cell phone.
4. Staff and persons will remain outside the building until further instructions are received from the police or fire department.
5. If unable to re-occupy the building, staff will follow the procedures in the Temporary Shelter and Location section below.

Medical Emergency

1. Staff will first call “911” if they believe that a person is experiencing a medical emergency (including serious injury), unexpected serious illness, or significant unexpected change in illness or medical condition that may be life threatening and provide any relevant facts and medical history.
2. Staff will give first aid and/or CPR to the extent they are qualified, when it is indicated by their best judgment or the “911” operator, unless the person served has an advanced directive. Staff will refer to the Policy and Procedure on the Death of a Person Served for more information.
3. Staff will notify the Designated Coordinator and/or Designated Manager or designee who will assist in securing any staffing coverage that is necessary.
4. If the person is transported to a hospital, staff will either accompany the person or go to the hospital as soon as possible. Staff will not leave other persons served alone or unattended.
5. Staff will ensure that a completed Medical Referral form and all insurance information including current medical insurance card(s) accompany the person.
6. Staff will remain at the hospital and coordinate an admission to the hospital. If the person served is not to be admitted to the hospital, staff will arrange for transportation home.



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7. Upon discharge from the hospital or emergency room, staff transporting to the program site will coordinate with the assigned nurse or nurse consultant, Designated Coordinator and/or Designated Manager or designee and ensure that:
 - a. All new medications/treatments and cares have been documented on the Medical Referral form
 - b. All medications or supplies have been obtained from the pharmacy
 - c. All new orders have been recorded on the monthly medication sheet
 - d. All steps and findings are documented in the program and health documentation, as applicable
8. If the person's condition does not require a call to "911," but prompt medical attention is necessary, staff will consider the situation as health threatening and will call the person's physician, licensed health care professional, or urgent care to obtain treatment.
9. Staff will contact the assigned nurse or nurse consultant or Designated Coordinator and/or Designated Manager or designee and will follow any instructions provided including obtaining necessary staffing coverage.
10. Staff will transport the person to the medical clinic or urgent care and will remain with the person. A Medical Referral form will be completed at the time of the visit.
11. Upon return from the medical clinic or urgent care, staff will coordinate with the assigned nurse or nurse consultant, Designated Coordinator and/or Designated Manager or designee and ensure that:
 - a. All new medications/treatments and cares have been documented on the Medical Referral form
 - b. All medications or supplies have been obtained from the pharmacy
 - c. All new orders have been recorded on the monthly medication sheet
 - d. All steps and findings are documented in the program and health documentation, as applicable

Fire

1. Staff will respond immediately to all fire and smoke detector alarms or signs of fire by activating the alarms system.
2. All persons will be evacuated from the building by staff and assembled in the northeast parking lot.
3. "911" will be immediately called from a neighbor's telephone or a cell phone in order to report the fire.
4. Staff will contain the area of the fire, if feasible, by closing doors. If it is possible to put out the fire with a fire extinguisher, staff will attempt to do so.
5. Staff will notify the manager or designee.
6. Persons served and individuals will not reenter the program site until the police or fire department issue instructions that the area is safe.
7. If the program site is not habitable and relocation to a designated safe area such as an emergency shelter is necessary, staff will follow the procedures in the Temporary Shelter and Location section below

Severe Weather

1. At the first sign of severe weather, including but not limited to high winds, heavy snow or rain, or extreme temperatures, staff will confirm the location and safety of all persons served.
2. Staff will listen to the radio or watch television for current weather conditions.
3. Upon hearing sirens or a take cover warning, staff will notify all persons that they need to seek shelter and will guide all persons to the designated safe area in the facility and will also bring a battery operated radio or television set, first aid kit, and flashlight.
4. If feasible, persons served but not scheduled for supervision will be called and warned.
5. Staff will assist all persons in staying in the safe area until an all clear is issued through the radio or by other means.
6. If injury or damage occurs, staff will notify the manager or designee and follow directions given.
7. If relocation to a designated safe area such as an emergency shelter is necessary, staff will follow the procedures in the Temporary Shelter and Location below.



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Criteria for Calling 911 – For Person Served in Danger of Harming Self or Others or Experiencing a Mental Health Crisis

1. Staff will implement any crisis prevention plans specific to the person served as a means to de-escalate, minimize, or prevent a crisis from occurring.
2. If a mental health crisis were to occur, staff will ensure the person's safety, and will not leave the person alone if possible.
3. Staff will contact "911," a mental health crisis intervention team, or a similar mental health response team or service when available and appropriate, and explain the situation and that the person is having a mental health crisis.
4. Staff will follow any instructions provided by the "911" operator or the mental health crisis intervention team contact person.
5. Staff will notify the Designated Coordinator and/or Designated Manager or designee who will assist in securing any staffing coverage that is necessary.
6. If the person is transported to a hospital, staff will either accompany the person or go to the hospital as soon as possible. Staff will not leave other persons served alone or unattended.
7. Staff will ensure that a completed Medical Referral form and all current insurance information including current medical insurance card(s) accompany the person.
8. Staff will remain at the hospital and coordinate an admission to the hospital. If the person served is not to be admitted to the hospital, staff will arrange for transportation home.
9. Upon discharge from the hospital or emergency room, staff transporting to the program site will coordinate with the assigned nurse or nurse consultant, Designated Coordinator and/or Designated Manager or designee and ensure that:
 - a. All new medications/treatments have been documented on the Medical Referral form
 - b. All medications or supplies have been obtained from the pharmacy
 - c. All new orders have been recorded on the monthly medication sheet
 - d. All steps and findings are documented in the program and health documentation, as applicable

Violence/Active Shooter

1. No weapons are permitted during service provision or on any property or service location of PAI.
2. If staff encounter a person who is armed and dangerous, staff will not attempt to challenge or disarm the person, but will remain calm and talk with the person using direct eye contact.
3. If a participant is the aggressor and has a Positive Support Transition Plan or other positive supports, staff will follow the plan and any service location procedures on behavior intervention.
4. Staff will attempt to keep other persons out of the area where the aggressor is located.
5. If other staff are present, and if possible, the Designated Manager will be notified.
6. If the situation warrants it, staff will call "911" and follow instructions given.

Missing Person

1. Based on the person's supervision level, staff will determine when the person is missing from the program site or from supervision in the community.
2. Staff will immediately call "911" if the person is determined to be missing. Staff will provide the police with information about the person's appearance, last known location, disabilities, and other information as requested.
3. Staff will immediately notify the Designated Coordinator and/or Designated Manager or designee. Together a more extensive search will be organized, if feasible, by checking locations where the person may have gone.
4. The Designated Coordinator and/or Designated Manager or designee will continue to monitor the situation until the individual is located.



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5. If there is reasonable suspicion that abuse and/or neglect led to or resulted from the unauthorized or unexplained absence, staff will report immediately in accordance with applicable policies and procedures for reporting and reviewing maltreatment of vulnerable adults or minors.

Temporary Shelter and Location

1. Staff will ensure that everyone leaves the building and will assist all persons in gathering in the northeast parking lot.
2. Staff will immediately notify the manager or designee of the conditions that may require emergency evacuation, moving to an emergency shelter, temporary closure, or the relocation of program to another site.
3. The manager or designee will coordinate relocation of services in a way that promotes continuity of care of persons served.
4. The manager or designee will coordinate and assist staff as necessary in transporting persons to the designated location.
5. If access to the program site is permitted, staff will transfer persons' program files, clothing, necessary personal belongings, current medications, and medication administration records to the designated location.
6. The manager will notify the legal representative or designated emergency contact, and case manager, and other licensed caregiver (if applicable) of the new location of the program if necessary

Lindsay Hiland

Print name of Program Director

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Lindsay Hiland
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Signature of Program Director

9/23/2022

Date

Alicia McCallum

Print name of VP of Operations

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Signature of VP of Operations

9/23/2022

Date