



Support Coordination and Direct Service Provider Responsibilities for Emergency Preparedness

OAAS-TNG-18-006

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What is an Emergency?

▶ Emergencies include, but are not limited to:

- Tornados
- Fires
- Floods
- Chemical spills
- Etc.

▶ The Emergency Preparedness plan should address ALL types of hazards

Support Coordination Agency & Provider Responsibilities

- ▶ Each provider and agency must have an emergency plan.
- ▶ All employees must be trained in emergency preparedness during orientation and on an ongoing basis.
- ▶ Employees must participate in planned emergency or natural disaster preparedness drills.
- ▶ Providers and agencies must cooperate to ensure that each participant has an individual plan for dealing with emergencies and disasters.

The Emergency Plan

▶ The Emergency Plan must:

- be written
- updated annually (DSP)
- address continuity of operations
 - ◆ Focus on how the agency will manage any consequences of any disaster or emergency that disrupts the ability to render care and treatment, or, threaten the lives or safety of participants.
 - ◆ include plans to coordinate with local and/or parish Office of Homeland Security and Emergency Preparedness (OHSEP) and include provisions for persons with disabilities.
- be approved by the provider/agency's governing body.

When Disaster Strikes

- ▶ SCA and providers will:
 - Monitor weather warnings, watches, and evacuation orders.
 - Execute their emergency preparedness plan.
 - Cooperate with OAAS and local or parish OHSEP.
 - ◆ **Provide participant updates as requested by OAAS.**

Note: Participants need to understand the importance of responding during an emergency to verify their status.



Direct Support Provider (DSP) Emergency Plans

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Minimum Expectations for DSP

- ▶ Provide for delivery of essential services to each participant as identified in the OAAS emergency plan.
 - Whether the participant is in a shelter or other location.
- ▶ Have adequate and qualified staff available to manage essential functions.
 - Provisions for back-up staff.
- ▶ Notify participant's family and/or support coordinator of the participant's evacuation status.
- ▶ Ensuring sufficient supplies, medication, clothing and copy of service plan are sent with the participant, if evacuated.

Minimum Expectations for DSP (cont'd)

- ▶ Ensure the participant evacuates with identification information, including:
 - Current and active diagnosis,
 - Medications, including dosage and times administered,
 - Allergies,
 - Special Dietary Needs or restrictions, and
 - Next of kin, including contact information.

Following a Disaster

- ▶ Upon request of the department, submit a copy of the emergency plan and written summary attesting to:
 - How the plan was followed/executed?
 - What (if any) plans were not followed?
 - What circumstances caused those plans not to be followed?
 - What alternate arrangements were used?
 - Report of any/all adverse outcomes for participants.

Emergency Planning for Adult Day Health Care (ADHC)

Louisiana Department of Health

628 North 4th Street, Baton Rouge, Louisiana 70802

(225) 342-9500

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ADHC Responsibilities

- ▶ ADHCs must have a written overall plan of emergency and safety procedures that address the following:
 - Evacuation to a safe or sheltered area,
 - Provisions for training staff and participants, as needed, in preventing, reporting, and responding to fires and other emergencies.
 - Provide means for an ongoing safety program.
 - Include provisions for training personnel in emergency duties and use of any fire-fighting or other emergency equipment in the immediate work areas.

ADHC Responsibilities (cont'd)

- ▶ To ensure appropriate & accessible first aid supplies in the center's building and all vehicles used to transport participants.
- ▶ Have access to telephone services when participants are in attendance.
 - Emergency numbers for fire department, police, medical services, poison control, and ambulance should be posted and easily accessible.
- ▶ ADHC center must immediately notify LDH and other appropriate agencies of any fire, disaster, or other emergency which may present a danger to participants or require their evacuation from the center.

ADHC Responsibilities (cont'd)

- ▶ Any interruption in service, or, a change in the license location due to an emergency situation, the provider is required to notify HSS no later than next business day.
- ▶ Have a policy and procedure assuring the notification of family member or responsible parties when an emergency occurs for an individual participant.
- ▶ Implement emergency medical procedures and notify the participant's family and other medical personnel upon identification of any non responsive participant.
- ▶ Conduct Emergency drills at least once every three months.
 - Make every effort to ensure that BOTH staff and participant recognize the nature and importance of such drills.

Support Coordination (SC) Responsibilities

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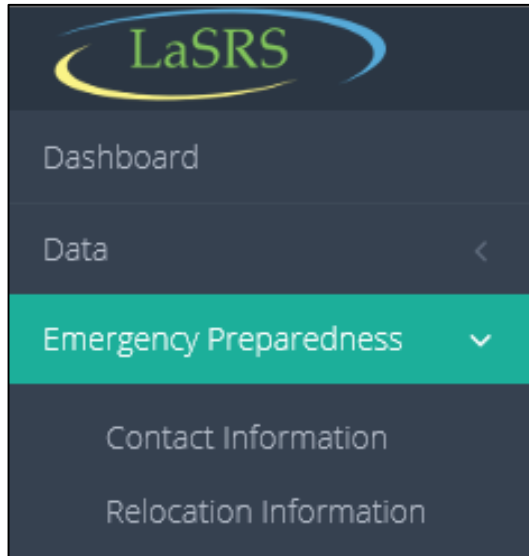
Ongoing SC Responsibilities


- ▶ Complete the OAAS emergency plan (OAAS-PF-09-004) with each participant at least annually.
- ▶ Collaborate with waiver providers for completion including obtaining signature or verbal agreement accepting responsibility for designated tasks on the form within 5 business days.
- ▶ Review for any possible changes at least monthly via monthly contacts.
 - document on the OAAS Support Coordination Contact Documentation (SCD) log.
 - ◆ Provide updates to the emergency plan to all service providers as applicable.



During an Emergency - SC Responsibilities

- ▶ During hurricane season (June 1- November 30), SCs must ensure that all contact information for a participant and those listed on their emergency plan is up-to-date.
- ▶ In the event of a general active emergency (i.e.- named storm in the Gulf), contacts must be confirmed weekly.
- ▶ In the event of an impending direct threat, OAAS will send out directives to SCA.

LaSRS Emergency Preparedness Module for SC's



Expand the data by clicking the  button on the record you would like to update, then select **Edit** to input new contact information.

Contact Information										
	Last Name	First Name	SSN	Waiver	Office	Parish	Region	SC Agency Name	Update Needed	Update Needed By
	DOE	JANE	XXX-XX-	OAASCCW	OAAS	SUNSHINE	10	#1 SUPPORT COORDINATION	Needs Update	04/05/2019
	DOE	JOHN	XXX-XX-	OAASCCW	OAAS	SUNSHINE	10	#1 SUPPORT COORDINATION	Needs Update	09/28/2018

LaSRS Editing Contact Information Screen Shot

Edit Current Information

Secondary Contact	<input type="text"/>	Requires placement in MSNS *	<input type="text"/>
Secondary Contact Phone #	<input type="text"/>	Dialysis +	<input type="text"/>
Secondary Contact Alternate Phone #	<input type="text"/>	Registered sex offender or RSB *	<input type="text"/>
Ventilator *	<input type="text"/>	Insulin dependent +	<input type="text"/>
Life Sustaining Equipment *	<input type="text"/>	Current Information Notes	<input type="text"/>
Requires Electricity for Equipment *	<input type="text"/>		

Contact Information Tab

- ▶ The contact info must be updated or confirmed every:
 - 90 days outside of Hurricane Season &
 - 30 days during Hurricane Season.
- ▶ If **Needs Update** is displayed then the record/field needs to be updated or confirmed.

Agency Name	Update Needed	Needed By
<input type="text"/>	Needs Update	03/13/2019
SIL : NO		
Ventilator : No		
Life Sustaining Equipment : No		
Requires Electricity for Equipment : No		
Requires placement in MSNS : No		
Dialysis : No		
Registered sex offender or RSB : No		
Insulin dependent : No		
Confirm Current Information :	Confirm Info.	

LaSRS Emergency Preparedness Module

Event	Last Name	First Name	SSN	Waiver	Office	Event Parish	Event Region	SC Agency Name
Tropical Storm Gordon								
Sub Tropical Storm Alberto								
Flash Flooding								
Tropical Storm Nate								
Hurricane Harvey								
Wobbly Pumping Station								
Tropical Storm Cindy								

- ▶ The Relocation report only contains records in the event of an emergency.
 - It includes participants residing in the affected area at the time of the emergency.
- ▶ Information should be input into LaSRS at the time of the emergency.

LaSRS Editing Relocation Information Screen Shot

Edit Relocation Information

Evacuated	<input type="text"/>	Relocation Street Address (if applicable)	<input type="text"/>
Returned	<input type="text"/>	Relocation City	<input type="text"/>
Return Date	<input type="text"/>	Relocation State	<input type="text"/>
Evacuated With	<input type="text"/>	Relocation Zip Code	<input type="text"/>
Relocation Contact	<input type="text"/>	Relocation Contact Home Phone #	<input type="text"/>
Relocation Contact Relationship	<input type="text"/>	Relocation Contact Cell Phone #	<input type="text"/>
Relocation Street Address (if applicable)	<input type="text"/>	Contact Destination Phone #, if different	<input type="text"/>
		Relocation Information Notes	<input type="text"/>

Link to Resources:

In Home HCBS Licensing:

<http://dhhnet/departments/oaas/PPM/SharedDocuments/LAC-RULES/In-Home-HCBS-and-MIHC-Licensing-Rule-LAC48.Ch50and51-Dec2018.pdf>

ADHC Licensing: <http://dhhnet/departments/oaas/PPM/SharedDocuments/LAC-RULES/ADHC-Licensing-Rule-LAC48.Ch42-Dec2018.pdf>

Support Coordination Standards for Participation:

[http://dhhnet/departments/oaas/PPM/SharedDocuments/LAC-RULES/OAAS Promulgated Rules/Global Waiver Rule-LAC50.XXI/LAC50.XXI.Chapter 5-OAAS-Support-Coordination-Standards-for-Participation.pdf](http://dhhnet/departments/oaas/PPM/SharedDocuments/LAC-RULES/OAAS-Promulgated-Rules/Global-Waiver-Rule-LAC50.XXI/LAC50.XXI.Chapter-5-OAAS-Support-Coordination-Standards-for-Participation.pdf)

Waiver Procedures Manual, Section T-Reports:

<http://www.ldh.la.gov/assets/docs/OAAS/Manuals/WaiversProceduresManual/T-Reports.pdf>

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