

My Horizon

Effective Date July 16, 2018

EMERGENCY RESPONSE AND RECOVERY POLICY & PROCEDURE

INTRODUCTION

Earthquakes, wildfires, winter storms, disease outbreaks and other emergencies can happen in Fairbanks. This document will assist staff in managing any emergency affecting our facilities.

Our facility must have a disaster preparedness and emergency evacuation plan approved by the state's licensing agency. This plan incorporates State of Alaska readiness requirements to ensure the safety of our clients and staff.

UNDERSTANDING THIS PLAN

To understand the planning process and to know who is affected by this plan and what we are planning for, you will want to take some time to go through this section to gather information, to gain knowledge and to make some assessments about our staff and facility to help in implementing this plan.

In the event of a natural or man-made disaster, My Horizon employees providing services for a given Participant will remain the primary care provider until such time a transfer of Participant to the Legal Guardian or the designated emergency plan Guardian can occur.

In the event of a natural or man-made initiated disaster occurring during non-operational hours, My Horizon will follow directions addressed by the community emergency plan. The existing phone tree of communication will be updated, as needed to insure all effort is put forth with regards to sharing information and identifying Service Plan(s) that meet with the conditions of the situation. Almost every incident, accident, or emergency in this plan will require a critical incident report. Contact the Executive Director to ensure this is acted upon.

In the event of a fire at the activities center, fire exits are available on either side of the main room. A fire evacuation plan is posted at each entry/exit. Staff and participants will gather at the far side of the parking lot in warm weather. Instructions from emergency responders will be followed. During cold weather, staff vehicles will be used.

The American Red Cross, Tanana Valley Chapter in Fairbanks, provides emergency services to the Fairbanks North Star Borough. They can be contacted at (907) 456-5937, and are located at 3501 Lathrop Street, Fairbanks AK 99701. In the event of a natural disaster, the Carlson Center is the primary meeting place located at 2010 2nd Ave., Fairbanks, AK 99701.

In the event a given activity on the daily schedule does not appear in the best interest of the Participant for any given reason, the destination for Services will be transferred to the main facility.

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In the event that a Care Provider fails to arrive to pick-up the Participant at the scheduled time/location, My Horizon management will be called immediately, and the closest available Provider will be dispatched to pick-up the Participant. If a provider is unavailable, My Horizon supervision will go to the pick-up/location to assume responsibility for the participant until an alternate Care Provider can assume responsibility for the care of the Participant.

OVERVIEW:

1. Know who will be affected by this plan.

Participants, providers, administrative staff, and their family members.

2. In addition to building-specific emergencies, be aware of what hazards may affect the local area.

Natural Technological Human/Societal:

- Earthquake
- Wildfire
- Extreme Weather
- Flooding
- Avalanche
- Ground Failure/Landslide
- Volcanic Ash Fall
- Severe Erosion
- Infectious Disease
- Energy Emergency
- Food/Water Contamination
- Transportation Accident
- Air Pollution
- Communications Failure
- Civil Disturbance
- Terrorism—including
- Chemical, biological
- Radiological, nuclear, or Explosive agents.

3. Know how you will obtain information during an emergency.

If the emergency affects only a small area of the community, the police or fire department may notify you by going door-to-door in the affected area. For emergencies affecting a large area of the community, the Borough will issue an emergency alert via the Emergency Alert System (EAS). Be sure you have a battery-operated radio and extra batteries stocked in the disaster supply kit. Here are sources of information in the event of an emergency:

BOROUGH EMERGENCY OPERATIONS

David Gibbs, Director	459-1481
Craig Malloy, Emergency Manager	459-1219
Brad Paulson, Emergency Services Administrator	459-1214
Sandy Besser, Animal Control Manager	459-1451

VOLUNTEER ORGANIZATIONS

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Red Cross - emergency food, housing, clothing, etc., can also provide food and drink to emergency responders and displaced residents in the field.

American Red Cross Tanana Valley Chapter	456-5937
Fort Wainwright Office	353-7234
After hours messenger service	451-8267

Salvation Army - emergency food assistance for victims and volunteers	
Fairbanks Salvation Army	452-5005

MEDIA

Newspaper	
Fairbanks Daily News-Miner	456-6661

Radio	
KIAK-FM (primary EAS station)	457-1921
KUAC-FM (secondary EAS station)	474-7491
KCBF-AM and KXLR-FM	452-5121
KAKQ-FM	457-1921
KFAR-AM and KWLF-FM	479-5910
KJNP-AM and FM	488-2216
KSUA	474-5782
KIAM	832-5426

Television

KATN-TV	452-2125
KJNP-TV	488-2216
KTVF-TV	458-1837
KUAC-TV	474-7495
KFXF-TV, KXD-TV	452-3697

4. Evacuation locations.

Two places will be designated for everyone to meet and make sure all of the participant's emergency contacts know the alternate sites are located.

Primary Location – In the adjacent parking lot, away from dangers in the immediate building area.

Secondary Location - For use during winter/inclement weather - 2866 Circle Loop, North Pole, Alaska 99705.

5. Communications plan

Make sure that loved ones know how to reach you if you have evacuated the facility and make sure you know how to reach them. It's a good idea to include contact information in the disaster

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supply kit. Identify an out-of-area phone contact for families of staff and residents to call during a large-scale emergency. Out of area phone numbers often work better than local phone numbers during emergencies. If the power is out, many modern phones or phones with built in answering machines will not work because they require electricity to operate. Have a phone on hand that plugs in only to the phone jack and not into an electrical outlet so that you can call for help if necessary.

6. Disaster supply kit.

The main facility has a disaster supply kit and adequate supplies to sustain our staff and clients for up to 7 days if necessary.

Our kit consists of:

- Water, one gallon of water per person per day for seven days, for drinking and sanitation.
- Food, at least a seven-day supply of non-perishable food.
- Battery-powered or hand crank radio and a NOAA Weather Radio with tone alert and extra batteries for both.
- Flashlight and extra batteries.
- First aid kit.
- Whistle to signal for help.
- Dust mask to help filter contaminated air and plastic sheeting and duct tape to shelter-in-place.
- Moist towelettes, garbage bags and plastic ties for personal sanitation.
- Wrench or pliers to turn off utilities.
- Manual can opener for food.
- Local maps.
- Cell phones with chargers, inverter or solar charger.

Additional items to consider:

- Prescription medications and glasses.
- Food and extra water for animals.
- Cash or traveler's checks and change.
- Important documents such as copies of insurance policies, identification and bank account records in a waterproof, portable container. You can use the Emergency Financial First Aid Kit (EFFAK) (PDF - 977Kb) developed by Operation Hope, FEMA and Citizen Corps to help you organize your information.
- Sleeping bag or warm blanket for each person. Consider our cold-weather climate.
- Complete change of clothing including a long sleeved shirt, long pants and sturdy shoes. Consider our cold-weather climate.
- Household chlorine bleach and medicine dropper – When diluted, nine parts water to one part bleach, bleach can be used as a disinfectant. Or in an emergency, you can use it to treat water by using 16 drops of regular household liquid bleach per gallon of water. Do not use scented, color safe or bleaches with added cleaners.

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- Fire extinguisher.
- Matches in a waterproof container.
- Feminine supplies and personal hygiene items.
- Mess kits, paper cups, plates, paper towels and plastic utensils.
- Paper and pencil.
- Books, games, puzzles or other activities for children.

7. Be prepared to shelter-in-place.

Familiarize yourself with shelter-in-place procedures and identify a “safe spot” in the facility should sheltering-in-place become necessary.

8. Know how to shut off utilities.

9. Know how to operate and maintain fire extinguishers.

All staff should know where fire extinguishers are located and how to use them.

Like any mechanical device, fire extinguishers must be maintained regularly to ensure their proper operation.

10. Distribute this plan to all each staff member, each client’s family.

11. All staff will be trained on this plan within 30 days of hire, with refresher training annually thereafter.

12. Fire and emergency drills will be conducted monthly and documented in the binder for this plan.

13. This plan will be reviewed every six months or after any emergency requiring its use.

If a problem is identified during a review, develop a solution and practice the new procedure. If this resolves the problem, modify your plan to reflect the change and supply a copy of the modified plan or section to each staff member, client’s families, and to the state licensing authority.

EMERGENCY ORDERS

At the outset of an emergency, the facility administrator or lead staff on duty will designate an initial emergency order based on what is appropriate for the emergency. 911 will be called any time there is a life-threatening emergency. Initial emergency orders may be one of the following:

- **Drop-cover-hold**
- **Evacuate**
- **Lockdown**

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• Shelter-In-Place

As information about the emergency becomes known and as conditions change, the initial order may be amended by the facility administrator or lead staff. In an earthquake, for instance, residents and staff may be told to drop-cover-hold until the shaking stops, and then be told to evacuate the building. Emergency responders may be able to help the facility administrator or lead staff will decide if, when, or how orders should be changed.

DROP-COVER-HOLD

The need to drop-cover-hold is generally obvious such as during an earthquake or explosion.

Staff shall immediately ensure that able Participants:

1. Drop to the floor.
2. Get under a table or other sturdy piece of furniture.
3. Hold on to a table leg or other stable support during an earthquake.
4. Remain until the order is rescinded or revised by the administrator or lead staff.

Staff shall immediately assist Participants that are unable to drop-cover-hold to:

1. Move away from windows.
2. Protect their head using a pillow if possible.
3. Avoid moving around as much as possible.

Residents and staff caught outdoors should:

1. Move away from electrical wires, buildings or other structures that could collapse.
2. Get down and cover their heads if possible.

LOCKDOWN

Lockdown may be appropriate for an active attack or an intruder. Any staff member sensing an imminent threat to life is authorized to call a lockdown. This condition is maintained until the order is rescinded or revised by a recognized authority.

Staff shall immediately ensure that:

1. All residents are accounted for.
2. Residents get down and seek cover away from windows and doors.
3. All doors and windows are closed and locked.
4. All lights are turned off.
5. Doors and/or windows are covered, as appropriate, based on the threat.

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SHELTER-IN-PLACE

This action may be appropriate for a hazardous materials incident or disease outbreak. The shelter-in-place command is given by the facility administrator or lead staff. The order may be based on observations reported to the front office by third parties. This condition is maintained until the order is rescinded or revised by a recognized authority. Staff shall immediately ensure that:

1. All residents outdoors are brought inside.
2. All building entrance/exit doors and all exterior windows are closed and locked.
3. All rooms with an exterior wall are abandoned.
4. The heating system is shut down especially if it is a forced air system.
5. Using duct tape, abandoned rooms are converted to dead air spaces.
6. Roll will be taken, if possible.

EVACUATE

This action may be appropriate for fire, active attack, bomb threat, post-earthquake damage, wildfire, or facility fire. Evacuation may be the initial emergency order. It is always appropriate in the case of a facility fire, for instance. An evacuation could be called as a secondary action. With earthquakes, for example, evacuation may follow a drop-cover-hold for an inspection of the facility for damage. In an active attack, evacuation could be preceded by a brief lockdown period. During an evacuation, staff will ensure that:

1. Residents remain calm and organized.
2. Emergency duffel bags are taken if time permits.
3. Disaster supplies kits are taken.
4. Residents are assembled for roll call at pre-planned staging areas when possible.
5. Any posted evacuation routes are followed if conditions permit.
6. Notice is posted, if time permits, as to where residents have evacuate.

INCIDENT-SPECIFIC CHECKLISTS

This facility has established checklists of procedures to be followed in the different emergency events described below:

- Aircraft accident
- Incident with serious injuries
- Medical Emergency
- Animal problem
- Death at Facility
- Earthquake
- Explosion
- Fire in facility
- Fire near facility
- Flood
- Intruder
- Loss of utilities
- Bomb Threat
- Suspicious item
- Windstorm
- Disease outbreak

These checklists will aid administrators and staff in managing emergencies, particularly those that are drawn out in time and/or are a component of a larger, community-wide, disaster.

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Emergencies not appearing on this list may occur, but the lists still contain measures that might be helpful to staff trying to decide how best to respond.

The lists are not all inclusive. Additional measures may be required as an incident progresses. Conversely, events may unfold in such a way that some items on the checklist are rendered unnecessary or counter-productive. The checklists are there to remind staff of measures likely to be useful and worthy of consideration.

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AIRCRAFT ACCIDENT

1. Consider an initial emergency order based on the size of the aircraft, nature of the crash, and the impact location relative to the facility. If the facility is safe, residents should be kept indoors.
 - Shelter-in-place
 - Evacuation
2. Call 911 if necessary.
3. Evacuate if necessary. Change telephone message and leave information posted on facility door or window. Once at the evacuation point, notify residents' emergency contacts. Do not return to the facility until buildings have been declared safe by officials.
4. If structural damage is suspected, arrange for a structural inspection by contacting the Emergency Operations Center at 459-1214 or contact a qualified engineer.
5. Log activities, decisions, and communications as soon as possible.
6. Debrief staff and review actions taken to consider whether emergency procedures were effective.
7. Amend plan as necessary based on review.

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INCIDENT WITH SERIOUS INJURIES

1. Consider an initial emergency order.
 - Lockdown (ex: onsite violent crime)
 - Evacuate (ex: earthquake has rendered facility unstable)
2. Call 911 to report serious injuries.
3. Trained staff must administer first aid.
4. Notify emergency contacts of affected participants.
5. If a crime is committed, meet with police and assist in investigation as requested. Obtain and record case number for your records.
7. Reassure concerned residents and/or relatives regarding safety precautions at facility.
8. Log activities, decisions, and communications as soon as possible.
9. Debrief staff and review actions taken to consider whether emergency procedures were effective.
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MEDICAL EMERGENCIES

1. Consider an initial emergency order.
 - Lockdown (ex: onsite violent crime)
 - Evacuate (ex: hazardous environment)
2. Call 911 to report the nature of the medical emergency (injury type, poisoning, fall, allergic reaction, etc.)
3. Trained staff must administer first aid.
4. Notify emergency contacts of affected participants.
5. If a crime is committed, meet with police and assist in investigation as requested. Obtain and record case number for our records.
7. Reassure concerned residents and/or relatives regarding safety precautions at facility.
8. Log activities, decisions, and communications as soon as possible.
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ANIMAL PROBLEM

1. If life threatening, call 911, otherwise call Animal Control Manager 459-1451.
2. Confirm that police are notifying Alaska Fish & Game or Animal Control, as appropriate.
3. Monitor the situation, and act as necessary.
4. Keep residents isolated from the animal.
5. Keep track of the animal's location to the extent possible.
6. If animal injures someone, see accident/incident with serious injuries checklist.
7. Log activities, decisions, and communications as soon as possible.
8. Debrief staff and review actions taken to consider whether emergency procedures were effective.
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DEATH AT FACILITY

1. Do not move body, or disturb evidence or immediate surroundings.
2. Clear clients from area.
3. Call 911.
4. Do not phone next of kin if death was not from natural causes. Death notification will be made by the police.
5. If facility administrator is not on premises, contact them to respond to scene.
6. Log activities, decisions, and communications as soon as possible.
7. Debrief staff and review actions taken to consider whether emergency procedures were effective.
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EARTHQUAKE

1. Drop-cover-hold.
2. Call 911 after the shaking stops only if there is a life-threatening emergency.
3. Avoid glass and falling objects. Move away from windows where there are large panes of glass and heavy suspended light fixtures.
4. Inspect facility after the shaking stops or as soon as it is safe. If damage is apparent, consider evacuation.
5. If structural damage is suspected, request a structural inspection by calling the MOA Emergency Operations Center at 459-1214.
6. Warn all personnel to avoid touching electrical wires.
7. Determine a secondary emergency order:
 - a. If shelter-in-place is selected, begin planning for food, shelter, and sanitation requirements; secure disaster supplies kit.
 - b. If evacuation is selected, secure disaster supplies kit and retrieve emergency kit; instruct staff to take all personal items, including vehicle keys; change telephone message and post information on facility door or window. If evacuating, do not use exit routes that have heavy architectural ornaments over entrances/exits.
8. Obtain available information on the magnitude of the disaster; try to determine if aftershocks, fires, hazmat incidents, etc. are expected that may affect personnel, residents, or the facility.
9. Log activities, decisions, and communications as soon as possible.
10. Debrief staff and review actions taken to consider whether emergency procedures were effective.
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EXPLOSION

1. Select an initial emergency order:

- Drop-Cover-Hold
- Shelter in place

2. Move residents away from windows and out from under light fixtures to avoid glass and falling objects if possible.

3. Call 911.

4. When the event is over, inspect the facility if it is safe to do so. If structural damage is apparent, consider evacuation.

5. If evacuating, change telephone message and leave information posted on facility door or window. Once at the evacuation point, contact relatives.

6. If evacuating, do not use routes that have heavy architectural ornaments over entrances/exits.

7. Look for indications suggesting whether the explosion was accidental or intentional. Preserve evidence.

8. If bombing is suspected, be alert for unexploded secondary devices and report them. Do not touch anything that appears suspicious.

9. Be wary of the possibility of nuclear/biological/chemical dispersal.

10. Warn all staff to avoid touching all electrical wires.

11. Log activities, decisions, and communications as soon as possible.

12. Debrief staff and review actions taken to consider whether emergency procedures were effective.

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FIRE IN FACILITY

1. Confine the fire by closing the door to the area involved.
2. Extinguish the fire if it can be done so safely, such as a small kitchen fire.
3. Order an evacuation immediately if the fire cannot be put out quickly.
4. Call 911.
5. Do not return to the facility until instructed by the fire department.
6. If applicable, maintain a list of persons removed by ambulance, including name of intended hospital.
7. Notify family members of any affected residents.
8. Log activities, decisions, and communications as soon as possible.
9. Debrief staff and review actions taken to consider whether emergency procedures were effective.
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FIRE NEAR FACILITY (Wildfire or other structural):

1. Evacuate, if necessary.
2. If not evacuating, call 911 to ensure the fire has been reported.
3. Monitor the situation visually and listen to the radio for any changes in incident status.
4. Log activities, decisions, and communications as soon as possible.
5. Debrief staff and review actions taken to consider whether emergency procedures were effective.
6. Amend plan as necessary based on review.

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FLOOD

1. Select an Initial emergency order based on the extent of the flooding:

- Evacuation
- Shelter-in-place

2. Call 911, if necessary.

3. If evacuating, do not return to the facility until it has been declared safe by the police department, the fire department, or municipal building safety officials.

4. If structural damage is suspected, request a structural inspection by calling the Emergency Operations Center at 459-1214.

5. Log activities, decisions, and communications as soon as possible.

6. Debrief staff and review actions taken to consider whether emergency procedures were effective.

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INTRUDER

1. Notify another staff member, then approach and greet the person to ascertain his/her reason for being at the facility.
2. If the person refuses to leave, take reasonable steps to insulate the residents. This could mean clearing residents from a room or hall, clearing an outdoor area, or calling a lockdown.
3. Call 911 and report the incident.
4. If you can safely do so, keep an eye on the person, and keep APD advised of his/her whereabouts and any weapons the intruder might have.
5. Log activities, decisions, and communications as soon as possible.
6. Debrief staff and review actions taken to consider whether emergency procedures were effective.
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LOSS OF UTILITIES

1. Call the pertinent utility and determine the extent of the outage.
2. Determine if utility loss is a nuisance (no lights in May) or a hazard (no heat in December).
3. Determine the scope of the outage. Is it just the facility, the entire neighborhood, or the entire city?
4. Try to determine how much time will be required to correct the problem.
5. Considering the collected information, determine an initial emergency order:
 - Consider shelter-in-place if utilities are to be restored soon.
 - Consider evacuation if prolonged occupation of the facility is inadvisable.
6. Log activities, decisions, and communications as soon as possible.
7. Debrief staff and review actions taken to consider whether emergency procedures were effective.
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BOMB THREAT – caller on phone

1. Keep caller on the phone as long as possible.
2. Motion to someone else to call 911 on another line.
3. That second person should relay the following information to the 911 dispatch:
 - a. Time threat call received
 - b. Phone extension receiving threat call
 - c. Request that a police officer respond to the facility
4. Do not use cell phones until approved by police.
5. Assist in securing the facility or area, if applicable.
6. Evacuate if instructed by the facility administrator or lead staff, following regular evacuation procedures.
7. Assist police in walk-through scan for suspicious items if requested to do so.
8. Log activities, decisions, and communications as soon as possible.
9. Debrief staff and review actions taken to consider whether emergency procedures were effective.
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BOMB THREAT – written or recorded message

1. Call 911.
2. If message is by email or fax, print message and read verbatim to 911 dispatch. Give originals to the responding officer.
3. If message is a paper note, read verbatim to 911 dispatch. Give originals to the responding officer making efforts to preserve the suspect's fingerprints on the paper.
4. Do not use cell phones until approved by police.
5. Assist in securing the facility or area, if requested.
6. Evacuate if instructed by facility administrator or lead staff following regular evacuation procedures.
7. Assist police in walk-through scan for suspicious items, if requested.
8. Log activities, decisions, and communications as soon as possible.
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SUSPICIOUS ITEM

1. Do not touch device or suspicious object.
2. Evacuate immediate area (and keep others away).
3. Call 911.
4. Turn off cell phones and radios.
5. Assist police in walk-through scan for suspicious items if requested to do so.
6. Log activities, decisions, and communications as soon as possible.
7. Debrief staff and review actions taken to consider whether emergency procedures were effective.
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DISEASE OUTBREAK

1. Wash your hands often with soap and water for at least 20 seconds, especially after being in a public place, or after blowing your nose, coughing or sneezing. If soap and water are not readily available, use a hand sanitizer with at least 60% alcohol.
2. Avoid touching your eyes, nose and mouth with unwashed hands.
3. Avoid close contact with people who are sick.
4. Wear a [cloth face covering](#) to cover your mouth and nose when around others. You could spread disease to others even if you do not feel sick. Don't place coverings on young children under age 2, anyone who has trouble breathing, or is unconscious, incapacitated or otherwise unable to remove the mask without assistance. [Learn more.](#)
5. Stay home if you are sick, except to get medical care.
6. Cover your nose and mouth with a tissue when coughing or sneezing and throw the tissue away after use. If a tissue isn't available, cough or sneeze into your elbow or sleeve, not your hands.
7. Clean and disinfect frequently touched surfaces daily. This includes tables, doorknobs, light switches, handles, desks, computers, phones, keyboards, sinks, toilets, faucets and countertops.
8. If surfaces are dirty, clean them. Use detergent, or soap and water, prior to disinfecting. Find full information on [how to disinfect here](#).
9. Stop disease spread through these steps:
 - [Follow good hygiene practices.](#)
 - Listen to and follow the directions of your state and local authorities.
 - Stay home if you can and avoid any non-essential travel.
 - Wear a [cloth face covering](#) to cover your mouth and nose when around others. [Learn more.](#) Keep at least 6 feet between you and others if you must be in public. Also avoid:
 - Close contact with people who do not share your home.
 - Group settings and gatherings of more than 10 people.
 - Eating or drinking in bars, restaurants, and food courts. Use drive-through, pickup or delivery options instead.
 - Visiting nursing homes, retirement or long-term care facilities.
 - Connect with loved ones through video calls, phone calls, texts or social media.
 - [Take precautions if you are at higher risk for severe illness.](#)
 - [If you or someone in your household becomes sick, call a health care provider for medical advice and follow it.](#)

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COVID-19 CONSIDERATIONS

According to the CDC, early information shows that some people are at higher risk of getting very sick from COVID-19.

This includes older adults and people of any age who:

- **Have serious underlying medical conditions**, such as heart, lung or liver disease; diabetes; moderate to severe asthma; severe obesity; and renal failure.
- **Have a weakened immune system**, including those undergoing cancer treatment.

People who are pregnant should also be monitored since they are known to be at risk with severe viral illness; however, to date data on COVID-19 has not shown an increased risk.

If you are at higher risk for serious illness from COVID-19, it is extra important for you to take actions to avoid getting sick.

- Stay home, avoid close contact with others and follow the other steps above.
- Call your doctor to learn about any additional steps you may be able to take to protect yourself.
- Call a medical professional as soon as COVID-19 symptoms start, if you are at higher risk.

Older Adults and COVID-19: What You Can Do

In addition to following the steps above including handwashing, social (physical) distancing and frequent disinfection of household surfaces, we recommend that you take these sensible precautions.

- Create a personal support network of trusted individuals who can help set up your phone, computer or tablet and check in with you by phone or video calls, text or email to ensure your wellness. They can also help you with errands, groceries, online shopping and setting up telemedicine (i.e., medical appointments over the phone or by video). Share your important health and medical information with them and be sure they know how they can help you.
- Limit visits with family members, especially young children. While you may need family members to help run errands, keep about 6 feet away from them. Have visitors leave food or grocery items at the door rather than entering the home. Avoid inviting young children into your home.
- Have a 1-month supply of medications and a 2-week supply of food on hand.
 - Along with prescription medications, have a 1-month supply of over-the-counter medications like cough suppressants and fever reducing drugs. Ask your physician or local pharmacy if prescriptions can be delivered.
 - A 2-week supply of food also includes water, household cleaning supplies, personal hygiene items, and medical supplies or equipment. Contact your local grocery stores to see if they offer online ordering and home delivery. Find out if there are local nonprofit services to assist with food or meal delivery.

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- Have a plan for if you get sick. Make a list of medications and medical contacts, and know where to find health care documents like advance directives (a living will). Determine who will care for you at home should you become ill, and tell them what sort of care you would want if you became too ill and unable to speak for yourself.
- Cancel all non-essential, in-person doctor's appointments. Use telemedicine services, which enables you to communicate with your doctor over video, phone or email, rather than face-to-face.
- Beware of scams. Unfortunately, scammers are taking advantage of people's fears and the Federal Trade Commission has tips to help protect you and others. There currently are no vaccines, pills, lotions or other prescription or over-the-counter products available to treat or cure diseases online or in stores. Beware of "viral videos" suggesting potentially dangerous or toxic home preventatives, such as drinking excessive amounts of water or mouthwash

What to Do If You Are Sick

If you are sick or not feeling well, follow the tips from the CDC below to help protect other people in your home and community. Keep in mind that people have mild illness and are able to recover at home.

If You Are Mildly Ill, Stay Home and Call a Health Care Provider

- Stay home and call your doctor for medical advice if you think you have been exposed to disease and develop symptoms. Older adults and people of any age with serious underlying medical conditions should call a health care provider as soon as symptoms start.
- Avoid public transportation, ridesharing and taxis.
- Separate yourself from other people in your home. As much as possible, stay in a specific "sick room." Use a separate bathroom, if available. Visitors, other than caregivers, are not recommended.
- Limit contact with pets and animals.
- To protect others, wear a [cloth face covering](#) if you are around other people (e.g., sharing a room or vehicle) and before you enter a health care provider's office. If you are [unable to wear](#) a cloth face covering, caregivers entering your room should wear one.
- [Continue to follow good hygiene practices.](#)
- Do not share dishes, drinking glasses, cups, eating utensils, towels or bedding with other people in your home. After use, wash items thoroughly with soap and water or put them in the dishwasher.
- In the sick room: On your own, clean and disinfect all surfaces daily and high-touch surfaces frequently throughout the day in your sick room and designated bathroom.
- In the rest of the house: Have a healthy household member clean and disinfect all other surfaces daily and high-touch surfaces frequently throughout the day.

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Coping With Stress During Disease Outbreaks

Disease outbreaks can disrupt our routines and has made everyday activities, such as work and caring for loved ones, challenging.

These changes, on top of the general uncertainty around this pandemic, can create feelings of stress, fear and nervousness. These feelings are normal, and people typically bounce back after difficult times.

Children and teens may respond more strongly to the stress and anxiety caused by disease outbreaks, and become frightened that they or their loved ones will get sick. Take time to talk calmly and reassure children about what is happening in a way that they can understand.

The following information can help you cope with stress and support others during this emergency.

It's normal for people to have these types of feelings right now:

- Fear about running out of essential supplies.
- Anxiety, particularly about being separated from loved ones.
- Uncertainty about how long you will need to shelter at home.
- Concerns for your physical safety and that of others.
- Fear of getting sick.
- Guilt about not being able to fulfill responsibilities, such as work, parenting or caring for dependents.
- Boredom or isolation.
- Thoughts of blame, worry or fear.
- Worry about loss of income.
- Fear of being stigmatized or labeled if you become sick.

Coping Tips:

People's reactions appear in different ways, not only in the way someone feels, but in the way they think and what they think about — their sleeping habits, how they go about daily living and the way they interact and get along with others. Here are a few steps to help people cope:

- Connect with loved ones through video calls, phone calls, texts or social media.
- Stay informed with accurate, reliable information from trusted sources. Avoid social media accounts and news outlets that promote fear or rumors.
- Take care of yourself and monitor the physical health needs of your loved ones. Eat healthy, drink plenty of water and get enough rest.
- Unless you are showing signs of illness or have tested positive for a disease, going outside to exercise and walk pets is okay. But don't forget to practice social distancing by keeping at least six feet away from others.

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Be patient with yourself and others. It's common to have any number of temporary stress reactions, such as fear, anger, frustration and anxiety. Hold an image in your mind of the best possible outcome. Make a list of your personal strengths and use these to help both yourself and others stay emotionally strong.

- Relax your body often by doing things that work for you - take deep breaths, stretch or meditate, or engage in activities you enjoy.
- If you are religious or spiritual, follow practices at home that provide you with comfort and emotional strength.

Helping Others:

- Reach out to older adults or people with chronic health conditions and offer to help. For example, offer to pick up groceries, medications and other essential supplies. Check in with them regularly but practice social distancing by keeping at least six feet away when you deliver essential items.
- Talk to your children and explain why this is happening and how long it might last. Use language that is normal and consistent with how you usually communicate. Be creative and think of fun activities that will occupy their time. Keep a schedule, set appropriate limits and maintain usual rules when possible.
- Take care of your pets, which can be an essential part of your support system. Like people, pets react to changes in their environment and routine, so their behaviors may change, as well. Keep track of their well-being and take care of their needs as best you can.
- Show kindness to people who may not have a support system or are isolated. There may be limits to what you can do in reaching out, but a little kindness may be just what someone needs.

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WINDSTORM

1. Select an initial emergency order based on the severity of the event:
 - Drop-cover-hold
 - Shelter-in-place
2. Call 911 if life-threatening emergencies occur.
3. Ensure that all windows and blinds are closed.
4. Clear the side of the facility bearing the full force of the wind.
5. If the facility is multi-storied, relocate the occupants to the lower floor near the inside walls.
6. Keep tuned to a local radio station for latest advisory information.
7. Upon passage of the storm, initiate any other appropriate action, or return to normal routine.
8. Log activities, decisions, and communications as soon as possible.
9. Debrief staff and review actions taken to consider whether emergency procedures were effective.
10. Amend plan as necessary based on review.

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DISASTER PLANNING APPENDICES

APPENDIX A: EMERGENCY CONTACT INFORMATION

EMERGENCY NUMBERS

North Pole Police	911
Alaska State Troopers	911
Fire Department	911
Paramedics / Emergency Medical Services.....	911
Poison Control Center.....	800-222-1222

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APPENDIX B: SHUTTING DOWN UTILITIES

GAS

If an earthquake affects your home, you will need to make a determination whether you need to shut down your gas or your gas appliances. **Never turn off your gas unless you smell or hear gas leaking.**

1. Stay calm and carefully check your gas pipes and gas appliances for the sound of escaping gas.
2. If an appliance is leaking gas, identify the shutoff valve where it connects with your gas supply. Close the appliance shut-off valve to stop the leak.
3. If your main gas line is leaking, evacuate your home immediately.
 - Do not turn on a light switch
 - Do not smoke
 - Do not use a match or candle if the power is out; use a flashlight
 - Do not pick up your phone
4. If your main gas line is leaking and you feel you can safely shut off the gas, evacuate your residents and staff first and then shut down your gas supply. Keep your gas meter free from ice, snow, or other obstructions.
 - a. Keep an 8"-12" adjustable wrench handy to turn off the gas. You should store it near your gas meter or in your disaster supply kit.
 - b. Find the gas meter shutoff valve. It is usually the first fitting on the gas supply pipe coming out of the ground near your meter.
 - c. Use the wrench to turn the valve one-quarter turn in either direction so the valve is crosswise to the pipe.
 - d. Once the gas is off, leave it off. Do not attempt to restore your gas service. Only a qualified service technician can restore your gas.
5. If you cannot shut off your gas supply to your home safely, go to a neighbor or other safe place and call 911 to report the gas leakage. Do not use the phone in your facility.

WATER

You will need to protect the water sources already in your home from contamination if you hear reports of broken water or sewage lines, or if local officials advise you of a problem.

1. Know where your water shutoff valve is located.
 - Residential plumbing code requires the water shutoff valve to be located within 10 feet of the crawlspace access when it is located in the crawlspace.

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- Other places to look would be at or near the water heater in the garage or mechanical room when located in a basement.
- Know what type of shutoff valve you have and which direction to turn off the valve. In most cases, counter-clockwise is the off position.

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APPENDIX C: FIRE EXTINGUISHERS

USE

You and your staff should practice the motion of operating a fire extinguisher. Do not pull the pin or squeeze the lever during a practice; this will break the extinguisher seal and cause it to lose pressure.

To operate an extinguisher remember PASS (Pull – Aim – Squeeze – Sweep)

1. Pull the pin.
2. Aim the nozzle or hose at the base of the fire from the recommended safe distance.
3. Squeeze the operating lever to discharge the fire-extinguishing agent.
4. Sweep the nozzle or hose from side to side until the fire is out. Move forward or around the fire area as the fire diminishes. Watch the area in case of re-ignition.

MAINTENANCE

Monthly Maintenance: Every 30 days you should verify the following:

1. Is the extinguisher in the correct location?
2. Is it visible and accessible?
3. Does the gauge or pressure indicator show the correct pressure?

Annual Maintenance: Your fire extinguisher needs annual maintenance, which may require professional service. Each fire extinguisher is different so you will need to read the manual or instructions on your fire extinguishers for specific instructions.

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SELF INSPECTION CHECKLIST (Completed within 30 days, and every six months thereafter)

- YES NO The out of area contact number has been provided to loved ones of clients who have been instructed to call this number if they cannot get through to the local phone number during or after an event.
- YES NO We have posted emergency numbers and the building address by each phone that is used in this facility.
- YES NO An emergency exit plan is posted at each entrance/exit door.
- YES NO All staff members have been trained on how and when to shut off utilities to the facility.
- YES NO Emergency telephone numbers are posted in plain sight and staff are informed to call 911 if directed in the event of an emergency or if informed to do so by staff.
- YES NO Upon admission and at least monthly thereafter, staff are advised of the outdoor area that is the designated meeting place in the event of an emergency.
- YES NO Upon admission and at least annually thereafter, capable residents receive training in first aid, fire, and evacuation procedures.
- YES NO Water and food stored for disasters are rotated every six months.
- YES NO At least one staff person in the facility is current in First Aid and CPR.
- YES NO Each room has at least two escape routes.
- YES NO The emergency plan is reviewed every six months with employees and whenever a new staff person is hired.
- YES NO Fire extinguishers are examined monthly and recharged as recommended by the manufacturer.
- YES NO There is a smoke detector inside each room and a carbon monoxide detector on each level of the facility.
- YES NO Smoke and carbon monoxide detectors are checked monthly and batteries are replaced twice annually if battery-powered.
- YES NO We have at least one battery-powered radio with extra batteries.
- YES NO We have working flashlights, including flashlights at each resident's bedside table, in the facility.
- YES NO We maintain a list of clients who do not have a relative who can pick them up after a disaster.
- YES NO A first aid book and quick reference chart is located in the common area for staff and clients.