

Washtenaw County Community Mental Health

EMERGENCY MANAGEMENT PLAN – (policy)

PURPOSE

- Minimize the consequences of natural disaster or other emergencies having a direct impact on Washtenaw County and the consumers, families and staff of CMH.
- Provide direction to staff in order to enhance their ability to respond to natural disasters or other emergencies.
- Function as a part of an overall coordinated community response to community emergencies or disasters as it affects the CMH priority population.

POLICY

- CMH shall define its role and response in community wide emergency preparedness plans and in concert with the Emergency Operations Plan for Washtenaw County.
- The CMH Director or appointee shall serve as the CMH Officer in the Washtenaw County Emergency Operations Center (EOC) during any activation of the EOC.
- CMH shall maintain an Emergency Management Team Structure (Incident Command Structure- Exhibit B) that shall provide an organized response to the needs of consumers they serve.
- Procedures are established which identify staff responsibilities and functions, and assure critical services to consumers during natural or man-made emergencies.
- Staff training is provided and planned exercises will occur related to the organization's response to emergencies. Exercises may be CMH specific or may be part of the Washtenaw County EOC.
- Emergencies that are confined to a particular CMH service site are addressed in the Site Safety Plan. During a larger event occurring during service hours, Site Plans shall be utilized in organizing the immediate response to the emergency to assure the health and safety of consumers, staff and visitors.
- As a part of the Person Centered Planning process, consumers will be offered the opportunity to identify specific support needs they may have during a community emergency. This information will be noted in the electronic medical record for use by staff and first responders during a community emergency.
- Debriefings will be conducted following exercises and recommendations for improvements will be made to the CMH Environment of Care Committee, the Clinical Coordination committee and/or the WC EOC.

- The CMH Director, Medical Director, or designee shall be responsible for the authorization of the use of any volunteers during an emergency. CMH shall first endeavor to staff all consumer needs with current, credentialed staff or current volunteers. Should insufficient staff be available to meet the need, volunteers shall be considered on the following basis:
 - Former staff who left the department in good standing
 - Staff members of other county departments who possess degrees, licensure or registration and skills related to the needs of CMH consumers
 - Staff members of Affiliated Counties who are credentialed by those organizations
 - Staff members of other community organizations who are similarly credentialed and where employment and credentialing can be verified by at least phone contact with a known administrative or supervisory staff member
 - Volunteers who do not meet the above criteria may be utilized in non-clinical or direct care functions, so long as they work in the presence of CMH staff or affiliation members and have a verified criminal background clearance

DEFINITIONS

Emergency: Emergencies can be internal or external and may be characterized as natural, unintentional, or intentional incidents that significantly disrupt the environment of care and treatment (for example, loss of utilities such as power, water, or telephones, due to floods, civil disturbances, accidents or emergencies within the organization or its community) or results in sudden, significantly changed or increased demands for the organization services. There are generally three categories of emergencies, Natural, Technological, and Sociological and Public Health.

Preparedness: Activities an organization takes to build capacity and identify resources that may be used, should an emergency occur. These activities may include an Inventory of Resources, an Ongoing Planning process, Staff Orientation and Drills.

Response: Activities an organization takes in actually responding to an emergency, such as treating or assisting victims, reducing secondary impact and controlling negative effects.

Recovery: Activities an organization takes in restoration of services following a disaster.

Mitigation: Activities an organization takes in attempting to lessen the severity and impact of a potential disaster or emergency.

REFERENCES

- Washtenaw County Emergency Action Guidelines

- Joint Commission Emergency Management Standards
- Applicable Joint Commission standards, contractual requirements, Michigan Mental Health Code, third-party payer requirements, county, state, and federal regulations and laws; and Authority standards, policies and procedures.
- WCCMH Emergency Closing Procedures
- Washtenaw County Emergency Operations Plan
- Washtenaw County Hazard Ranking

EXHIBITS

- A.** Incident Command Structure

EXHIBIT A

Incident Command Structure, 8/20

Incident Commander Trish Cortes			
Public Information Officer Sally Amos O'Neal		Safety Officer Sally Amos O'Neal/Rhonda Dornbos	
Operations Chief Krista DeWeese, Liz Spring, Brandie Hagaman, Katie Hoener <i>Medical Response:</i> Colleen O'Brien, Tim Florence Case <i>Management/Supports Coordination:</i> Jessica Halliday, Rani Dronamraju, Jennifer Lembesis <i>Licensed/Unlicensed Residential Coordination:</i> Julie Lovelace, Tracy Wells, Ebony Montgomery <i>Community Crisis Response:</i> Melisa Tasker <i>Crisis Residential:</i> Melisa Tasker <i>Clubhouse:</i> Heather Linky <i>Jail:</i> Sarah Stewart <i>Children's Services:</i> Christine Hapeman, Barbara Brookens-Harvey	Planning Team Shane Ray, Liz Spring, Krista DeWeese, Melisa Tasker, Mike Harding, Katie Hoener, Brandie Hagaman, Laura Higle <i>Mobilization of Resources:</i> <ul style="list-style-type: none"> • <i>Resource tracking and status:</i> • <i>Consumer Info (CRCT form reports, ID vulnerable clients, consumer notification):</i> • <i>Action Plan:</i> <ul style="list-style-type: none"> ○ Coordinate public info ○ Announcements ○ Missing Persons ○ Liaison with families ○ Communication between teams 	Logistics Chief Heather Linky, Trish Cortes <i>Housing/Shelter/Service Delivery Space:</i> John Stacy, Ebony Montgomery <i>Transportation (County van allocation)</i> Seth Dominique, Steve Taylor <i>Basic Needs, Resources and Personal Care</i> UPDATE, Sara Camilleri, Jen Lembesis, Beth Leadford, Ann Bauer <i>Medical needs/supplies</i> Lisa Schneider, Cherie Walsh	Finance/Admin Chief Nicole Phelps <i>Procuring resources (vendors, contracts, payments)</i> Megan Taylor, Rhonda Dornbos