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connected

EMERGENCY PLANNING FOR BUILDING OCCUPANCIES WITH RESIDENTS WITH FUNCTIONAL LIMITATIONS

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WHY DO EMERGENCY PLANNING FOR YOUR RESIDENTIAL SITES?

Buildings/residences present many potential hazards during emergencies or disasters

Providing a safe worksite/residential site for all staff and residents can prevent injury and death

Planning ahead can protect important resources: physical and economic

TRAINING CONTENT

Potential hazards in Campbell River

How disabilities can affect response

Assessing residents' needs and personnel resources

Emergency Plan Components: communications, drills, and evacuations

Non-structural hazards assessment

Working with the community

Employer leadership

WorkSafe BC and BC Fire Code regulations

Personal preparedness/CMIST

Resources

**WHAT ARE THE POTENTIAL HAZARDS IN
CAMPBELL RIVER?**

THE POTENTIAL HAZARDS IN CAMPBELL RIVER

Atmospheric hazards; severe weather

Structural fires

Power outages

Major traffic accidents

Industrial fires

Seismic hazards

Marine and air accidents

flooding

Interface and wild fires

Hazmat incidents

Landslides

Structural collapse

Explosion

Dam failure

Drought

**WHAT ARE THE POTENTIAL HAZARDS AT
YOUR RESIDENTIAL SITES?**

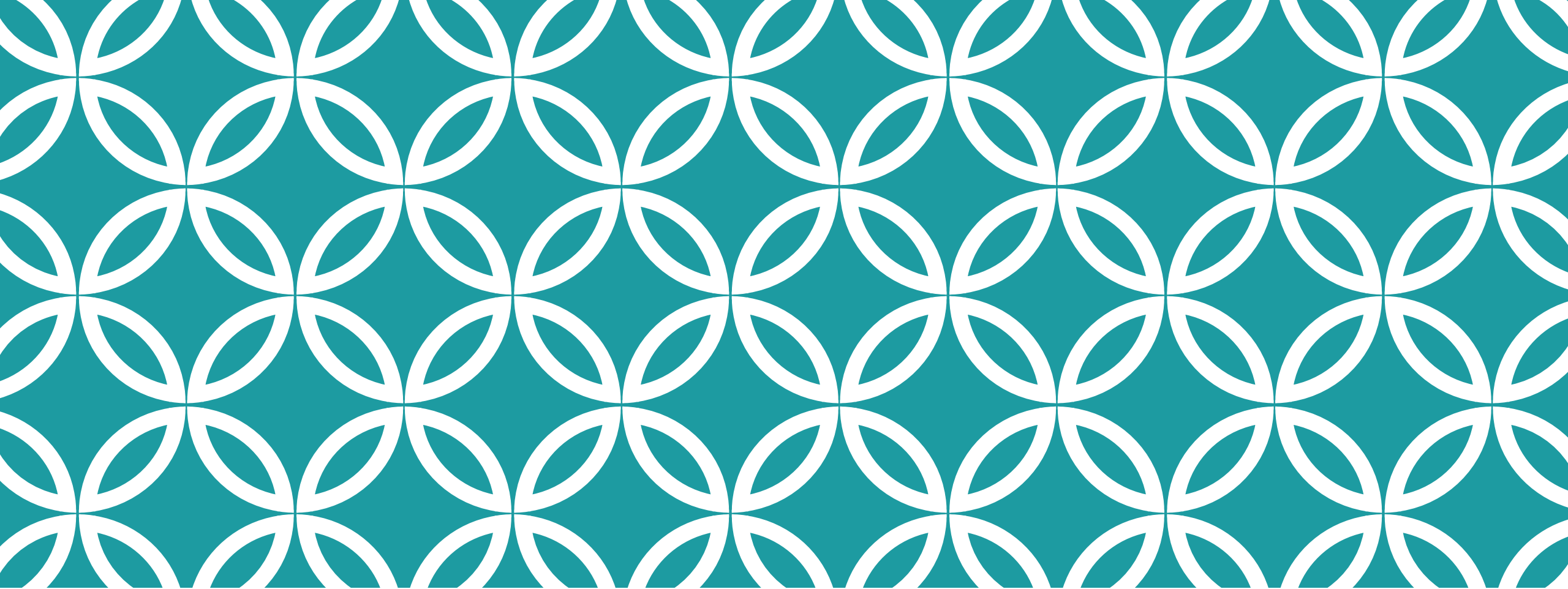
OFFICE AFTER AN EARTHQUAKE IN HAWAII







**WHAT CHALLENGES DOES YOUR AGENCY FACE IN
DEVELOPING AND/OR IMPLEMENTING ITS EMERGENCY
RESPONSE PLAN?**



HOW FUNCTIONAL LIMITATIONS AFFECT ABILITY TO RESPOND IN EMERGENCIES



ABILITY TO RESPOND IN EMERGENCIES



Mobility limitations may affect a person's ability to independently leave the building or use stairs or open doors

ABILITY TO RESPOND IN EMERGENCIES

The deaf and hard of hearing may not have the ability to hear or react to emergency warning systems or aural instructions

Visual limitations will affect a person's ability to identify escape routes, directional information, instructions, objects or hazards, which will reduce his/her evacuation time



ABILITY TO RESPOND IN EMERGENCIES

Respiratory limitations may affect a person's ability to walk long distances, and perform tasks that require excessive physical activity such as evacuating a building. These limitations may be exacerbated by smoke, dust, fumes and chemicals.

Speech disabilities include difficulties with articulation, voice strength, language expression or total loss of speech and will affect a person's ability to communicate during an emergency.

ABILITY TO RESPOND IN EMERGENCIES

Cognitive limitations may affect a person's ability to respond to emergencies in the following ways: memory loss, problems with orientation, distractibility, perception, and difficulty thinking logically.

Many mental illnesses or mental disorders that are characterized by alterations in thinking, mood or behaviour, may be exacerbated in an emergency situation.

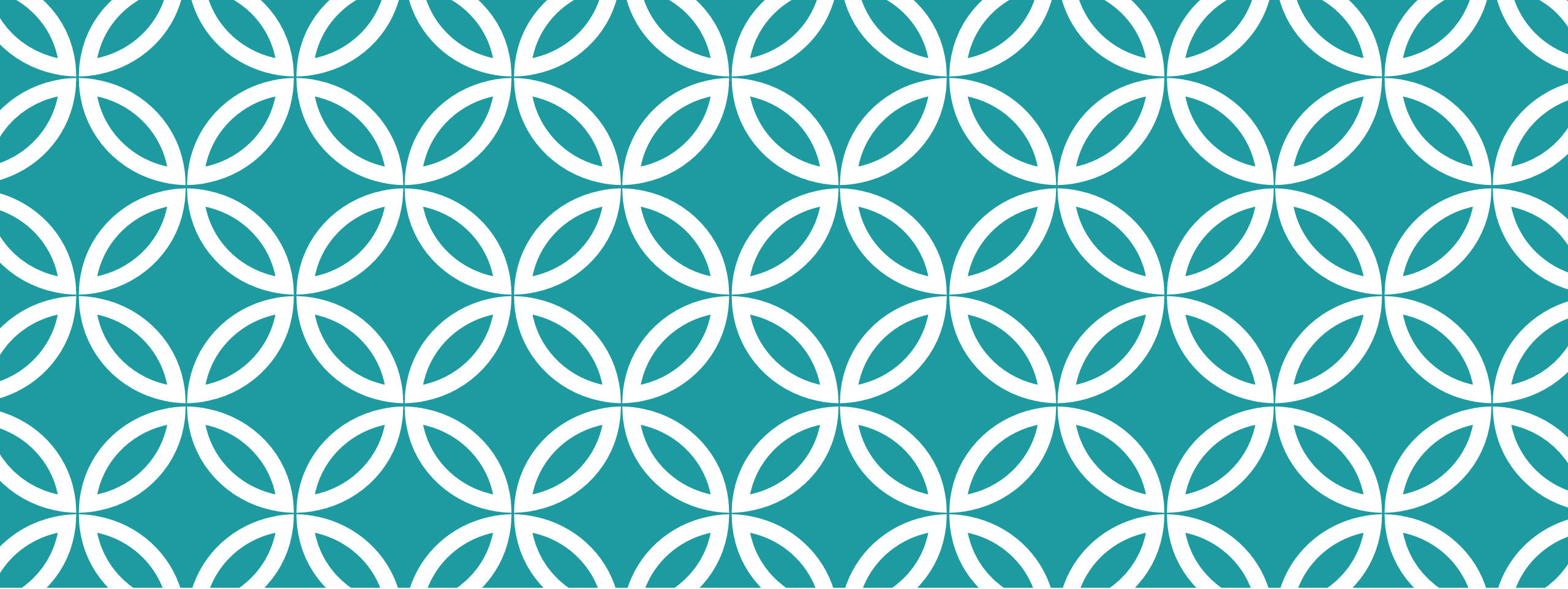
**WHAT DOES YOUR AGENCY
CURRENTLY HAVE IN PLACE
FOR ASSESSMENT OF NEEDS
IN EMERGENCIES?**



ASSESSING STAFF AND RESIDENTS' NEEDS

Maintain a list of those workers and residents who will need assistance during emergencies and their location in the building for emergency personnel

Identifying accommodation options for emergency notification and evacuation –work with staff and residents that will need accommodation and plan for changes in their condition



THE COMPONENTS OF YOUR EMERGENCY PLAN



EMERGENCY COMMUNICATIONS

The ability to communicate quickly with all residents and employees in the building is critical during an emergency.



INFORMATION AND NOTIFICATION

Employers/residential managers should consider the following:

Ensure that all employees, residents and visitors – including those who are deaf and hard of hearing and those who are blind or have low vision – have access to the same information in a detailed and timely manner

Put multiple methods in place to notify individuals of emergency plans and procedures – provide alternate formats

At emergency training sessions provide alternate formats

INFORMATION AND NOTIFICATION

Install visual alarms/lighted fire strobes for deaf employees and residents

Provide tactile/Braille signage and maps and audible directional signage to help staff and residents with visual limitations who must navigate smoke-filled exit routes

Colour code fire doors and exit ways for clients with cognitive limitations

Provide a picture book of drill procedures for residents with cognitive limitations

WORKPLACE EMERGENCY DRILLS

When doing emergency drills:

Include staff and residents with functional limitations in emergency exercises

If some individuals experience heightened anxiety during emergency drills an alternative is one-on-one emergency planning with these individuals

Address staff and residents' fears, anxiety and concerns during and after drills

WORKPLACE EMERGENCY DRILLS

During a drill it is not necessary for individuals with mobility disabilities to evacuate the building completely, however, the individual and their network should train separately in assistance techniques; for example in how to use an evacuation chair if one is available or in transfer and carrying techniques



EVACUATION: THE EMPLOYER

Provide the same level of safety for all staff and residents during evacuations

Consider pre-designating a specific stairwell in the building for evacuation of staff, residents, and visitors with mobility limitations

EVACUATION: STAFF WITH FUNCTIONAL LIMITATIONS

Be familiar with the building and your evacuation options – exits, stairwells, ramps, areas of refuge

Know your workplace emergency evacuation plan

Help select those who are able to assist you in case of an emergency

Participate in emergency drills

Be aware of the emergency notification system in your building

EVACUATION: RESIDENTS

Talk to your residents about the buildings evacuation procedures and exit options –stairwells, ramps or areas of refuge

Residents' personal network should know what the evacuation procedures are for the building

Employees who are with residents or visitors with functional limitations should accompany them when evacuating

EVACUATION OF INDIVIDUALS WITH MOBILITY LIMITATIONS

Not every emergency requires full evacuation of a building

Evacuation options:

- Horizontal
- Vertical
- Stairway
- Area of refuge

A full evacuation will take longer than you think

DEFINITION OF A FIRE REFUGE

An area that is separated from fire by fire-resisting construction and which provides a safe route to a storey exit; it is a temporary safe space for people with mobility limitations to wait for evacuation assistance

EVACUATION: SERVICE ANIMALS

Service animals should be included in evacuation plans and participate in drills so they become familiar with emergency alarm sounds and evacuation routes



DOING A HAZARDS ASSESSMENT

An assessment of non-structural hazards and barriers should be conducted for all building occupancies:

- do a walk-through of the facility with staff and residents with functional limitations and identify barriers to successful evacuation
- look for objects that may fall and injure staff and residents, as well as any objects that may obstruct passage ways and could hinder persons with functional limitations from safely exiting the building

ADDRESSING THE HAZARDS AND BARRIERS

To address the identified worksite hazards and barriers establish the following:

- Who will be responsible for addressing the identified hazards and barriers
- A process for how the hazards will be addressed
- Monitoring of hazards
- A system for reporting new hazards

SCENARIO: BUILDING FIRE

There is a fire at one of your residential sites and people have to evacuate.

2 individuals with cognitive limitations have difficulty evacuating quickly and safely because they are confused and don't understand what is happening



SCENARIO RESPONSE AND PLANNING

Talk about the following with regards to when there are different levels of staffing:

- Identify the problems
- Identify immediate response situation solutions
- Identify long-term planning solutions

DEFINITION OF EVACUATION CHAIRS

Emergency evacuation devices that help move people with mobility limitations down the stairs or across rough terrain

EXAMPLE OF EVAC CHAIR





Build a Complete
Evacuation Solution

EVAC CHAIRS AND SLEDS

CONSIDERATIONS FOR THE USE OF EVACUATION DEVICES

Cost

Training needed

No industry safety standards

One-size fits all chair

Reluctance of some individuals to use

Storage

Can impede others evacuating

FIRE SERVICES CONSIDERATIONS

Evacuation limited to life threatening situations

Will undertake evacuation of people with disabilities by firefighter service elevator if personnel commitments permit

Not trained in moving people with physical disabilities and will carry individuals “fire fighter style”

Not trained in the use of evacuation chairs

Consult with your local fire department about your emergency plan and residents’ needs



WORKING WITH THE COMMUNITY

Work with building security personnel and include them in emergency drills, as well as training to assist residents with functional limitations

Talk to other agencies or businesses who are your neighbours about your emergency plan and evacuation procedures

SCENARIO: FLOODING

A major earthquake has happened off the coast of Vancouver Island. It has caused the John Hart and Strathcona dams to fail and release water and your residential facility is in its path. You have about 1.5 hours before the flood waters arrive. A number of residents have mobility limitations and it will take a long time to evacuate them.

Identify the problems

Identify immediate situation solutions

Identify planning solutions



EMPLOYER LEADERSHIP: AFTER AN EMERGENCY

Call a staff meeting as soon as possible to talk about what has happened

Acknowledge the fear, anxiety and loss staff and residents are experiencing

Provide information about next steps

If site operations have been disrupted, let people know when, where, and how operations will continue



SERVICE CONTINUITY PLANNING

How will you continue to provide essential services to your clients if your facility is impacted by a local emergency?

Service continuity planning helps you figure this out

BC OCCUPATIONAL HEALTH AND SAFETY

4.13 RISK ASSESSMENT

- 3) Written rescue and evacuation procedures are required for but not limited to
- (a) Work at high angles
 - (b) Work in confined spaces
 - (c) Work with hazardous substances
 - (d) Underground work
 - (e) Work on or over water and
 - (f) Workplaces where there are persons who require physical assistance to be moved**

BC FIRE CODE 2006

2.8.2.1. Measures in a Fire Safety Plan

1) In buildings or areas described in Article 2.8.1.1., a fire safety plan conforming to the Section shall be prepared in cooperation with the fire department and other applicable regulatory authorities and shall include

a) the emergency procedures to be used in case of fire, including

iv) evacuating occupants, including special assistance for persons requiring assistance



ENCOURAGE PERSONAL PREPAREDNESS

Provide employees with emergency preparedness information

Encourage staff to have emergency supplies at their work stations; for example, extra medications and special dietary foods

Encourage staff to have an emergency plan for at home

WORKERS WITH FUNCTIONAL LIMITATIONS AND PERSONAL PREPAREDNESS

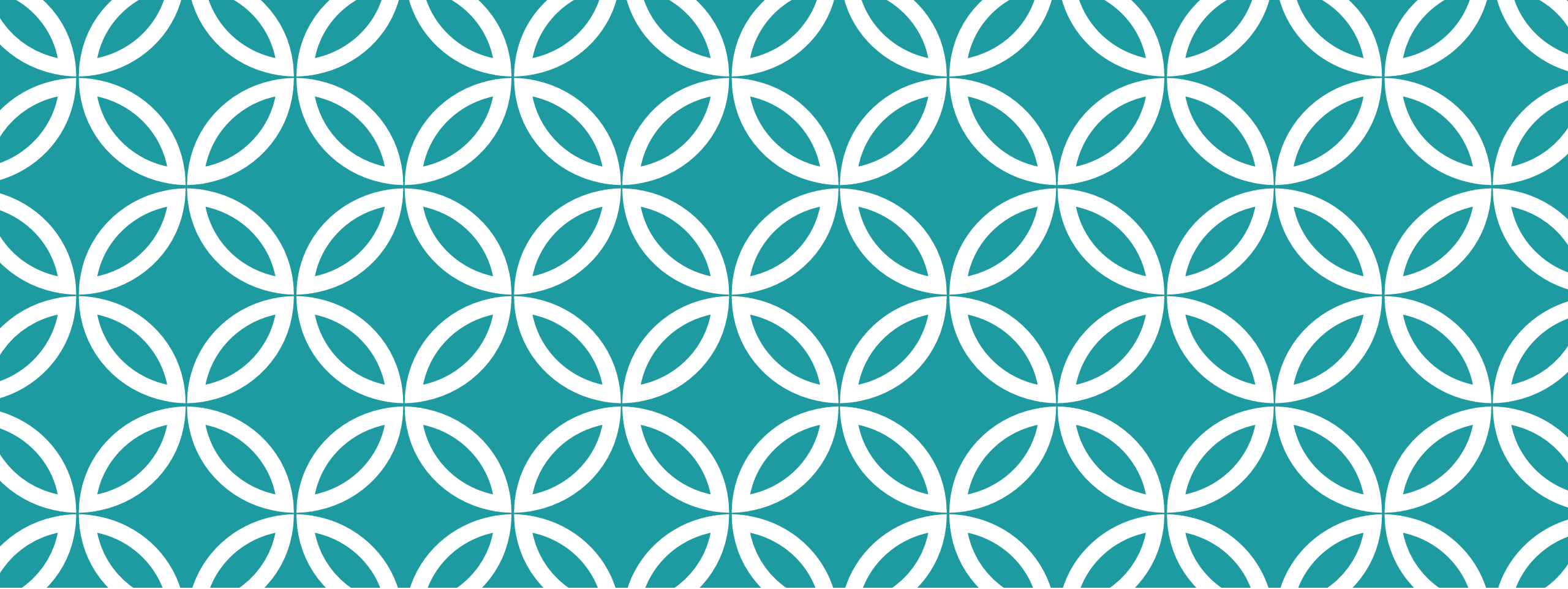


have a personal preparedness plan for themselves and their family

have emergency supplies at their work station specific to their disability needs

plan how they will communicate their needs to first responders

have something in place to ensure their transportation home if the workplace can not be returned to after an evacuation



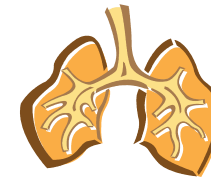
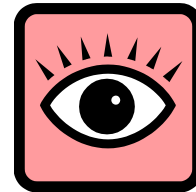
**PERSONAL EMERGENCY PREPAREDNESS
FOR RESIDENTS**



FUNCTIONAL LIMITATIONS CAN AFFECT YOUR ABILITY TO RESPOND IN AN EMERGENCY

People may have limitations in the following functional areas:

- Mobility
- Manipulating objects/agility
- Hearing
- Seeing
- Breathing
- Speech
- Communication
- Learning
- Understanding



CMIST



Begin your personal emergency preparedness using the five categories of the Functional Needs Framework:

CMIST

- Communication
- Medical
- Independence
- Supervision
- Transportation

COMMUNICATION



Communication needs include people who:

- Have reduced or no ability to speak, see or hear
- Have limitations in learning and understanding
- Have limited or no ability to speak, read or understand English

COMMUNICATION DURING EMERGENCIES



During an emergency people with communication needs may not be able to:

- Hear verbal announcements and instructions
- Identify escape routes and see hazards
- See directional signs to assistance services
- Understand the emergency message
- Communicate their needs verbally

MEDICAL



Medical needs includes people who need help with:

- Managing chronic, terminal, contagious health conditions
- Managing medications, IV therapy, tube feeds
- Dialysis, oxygen, suction
- Managing wounds, catheters, ostomies

MEDICAL



During an emergency:

- People sometimes evacuate without their medications or medical equipment and need them replaced
- Early identification of needs and disaster response intervention can avoid costly deterioration of health and functional independence

FUNCTIONAL INDEPENDENCE



Functional Independence includes people who:

- Use assistive equipment and devices to function independently on a daily basis such as:
 - Mobility aids – wheelchairs, walkers, scooters
 - Communication aids – computers, hearing aids
 - Medical equipment – oxygen, syringes
 - Service animals

-

FUNCTIONAL INDEPENDENCE



During an emergency:

- Individuals may become separated from their assistive equipment and devices or service animal
- Equipment and devices may become damaged in the disaster
- Power-dependent equipment and devices will not work in a power outage
- Without equipment individuals may not be able to evacuate on their own
- Ask those helping you to evacuate you with your assistive equipment whenever possible

SUPERVISION AND SUPPORTS



Supervision and support needs includes people who have:

- Developmental disabilities
- Mental illness
- Cognitive limitations
- Activities of daily living needs – dressing, bathing, eating

DURING AN EMERGENCY



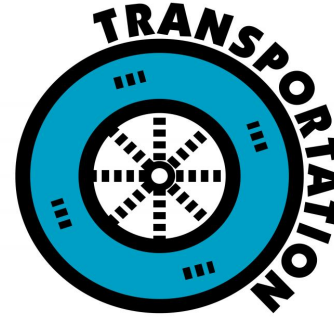
Caregiver may not be available

Mental health conditions may be aggravated

Routine is interrupted which may cause disorientation

Transfer trauma

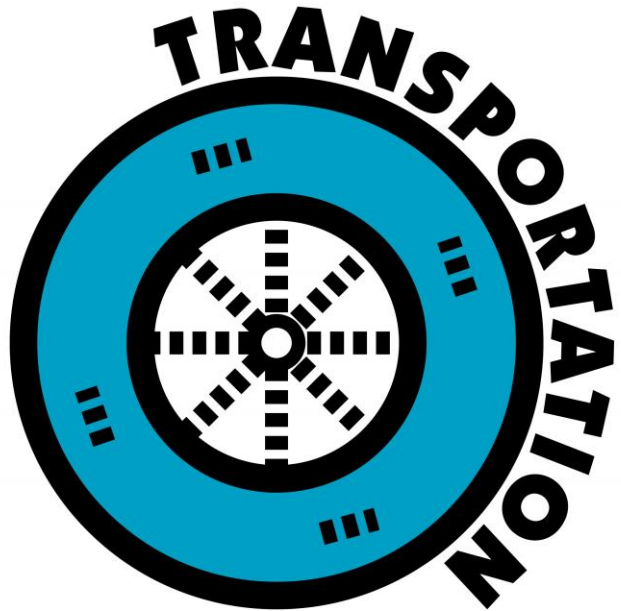
TRANSPORTATION



Transportation needs includes people who can not drive due to:

- Functional limitations
- Age
- Temporary injury
- Low-income
- No access to vehicle
- Legal restrictions

DURING AN EMERGENCY



May not be able to evacuate without help

May need accessible transportation

May not be able to get to emergency services and community resources

PERSONAL PREPAREDNESS USING CMIST



Medications – profile of medical needs:

- List prescription and non-prescription medications
- Record how many you need to take and how often
- Document how medication is stored (refrigerated, etc.)
- Record family doctor and pharmacist names and numbers
- Assemble equipment needed for medication (syringes, etc.)
- Organize to have a 7-day supply in your “grab and go” kit

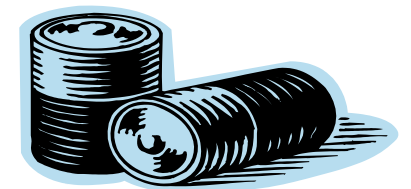
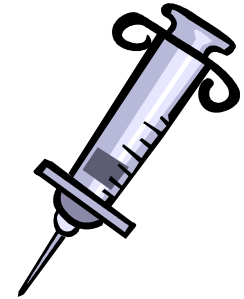


PERSONAL PREPAREDNESS



Assistive Equipment and Medical Supplies:

- Identify what you need
- Note where your equipment is kept
- Record if you have extra equipment that could be used in an emergency such as a manual wheelchair, cane
- Organize back up power – batteries
- Organize extra supplies you need in your “grab and go” kit
- List your personal support team



CREATING A PERSONAL SUPPORT TEAM FOR EMERGENCIES

A personal team is made up of people you trust – family, friends, neighbours, community members, care givers, and co-workers – who will be able to help you in an emergency



PERSONAL SUPPORT TEAM FOR EMERGENCIES

Help residents to create personal support teams – family, friends or caregivers – who can:

- Help them put together an emergency grab & go kit and medical information
- Help them assess their needs during and after an emergency
- Help them evacuate if necessary
- Can be trusted with the client's medical information (like prescriptions and pharmacist)

A PERSONAL SUPPORT TEAM VERSUS A BUDDY SYSTEM

A buddy system is not as effective as developing a personal support team for the following reasons:

1. A buddy may be absent or out of town
2. May forget or become panicked during an emergency
3. Having two or more people in your team will reduce the risk of help not coming



IDENTIFYING WHO CAN HELP YOU DURING AN EMERGENCY

When identifying those who will be a part of your personal team consider the following:

1. They should be physically and mentally capable of performing the task
2. They should not need help themselves
3. They should live in the same building or close by
4. They should be familiar with your needs

CHECKLIST



1. Create your emergency plan using CMIST
2. Develop a personal support team for emergencies
3. Prepare an emergency “Grab and Go” kit specific to your CMIST needs
4. Master the skill of giving quick information
5. Plan your escape
6. Learn what to do in case of power outages and personal injury
7. Learn your community’s warning procedures and shelter locations

RESOURCES

Disability Alliance BC

CMIST Personal Emergency Planning: for people with disabilities and their caregivers

<http://disabilityalliancebc.org/cmistpersonalplan/>

Emergency Management BC

PreparedBC: Resources for People with Disabilities

<http://www2.gov.bc.ca/gov/content/safety/emergency-preparedness-recovery/preparedbc/people-with-additional-preparedness-needs>

RESOURCES

Planning for Safety: Evacuating people who need assistance in an emergency: A guide for building managers and occupants

<http://publications.gc.ca/site/eng/9.692724/publication.html>

Get Me Out of Here, www.freetobe.ca/gmoh/index.html

City of Campbell River Emergency Program

www.campbellriver.ca/city-services/public-safety/emergency-preparedness

Strathcona Regional District

www.strathconard.ca/preparedness

QUESTIONS?

