



**Emergency Preparedness
Resource
For
Pennsylvania and Delaware
Dialysis Facilities**

Fourth Edition



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The contents of the manual were developed by the Network 4 staff, renal community volunteers, and through collaboration with other ESRD Networks.

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Emergency Preparedness Resource for Pennsylvania and Delaware Dialysis Facilities

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B. Introduction

Federal regulations require that all ESRD facilities develop policies and procedures for emergency preparedness. To meet the unique needs of the ESRD population and to minimize the effects of an emergency, each facility must plan ahead to be prepared before an emergency strikes.

ESRD Network 4, covering Pennsylvania and Delaware, has prepared this manual as a **guide** and **resource** to dialysis facilities in the development and improvement of their facility-specific emergency preparedness plan.

The purposes are to:

- provide pertinent Federal Regulations and Interpretive Guidelines citations
- provide a list of the Federal, State, and Local Emergency Services systems and telephone contacts
- provide areas to consider for an emergency preparedness manual
- supply information about planning resources and organization
- provide suggestions for patient dietary “survival”
- identify specific Social Worker responsibilities in stress management
- provide suggestions for water and electrical problems

This manual includes information about topics to consider in preparation for an emergency/disaster. The more prepared you are now, the quicker and more efficient you will be when disaster strikes. Understand you may not be able to prepare for every possible situation, but **stop** and **think** now about what it takes to operate your unit and how you could perform differently should an emergency should arise. Whether you have already prepared your unit emergency manual or you have reviewed other unit emergency manuals, we hope we might add new or local information that will be of use. This manual should be used as a guide to prepare for what could happen in the future.

Much of this manual is structured in an easy to follow form, so it can be read quickly, and used as a reference or outline for your unit manual. The “Emergency Preparedness Resource for Dialysis Patients” manual is a separate booklet. It is recommended that each patient be given a copy of this manual, and that the dialysis staff become familiarized with the patient manual. When providing documents on emergency preparedness to patients, it is suggested that you use a lilac or purple cover. The color lilac/purple has been selected to signify “renal patient” by a national coalition of kidney community partners.

C. What Network 4 Expects From Your Facility During an Emergency

In the event that your unit is affected by an adverse situation, you must contact the Network office with the status of your unit (e.g. open, closed, limited functionality, evacuation required, etc.):

The Renal Network – Network 4
40 24th Street, Suite 410
Pittsburgh, PA 15222
Phone: 412-325-2250
(or patient-only toll-free 1-800-548-9205)
Fax: 412-325-1811
Email: info@nw4.esrd.net

Your functional status will be used to feed an internet-based dialysis facility search engine: www.dialysisunits.com

Should the Network 4 office be affected, we have as part of our emergency preparedness plan an arrangement with a sister Network office. This sister office will answer your call, record your issue, and update your unit's functional status:

Intermountain ESRD Network, Inc. (Network 15)

Should you be in need of placing patients, you may turn to this resource (www.dialysisunits.com) to find facilities that are unaffected by the disaster.

In the event that you should accept patients from an area affected by disaster, we ask that you make the Network office aware of these individuals by utilizing the "Disaster Patient Activity Report" (DPAR). You may download this form and its instructions at: www.kcercoalition.com/tracking.htm

D. Interpretive Guidelines

The following Interpretive Guidelines provided in this manual were created as the final rule (published April 15, 2008). It is recommended that you review the CMS website for any updates to the “State Operations Manual, Appendix H – Guidance to Surveyors: End Stage Renal Disease Facilities” available at www.cms.hhs.gov/CFCsAndCOPs

The state surveyor will evaluate your unit according to the interpretive guidelines below:

Standard Emergency Preparedness: V408 (d) Condition: 494.60

The dialysis facility must implement processes and procedures to manage medical and non-medical emergencies that are likely to threaten the health or safety of the patients, the staff, or the public. These emergencies include, but are not limited to fire, equipment or power failure, care-related emergencies, water supply interruption, and natural disasters likely to occur in the facility’s geographic area.

Emergency Preparedness of Staff: V409 – V11, Condition: 494.60

The dialysis facility must provide appropriate training and orientation in emergency preparedness to the staff. Staff training must be provided and evaluated at least annually and include the following:

“Ensuring that staff can demonstrate knowledge of emergency procedures including informing patients of ...”

- What to do
- Where to go, including instructions for occasions when the geographic area of the dialysis facility must be evacuated
- Whom to contact if an emergency occurs while the patient is not in the dialysis facility
- How to disconnect themselves from the dialysis machine if an emergency occurs, and at the same time
- Ensuring that at a minimum, patient care staff maintain current CPR certification
- Ensuring that nursing staff is properly trained in the use of emergency equipment

Emergency Plans: V414 – V416, Condition: 494.60

The facility must:

- Have a plan to obtain emergency medical system assistance when needed
- Evaluate at least annually the effectiveness of emergency and disaster plans and update them as necessary

- Contact its local disaster management agency at least annually to ensure that such agency is aware of dialysis facility needs in the event of an emergency

Medical Records: V726 - V727, Condition: 494.170

The dialysis facility must maintain complete, accurate, and accessible records on all patients, including home patients who elect to receive dialysis supplies and equipment from a supplier that is not a provider of ESRD services and all other home dialysis patients whose care is under the supervision of the facility.

- (a) Standard: Protection of the patient's record. The dialysis facility must -
1. Safeguard patient records against loss, destruction, or unauthorized use, and
 2. Keep confidential all information contained in the patient's record, except when release is authorized pursuant to one of the following:
 - The transfer of the patient to another facility
 - Certain exception provided for in the law
 - Provisions allowed under third party payment contracts
 - Obtaining written authorization from the patient or legal representative before releasing information that is not authorized by law.

Life Safety Code: V417(e) "Standard Fire Safety"

Effective February 9, 2009, dialysis facilities must comply with Chapter 20 (for new dialysis facilities) or Chapter 21 (for existing dialysis facilities) of the 2000 edition of the Life Safety Code (LSC) for Ambulatory Health Care Occupancies of the National Fire Protection Association (NFPA). Because of the nature of dialysis patients being artificially restrained by means of the dialysis mechanism, certain institutional requirements for drills are pertinent. "Fire exit drills in hospitals shall include the transmission of a fire alarm signal and simulation of emergency fire conditions except that the movement of infirm or bed-ridden patients to safe areas or to the exterior of the building is not required. Drills should be conducted quarterly on each shift to familiarize hospital personnel (nurses, interns, maintenance engineers, and administrative staff) with signals and emergency action required under varied conditions. The purpose of a fire drill is to test the efficiency, knowledge, and response of institutional personnel. Its purpose is not to disturb or excite patients."

Note that the drill is intended primarily for the benefit of personnel, to rehearse the procedures and details worked out in the facility's plans to handle the emergency or disaster. While the regulatory requirement is that the procedures for different types of emergencies be tested at least annually, training of staff and patients in the agreed-upon procedures to include practice and timed rehearsals of specific procedures should, of course, supplement a full-stage drill.

E. Affiliation Agreement

In preparing for emergency planning, each dialysis facility should arrange for a mutual aid and affiliation agreement with another chronic ESRD facility to provide emergency services and continuation of dialysis therapy for their patients.

This is in addition to the arrangement required by the Conditions for Coverage for hospital coverage.

This agreement should include, but not be limited to the following:

- Shared staffing arrangements, including credentialing, liabilities, salaries, orientation and training
- Billing arrangements
- Shared equipment and supply arrangements
- Medical records arrangements

Two backup dialysis units may be recorded in the CROWNWeb system once it becomes available in 2012.

F. Vulnerability Analysis

All dialysis facilities are vulnerable to any number of natural or man-made hazards. Reviewing the following analysis prepared by the End Stage Renal Disease Network of Texas will enhance your ability to predict emergencies/disasters that you may face.

An analysis of your facility's vulnerability to particular hazards can provide the basis for developing practical, workable emergency operation plans or checklists and appropriate standard operating procedures.

In analyzing and assessing the vulnerability of your dialysis facility, you must consider your unique environmental, indigenous, and economic factors as the basis for:

Estimating the likelihood of damage, either by direct effects or by indirect effects resulting from a facility damaged elsewhere.

Making plans for protective measures within individual facilities to minimize the impact on daily operations and structural damage.

Based on its unique location and operation, each facility must recognize its vulnerability to particular hazards. For example, if your facility is located near an industrial plant, your facility may be vulnerable to the effects of explosions or chemical leaks. Facilities located near rivers are at risk of flooding or potential water contamination. All facilities are possible targets of sabotage or bomb threats.

It is also important to remember that just because your facility is not considered at risk during a disaster or emergency, your proximity to facilities that are affected could impact your operations if the impaired facility needs to transfer patients.

The following is a list of both **natural** and **man-made** emergencies the average dialysis might experience.

Man-made Hazards

- Bomb threat
- Chemical spill
- Electrical failure
- Equipment failure
- Explosion
- Gas leak
- Sabotages
- Water shut off

Natural Hazards

- Earthquake
- Fire
- Flood
- Hurricane
- Storms
- Tornado
- Snow and ice

G. Facility Emergency Preparedness

If you prepare for emergency situations, the unit response can be more efficient during an actual emergency. Consider the following when developing your plan:

- Have an affiliation agreement with a back-up unit
- Maintain a current telephone list of all staff including cell phone numbers (remember to prepare a contingency plan for use when telephone service has been disrupted)
- Maintain a list of emergency telephone numbers, contacts and supply vendors
- Provide protection of patient records – for example, store data discs in a fireproof box, which contains patient dialysis prescriptions, hepatitis status, drug and dialysis allergies. IT MUST BE UPDATED ROUTINELY!
- Provide staff and patient education on emergency preparedness and documentation of the reviews
- Maintain facility checklist for emergency preparedness
- Maintain current patient telephone number list, including patient emergency contact information (name, relationship and telephone number)

H. Suggested Emergency Supplies

The following is a recommended list of supplies for emergency preparedness. Adjust the quantity according to your facility size. Include pediatric supplies if applicable. An emergency supply box should be kept in an accessible area and all staff should know its location.

General/Communication

- Portable radio
- Spare batteries
- Flashlight
- Cellular telephones
- Walkie-talkies

Hemodialysis Supplies

- Fistula needles
- Tape
- Blood lines
- Dialyzers
- Dialysate
- 1000cc bags of 0.9% normal saline
- Gauze
- Tube-occluding forceps (smooth-edge clamps) or disposable clamps
- Needles
- Scissors
- Container for disposal of used needles/syringes

Peritoneal Dialysis Supplies

- Outlet port clamps
- Transfer sets
- Beta clamps
- Minicaps
- Variety of PD solutions
- Connection systems

Personal Safety Items

- Gloves
- Protective eye wear
- Protective masks
- Fluid resistant aprons/gowns

Medicines

- Heparin®
- Kayexalate®
- Normal Saline
- Benadryl®
- Tylenol® or pain medication

First-Aid Supplies

- Bandages
- Betadine swabs
- Syringes
- Alcohol swabs
- Sutures, blades, etc.
- Protective mouthpiece for CPR
- Airways

Other Medical Supplies

- Portable blood pressure cuffs
- Stethoscopes
- EKG (for hyperkalemia)

Cleaning

- Bleach
- Bleach container
- Disinfectant for machines
- Garbage bags
- Hazardous material bags

Electrical Supplies

- Power adapters
- Transducers
- Extension cords

Office Supplies

- Treatment forms
- Master list of patients and staff
- Pens

I. Staff Emergency Preparedness

Recognize that staff and their families may experience personal affects from the disaster. Staff members should be encouraged to make emergency plans and maintain adequate emergency supplies in their homes.

1. Have a written plan in place, which includes but is not limited to the following topics:
 - Procedure for power failure
 - Procedure for water outage
 - Procedure for emergency termination of dialysis
2. Give new staff members instruction on emergency preparedness.
3. Provide regular in-service training for all staff. Staff should be aware of directions given to patients.
4. Perform timed drills for patients and staff on a regular basis to practice necessary skills and ensure safety. Keep documentation of reviews.
5. Make sure a current list of staff telephone numbers is kept in the homes of all key management personnel.
6. Develop a plan for a clear chain of command to deal with emergencies.
7. Have a unit-specific emergency plan, including responsibilities of all staff members (see “Suggestions for Staff Assignments for Evacuation” in this manual). The plan should include the following:
 - Who notifies staff
 - Who notifies patients
 - Who notifies telephone, gas, and water companies
 - Who notifies administration and medical director
 - Who is responsible to shut off water and gas mains
 - Who is responsible for securing heavy equipment
 - Who is responsible for evacuating charts or hard copies of patient treatment orders and emergency patient contact information
8. Adopt a policy for terminating dialysis in preparation for evacuation.
9. Designate evacuation routes.
10. Store some ready-to-eat foods, can openers, and disposable dishes to be used if staff and patients must remain at the facility. Food preparation is difficult without water and power.

11. Flashlights and extra batteries, as well as a portable radio and batteries, need to be available. Proper function of these items should be checked routinely.
12. Preparation and routine check of the emergency/evacuation supply box.

J. Patient Preparedness

All Patients

This information applies to all patients – in-center hemodialysis, home hemodialysis, peritoneal dialysis, and transplant.

1. Have patients complete and (if it is necessary) carry forms with them – see “Important Emergency Patient Information” in the Patient Manual section. This information includes dialysis orders, access information, insurance contacts, physician’s name, and medications.
2. Provide patients with the names, location, and telephone numbers of other units and hospitals in the area that they can contact.
3. Provide patients with the telephone numbers of the emergency broadcast system for the area and advise patients as to the radio stations from which you will broadcast information.
4. Develop a plan for alternate transportation needs. Remember, CMS has emergency plans for covering transportation costs in emergencies.
 - Helicopter to cross flooded areas
 - All-terrain vehicles for blizzards
5. Make sure patients have lists of items they should keep at home including battery-operated radio, extra batteries, flashlights, candles, food, water, fire extinguisher, and first-aid kit.
6. Teach patients how to disconnect from the machine.
7. Make sure patients have a resource directory with emergency telephone numbers.
8. Provide information on an emergency diet for patients to use if they cannot dialyze.
9. Give patients information about which foods to have on hand that are ready-to-eat. Food preparation is difficult without power and water.
10. Have patients make plans on how to find loved ones after a major emergency.

Home Hemodialysis Patients

1. Make sure patients have the following:
 - A one-month supply of dialysis supplies; expiration dates should be checked every 6 months and stock rotated on a regular basis
 - Extra supplies of medicines and food
 - Kayexalate® (with doctor's approval) for control of potassium
2. Instruct patients that they should register with the local water and power companies for priority service.
3. Instruct patients to keep batteries charged if they use ultraviolet devices.
4. Inform patients to communicate with their backup unit in case of a disaster.
5. Teach patients to be comfortable taking themselves off the machine.

CAPD Patients

1. Make sure patients have the following:
 - A one-month supply of dialysis supplies; expiration dates should be checked every 6 months and stock rotated on a regular basis
 - Extra supplies of medicines and food, including a 5-day supply of usually prescribed medicines for peritonitis
 - Extra medical supplies at work, if employed outside the home
 - Kayexalate® (with doctor's approval) for control of potassium
2. Instruct patients that they should register with the local water and power companies for priority service.
3. Instruct patients to keep batteries charged if they use ultraviolet devices.
4. Inform patients to communicate with their back-up unit in the event of a disaster.

CCPD Patients

1. Make sure patients have the following:
 - A one-month supply of dialysis supplies; expiration dates should be checked every 6 months and stock rotated on a regular basis
 - Extra supplies of medicines, food, and fluid including a 5-day supply of usually prescribed medicines for peritonitis
 - Extra medical supplies at work, if employed outside the home.
 - Kayexalate® (with doctor's approval) for control of potassium.

2. Instruct patients that they should register with the local water and power companies for priority service.
3. Cross-train CCPD patients on CAPD.
4. Inform patients to communicate with their back-up unit in the event of a disaster.

Transplant Patients

1. Make sure patients have the following:
 - Extra supplies of their medications, sufficient fluid and food resources.
 - The name and phone number of a physician in their local area on whom they can rely.
 - Information on how to handle diet and fluids in case of an emergency.

Diabetic Patients

1. Make sure patients have the following:
 - Extra batteries needed for blood sugar monitoring devices
 - Extra supplies of insulin and syringes on hand at all times
 - Food needed to counter low blood glucose reactions (e.g. glucose tablets, juice boxes, and hard candy)

Elderly Patients

1. Survival of the elderly may depend on meeting their need for shelter and food or dialysis. These patients and their families may need assistance in planning for emergencies.
2. Disruption in a daily routine can cause the elderly to lose confidence in making basic survival decisions. Identify individuals who will contact the elderly in case of disaster.

K. Staff Assignments for Evacuation

The following are suggested responsibility assignments for staff during an emergency that requires evacuation. Their responsibilities should be reviewed by the appropriate staff during emergency drills.

Follow unit procedure for emergency termination of dialysis.

Nurse Responsibilities

- Assist with evacuation of patients
- Retrieve patient records and emergency supply box
- Collect blankets and sheets while leaving the building and distribute to patients and/or injured persons
- Once outside, assist patients and/or injured persons as needed (i.e. administer normal saline, check blood pressures, flush vascular accesses, etc.)

Technician Responsibilities

- Assist with transfer of patients from dialysis chairs to wheelchairs or from chairs onto sheets on the floor
- Transfer patients from building via wheelchairs and sheets
- Retrieve normal saline IV solutions and tubing, extra blood pressure cuffs and stethoscopes
- Retrieve oxygen tanks, nasal cannulas and masks

Secretary Responsibilities

- Call local emergency number
- Retrieve roster of patients and staff
- Retrieve patient records and/or disc with patient information
- Collect blankets and sheets while leaving the building and distribute to patients and/or injured persons as needed
- Conduct a roll call of patients and staff immediately outside of building

L. The Role of the Social Worker

The dialysis Social Worker has some very “concrete” tasks during a disaster. They include reviewing the needs of the patients for shelter, transportation, and mental health.

Shelter

In the event of a weather emergency, such as a snowstorm or flood, the social worker should review with each patient/family his/her contingency plans for evacuation from his/her home, if necessary. This includes knowing where the patient will be staying (friend, relative, or a shelter). Obtain several phone numbers in order to contact the patient regarding any change in treatment (e.g. location, time).

The following is a partial list of possible resources for the basic emergency needs of shelter:

- Friends
- Relatives
- American Red Cross Shelters (call local chapter office)

A “buddy” system is an effective way for patients to link up, share transportation and shelter, and to “check up” on one another.

Transportation

Planning for alternative transportation is an absolute necessity.

“Normal” transportation will most likely be disrupted by the disaster itself. Discussion should take place between the social worker and patient/family about emergency transportation options.

If a number of dialysis units are affected in one area, the social worker could be involved in chartering a bus to transport a group of patients to a unit as far as 20 to 60 miles away.

The following is a partial list of possible resources for the basic emergency needs of transportation:

- Military Reserve Units
- Police
- Bus/Taxi
- Area Agency on Aging
- Church-Affiliated Groups
- Ambulance

The social worker is also encouraged to contact peers/colleagues in locations unaffected by the disaster. They may have recommendations on how to resolve certain issues, as well as provide support for the “crisis-affected” social worker. Social workers from other areas may be able to “pitch-in” and provide respite services for the social worker in the emergency. Your local or state NASW (National Association of Social Workers) office can be a resource.

The CNSW (Council of Nephrology Social Workers) may also be a resource for you. There are two chapters of the CNSW in the Network 4 area, one for the eastern portion of the region and one for the western. These chapters provide mentors for challenging patient situations; legislative issues; rehabilitation; immigration/language issues; pediatric concerns; death, dying and withdrawal; insurance and other resources. You can obtain contact information regarding these chapters on the National Kidney Foundation’s CNSW’s website:

<http://www.kidney.org/professionals/cnsw/region1.cfm>

Mental Health

Along with the concrete tasks for assisting with shelter and transportation, the social worker has an important role to alleviate the stress inherent in the situation. Any type of change in routine can cause stress for patients and staff alike. The change in routine that a disaster can cause in a dialysis unit can be immobilizing. The social worker, as a mental health provider, will assist in helping both patients/family and staff effectively cope with the additional stress of the disaster.

Symptoms of Acute Stress

A brief review for all staff of the symptoms of acute stress and post-traumatic stress disorders is pertinent here. Most patients will exhibit at least minor symptoms of acute distress. It is important to remember that these are “normal” people reacting to a very “abnormal” situation. Staff needs to be on the alert to recognize more severe reactions and report them to the social worker. Remember, the staff (including the social worker) are also victims of the disaster and can also experience stress symptoms.

M. Water and Power Outage

Maintaining a Water Supply

Water used for dialysis must be tested to ensure it meets the required AAMI quality standards

A well-informed staff and a close relationship with both a reputable water treatment vendor and your local water authority are crucial to ensure a continuous, safe water supply in the event of an emergency. Your local water authority must be made aware that you provide a life sustaining therapy – dialysis. It is important that your location and particular needs, such as quality and quantity, are known. This is particularly important for freestanding facilities as your needs may not be as clearly recognizable as with hospital-based facilities.

The most common cause for water supply failures in our region are:

- Contaminated source of water supply
- Frozen pipes
- Broken water mains
- Fires

Reduced water pressure from broken water mains or fires requires the use of a booster pump (rented or purchased from your water treatment vendor).

Total absence or intermittent reduction of supply water requires the following:

- a) Bulk potable water from water supply vendor to be processed through existing water treatment systems.
- b) Bulk purified water from a treatment vendor, which can be utilized to directly feed the service loop to individual dialysis stations. It is highly recommended that portable activated carbon and DI exchange tanks followed by appropriate monitoring and 0.2 micron (or better) filters be used.
- c) Stainless steel or food grade plastic tanks used for the sole purpose of transporting or storing potable water are required.
- d) Bulk water, whether potable or purified, must be pressurized to obtain the minimal pressure requirements of the reverse osmosis apparatus or dialysis machines.
- e) The use of DI tanks is highly recommended when using transported water due to the high waste levels (up to 50%) when using water softeners and reverse osmosis.
- f) Assessment of below freezing temperatures if outside storage of water is required.

NOTE: The recommendations on these pages will work with all dialysis water systems – direct feed and recirculating. Facilities that utilize recirculating systems with storage

tanks, activated carbon, DI, and submicron filtration as final treatment are easier and less costly to adapt for this purpose. This system also serves as an alternative treatment in the event of a reverse osmosis or other water treatment component failure. Use care in your choice of a vendor to assure quality water and to minimize interruption of dialysis therapy to patients. Once alternate sources for your emergency needs are identified, coordinate meetings to plan design modifications (if needed) to permit efficient implementation of emergency plans.

Maintaining an Electric Supply

Just as maintaining a water supply is crucial to the provision of uninterrupted dialysis therapy, being prepared for power interruption is also vital. Again, like water, some thought should be given to how you will handle a loss of electricity and the extent of your back-up plan. Plans can range from battery-powered lighting for evacuation of the building to the installation of a permanent generator that will provide power for the whole facility. There is a need to develop a plan to rent a generator that can be used to power equipment for safe dialysis treatments. You should consider which equipment you will want to maintain in an emergency when planning your generator requirements.

If you do not have a permanent generator, investigate where you can rent generators and related equipment.

Speak with a dealer and have arrangements made in writing with the rental company in your area so that you have priority access to the equipment you need. When you speak with the vendor, consider asking the following questions:

- Do you deliver generators and related equipment?
- What is the timeframe for on-site delivery?
- Do you deliver at night or during a holiday?
- Do you supply fuel?
- How are rental contracts structured?
- What is your dialysis experience?
- What technical service/support is provided?
- What if the generator fails on-site?
- Do you offer training in equipment installation and operation?

Be prepared to address the following issues:

- a) Where will you place the generator? (Because of the size, you may want to consider several small generators rather than one large one.)
- b) Decide how you will obtain the generator. Will it be delivered or will you need to arrange for transport? (If you need to have it transported, you might need to consider hiring a trucking firm.)
- c) Decide how you will route the cable from the generator outside your building to the electrical distribution boxes inside. You may need to consider an exterior outlet on your building to be able to connect to a generator.
- d) Compute your needs for adequate fuel. You should have enough for 2 or 3 days.

- e) Decide how you will hook up and maintain the generator. (If you do not have trained people on-site, you may need an electrical contractor or have someone train your staff. A survey of your facility by a qualified electrician is a must.)

N. Emergency Planning Resources

The following is a list of Emergency Management Organizations and a brief description of the services they provide. The State Emergency Management Office and the Federal Emergency Management Agency are organizations that can provide your facility with planning assistance and literature. Communication with your local emergency management office is essential to coordinate disaster planning. Your local Disaster Coordinator can provide consultation and advice specific to your facility and community disaster plans.

Disaster Coordinators

Each unit should have at least two individuals (a primary and a secondary) serving as your unit's Disaster Coordinators.

In the event of an emergency or natural disaster, the Network will be in contact with these individuals to provide the functional status of your facility.

It is required that the contact information for these individuals be on file with the Network 4 office, and should include: personal email addresses, personal cell phone numbers and home phone numbers. This will be a data requirement in CROWNWeb.

Federal Operations

Single point of contact within the Federal Government for emergency management activities. Provides multiple services ranging from disaster preparedness & disaster recovery, to financial assistance programs. Excellent source for publications.

Federal Emergency Management Agency (FEMA)

Region III (includes Pennsylvania and Delaware)
615 Chestnut Street
One Independence Mall, Sixth Floor
Philadelphia, PA 19106-4404
(215) 931-5500

FEMA Library -- <http://www.fema.gov/library/index.jsp>

The FEMA Library is a searchable web-based collection of all publicly accessible FEMA information resources, including: CDs, DVDs, VHS tapes, audio tapes, disability resources, posters and display items, brochures, publications, guidance and policy papers, program regulations and guidelines, forms, slide presentations, and some documents. It allows users to better locate, download to your computer to save and print items from the web.

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State Operations

Prepares and maintains a comprehensive state emergency management plan and takes an integral part in the development and revision of local and inter-jurisdictional emergency management plans. Emergency management plan consultation services available:

Pennsylvania Emergency Management Agency (PEMA)

2605 Interstate Drive
Harrisburg, PA 17110-9364
(717) 651-2001

Delaware Emergency Management Agency (DEMA)

165 Brick Store Landing Road
Smyrna, DE 19977
(302) 659-3362 or
(877) 729-3362

Local Operations

Prepares and maintains a current local or inter-jurisdictional emergency plan which provides for hazard mitigation, emergency preparedness, response and recovery.

To locate your specific local Emergency Management Office, consult the following pages provided by the Pennsylvania and Delaware Emergency Management Agencies.

County Emergency Management Agency Coordinators – Pennsylvania
 (provided by PEMA – January 2011)

<p>01. Adams County</p> <p>John Eline 230 Greenamyre Lane Gettysburg, PA 17325-2313 Phone: 717-334-8603 Fax: 717-334-1822 / 6826 Email: jeline@adamscounty.us</p>	<p>02. Allegheny County</p> <p>Robert A. Full 400 North Lexington Street, Suite 200 Pittsburgh, PA 15208 Phone: 412-473-2550 Fax: 412-473-2623 Email: rfull@county.allegheny.pa.us</p>
<p>03. Armstrong County</p> <p>Randall J. Brozenick 450 East Market Street, Ste 104 Kittanning, PA 16201-1409 Phone: 724-548-3431 Fax: 724-548-3243 Email: rjbrozenick@co.armstrong.pa.us</p>	<p>04. Beaver County</p> <p>Wesley Hill 351 14th Street Ambridge, PA 15003 Phone: 724-775-1700 Fax: 724-266-0210 Email: whill@co.beaver.pa.us</p>
<p>05. Bedford County</p> <p>Dave E. Cubbison 200 South Juliana Street Bedford, PA 15522 Phone: 814-623-9528 Fax: 814-623-0799 Email: dcubbison@bedfordcountypa.org</p>	<p>06. Berks County</p> <p>Brian A. Gottschall 2561 Bernville Road Reading, PA 19605 Phone: 610-374-4800 ext. 2502 Fax: 610-374-8865 Email: bgottschall@countyofberks.com</p>
<p>07. Blair County</p> <p>Daniel Boyles 615 Fourth Street Altoona, PA 16602 Phone: 814-940-5900 Fax: 814-940-5907 Email: dboyles@atlanticcbbn.net</p>	<p>08. Bradford County</p> <p>Robert Barnes 911 Communications Building 29 Van Kuren Drive, Ste 2 Towanda, PA 18848 Phone: 570-265-5022 Fax: 570-265-4774 Email: barnesr@bradfordco.org</p>
<p>09. Bucks County</p> <p>John D. Dougherty, Jr. 911 Freedom Way Ivyland, PA 18974 Phone: 215-340-8700 Fax: 215-957-0765 Email: jddougherty@co.bucks.pa.us</p>	<p>10. Butler County</p> <p>Frank P. Matis 120 McCune Drive Butler, PA 16001 Phone: 724-284-5211 Fax: 724-285-6388 Email: fmatis@co.butler.pa.us</p>

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<p>11. Cambria County</p> <p>Ronald Springer 110 Franklin Street, Suite 200 Johnstown, PA 15901 Phone: 814-534-4342 Fax: 814-472-2057 Email: rspringer@co.cambria.pa.us</p>	<p>12. Cameron County</p> <p>Kevin T. Johnson County Courthouse, 20 East 5th Street Emporium, PA 15834 Phone: 814-486-9352 Fax: 814-486-9393 Email: cameos@cameroncountypa.com</p>
<p>13. Carbon County</p> <p>Mark S. Nalesnik 1264 Emergency Lane Nesquehoning, PA 18240-8948 Phone: 570-325-3097 Fax: 570-325-9132 Email: ccema@ptd.net</p>	<p>14. Centre County</p> <p>Randy K. Rockey 410 Holmes Street, Room 133 Bellefonte, PA 16823 Phone: 814-355-6745 Fax: 814-355-6589 Email: rkrockey@co.centre.pa.us</p>
<p>15. Chester County</p> <p>Edward J. Atkins 601 Westtown Road, Suite 12 West Chester, PA 19380-0990 Phone: 610-344-5000 Fax: 610-344-5050 Email: eatkins@chesco.org</p>	<p>16. Clarion County</p> <p>Michael T. Rearick Court House, 421 Madison Road Clarion, PA 16214 Phone: 814-226-6631 Fax: 814-226-4294 Email: mrearick@oes.clarion.pa.us</p>
<p>17. Clearfield County</p> <p>Dave McClure 911 Leonard Street Clearfield, PA 16830-3245 Phone: 814-765-5357 Ext. 2 Fax: 814-768-9920 Email: dmccclure@clearfield911.com</p>	<p>18. Clinton County</p> <p>William Frantz 22 Cree Drive Lock Haven, PA 17745 Phone: 570-893-4090 Ext. 209 Fax: 570-893-4048 Email: bfrantz@clintoncountypa.com</p>
<p>19. Columbia County</p> <p>Lawrence Lahiff Court House, P.O. Box 380 Bloomsburg, PA 17815 Phone: 570-389-5720 Fax: 570-784-2975 Email: llahiff@columbiapa.org</p>	<p>20. Crawford County</p> <p>Allen W. Clark 903 Diamond Park Meadville, PA 16335 Phone: 814-724-2552 Fax: 814-724-2563 Email: aclark@co.crawford.pa.us</p>
<p>21. Cumberland County</p> <p>Theodore J. Wise 1101 Claremont Road, Room101 Carlisle, PA 17015 Phone: 717-240-6400 Fax: 717-240-6406 Email: twise@ccpa.net</p>	<p>22. Dauphin County</p> <p>Greg Kline 911 Gibson Boulevard Steelton, PA 17113-1988 Phone: 717-558-6800 Fax: 717-558-6850 Email: gkline@dauphinc.org</p>

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<p>23. Delaware County</p> <p>Edwin J. Truitt, CEM 360 North Middletown Road Lima, PA 19063 Phone: 610-565-8700 Fax: 610-892-9583 Email: delcom1@icdc.com</p>	<p>24. Elk County</p> <p>Michael McAllister 250 Main Street, PO Box 448 Ridgway, PA 15853 Phone: 814-776-5314 Fax: 814-772-1697 Email: mamcallister@elkoes.com</p>
<p>25. Erie County</p> <p>Dale Robinson 2880 Flower Road Erie, PA 16509 Phone: 814-870-9920 Fax: 814-870-9930 Email: drobinson@ecdops.org</p>	<p>26. Fayette County</p> <p>Roy A. Shipley 24 East Main Street Public Service Building, 4th Floor Uniontown, PA 15401 Phone: 724-430-1277 Fax: 724-430-1281 Email: rshipley@fcema.org</p>
<p>27. Forest County</p> <p>Stephen E. Hale P.O. Box 217 Tionesta, PA 16353 Phone: 814-755-3541 Fax: 814-755-8837 Email: shale@co.forest.pa.us</p>	<p>28. Franklin County</p> <p>David Donohue 390 New York Avenue Chambersburg, PA 17201 Phone: 717-264-2813 Fax: 717-267-3493 Email: dkdonohue@co.franklin.pa.us</p>
<p>29. Fulton County</p> <p>Vincent Joyce 219 North Second Avenue, Ste 106 McConnellsburg, PA 17233 Phone: 717-485-3201 Fax: 717-485-3767 Email: vjoyce@co.fulton.pa.us</p>	<p>30. Greene County</p> <p>Gregory C. Leathers 55 West Greene Street Waynesburg, PA 15370-2033 Phone: 724-627-5387 Fax: 724-627-5342 Email: gleathers@co.greene.pa.us</p>
<p>31. Huntingdon County</p> <p>Adam L. Miller Court House, 223 Penn Street Huntingdon, PA 16652 Phone: 814-643-6613 Fax: 814-643-8178 Email: ema@huntingdoncounty.net</p>	<p>32. Indiana County</p> <p>Thomas A. Stutzman 85 Haven Drive Indiana, PA 15701 Phone: 724-349-9300 Fax: 724-465-3868 Email: tstutzman@indianacounty.org</p>

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<p>33. Jefferson County</p> <p>Tracy Zents Emergency Services Building 560 Service Center Road Brookville, PA 15825-9761 Phone: 814-849-5052 Fax: 814-849-6387 Email: tzents@jeffersoncountypa.com</p>	<p>34. Juniata County</p> <p>Allen Weaver 11 North Third Street Mifflintown, PA 17059 Phone: 717-436-7730 Fax: 717-436-7733 Email: aweaver@co.juniata.pa.us</p>
<p>35. Lackawanna County</p> <p>Robert Flanagan 30 Valley View Business Park Jessup, PA 18434 Phone: 570-961-5511 Fax: 570-936-6529 Email: flanaganr@lackawannacounty.org</p>	<p>36. Lancaster County</p> <p>Randall S. Gockley P.O. Box 219 Manheim, PA 17545-0219 Phone: 717-644-1200 Fax: 717-664-1235 Email: rgockley@lema.co.Lancaster.pa.us</p>
<p>37. Lawrence County</p> <p>Brian Melcer 110 East Lincoln Avenue, #2B New Castle, PA 16101 Phone: 724-658-7485 Ext. 3701 Fax: 724-656-0568 Email: bmelcer@co.lawrence.pa.us</p>	<p>38. Lebanon County</p> <p>Daniel Kauffman 400 South Eighth Street Municipal Building, Room 12 Lebanon, PA 17042 Phone: 717-272-7621 Fax: 717-272-9509 Email: dan@lebanonema.org</p>
<p>39. Lehigh County</p> <p>Thomas Nervine 640 West Hamilton Street, Eighth Floor Allentown, PA 18101 Phone: 610-782-4600 Fax: 610-820-2014 Email: thomasnervine@lehighcounty.org</p>	<p>40. Luzerne County</p> <p>Stephen Bekanich 200 North River Street Wilkes-Barre, PA 18711-1001 Phone: 570-820-4400 Fax: 570-820-4456 Email: sbekanich@luzernecounty.org</p>
<p>41. Lycoming County</p> <p>Richard Knecht 542 County Farm Road, Suite 101 Montoursville, PA 17754 Phone: 800-433-9063 Fax: 570-433-4435 Email: rknecht@lyco.org</p>	<p>42. McKean County</p> <p>Bruce A. Manning 17175 Route 6 Smethport, PA 16749 Phone: 814-887-5070 Fax: 814-887-4910 Email: bamanning@mckeancountypa.org</p>

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<p>43. Mercer County</p> <p>Frank Jannetti Jr. 205 South Erie Street Mercer, PA 16137-1501 Phone: 724-662-6100 Fax: 724-662-6145 Email: fjannetti@mcc.co.mercer.pa.us</p>	<p>44. Mifflin County</p> <p>Philip Lucas Mifflin County Courthouse 20 North Wayne Street Lewistown, PA 17044 Phone: 717-248-9645 Fax: 717-248-0300 Email: plucas@co.mifflin.pa.us</p>
<p>45. Monroe County</p> <p>Guy Miller 100 Gypsum Road Stroudsburg, PA 18360 Phone: 570-992-4113 Fax: 570-402-7358 Email: gmliller@co.monroe.pa.us</p>	<p>46. Montgomery County</p> <p>Thomas M. Sullivan 50 Eagleville Road Eagleville, PA 19403 Phone: 610-631-6530 Fax: 610-631-6536 Email: tsulliva@montcopa.org</p>
<p>47. Montour County</p> <p>Walter H. Peters, III 30 Woodbine Lane Danville, PA 17821 Phone: 570-271-3047 Fax: 570-271-3078 Email: wpeters@montourco.org</p>	<p>48. Northampton County</p> <p>Robert F. Mateff, Sr. Northampton County Emergency Operations Center, 100 Gracedale Avenue Nazareth, PA 18064-9278 Phone: 610-746-3194 Ext. 226 Fax: 610-759-2172 Email: rmateff@northamptoncounty.org</p>
<p>49. Northumberland County</p> <p>Paul F. Froutz 911 Greenough Street, Suite #2 Sunbury, PA 17801 Phone: 570-988-4217 Fax: 570-988-4375 Email: paul.froutz@norrycopa.net</p>	<p>50. Perry County</p> <p>Larry Smeigh Court House, P.O. Box 37 New Bloomfield, PA 17068 Phone: 717-582-2131 Ext. 256 Fax: 717-582-5165 Email: lsmeigh@perryco.org</p>
<p>51. Philadelphia County</p> <p>Liam O'Keefe 240 Spring Garden Street, Lower Level Philadelphia, PA 19123 Phone: 215-686-1450 Email: liam.o'keefe@phila.gov</p>	<p>52. Pike County</p> <p>Roger K. Maltby Administration Building 506 Broad Street Milford, PA 18337 Phone: 570-296-6714 Fax: 570-296-3550 Email: rmaltby@pikepa.org</p>

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<p>53. Pittsburgh (City of)</p> <p>Michael H. Huss 200 Ross Street, Fifth Floor Pittsburgh, PA 15219 Phone: 412-255-2633 Fax: 412-255-8662 Email: pittsburghemergencymanagement@city.pittsburgh.pa.us</p>	<p>54. Potter County</p> <p>Glenn Dunn 20 Mockingbird Lane Coudersport, PA 16915 Phone: 814-274-8900 Fax: 814-274-8901 Email: gdunn@pottercountypa.net</p>
<p>55. Schuylkill County</p> <p>John M. Matz Public Safety Building 435 North Centre Street Pottsville, PA 17901-2528 Phone: 570-622-1705 Fax: 570-621-9999 Email: jmatz@co.schuylkill.pa.us</p>	<p>56. Snyder County</p> <p>Derrick L. Shambach 30 Universal Road Selinsgrove, PA 17870 Phone: 570-372-0535 Fax: 570-374-5992 Email: dshambach@snydercounty.org</p>
<p>57. Somerset County</p> <p>Richard B. Lohr 100 East Union Street Somerset, PA 15501 Phone: 814-445-1515 Fax: 814-483-1090 Email: lohrr@co.somerset.pa.us</p>	<p>58. Sullivan County</p> <p>Sean Thibodeault 6864 Route 220, PO Box 157 Laporte, PA 18626 Phone: 570-946-5010 Fax: 570-946-4122 Email: sthibodeault@snydercounty.org</p>
<p>59. Susquehanna County</p> <p>Charlene Moser County Office Building 81 Public Avenue Montrose, PA 18801 Phone: 570-278-4600 Fax: 570-278-9269 Email: emadirector@susqco.com</p>	<p>60. Tioga County</p> <p>Dennis A. Colegrove Court House, 118 Main Street Wellsboro, PA 16901 Phone: 570-724-9110 Fax: 570-724-6819 Email: dcolegrove@tiogacountypa.us</p>
<p>61. Union County</p> <p>Michelle P. Sanders 155 North 15th Street Lewisburg, PA 17837 Phone: 570-523-3201 Fax: 570-524-8808 Email: msanders@unionco.org</p>	<p>62. Venango County</p> <p>Thomas P. Sherman 1052 Grandview Road Oil City, PA 16301 Phone: 814-677-0325 Fax: 814-677-7459 Email: tsherman@co.venango.pa.us</p>

County Emergency Management Agency Coordinators – Pennsylvania
 (provided by PEMA – January 2011)

<p>63. Warren County</p> <p>Todd Lake 100 Dillion Drive, Suite 203 Youngsville, PA 16371 Phone: 814-563-2220 Fax: 814-563-9438 Email: tlake@warren-county.net</p>	<p>64. Washington County</p> <p>Jeffrey A. Yates 100 West Beau Street, C1 Courthouse Square Washington, PA 15301 Phone: 724-228-6911 Fax: 724-223-4712 Email: yatesj@co.washington.pa.us</p>
<p>65. Wayne County</p> <p>Steven E. Price Court House, 925 Court Street Honesdale, PA 18431-1996 Phone: 570-253-1622 Fax: 570-253-2943 Email: sprice@co.wayne.pa.us</p>	<p>66. Westmoreland County</p> <p>Richard J. Matason 911 Public Safety Road Greensburg, PA 15601 Phone: 724-600-7301 Fax: 724-600-7393 Email: rmatason@co.westmoreland.pa.us</p>
<p>67. Wyoming County</p> <p>Eugene J. Dziak 455 SR 6 East, Ste 1 Tunkhannock, PA 18657 Phone: 570-836-2828 Fax: 570-836-5678 Email: emao1@epix.net</p>	<p>68. York County</p> <p>Mike Fetrow 120 Davies Drive York, PA 17402 Phone: 717-840-2990 Fax: 717-840-7406 Email: mifetrow@ycdes.org</p>

County Emergency Management Agency Coordinators – Delaware
(Provided by DEMA – March 2011)

City of Wilmington Emergency Management Office George Giles Phone: 302-576-3914 Fax: 302-570-5491	New Castle County Office of Emergency Management David Carpenter Phone: 302-395-2700 Fax: 302-395-2705
Kent County Division of Emergency Planning and Operations Phone: 302-736-2222 Fax: 302-736-2223	Sussex County Emergency Operations Center Joseph Thomas Phone: 302-855-7801 Fax: 302-855-7800

Delaware Statewide Emergencies: Dial 911

O. Department of Veterans Affairs Medical Centers

Veterans Affairs Medical Center (VAMC) emergency preparedness plans include procedures for internal and external emergencies as discussed in this manual, as well as Veterans Affairs Department of Defense contingency plans, the National Disaster Medical System (NDMS) Plans and the Federal Response Plans (FRP).

VAMC policies and procedures currently in use would be used in emergency situations should private sector employees need to provide medical support by working within a VAMC during an emergency.

Refer to all current VAMC policies, directives and handbooks.

P. National Disaster Medical System

The National Disaster Medical System (NDMS) is a cooperative partnership among the Department of Health and Human Services, Department of Defense, Department of Veterans Affairs, Federal Emergency Management Agency, state and local governments, and the private sector.

NDMS is designed to provide Federal assistance by supplementing state and local regions when medical resources are overwhelmed due to an emergency situation. It does not replace state and local emergency preparedness plans.

NDMS is activated when there is a need to handle a large number of casualties from a domestic emergency or a conventional overseas war.

Federal assistance coordinated through NDMS includes:

- a) Medical assistance via Medical Support Units, Special Teams, medical supplies and equipment.
- b) Evacuation of patients to designated locations throughout the United States.
- c) Hospitalization within a network of non-Federal medical care facilities that have volunteered to accept patients.

Accredited hospitals in large metropolitan areas are encouraged to enter into a voluntary agreement with NDMS, and participate in the hospital network to accept patients during emergencies. In each NDMS area, there is a designated Federal Coordinating Center that assists participating hospitals and local authorities with emergency preparedness plans through NDMS. For additional information, call: 1-800-USA-NDMS or 301-443-1167.

Q. Dialysis Facility Emergency Plan Workbook

The following pages may be used as a starting point toward the development of your unit's emergency plan. It is a good idea to keep your plan in a secure location (as it may contain personal contact information that you do not want to be available to everyone), and make sure that you have reviewed and shared your unit's preparedness plan with staff members who will have a role in executing the plan.

The patients also have information they should complete and maintain, or that the dialysis facility could supply for each individual. Refer to the Important Emergency Patient Information section in the "Emergency Preparedness Resource for Pennsylvania and Delaware Dialysis Patients" manual.

This workbook was completed by: _____

On this date: _____

For dialysis unit: _____

Located at: _____

Telephone: _____

Fax: _____

Emergency Plan Coordinators

(Because this information contains personal/private information, this information should be considered confidential and released only on a "Need to Know" basis.)

Primary

Name/Title: _____

Home Address: _____

Office Telephone Number: _____

Home Telephone Number: _____

Cellular Telephone Number: _____

Email Address, work: _____

Email Address, personal: _____

Backup

Name/Title: _____

Home Address: _____

Office Telephone Number: _____

Home Telephone Number: _____

Cellular Telephone Number: _____

Email Address, work: _____

Email Address, personal: _____

Dialysis Facility Emergency Telephone List

Date Completed ____ / ____ / _____

Date Revised ____ / ____ / _____

Police: _____

Fire: _____

Ambulance: _____

Power Company: _____

Water Company: _____

Telephone Company: _____

Emergency Management Office: _____

Emergency Contractor / Vendor List

Date Completed ____ / ____ / _____

Date Revised ____ / ____ / _____

Water Treatment Vendor

Name: _____

Address: _____

Phone: _____

Customer Number: _____

Dialysis Machine Vendor

Name: _____

Address: _____

Phone: _____

Customer Number: _____

Medical Supply Vendor

Name: _____

Address: _____

Phone: _____

Customer Number: _____

Generator Vendor

Name: _____

Address: _____

Phone: _____

Customer Number: _____

Electrician

Name: _____

Address: _____

Phone: _____

Customer Number: _____

Plumber

Name: _____

Address: _____

Phone: _____

Customer Number: _____

Pharmacy Supply Source

Name: _____

Address: _____

Phone: _____

Customer Number: _____

Medical Waste Source

Name: _____

Address: _____

Phone: _____

Customer Number: _____

Transportation Source(s)

Name: _____

Address: _____

Phone: _____

Customer Number: _____

Name: _____

Address: _____

Phone: _____

Customer Number: _____

Backup Hospital

Hospital Name: _____

Address: _____

Phone: _____

Contact Name: _____

Backup Dialysis Facilities

Unit Name: _____

Address: _____

Phone: _____

Contact Name: _____

Unit Name: _____

Address: _____

Phone: _____

Contact Name: _____

Corporate Contacts

Name/Title: _____

Phone: _____

Email: _____

Name/Title: _____

Phone: _____

Email: _____

Name/Title: _____

Phone: _____

Email: _____

Personnel Contacts

(Because this information contains personal/private information, this information should be considered confidential and released only on a "Need to Know" basis.)

Primary Emergency Plan Coordinator

Name/Title: _____

Home Address: _____

Office Telephone Number: _____

Home Telephone Number: _____

Cellular Telephone Number: _____

Email Address, work: _____

Email Address, personal: _____

Backup Emergency Plan Coordinator

Name/Title: _____

Home Address: _____

Office Telephone Number: _____

Home Telephone Number: _____

Cellular Telephone Number: _____

Email Address, work: _____

Email Address, personal: _____

Unit Administrator

Name/Title: _____

Home Address: _____

Office Telephone Number: _____

Home Telephone Number: _____

Cellular Telephone Number: _____

Email Address, work: _____

Email Address, personal: _____

Medical Director

Name/Title: _____

Home Address: _____

Office Telephone Number: _____

Home Telephone Number: _____

Cellular Telephone Number: _____

Email Address, work: _____

Email Address, personal: _____

Head Nurse

Name/Title: _____

Home Address: _____

Office Telephone Number: _____

Home Telephone Number: _____

Cellular Telephone Number: _____

Email Address, work: _____

Email Address, personal: _____

Social Worker

Name/Title: _____

Home Address: _____

Office Telephone Number: _____

Home Telephone Number: _____

Cellular Telephone Number: _____

Email Address, work: _____

Email Address, personal: _____

Dietitian

Name/Title: _____

Home Address: _____

Office Telephone Number: _____

Home Telephone Number: _____

Cellular Telephone Number: _____

Email Address, work: _____

Email Address, personal: _____

Secretary

Name/Title: _____

Home Address: _____

Office Telephone Number: _____

Home Telephone Number: _____

Cellular Telephone Number: _____

Email Address, work: _____

Email Address, personal: _____

Patient Care Technician

Name/Title: _____

Home Address: _____

Office Telephone Number: _____

Home Telephone Number: _____

Cellular Telephone Number: _____

Email Address, work: _____

Email Address, personal: _____

Staff Nephrologist

Name/Title: _____

Home Address: _____

Office Telephone Number: _____

Home Telephone Number: _____

Cellular Telephone Number: _____

Email Address, work: _____

Email Address, personal: _____

Staff Nephrologist

Name/Title: _____

Home Address: _____

Office Telephone Number: _____

Home Telephone Number: _____

Cellular Telephone Number: _____

Email Address, work: _____

Email Address, personal: _____

Corporate Contact / Regional Representative

Name/Title: _____

Home Address: _____

Office Telephone Number: _____

Home Telephone Number: _____

Cellular Telephone Number: _____

Email Address, work: _____

Email Address, personal: _____

Physical Location Description

Use this space to describe the location of your dialysis unit in relation to the neighborhood and building. Consider you had to tell emergency personnel, how would you give them directions to find you?

You may want to insert a map from the internet.

Some items to include with your diagrams could be:

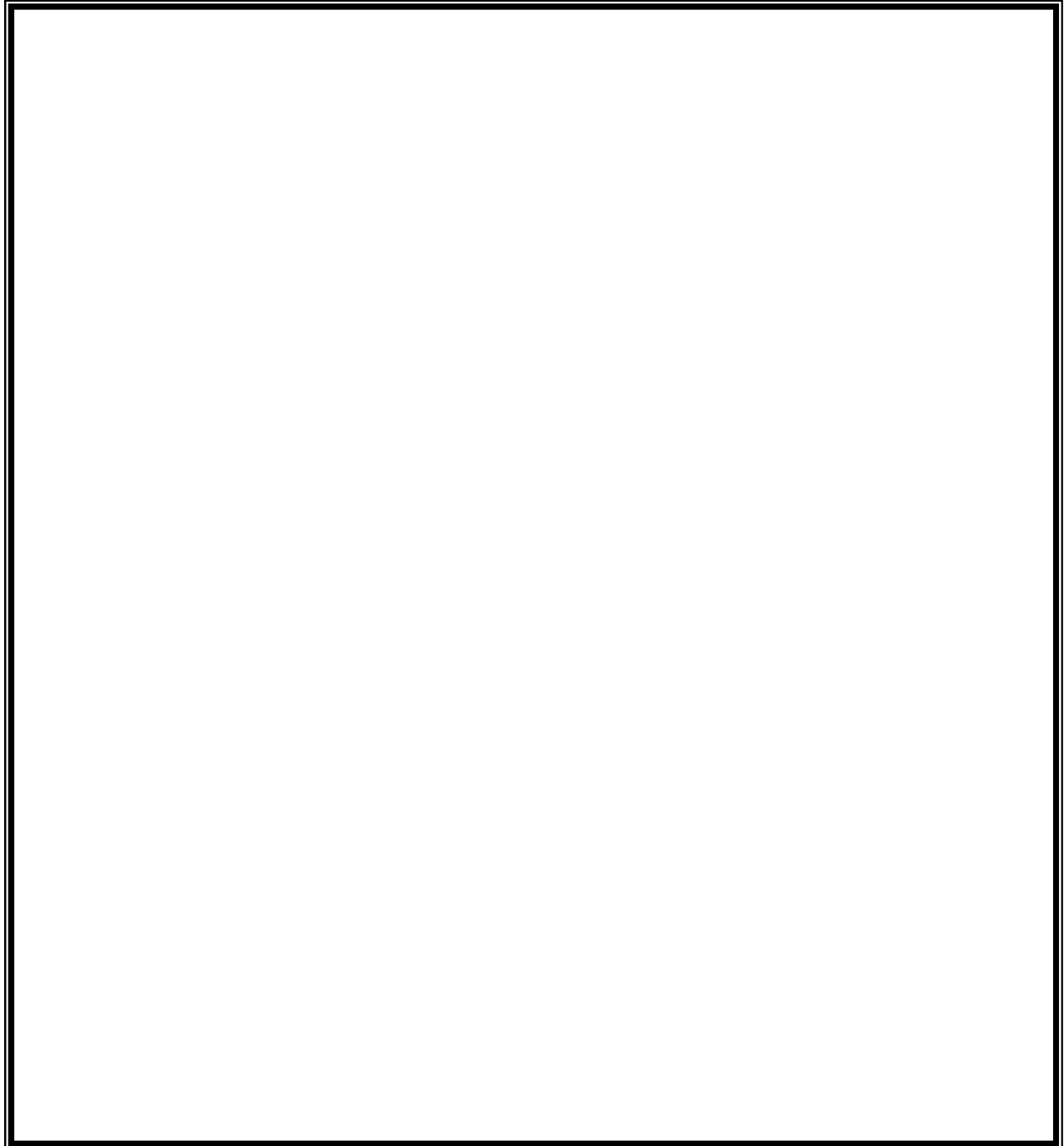
- Fire hydrants / fire extinguishers / fire alarm stations
- Stairwells / fire doors
- Directions to your unit once inside of a main building (if part of a larger complex)
- Description of an evacuation route



Technical Description of Dialysis Unit

Use this space to diagram the technical setup of your dialysis unit. Include the make and model of all equipment (computer network and dialysis machines), location of water lines, electrical outlets and/or a blue print/technical schematic of key components.

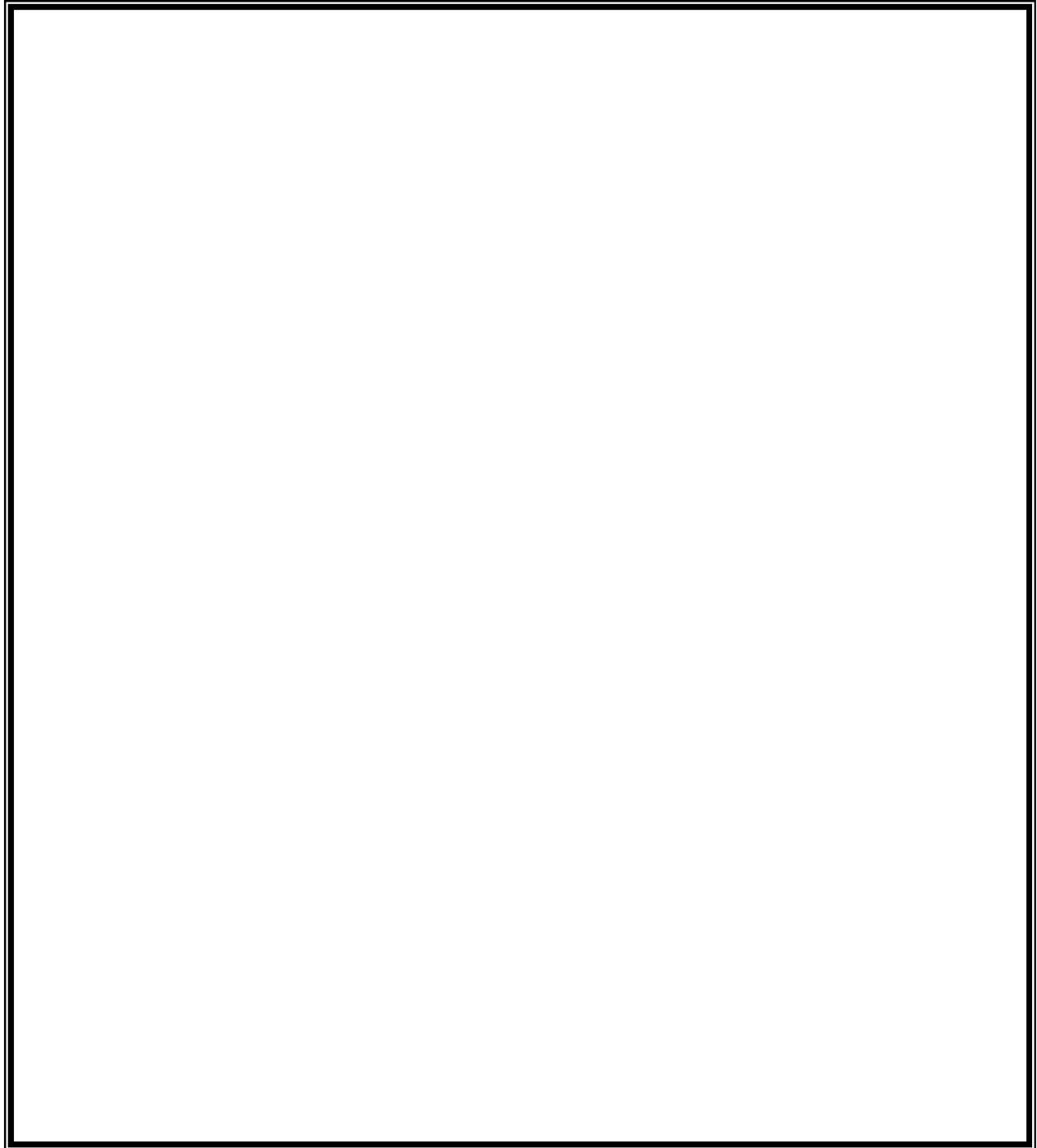
You may want to have a few different diagrams so not to have too much on one image.



Logs, Records and Reports

Consideration should be made to protect all important paper-form documentation from damage, including but not limited to water treatment records, laboratory results and patient charts.

You may use the space below to detail how this type of information is safeguarded.



S. Executive Summary

Dialysis Provider Disaster “To Do” List

- Develop a relationship with your local Emergency Management Agency (EMA) or Emergency Operations Center (EOC) and determine county policy regarding ESRD patients.
- Develop a facility disaster plan and review annually with patients, patient’s family and staff.
- Review and update disaster policies/plan especially prior to the start of inclement weather.
- Update patient medication list, patient prescriptions and patient emergency contact information regularly.
- Provide patients with the name and phone number of a backup facility as well as a list of all dialysis clinics in the surrounding area for use in finding alternative treatment sites.
- Provide patients with a copy of his/her most recent dialysis orders, or copy of last treatment record, pre disaster.
- Dialyze patients as close to impending disaster as safety permits.
- Coordinate transportation with local providers and patients in the event of scheduling changes.
- Develop an effective communication plan, as phones may not be operable.
- Post event – notify your local EMA/EOC if there is a need for restoration of power or water.
- Post event – report the functional status of your facility to ESRD Network 4: 412-325-2250.

“Best Practices”

- Allow staff “up-front” time to prepare.
- Consider arranging an out-of-area or out-of-state recorded voice message service to update patients on your facility’s status.
- Pre-arrange a back-up facility for patients.
- If possible, pre-arrange an emergency generator, fuel and water supply.
- Place supplies and records in waterproof containers.
- Have petty cash supply on hand to assist staff with basic needs: food, clothing, gas and housing.

Resources

- CMS Guide: *EMERGENCY PREPAREDNESS FOR DIALYSIS FACILITIES*, available for download at: www.cms.hhs.gov/ESRDNetworkOrganizations/Downloads/EmergencyPreparednessforFacilities2.pdf
- Conditions for Coverage for End-Stage Renal Disease Facilities; Final Rule; Published April 15, 2008, available for download at: www.cms.hhs.gov/CFCsAndCOPs
- Weather maps and information: www.noaa.gov
- Emergency preparedness information: www.annanurse.org
- National Kidney Foundation Emergency Hotline: 1-888-335-4363
- Federal Emergency Management Agency: www.fema.gov
- Pennsylvania Emergency Management Agency: www.pema.state.pa.us
- Delaware Emergency Management Agency: dema.delaware.gov
- Homeland Security Preparedness Homepage: www.ready.gov
- ESRD Network 4 website: www.esrdnetwork4.org