

**EMERGENCY OPERATIONS
PLAN
ANNEX B, EVACUATION**

**APPENDIX A
SPECIAL NEEDS**

HURRICANE EVACUATION

NOVEMBER 2008

CHATHAM EMERGENCY MANAGEMENT AGENCY

TABLE OF CONTENTS

I.	INTRODUCTION	1
	General	
	Definitions	
	Responsibilities	
	Assumptions	
II.	PURPOSE	4
III	CONCEPT OF OPERATIONS	5
IV.	ADMINISTRATION & LOGISTICS	9
	Tracking	
	Critical functions within the ST3C	
	Hospital Special Needs Actions	
TAB A	LEVELS OF CARE	12

I. INTRODUCTION

A. GENERAL

The protection of Chatham County residents threatened by an Incident of Critical Significance is a primary objective of the County Emergency Operations Plan (EOP). As a part of this plan, Hurricane Evacuation procedures define measures to evacuate members of the special needs population that require specialized assistance in their daily needs and during emergency situations.

It is important to note that this plan does NOT include residents of Nursing Homes, Personal Care Facilities, and Community Living Arrangement Facilities.

All Nursing Homes, Personal Care Facilities, and Community Living Arrangement Facilities that are defined, regulated and otherwise not exempted, by the Georgia Department of Human Resources (DHR) are required by DHR Rule, Chapter 290-5-45, to provide their clients, "...arrangements for transportation and hospitalization...[and] alternative living arrangements...".

B. DEFINITIONS

Congregate Shelter: Group general-population shelter

Levels of Care: GA Department of Human Resources (DHR)
Definitions for Determining Disaster Shelter Placement (TAB A)

Medical or Special Needs Shelter: A shelter which is equipped and staffed to provide care for that population of persons with special needs who do not require hospital admission: but do require a higher Level of care than the general population.

National Disaster Medical System (NDMS): Part of the Department of Health and Human Services, Office of Preparedness and Response, to support Federal agencies in the management and coordination of the Federal medical response to major emergencies and federally declared disasters.

Saffir-Simpson Scale: Hurricane intensity scale. (Chatham County storm surge also indicated.)

HURRICANE CATEGORY	WIND mph	SURGE Height ft.
1	74-95	4'-11'
2	96-110	11'-17'
3	111-130	17'-21.5'
4	131-155	21.5'-26'
5	<155	26'-30.5'

Secondary Triage, Treatment and Transportation Center Plan (ST3C) or Staging Area: Temporary evacuation assembly area activated to assess (triage), assign, and transport special needs persons to the appropriate evacuation destination. If medical support is provided, it will be temporary and at the basic life support Level.

Service Animals: A guide dog, signal dog or any other animal individually trained to provide assistance to an individual with a disability.

Special Needs Individuals/Groups: Includes that population requiring specialized assistance in meeting daily needs and may require special assistance during emergency situations. Individuals may need specially trained health care providers, special facilities equipped to meet their needs, and may require specialized vehicles and equipment for transport.

C. RESPONSIBILITIES

1. **Chatham Emergency Management Agency (CEMA):** As the overall coordinator for Chatham County in disasters and emergency management, CEMA is responsible for the following activities when a special needs evacuation is to be initiated:
 - a. Facilitate planning between emergency support functions and Georgia Emergency Management Agency (GEMA) to rapidly provide transportation that can accommodate special needs clients.
 - b. Ensure transportation assets are in place and commencing transport within 12 hours of notification.
 - c. Assist the Chatham County Health Department (CCHD) with staffing and supplies for the Secondary Triage, Treatment, and Transportation Center (ST3C) or Staging Area, and other requirements as requested.
 - d. Maintain communications with GEMA regarding planning, the decision to evacuate, and the status of the evacuation.
 - e. Request Georgia Air National Guard transportation assets if they are available.

2. **Chatham County Health Department, Division of Public Health (DPH):**
 - a. Coordinate with other participating agencies to discuss implementation of the plan and activities of the group through the Emergency Operations Center (EOC).
 - b. Coordinate planning, identification, triage, evacuation and the return of the County's special needs population.
 - c. Coordinate planning and training to address the special needs population's requirements during evacuation.
 - d. Operate and coordinate the improvement of shortfalls in staffing, location, supplies, etc. for the ST3C or Staging Area.
3. **Teleride** will provide transportation from clients' homes to the ST3C or Staging Area immediately upon activation of this plan. As required, transport clients from the ST3C back to their homes or local hospitals.
4. **Ambulances** will be used to provide transportation from clients' homes to the ST3C or Staging Area. As required, they will transport clients from the ST3C back to their homes or to local hospitals if specific criteria is met.
5. **GEMA** will coordinate with State and private agencies to provide transportation that will accommodate special needs clients.
6. **ST3C Team**
 - a. **Physician Lead** - This function is staffed by a Chatham County Health Department Physician. This person will have the functional responsibility of determining the Application of the five levels of care as outlined by the Care of Special Needs Populations document at Tab A.
 - b. **Nursing Lead:** This position is staffed by the Chatham County Nurse Manager or her/his designee. The functional responsibility of this position is to triage Special Needs Registrants based on the five levels of care. Standard State of Georgia Nursing Protocols will be used as a template for decision making. Registrants will be triaged for assignment to a Special Needs Population Shelter.
 - c. **Clerical Lead:** This position is staffed by the Chatham County Administrative Lead or his/her designee. Functional responsibilities of this position include providing and maintaining the Special Needs Registry at the Triage Center. Staff will provide the Registry, Special Needs Registry Application Form and disseminate the information to responding or supporting agencies as needed. Department of Family and Children Services (DFACS) will be responsible to manage the Triage Center and tracking the Special Needs Population to their assigned Shelters.
 - d. **Logistics Lead:** This position is staffed by the Chatham County Procurement Officer. The functional responsibility of this position is to provide equipment and supplies as needed by the

- Nursing Function of the Triage shelter.
 e. Transportation/Manifest Officer: (See Tracking)

D. ASSUMPTIONS:

1. A hurricane is projected to make landfall in or near enough to Chatham County to cause significant infrastructure damage and pose a threat to anyone remaining in the county. The threat requires the evacuation of the special needs population as well as the general populace.
2. As identified below, a special needs evacuation decision shall be made prior to the evacuation of the general population. The evacuation decision making process should allow for sufficient time to provide for a:
 - a. Six hour period prior to the onset of tropical storm force winds.
 - b. Twenty hour period of mandatory evacuation clearance time.
 - c. Six hour daylight period for a voluntary evacuation.
 - d. Twelve hour period of special needs evacuation prior to the initiation of the voluntary evacuation.
3. Supplemental transportation resources will be coordinated and made available by GEMA. It will take at least 12 hours for State procured transportation to be in place.
4. Due to the gravity of the threat, an evacuation order will be given by local elected officials. GEMA will have been advised of this order.
5. Local transportation resources have been deemed inadequate to accomplish this special needs evacuation.
6. Local hospitals will remain at least partially operational in conditions up to a Category 4 hurricane for patients that are too critical to evacuate. All remaining patients will be evacuated via the GHA Live Process Regional Coordination designate.
7. State operated special needs shelters will be activated upon demand for Level 3, 4 and 5 care.
8. Unaccompanied minors will be supervised by Red Cross Disaster Services personnel until they can be delivered into DFCS care.
9. Persons exhibiting uncontrollable and disruptive behavior will be referred to law enforcement.

II. PURPOSE

The purpose of this SOP is to provide an overview of Chatham Emergency Management Agency's (CEMA) role in assisting with the evacuation of Special Needs Populations and documentation of the process to be used in requesting this assistance. The Chatham County Health Department has been assigned the task of developing plans in conjunction with CEMA. This procedure does not replace the Public Health District Plan but serves to clarify the process of additional assistance requests to CEMA and higher headquarters.

III. CONCEPT OF OPERATIONS

This plan will be implemented upon the recommendation of the Director CEMA with the approval of the Chairman, Chatham County Board of Commissioners and concurrence of the Mayors of the Municipalities as appropriate. The Coastal Health District Director's recommendations concerning special needs evacuation shall be considered as an integral part of the evacuation process.

Persons with special needs are encouraged to have plans for their evacuation. The following steps are to be considered a last resort for use only when no other alternatives are available. **DO NOT WAIT TO REGISTER. REGISTRATION IS TAKEN THROUGHOUT THE YEAR.**

1. Applicant calls the Special Needs Coordinator (SNC), Chatham County Department Health Department, (912) 356-2441, who will record the information needed to cause an application to be mailed to the applicant and then see that an application is mailed with instructions to complete and return the application to the health department. As an alternative, the Application can be downloaded from the Coastal Health District website www.gachd.org/emergency-preparedness and mailed to the Chatham County Health Department at :

Attn: Special Needs Coordinator
1395 Eisenhower Drive
Savannah, GA 31406

Action: CCHD

2. Once the Special Needs Coordinator receives the completed Enrollment Form they will pass the Form to the Chatham County Health Department Nursing Section for screening.

Action: CCHD

- A. If approved by the Health Department Nursing Section to meet the criteria of Level 3, 4, or 5 special needs care definitions, the application will be signed as approved for inclusion on the Special Needs Registry. The approved form will be returned to the Special Needs Coordinator for entry into the Chatham County Health Department Special Needs database.

Action: CCHD

- B. If not accepted into the Special Needs registration program, the applicant will be immediately notified by the Health Department so that they make other arrangements for evacuation and sheltering.

Action: CCHD

- C. The Special Needs Registry does not include Level 1 or Level 2 clients. Non qualified applicants will be instructed that in the event of

an evacuation they may proceed by any CAT bus to the Civic Center for evacuation by public transportation to a congregate shelter.

Action: CCHD

- D. If accepted onto the Special Needs Registry at Level 3, 4, or 5, the applicant will be so informed by the Special Needs Coordinator.

Action: CCHD

- E. If an evacuation appears imminent, the client will be advised by the United Way 2-1-1 staff to prepare for evacuation. The client will again be advised by the United Way 2-1-1 staff on the day of the event, of the time of pick-up. Clients will be picked-up by Teleride or by ambulance.

*Action: UW 2-1-1
Teleride
Ambulance*

- (1) Level 3 and 4 clients will be transported to a Special Needs Staging Area for triage and transportation to an inland special needs shelter.

*Action: Teleride
Ambulance*

- (2) If the Special Needs Staging Area triage process results in a client evaluation of a Level 1 or 2, that client will be transported to their home where they may subsequently enter the process for evacuation from the Civic Center to a congregate shelter.

*Action: ST3C Staff
Teleride
Ambulance*

- (3) If the triage process results in a client evaluation of a Level 5, that client will be transported to a local hospital or inland shelter if National Domestic Medical System assets are available. In the event of a category 4 or 5 hurricane, local hospitals will be closed thereby mandating the need for NDMS assistance.

*Action: ST3C Staff
Ambulance*

- F. If accepted onto the special needs registry at Level 5, the applicant will be so informed by Public Health and instructed that in the event of an evacuation they will be notified by telephone by the United Way 2-1-1 staff of the time of pick-up. The client will be advised to be prepared to

evacuate immediately upon receipt of the telephonic notification. Level 5 patients must bring:

- (1) Only one caregiver, no children and no pets.
- (2) All medications in their original prescription bottle.
- (3) Picture ID and insurance cards.
- (4) All medical supplies and instructions to include splints, dressings and wheelchairs.
- (5) Necessary personal care/hygiene items such as toiletries and adult diapers.
- (6) Physician names and emergency contract information.
- (7) Copy of living will/durable Power of Attorney for healthcare.

Action: CCHD
2-1-1
Ambulance

2. During an evacuation event or when there is insufficient time to follow non-emergency Registry protocols the normal registration process may be set aside.
3. If an unexpected emergency occurs: upon receipt of a request to be placed on the Special Needs Register, the Special Needs Coordinator, will record the necessary information needed to enroll the applicant
 - A. The Special Needs Coordinator will immediately refer the applicant to Nursing for telephonic screening.
 - B. Once the screening process is completed and determination is made on inclusion of the applicant to the Registry, the Coordinator will be notified and the applicant placed on the Registry.
 - C. Once the emergency mode has ended, the Special Needs Coordinator will revert to the non-emergency mode and mail an application to the applicant.
 - D. If an applicant is not approved for inclusion, the applicant will be immediately notified so the applicant may make other arrangements for evacuation and sheltering.

Action: CCHD
4. Applicants entered onto the Special Needs Registration Database will be contacted semi-annually by the Special Needs Coordinator to verify their medical condition and update their Enrollment Form.

Action: CCHD
5. Prior to hurricane season, locations of special needs client's homes will be identified and mapped.

Action: CCHD
CEMA

6. When a storm is three to five days from Chatham County, the following departments and agencies will be notified by CEMA that a special needs evacuation may be required:
- A. Chatham County Health Department
 - B. EMS for wheelchair and horizontal transport service
 - C. CAT-Teleride for wheelchair service
 - D. Area hospitals
 - E. GEMA for special needs shelters and transportation
- Action: CEMA*
7. When a storm is approximately three days (72 hours) from Chatham County, special needs clients will be advised by United Way 2-1-1 that evacuation is possible, to prepare their essential items kits that include medications and important documents, and be prepared to evacuate within one hour of the next call.
- Action: CEMA
CCHD
UW 2-1-1*
8. When a storm is two days (48 hours) from Chatham County, the following departments and agencies will be notified by CEMA that a special needs evacuation is required immediately:
- A. Chatham County Health Department
 - B. EMS for wheelchair and horizontal transport service
 - C. CAT-Teleride for wheelchair service
 - D. Area hospitals
 - E. GEMA for special needs shelters and transportation
- Action: CEMA*
9. Clients registered as Level 3 and 4 will be picked-up and transported to a Special Needs Staging Area for triage and transportation to an inland special needs shelter.
- Action: CCHD
Teleride
Ambulance*
10. Clients registered as Level 5 will be transported to a local hospital if NDMS assets are not available at an inland shelter location.
- Action: CCHD
Ambulance*
11. Clients will be given a lanyard and document pouch to wear around their neck during transportation from the Special Needs Staging Area to their ultimate destination.
- A. Client registration form with their medical history, allergies and medication list will be placed in the lanyard with their name showing.

B. Their name will also be placed on a Special Needs tracking form and they will be given an Identification number. This number, along with their name and destination will be placed on an arm bracelet that they will also wear to their destination.

C. This will allow the patient to be tracked throughout their evacuation.

*Action: Lanyards – CCHD
ST3C staff
State arranged export resources*

12. Pets will only be allowed at (or in conjunction with) the Special Needs Center if they are crated and the owner has a current record of the pet's immunizations or they are service animals assisting disabled persons (these animals must remain with the owner at all times).

13. Animal Control will provide the staff and equipment to temporarily care for animals that are brought to the center. Animal Control should keep in mind the following when incorporating pet management into their plan:

- A. Animal drop-off point.
- B. How to identify animals with their owner.
- C. Handling Seeing Eye Dogs and other service animals.
- D. Food and water (depending on the length of time animals are held in kennels).
- E. Pet medications

Action: Animal Control

14. When utility services have been fully restored and reentry is authorized, the evacuation process will be reversed and all clients returned to their respective homes.

Action: All above listed agencies

In the event that a storm is predicted to make landfall as a Category 4 or 5 hurricane, area hospitals will be forced to evacuate. Internal hospital procedures will dictate their activities. No level 5 patients will be transported to local hospitals as they will be securing the evacuation of critically ill patients via the GHA Live Process; as available assistance will be provided through the Emergency Operations Center and both state and local resources will be provided.

IV. ADMINISTRATION AND LOGISTICS

A. TRACKING

1. Patient Tracking:

DFACS is the lead agency for the provision of administrative tracking support. If the ST3C or Staging Area Commander sees that additional staff is required, the DFACS representative will be contacted at the EOC. Volunteers from the community can also be used to support

these requirements and would be placed under the supervision of the DFACS supervisor.

2. The Special Needs Registry will be the standard document of use in tracking Special Needs Populations through the ST3C.
3. The number of special needs clients will be communicated through the EOC to the receiving District and State Operations Centers.
4. Patients that are processed at the ST3C must be tracked and their medical status/evaluation documented. Patients will report to the facility and undergo a triage. If patients report to the facility with personal belongings that look suspicious the Safety Officer will notify police officials to have their items checked before they are allowed to enter the facility. Personal belongings will remain with the patient as they are processed through the ST3C. At a minimum, Administration must capture the name and triage tag number/identifier, at the beginning of the process. Patients that are processed through the facility will have their triage tag will removed by the staff and the tag will become part of the patient's treatment record.
5. Patient Charting
Health care providers at the ST3C will document the patient's medical status and collect patient demographic data. Patients can start to fill out the demographic portion of their chart should they need to wait for an available provider. The chart will be completed at the out-processing station. Any information that patients or staff were unable to obtain, can be filled in while patients review their discharge papers.

B. CRITICAL FUNCTIONS WITHIN THE ST3C OR STAGING AREA

The ST3C Commander, Operations Officer and representatives from the supporting agencies will determine patient flow. Certain challenges, such as narrow corridors, or doorways, and stairs that do not allow stretchers or wheelchairs to pass easily must be considered in the patient flow planning. The following section delineates and describes the critical aspects of the ST3C. Each area must be considered when establishing the facility.

1. Perimeter Security
Due to the nature of the incident the ST3C may require a full compliment of security officers. Perimeter security is needed to provide for the safety of the public. Local law enforcement will provide security for the facility and surrounding areas. Security officers will need to ensure that only authorized and properly credentialed staff enters the grounds.
2. Perimeter security will also be called upon to check personal belongings of patients as needed. If dangerous items are suspected/seen in patient's belongings such as (e.g. weapons), security will immediately confiscate the articles and notify the local law

enforcement authorities.

3. Perimeter security efforts also include directing traffic and controlling traffic patterns. Though most of the patients will arrive by bus or ambulance from the scene, many citizens may arrive in their private vehicles, taxis, public buses, or foot. Officers must determine ambulance and bus drop off points, and private citizen vehicle parking.
4. Once patients are discharged from the ST3C they will not be allowed to re-enter. Patients will be directed away from the facility.
5. The number of security officers needed at the facility will depend on the size of the ST3C and the number of functions that are to be assigned. Local law enforcement will provide perimeter security but other agencies and volunteers will also be used to support this effort. School crossing guards, private security agencies, traffic controllers for stadium/concert events, and the Department of Public Works will be able to provide barricades, cones, directional signs, and personnel to supplement traffic control efforts.

C. HOSPITAL SPECIAL NEEDS ACTIONS

Local Hospitals will secure facilities at the first notification of a special needs evacuation. The perimeter will be secured and visitors and guests will be triaged before entering the campus to determine the nature of their visit. Patients seeking emergency care will be directed to the Emergency Department. Individuals picking up a discharged patient will be required to provide the name of the patient before entrance will be allowed. Patients identifying themselves as special needs patients will be laced in a holding area. Hospitals will notify the ST3C site of necessary pick up requirements for further ST3C registration, triage and delineation of destination. Special needs level 5 patients who have already been identified via ST3C or Special Needs registration will be required to have the appropriate lanyard designating their status. These patients will be admitted through the emergency Departments. People seeking shelter will be informed that they may proceed by any CAT bus to the Civic Center for evacuation by public transportation to a congregate shelter.

TAB A: LEVELS OF CARE: GA DHR Definitions for Determining Disaster Shelter Placement

LEVEL	DESCRIPTION	EXAMPLES	ASSIGNMENT
1	Persons who are independent and capable of self-care requiring only minimal support for minor illnesses and injuries.	Well, able-bodied; sprains, strains, cuts, abrasions; colds; taking medication for stable acute or chronic conditions such as arthritis or mental health conditions; pregnant women up to 40+ weeks who have no complications, and accompanied well children.	Congregate shelter
2	Persons with conditions requiring observation or minor supportive assistance in activities of daily living. Independent with some family/caretaker support. Persons capable of socially acceptable interaction.	Requires use of wheelchair or assistive device, but can transfer; stable diabetics (insulin or diet controlled); currently stable, but on medication for stable cardiac or respiratory conditions; impaired hearing or vision; mental illness; hypertension; renal problems. *Unaccompanied children in the care of DFCS awaiting transfer to appropriate care.	Congregate shelter
3	Persons with conditions requiring some Level of privacy or separation but do not require skilled or continuous health care support from facility staff.	Communicable diseases like chicken pox or roseola; persons on chemotherapy or radiation; people with drug controlled TB; those with moderate Alzheimer's or dementia; those requiring assistance from family member/caretaker in activities of daily living and have that person with them; accompanied developmentally disabled children; those with portable O2 in use; kidney dialysis patients.	Medical or Special Needs Shelter or other designated care facility for supportive care.
4	Persons requiring frequent or continuous surveillance for potentially life-threatening conditions or require bedding or bathroom facilities, or help with ADL not available in the shelter. Persons exhibiting behavior not conducive to congregate sheltering.	Incontinent persons or those requiring assistance with toileting; those with limited mobility who cannot sleep on a cot or transfer; brittle diabetics or epileptics; oxygen dependent persons; those with severe dementia, uncontrolled mental illness, persons in withdrawal; women with complicated pregnancies.	Medical or Special Needs Shelter or other designated care facility for supportive care.
5	Persons requiring skilled care, continuous observation, or special equipment and services usually found in a hospital.	Those needing IV feeding or medication; completely bedfast requiring total care, uncontrolled chronic or acute physical or mental conditions; women in active labor; those with significant injuries, difficulty breathing, or prolonged pain; severely disabled infants and children.	Emergency room, hospital or designated care facility of a hospital where swift transfer can occur if needed