



HAZARDOUS MATERIAL/WASTE

MISSION	
To provide a safe environment for residents, staff, and visitors within the nursing home following a hazardous material or hazardous waste incident that may or may not impact the safety of the facility or availability of services; and to provide the safe continuation of care for residents and visitors.	
DIRECTIONS	
Read this entire response guide and use as a checklist to ensure tasks are addressed and completed. For each response period, all activated IMT positions should refer to their Job Action Sheet for additional actions. Each IRG is intended to be a starting point and not all inclusive. Customize to your facility. <i>Note: Section duties and responsibilities remain the responsibility of the Incident Commander unless delegated.</i>	
OBJECTIVES	
<input type="checkbox"/>	Provide safe and effective decontamination of contaminated and/or injured residents.
<input type="checkbox"/>	Protect residents, staff, and the nursing home from contamination and safely restore normal operations.
<input type="checkbox"/>	Communicate effectively with the local emergency operations center and emergency response partners.

RAPID RESPONSE CHECKLIST	
<input type="checkbox"/>	If a reportable hazardous material/waste spill or release occurs (or is threatened) on facility property, call 9-1-1 immediately to report the incident. It is also necessary to notify the California Governor’s Office of Emergency Services (Cal OES) Warning Center at 1-800-852-7550. The facility may also be required to notify local authorities. Include the following information: <ul style="list-style-type: none"> • Name of caller and facility • Exact location, date and time of spill, release or threatened release • Substance, quantity involved and isotope (if known) • Chemical name (if known) • Description of what happened
<input type="checkbox"/>	Alternately, the facility may be notified by authorities of an external hazardous materials/waste spill or release that may affect the facility.
<input type="checkbox"/>	Activate facility’s EOP and appoint a Facility Incident Commander (IC) if warranted.
<input type="checkbox"/>	Assess residents for signs of distress; keep residents, staff and visitors away from the site of the spill.

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RAPID RESPONSE CHECKLIST	
<input type="checkbox"/>	Access the <i>Safety Data Sheet</i> (formerly named the <i>Material Safety Data Sheet</i>) for the material spilled or released on the facility's property. Determine if the material/waste poses a safety or health risk to residents, staff or visitors. All SDS's should be available on site, but if the SDS cannot be located on site, consider checking the internet.
<input type="checkbox"/>	Utilize appropriate Personal Protective Equipment (PPE) if warranted.
<input type="checkbox"/>	Close windows, doors, and ventilation systems as needed to protect air quality by preventing the spread of dangerous fumes or smoke.
<input type="checkbox"/>	Coordinate with public safety agencies (fire and law) and emergency management to determine if evacuation is necessary.
<input type="checkbox"/>	If the decision is considered to evacuate the facility, see SHELTER-IN-PLACE or the EVACUATION IRG .
<input type="checkbox"/>	Notify appropriate state survey agency to report an unusual occurrence and activation of facility's EOP.
<input type="checkbox"/>	Follow public health advice regarding water or air contamination (including the following notices: Boil Water, Do Not Drink Water, and Do Not Use Water).
<input type="checkbox"/>	<i>Add other response actions here consistent with the facility EOP.</i>

Immediate Response (0 – 2 hours)		
IMT Position	Action	Initials
Incident Commander	Establish operational periods, objectives, and regular briefing schedule. Consider the use of NHICS 200: Incident Action Plan (IAP) Quick Start for initial documentation of the incident.	
	Activate the Incident Management Team, Medical Director/Specialist, and Nursing Home Command Center.	
	Notify nursing home Chief Executive Officer, Board of Directors, state survey agency, and other appropriate internal and external officials of situation status.	
	In conjunction with the Medical Director/Specialist determine the threat (if any) to the nursing home and the need for shelter-in-place or facility evacuation.	
	Consider limiting or ceasing nonessential services.	
	Communicate information via regular briefings to Section Chiefs and the Incident Commander.	
Liaison/PIO	Activate the communication plan and respond to media inquiries in coordination with law enforcement and the Incident Commander.	

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Immediate Response (0 – 2 hours)		
IMT Position	Action	Initials
Liaison/PIO	Develop resident, staff, and community response messages to convey nursing home preparations, services, and response.	
	Monitor media outlets for updates on the incident and possible impacts on the facility.	
	Notify community partners in accordance with local policies and procedures (e.g., consider local emergency operations center, other area healthcare facilities, local emergency medical services, and healthcare coalition coordinator), to determine incident details, community status, estimates of casualties (if any), and establish contacts for requesting supplies, equipment, or personnel not available in the facility.	
	Contact appropriate authorities and experts to provide nursing home status and request support and recommendations for decontamination.	
Safety Officer	Activate security policy and procedure to: <ul style="list-style-type: none"> <input type="checkbox"/> Secure the nursing home and campus <input type="checkbox"/> Establish access and egress routes <input type="checkbox"/> Implement crowd and traffic control protocols 	
	Monitor safe decontamination if incident involves chemical exposure.	
	Establish and secure areas for collection of contaminated belongings and valuables.	
	Monitor safe and consistent use of appropriate personal protective equipment by staff.	
	Conduct ongoing analysis of existing response practices for health and safety issues related to residents, staff, and nursing home and implement corrective actions to address; complete NHICS 215A.	
Medical Director/Specialist	Assist in obtaining specific information regarding chemical agent such as antidotes, treatment, decontamination procedures, etc, if applicable	
	Provide expert input in the Incident Action Planning process.	
	Assist the Incident Commander in determining the threat to the nursing home and the need for shelter-in-place or evacuation.	
Operations Section Chief	Implement the shelter-in-place or evacuation procedures, as directed by the Incident Commander.	
	Ensure continuation of resident care and essential services.	

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Immediate Response (0 – 2 hours)		
IMT Position	Action	Initials
Operations Section Chief	For large chemical incidents: <input type="checkbox"/> Establish triage and decontamination areas with a clear perimeter and direction on ingress and egress <input type="checkbox"/> Provide rapid triage and disposition of potentially contaminated residents, non-contaminated residents, media, family/guardians, etc. <input type="checkbox"/> Implement staff monitoring and rotation through the decontamination area <input type="checkbox"/> Consult with Medical Director/Specialist and internal and external consultants to ascertain treatment protocols <input type="checkbox"/> Relocate medications and antidotes to clinical care and decontamination areas <input type="checkbox"/> Consider the need for evidence collection	
	Implement business continuity planning and protection of resident records.	
	Prepare to transfer or stabilize injured residents as appropriate and as resources are available.	
	Conduct a census of residents, identifying those who are appropriate for discharge.	
	Prepare to implement emergency plans and procedures as needed (e.g., loss of power, cooling, water, HVAC, communications).	
	Coordinate with the Safety Officer to secure the nursing home and implement limited visitation policy.	
	Implement tasks listed below if Branches are not activated.	
Resident Services Branch Director	Conduct a resident census and prioritize for safe discharge or transfer, if applicable.	
	Identify evacuation priorities and transfer requirements.	
	Determine capacity required to handle shelter-in-place conditions.	
	Provide safe medical care to residents remaining in the nursing home.	
Infrastructure Branch Director	As directed, implement the nursing home's Shelter-In-Place Plan, including shutdown of heating, ventilation, and air conditioning system or sealing of the nursing home.	
	Conduct a damage, structural integrity, and utilities assessment of the nursing home.	
	Monitor nursing home air quality for safe occupation.	
	As requested, support the setup of decontamination areas and movement of supplies.	

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Immediate Response (0 – 2 hours)		
IMT Position	Action	Initials
Planning Section Chief	Establish operational periods, incident objectives, and the NHICS 200: Incident Action Plan (IAP) Quick Start in collaboration with Command and General staff.	
	Prepare for potential evacuation by researching available evacuation sites.	
	Initiate personnel and materiel tracking.	
	Gather <u>internal</u> situation status including supply and equipment status, current staff and nursing home census.	
	Initiate the gathering and validation of <u>external</u> situational status (weather, impact to roads, utilities, scope of damage, evacuation routes) and infrastructure status for inclusion in the IAP.	
	Maintain and update the situational status boards and other documentation tools for timeliness and accuracy of information received.	
	Initiate resident and bed tracking in collaboration with Operations Section (NHICS 254 – Emergency Admit Tracking).	
Logistics Section Chief	Support the logistics needs of nursing home staff and operations.	
	Initiate staff call-in systems, if instructed to do so and if it is safe for arriving staff. Activate the labor pool to obtain personnel resources as needed.	
	Inventory equipment, supplies, and medications on hand and prepare to ration materiel as needed.	
	Obtain supplies, equipment, medications, food, and water to sustain operations.	
	Anticipate increased need for medical supplies, medications, and equipment and take actions to obtain when possible.	
All Activated Positions – Refer to Job Action Sheets		

Intermediate Response (2 - 12 hours)		
IMT Position	Action	Initials
Incident Commander	Review the overall impact of the ongoing incident on the nursing home with Command Staff and Section Chiefs.	
	Reevaluate need to shelter-in-place versus evacuate.	
	Monitor that communications and decision making are coordinated with external agencies and area health care facilities, as appropriate.	

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Intermediate Response (2 - 12 hours)		
IMT Position	Action	Initials
Incident Commander	Direct implementation of any and all additional response plans required to address the incident.	
Liaison/PIO	Conduct briefings to residents, staff, people seeking shelter, and media to update them on incident and nursing home status.	
	Coordinate risk communication messages with the Joint Information Center (if activated).	
	Assist with notification of residents' families about the incident and inform them about the likelihood of evacuation, if required.	
	Maintain contact with local emergency operations center, area health care facilities, and regional medical health coordinator to relay status and critical needs and to receive community updates.	
Safety Officer	Continue to implement and maintain safety and personal protective measures to protect residents, staff, visitors, and nursing home, including restrictions in entry, egress, traffic, and crowd control.	
	Ensure staff food, water and rest periods.	
	Monitor, report, follow up on, and document resident or staff injuries.	
	Monitor that victim decontamination is in compliance with established decontamination practices.	
	Implement procedures for resident valuables management and evidence collection in cooperation with law enforcement.	
	Continue to monitor proper use of personal protective equipment and decontamination procedures.	
	Initiate employee monitoring for chemical exposure and provide appropriate follow up care.	
	Update NHICS 215A as required.	
Medical Director/Specialist	Support the Operations Section as needed, by coordinating information regarding specific decontamination and treatment procedures; provide direct oversight of decontamination operations as directed.	
	Continue to provide expert input into the Incident Action Planning process.	
Operations Section Chief	Monitor continuation of medical mission activities.	
	Implement tasks listed below if Branches are not activated.	
Resident Services Branch Director	Continue resident, staff, and nursing home monitoring for chemical exposure, and provide appropriate follow up as required.	

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Intermediate Response (2 - 12 hours)		
IMT Position	Action	Initials
Resident Services Branch Director	Continue to assess residents for change in condition.	
	Evaluate and update staff scheduling to accommodate decontamination team support and scheduling.	
	If needed, activate Fatality Management Plan and management of contaminated remains.	
Infrastructure Branch Director	Continue to monitor nursing home air quality.	
	Monitor impact of alterations in heating, ventilation, and air conditioning system for ability to maintain operations and comfortable environment.	
	Ensure nursing home cleanliness (as best as possible). Initiate special cleaning as necessary.	
	Continue to monitor the status of the physical plant and ensure the integrity of and/or restoration of utilities and communications.	
Planning Section Chief	Revise and update Incident Action Plan, including planning for supply, staffing, and other needs.	
	Continue to research potential evacuation sites, if needed.	
	Continue resident, bed, material, and personnel tracking.	
Logistics Section Chief	Contact vendors to ensure provision of needed supplies, equipment, medications, and water and food to residents, visitors, and families.	
	Continue staff call-in, if safe to do so, and provide additional staff to impacted areas.	
Finance/ Administration Section Chief	Coordinate with Risk Management for additional insurance and documentation needs.	
	Initiate screening and tracking of incoming volunteers and/or new personnel.	
	Track the hours associated with the emergency response.	
	Facilitate the procurement of needed supplies, equipment, and contractors.	
	Track response expenses and expenditures.	
All Activated Positions – Refer to Job Action Sheets		

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Extended Response (greater than 12 hours)		
IMT Position	Action	Initials
Incident Commander	Reassess the incident objectives and Incident Action Plan; revise them as indicated by the response priorities and overall mission.	
	Continue regular briefing of Command Staff and Section Chiefs.	
	Reevaluate the nursing home's ability to continue its medical mission.	
	Update the nursing home Chief Executive Officer, Board of Directors, state survey agency, and other appropriate internal and external officials of situation status.	
	Plan for a return to normal services in coordination with Command Staff and Section Chiefs.	
Liaison/PIO	Continue regularly scheduled briefings to media, residents, staff, families, and people seeking shelter.	
	Communicate regularly with the Joint Information Center (if activated) to update nursing home status and coordinate public information messages.	
	Address social media issues as warranted; use social media for messaging as situation dictates.	
	Maintain contact with local emergency operations center, other area health care facilities, and regional medical health coordinator to relay status and critical needs and to receive incident and community updates.	
Safety Officer	Continue to oversee safety measures and use of personal protective equipment for staff during demobilization of decontamination response.	
	Continue to ensure nursing home security, traffic, and crowd control.	
	Monitor the enforcement of nursing home policies and cooperation with local, state, and federal law enforcement agencies when interviewing residents and collecting evidence.	
Medical Director/Specialist	Continue to support the Operations Section as needed by coordinating information regarding specific decontamination and treatment procedures.	
	Continue to provide expert input into the Incident Action Planning process.	
Medical Director/Specialist: Chemical Specialist	Monitor the movement of the chemical plume (if applicable), consult with local health department and emergency management and advise the Incident Commander if the external area is safe for discontinuation of shelter-in-place.	

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Extended Response (greater than 12 hours)		
IMT Position	Action	Initials
Operations Section Chief	Monitor the continuation of medical mission activities, including resident care and hazardous materials (HazMat) activities.	
	Implement tasks listed below if Branches are not activated.	
Resident Services Branch Director	Continue resident monitoring for exposure and provide appropriate follow up care as required.	
Infrastructure Branch Director	Continue to monitor nursing home air quality.	
	Provide behavioral health support for residents, families, and staff as needed.	
	With a Chemical Specialist and when shelter-in-place is suspended, conduct an external inspection of the facility for damage and determine need for outside decontamination.	
	Continue infrastructure monitoring, maintenance, and air quality monitoring in collaboration with the Safety Officer.	
Planning Section Chief	Update and revise the Incident Action Plan in collaboration with Command Staff and Section Chiefs.	
	Finalize and distribute steps for demobilization in the Incident Action Plan.	
	Continue staff, equipment, and materials tracking.	
	Continue to update status boards and other communication devices with latest nursing home and community status.	
Logistics Section Chief	Monitor and address the health status of staff that participated in, supported, or assisted in decontamination activities.	
	Restock and repair all supplies and equipment used in the response.	
	Refer to Job Action Sheet for additional tasks.	
Finance/ Administration Section Chief	With the Logistics Section Chief, facilitate the procurement of supplies, equipment, medications, and contracting for nursing home clean up or repair.	
	Assess and implement risk management and claims procedures for reported staff and resident exposures or injuries.	
	Continue to track response costs and expenditures and prepare regular reports for the Incident Commander.	
All Activated Positions – Refer to Job Action Sheets		

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Demobilization/System Recovery		
IMT Position	Action	Initials
Incident Commander	Determine the termination of event or “all clear” in collaboration with Command Staff, Section Chiefs, local law enforcement, and Hazmat officials.	
	Oversee and direct demobilization and system recovery operations with restoration of normal services.	
	Ensure that the process is mobilized to complete response documentation for submission for reimbursement.	
Liaison/PIO	Conduct final media briefing and assist with updating staff, residents, people seeking shelter, families/guardians, and others of termination of the incident.	
	Communicate the final nursing home status and termination of the incident to regional medical health coordinator, local emergency operations center, area health care facilities, and local emergency medical services.	
Safety Officer	Monitor the proper disposal of contaminated waste and wastewater.	
	Assist with monitoring the completion of nursing home repairs and decontamination, in conjunction with the Operations Section.	
	Monitor and maintain a safe environment during the return to normal operations.	
	Return entry and egress restrictions, traffic flow, and security personnel to normal services.	
	Report staff injury and illness for follow up by Finance/Administration Section Chief.	
Operations Section Chief	Ensure continuation of resident care and essential services.	
	With Infrastructure Branch, monitor and manage the decontamination of the nursing home.	
	Ensure that all personnel, supplies, and equipment utilized in the response have been properly decontaminated and stored.	
	Initiate long term monitoring of employees exposed to chemicals and participating in decontamination or resident care activities, including provision of behavioral health support, as required.	
	Implement tasks listed below if Branches are not activated.	
Resident Services Branch Director	Coordinate resident care services returning to normal operations.	
	Repatriate transferred residents, if applicable.	
Infrastructure	Restore heating, ventilation, and air conditioning systems to normal service.	

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Demobilization/System Recovery		
IMT Position	Action	Initials
Branch Director	With the Safety Officer, continue to monitor the disposal of contaminated waste and wastewater.	
	Conduct or facilitate nursing home repairs and return to normal operating conditions.	
	Complete a damage report, including the progress of repairs, and estimated timelines for restoration to normal operating conditions.	
Planning Section Chief	Conduct debriefings and a hotwash with: <ul style="list-style-type: none"> <input type="checkbox"/> Command Staff and section personnel <input type="checkbox"/> Administrative personnel <input type="checkbox"/> All staff <input type="checkbox"/> All volunteers 	
	Write an After Action Report and Corrective Action and Improvement Plan for submission to the Incident Commander, including: <ul style="list-style-type: none"> <input type="checkbox"/> Summary of the incident <input type="checkbox"/> Summary of actions taken <input type="checkbox"/> Actions that went well <input type="checkbox"/> Actions that could be improved <input type="checkbox"/> Recommendations for future response actions 	
	Ensure all electronic and paper documents created in event response are collected and archived.	
Logistics Section Chief	Inventory the Command Center and facility supplies and replenish as necessary, appropriate, and available. Restock supplies, equipment, medications, food, and water to pre event inventories.	
	Deactivate nontraditional areas used for sheltering and feeding and return to normal use.	
	Release temporary staff and other personnel to normal positions.	
	Submit all section documentation to Planning Section for compilation in After Action Report.	
Finance/ Administration Section Chief	Document all costs, including claims and insurance reports, lost revenue, and expanded services, and provide report to Command Staff.	
	Work with local, state, and federal emergency management to begin reimbursement procedures for cost expenditures related to the event.	

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Demobilization/System Recovery		
IMT Position	Action	Initials
Finance/ Administration Section Chief	Contact the insurance carriers to assist in documentation of structural and infrastructure damage and initiate reimbursement and claims procedures.	
All Activated Positions – Refer to Job Action Sheets		

Documents and Tools
<p>Nursing Home Emergency Operations Plan, including:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Evacuation procedures <input type="checkbox"/> Decontamination procedures <input type="checkbox"/> Business Continuity Plan <input type="checkbox"/> Fatality management procedures <input type="checkbox"/> Isolation protocols <input type="checkbox"/> Employee health monitoring and treatment procedures <input type="checkbox"/> Resident, staff, and equipment tracking procedures <input type="checkbox"/> Communication plan <input type="checkbox"/> Behavioral health support procedures <input type="checkbox"/> Emergency procurement policy
<p>Forms, including:</p> <ul style="list-style-type: none"> <input type="checkbox"/> NHICS 200 – Incident Action Plan (IAP) Quick Start <input type="checkbox"/> NHICS 205 – Communications List <input type="checkbox"/> NHICS 214 – Activity Log <input type="checkbox"/> NHICS 215A – Incident Action Plan (IAP) Safety Analysis
Job Action Sheets
Paper forms for down-time documentation, data entry, etc.
Access to nursing home organization chart
Campus floor plans, maps, and evacuation routes
Television/radio/internet to monitor news
Telephone/cell phone/satellite phone/internet/amateur radio/2-way radio for communication