



LIFE SKILLS EMERGENCY PROCEDURES GUIDE

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FACILITY INFORMATION

NAME OF ERC FACILITY	ADDRESS	CITY & ZIP CODE	MAIN FACILITY PHONE	FACILITY FAX
ADMINISTRATIVE OFFICES	3917 S. Old Missouri Rd	Springdale, 72764	479-872-1800	479-872-4654
BURDICK HOUSE	1268 A Jaro Lane	Springdale, 72764		
CHILD DEVELOPMENT CENTERS				
Farmington CDC	56 W. Main St.	Farmington, 72730	479-267-5760	479-267-5769
Fayetteville CDC	1760 N. Woodland	Fayetteville, 72703	479-443-4420	479-443-0547
Huntsville CDC	913 N. College	Huntsville, 72740	479-738-1751	479-738-1752
Siloam Springs CDC	1300 N. Patriot	Siloam Springs, 72761	479-373-6488	479-373-6584
Springdale CDC	2871 American St	Springdale, 72764	479-927-1350	479-927-2452
ICF HOMES				
Jones Home	2005 Kim Ave.	Springdale, 72764	479-872-4664	479-872-4667
Norman Home	2000 Kim Ave.	Springdale, 72764	479-872-4670	
Richardson Home	2006 Kim Ave.	Springdale, 72764	479-872-4659	479-872-2342
LIFE SKILLS	1763 Ford Ave.	Springdale, 72764	479-872-4663	479-872-4651
RICHARDSON INDUSTRIES	3917 S. Old Missouri Rd	Springdale, 72764	479-872-1800	479-872-4654
WAIVER OFFICE	1792 E. Joyce Blvd., Suite 2	Fayetteville, 72703	479-287-4535	479-287-4549

ERC EMERGENCY CONTACTS

NOTE: During any type of emergency situation, a chain of command should be established to facilitate the coordination of communication and procedures during the emergency. Decisions that affect the ERC facility involved will be made by the Emergency Coordinator of that facility and the Program Director in coordination with the Executive Director, or designee.

		Cell Phone	Work Phone
Executive Director	Cindy Acree	479-966-2385	479-872-1800x206
Director of Administration	Lynne Keller	479-361-0702	479-872-1800x218
Adult Services Director RI Program Manager LS Manager Residential Director CE/W Director	Zarah Reed John Salina Karen Cherico Kristin Crist Daniel Hewitt	479-422-1663 479-422-3311 479-966-2632 515-991-0158 479-231-7082	479-872-1800 479-872-4663x10 479-872-5370 479-287-4535
Children Services Director Asst Director/Huntsville Coordinator Farmington Coordinator Fayetteville Coordinator Siloam Springs Coordinator Springdale Coordinator	Patricia Fleshman Natasha Dennis Shana Sayle Adam Humphrey Jamie Short Race Cunningham	479-231-7083 479-981-1377 479-595-9121 479-595-9121 479-427-1038 479-466-4190	479-738-1751 479-267-5760 479-443-4420 479-373-6488 479-927-1350
Transportation Coordinator	Angela Hicks	479-320-6636	
Maintenance Coordinator	Arnold Key	479-799-9407	
IT/Systems Administrator	Josh Jordan	479-231-6414	479-872-1800x211

COMMUNITY EMERGENCY CONTACTS

<p>FOR ALL FACILITIES</p> <p>Emergency police/fire/ambulance 911</p> <p>Poison Control Hotline 1-800-376-4766</p> <p>Adult Abuse Hotline 1-800-482-8049</p> <p>MEDICAL FACILITIES</p> <p>Fayetteville & Farmington Washington Regional Hospital 479-713-1000</p> <p>Huntsville Boston Mtn Rural Health 479-738-5500</p> <p>Siloam Springs SS Memorial Hospital 479-524-3141</p> <p>Springdale Northwest Reg Medical Center 479-751-5711</p> <p>HEALTH DEPARTMENTS</p> <p>Fayetteville, Farmington & Springdale Washington County HD 479-521-8181</p> <p>Siloam Springs Benton County HD 479-986-1300</p> <p>Huntsville Madison County HD 479-738-2612</p>	<p>NWA RED CROSS 479-306-4688</p> <p>Office of Long Term Care 501-682-8485</p> <p>Utilities – Electric (Farmington) SWEPCO 479-751-3841 (Fayetteville) AR Electric Co-op 479-521-1938 (Siloam Springs) SWEPCO 479-524-2300 (Springdale) Ozark Electric 479-751-2342</p> <p>Utilities – Water (Farmington) City of Fayetteville 479-521-1258 (Fayetteville) City of... 479-521-1258 (Huntsville) City of... 479-738-6133 (Siloam Springs) City of... 479-524-3513 (Springdale) City of... 479-751-5751</p> <p>Utilities – Gas (Farmington) SourceGas 479-521-5330 (Fayetteville) SourceGas 479-582-8800 (Huntsville) Empire Gas 479-738-5168 (Siloam Springs) SourceGas 479-373-1099 (Springdale) BlackHills Energy 888-890-5554</p> <p>Washington County Office of Emergency Management (479) 444-1722</p>
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COMMUNITY NON-EMERGENCY CONTACTS

DUNK	479-750-1833
NON-EMERGENCY POLICE	
Farmington	479-267-3411
Fayetteville	479-587-3555
Huntsville	479-738-6556
Siloam Springs	479-524-4118
Springdale	479-750-8543
NON-EMERGENCY FIRE	
Farmington	479-267-3338
Fayetteville	479-443-7802
Huntsville	479-738-2321
Siloam Springs	479-524-3103
Springdale	479-751-4510

QUICK REFERENCE

Evacuation

- Smoke in the building
- Fire (or explosion) in or near building
- Gas Leak
- Bomb Threat

Evacuation and Relocation

- Hazardous Spill may require relocation
- Fire in or near building may require relocation
- Other event causing significant damage to building

Shelter in Place

- Tornado
- Earthquake
- Hazardous Chemical Spill may require Shelter in Place until advised to relocate
- Threat of Violence

The emergency kit is located in the medication rooms.

Always take the emergency kit, Nurse Phone, and any medications with you. Include emergency contact information for persons served and emergency services.

Persons with special medical needs will be attended by the nursing staff or other qualified personnel, ensuring any medications that are on-site for a person served will be taken with the person served in the event of the emergency relocation.

EVACUATION

PROCEDURE:

1. For fire: Pull fire alarm.
2. For other reasons: Verbal order to evacuate by Emergency Coordinator.
3. Evacuate to the designated area (see evacuation map), at least fifty feet from the building.
4. Account for all persons served and staff at the start of the evacuation and at the completion of the evacuation.

PERSONNEL ROLES IN EVACUATIONS

Emergency Coordinator

Is generally the facility coordinator/supervisor/designee. He/she is in charge during any emergency. He/she will evacuate with the Emergency Notebook and Cell Phone.

Service Coordinator/designee

Evacuate with first aid kit/evacuation pack. If safe to do so, evacuate with medications that will be needed. Transport them in a secure container. Attend to medically fragile persons served and any others injured during evacuation. Call 911 and notify the Program Coordinator.

DSPs

Take roll to ensure all persons served have been evacuated. Check all rooms, bathrooms, closets, etc. to ensure everyone is evacuating. Close windows and doors.

Administrative Staff

Assist where needed.

EVACUATION and RELOCATION

- Fire in or near the facility
- Hazardous Spill may require relocation
- Threat of violence
- Extensive damage to the facility

PROCEDURES

1. Follow evacuation procedures
2. The emergency coordinator will ensure notification poster is attached to the facility entrance providing the relocation site and contact information.
3. The emergency coordinator will designate staff to contact parents to pick up their child.
4. The emergency coordinator will contact the transportation company to request pickup and assistance contacting families of bus riders.

EMERGENCY RELOCATION SITES FOR ALL ERC FACILITIES

CHILD DEVELOPMENT CENTERS

- | | |
|---|--------------|
| • Farmington CDC: Church of Christ, 41 W. Main, Farmington | 479-267-3182 |
| • Fayetteville CDC: Woodland Jr. High, 1 E. Poplar St., Fayetteville | 479-444-3067 |
| • Huntsville CDC: Madison City Sr. Center, 903 N. College, Huntsville | 479-738-2750 |
| • Siloam Springs CDC: SS Fire Station, 1450 Cheri Whitlock, SS | 479-524-3103 |
| • Springdale CDC: First United Methodist Church, 206 W. Johnson, Springdale | 479-750-5229 |

RI & ADMN OFFICES Life Skills Building, 1763 Ford Ave., Springdale	479-872-4663
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LIFE SKILLS Richardson Industries – as determined by Evacuation Coordinator	479-872-1800
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ICF HOMES Life Skills Building, 1763 Ford Ave., Springdale	479-872-4663
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WAIVER OFFICES Richardson Industries, 3917 S. Old Missouri Rd., Springdale	479-872-1800
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SHELTER IN PLACE

- Tornado
- Earthquake
- Hazardous Chemical Spill – may require Shelter in Place until advised to relocate
- Threat of Violence

PROCEDURES

1. All staff and persons served will remain in the building until directed otherwise by the Emergency Coordinator.
2. Any persons served or staff outside the facility will be brought inside and accounted for.

LOCKDOWN – Emergency Procedures

GOAL – To maintain a secure facility when there is an outside threat. Persons Served will NOT be alerted unless necessary.

PROCEDURES:

1. Program Coordinator/Designee will determine if an outside threat warrants a lockdown and then will:
 - a. Notify staff throughout the building.
 - b. Call 911 and the Program Coordinator or designee.
2. Persons served and staff who are outside the building should be directed to go inside the nearest building and remain there until the “all clear” has been given by the supervisor.

FIRE

PROCEDURE:

1. Pull fire alarm and notify site coordinator.
2. Evacuate.
3. If an exit is blocked, find the next closest exit. Maps should be located by all exits.

Small fires

- Use fire extinguishers for small limited fires.
- Their locations are noted on the facility map.

Remember the acronym **P.A.S.S.** when using a fire extinguisher:

P - Pull the pin.

A - Aim at the base of the fire.

S - Squeeze the handle trigger.

S - Sweep from side to side, stand approximately six (6) feet back from the fire when using an extinguisher.

TORNADO/SEVERE WEATHER

TERMINOLOGY

A “WATCH” – means conditions are favorable for tornado or severe weather.

A “WARNING” – means a tornado has been spotted or is imminent. Take shelter immediately.

Monitor weather reports continuously.

SIGNALS

Tornado watches and warnings will be monitored by a radio in the administrative area of the facility.

When you hear tornado sirens or as determined by the supervisor on duty take shelter immediately in the area of your building that has been designated as a “tornado safe area”. These are indicated on the emergency maps posted throughout all ERC facilities.

PROCEDURES

1. All clients and staff gather in the living room
2. All doors and windows should be closed.
3. Avoid the west side of the building if at all possible.
4. Stay away from glass windows, if possible
5. A battery-operated weather radio should be within hearing distance to monitor weather reports.

MEDICAL EMERGENCIES

DEFINITION – An unexpected serious occurrence demanding immediate action to aid the injured/ill person(s).

PROCEDURES:

1. The situation should be assessed for personal risk factors prior to assistance or intervention.
2. Call 911 or send someone else to call 911 for assistance.
3. Use Universal Precautions. Gloves should be worn before touching blood and body fluids, mucous membranes, or non-intact skin of all patients (clients), for handling items or surfaces soiled with blood or body fluids. Gloves should be changed after contact with each patient/client. Personal Protective Equipment (PPE) can be located in the Service Coordinator’s Office.
4. Do not move or allow the injured person(s) to be moved.

Medical Emergency	Warning Signs	What to Do
Allergic Reaction	Trouble breathing Swelling of the tongue or face Signs of shock	Call 911 and get a first aid kit and AED If the person has an epinephrine pen, hold the pen in your hand and remove the cap. Press the injector hard against the person’s thigh, about halfway between the hip and the knee. Hold the pen in place for about 10 seconds. Remove the pen by pulling it straight out, and without touching the end with the needle. Rub, or have the person rub, the injection site for 10 seconds. Get the person to a medical professional immediately.
Amputated Body Part		Take care of any bleeding from the injured person first. Rinse the amputated part with clean water, then cover or wrap with a clean dressing. Place in watertight plastic bag.

		<p>Place bag in another container with ice or ice and water. Label with name, date, and time. Make sure the amputated part and the injured person arrive at the hospital at the same time.</p>
Asthma Attack	<p>Breathing very fast or very slowly. Trouble with every breath. Noisy breathing. Trouble speaking.</p>	<p>Assist the person with the use of their inhaler, if they have one. If they don't have one, call 911. Shake the medicine, and put the medicine canister into the mouthpiece. Attach spacer if there is one. Have the person breathe out slowly, and place the inhaler over or inside the mouth. Have the person push down on the canister (or do it for them if they are unable) as they breathe in deeply. Have them hold their breath for a few seconds, and then breathe out slowly.</p>
Back or Neck Injuries	<p>Suspect a head, neck, or back injury if the person fell from a height, took a blow to the head, was injured while driving or was in a car crash, or was involved in a bicycle or motorbike crash without a helmet or the helmet broke in the crash. Tingling or weakness in extremities. Pain or tenderness in neck or back. Appears intoxicated or not fully alert.</p>	<p>Do not turn head or neck unless it's absolutely necessary to provide CPR, to move the person out of danger, or the person is having trouble breathing, is vomiting, or has fluids in the mouth. Call 911 and get a first aid kit and AED. Have the person remain as still as possible, and wait for someone with more advanced training to arrive.</p>

	Has other painful injuries, especially in the head or neck.	
Bites or Stings		<p>Get a first aid kit and wear PPE. Call 911 if needed. Clean the bite or sting area with soap and water, and use dressings and pressure to stop any bleeding. Call a healthcare provider for any bites that break the skin. Apply a bag of ice and water wrapped in a towel for 20 minutes for bruising and swelling.</p>
Bleeding		<ol style="list-style-type: none"> 1. Apply pressure over wound with sterile bandage or clean cloth 2. Elevate bleeding part, if possible, until help arrives 3. For nose bleeds, lean head down and apply pressure to the nose until bleeding stops. Call 911 if gushing blood, or if bleeding does not stop after 15 minutes.
Burns - Severe		<p>Run cold, but not ice cold, water over the burn area for 10 minutes. Never use ice. Apply a dry dressing to the burn area, and get the person to a medical professional.</p>
Choking	<p>Mild choking – the person will be able to cough, breathe, and speak. Sever choking – the person will not be able to cough, breathe, or speak, and they may grab their throat signifying that they are choking.</p>	<p>For mild choking, stand-by and allow the person to cough. Do not pat their back. For severe choking, stand or kneel behind the person and wrap your arms around the person’s waist so that your fists are in front. Make a fist with one hand and place the thumb side of your fist slightly above the belly button. Grasp your fist with your other hand, and give quick upward thrusts into the abdomen until the object blocking the airway comes out.</p>

		If the object doesn't come out and the person becomes unresponsive, call 911 and get an AED, lower them to the ground and provide CPR, checking the mouth after every 30 compressions for the object. Remove it if possible.
Electrical Shock	There may be marks or burns where the electricity entered and exited the body. May stop breathing, or cardiac arrest.	Call 911 and get a first aid kit and AED. Wear PPE. Provide CPR if needed, and the scene is safe to do so. Do not attempt to move wires or enter an area with down lines. Contact authorities. Get the person to a medical professional.
Eye Injuries - Chemical		Call 911 and get a first aid kit. Rinse eyes with water for 15 minutes. If there is only one affected eye, be sure that that eye is positioned below the uninjured eye so chemicals are washed into the good eye.
Eye Injuries – Cut/Scratch		Call 911 and get a first aid kit. Tell the person to keep both eyes closed until someone with more advanced training takes over.
Eye Injuries – Foreign Object		Call 911 and get a first aid kit. Tell the person to keep both eyes closed until someone with more advanced training takes over.
Seizure		<ol style="list-style-type: none"> 1. Stay calm 2. Do Not restrain movement 3. Do Not try to place anything in the person's mouth 4. Remove eyeglasses and loosen tight clothing 5. Clear area of objects that could injure the person 6. Provide reassurance to the person 7. Stay with the person until he/she is fully aware 8. Follow Seizure Procedure

Missing Person – Emergency Procedures

In the event a staff person identifies a client is missing, that staff person will immediately notify the supervisor on duty.

The supervisor will immediately verify the client is not in any of the office buildings, other day program locations, or nearby outside area.

If the client is found within the facility area, but unsupervised, the supervisor will:

- Notify the Program Coordinator or designee
- The Program Coordinator or designee will begin an investigation, and complete necessary licensure paperwork

If the client is not found in the facility area(s), the supervisor on duty will:

- Notify the Program Coordinator or designee
- Call the Police Department by dialing 911.
- Call the client's guardian/parent/advocate
- Cooperate with law enforcement in the search for the missing client.
- The Program Coordinator or designee will begin an investigation, and complete necessary licensure paperwork.

POWER OUTAGE

PROCEDURES

1. Staff will notify supervisor on duty of power outage
2. Supervisor will notify the following:
 - a. Program Coordinator or designee
 - b. Maintenance Coordinator
 - c. The appropriate power company to determine/discover if the power outage is confined to the facility or is more widespread
 - i. Unless the power failure is accompanied by any emergency situation requiring evaluation (e.g. fire, flood, etc.) clients will be kept inside
 - ii. If condition requires evacuation, staff will follow emergency evacuation procedures
 - d. Flashlights will be gathered and 15-minute checks will be completed until power restored
 - e. Refrigeration temperatures will need to be checked and appropriate relocation of items will be made, if needed.
 - f. Licensure notifications will be made in accordance with regulations.

VIOLENT or THREATENING SITUATION

PROCEDURES:

1. Determine a threatening situation and notify supervisor on duty
2. Supervisor will assess the situation and call 911, if warranted
3. Exterior doors will be locked, provided the threat is not inside the building
 - a. Clients and staff will remain in the safe area area, as designated on the safety map
 - b. Client and staff will relocate to emergency relocation site, if needed, until further directions
4. DO NOT try to confront the violent person.
5. Follow the instructions of emergency personnel.
6. Remain in safe area until all clear is given.

KNOWN OR SUSPECTED WEAPONS:

1. Do not attempt to take weapon.
2. Remain calm and one staff is to maintain eyes on.

EARTHQUAKE

PROCEDURES

1. Stay indoors
 2. Drop, Cover, and Hold – Take cover under a sturdy table or against an inside wall and hold on. Cover face and head with arms.
 3. Stay away from glass, windows, outside doors and walls, and anything that could fall, such as lighting fixtures and furniture.
 4. Once shaking stops, follow evacuation procedures.
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1. If outdoors, persons served and staff are to move away from the building and into an open area, away from utility poles or overhead wires.
 2. Do not come into contact with downed utility poles or wires.
 3. Do not re-enter the building.

BOMB THREAT

PROCEDURES

1. Follow Immediate Evacuation Procedures
2. Collect and document the following information:

QUESTIONS TO ASK IF A BOMB THREAT IS CALLED IN BY PHONE:

1. When is the bomb going to explode?
2. Where is the bomb right now?
3. What does the bomb look like?
4. What kind of bomb is it?
5. What will cause the bomb to explode?
6. Did you place the bomb? IF YES...why?
7. If NO – do you know who did?
8. What is your address?
9. What is your name?

WRITE DOWN THE EXACT WORDING OF THE BOMB THREAT...

Length of call: _____

Date of call: _____ Time of call: _____

Call made to this number: _____

IMPORTANT INFORMATION TO COLLECT

Sex of caller: Male Female
Age: Child Teenager Adult Elderly
Race: Caucasian Black Hispanic Oriental

Was the caller's voice...

Calm Angry Loud Soft
Excited Slow Rapid Deep
High Nasal Slurred Disguised
Normal Very distinct Did it sound familiar?

If so – who did it sound like? _____

Was the caller...

Stuttering Coughing Clearing their throat
Crying Laughing Deep breathing

BOMB THREAT LANGUAGE:

Well-spoken Foul Incoherent Taped
Was the message read from a script? Yes No

BACKGROUND NOISES/SOUNDS No noise at all

Street noises Factory machinery Music

Voices Pots/pans/cooking noises Static

Office machines Animal noises Children

COMMENTS: _____

INTRUDER ON CAMPUS / IOC

GOAL – To maintain calm and order and not disrupt the daily program any more than necessary. Clients will NOT be alerted unless necessary.

PROCEDURES

1. Staff should stop any stranger in the building who they are not familiar with and inquire as to his/her business in the facility.
2. If it is determined that this person poses a threat to staff and/or clients, 911 should be called immediately and supervisor on duty notified
3. If danger exists, clients should be evacuated to a safe area away from the intruder.
4. If evacuation is not an option, clients and staff should “shelter in place” and put heavy furniture to block the door or shove a door stop under the door to prevent entry.

HAZARDOUS CHEMICAL SPILL

PROCEDURES

1. Remain inside the building unless directed to evacuate by emergency services personnel.
2. Windows and doors will be closed.
3. All fans, air conditioners and ventilators will be turned off at the breaker box by the Emergency Coordinator.
4. All persons served and staff will gather in the living room.
5. Use plastic sheeting, shower curtains, or towels to seal off window and door gaps.

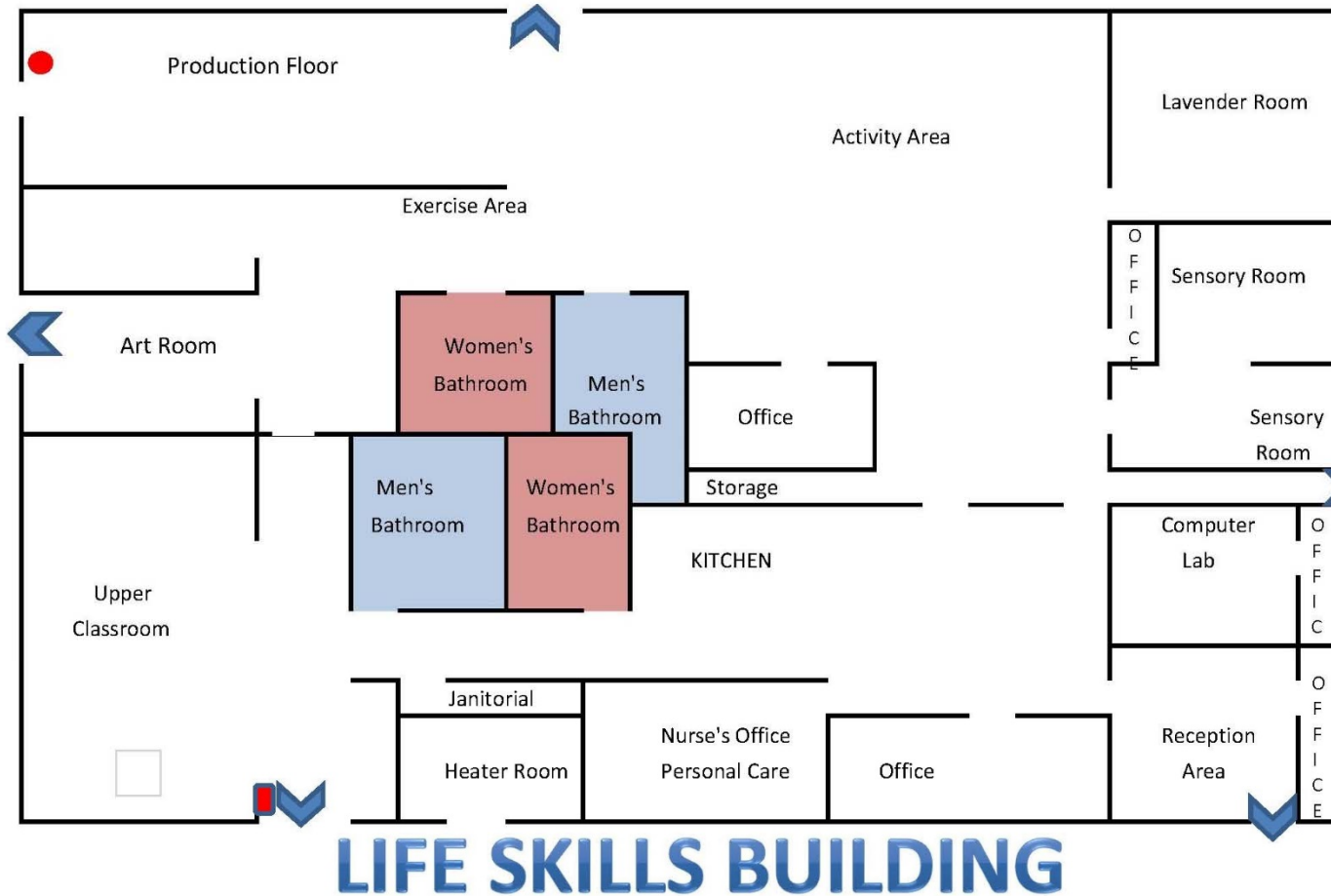
PREPAREDNESS

- All staff members are certified in CPR and First Aid
- Evacuation diagrams are posted in all areas of the facility
- Facility Safety Inspections are conducted monthly (and includes inspection of fire extinguishers)
- Facility Inspections are conducted annually by external sources (i.e., DUNK, Fire Marshal, Health Department)
- Emergency Drills are routinely conducted
- Safety Reports are submitted quarterly to the Health and Safety Committee for review
- Entry into the facility requires a code, therefore reducing the likelihood of unauthorized “visitors”
- Emergency Books are maintained at each facility , containing contact information for each child and staff member
- Each facility maintains an Evacuation Pack which contains: weather radio, first aid kit, flashlight, batteries, tissues, hand sanitizer, whistle, disposable cups, wet wipes, pen/paper, and an emergency survival blanket.

CONTINUATION OF ESSENTIAL SERVICES

In the event of an emergency in which regular services have been interrupted, certain basic services will continue. The Life Skills building has a generator to provide electric and water services to persons served. This building also has a shower and kitchen for use by persons served and staff. In the event that food and/or shelter is not available via the methods described above, the Program Coordinator or designee will contact the local Red Cross for assistance.

EVACUATION MAP



ADDRESS: 1763 Ford Ave. Springdale, AR

SQ FT: 9000 sf on 2 acres

ERC USE: Day Programming for Adults - capacity for 50 adults ages 18+.

ERC OWNS THIS PROPERTY

ERC LIFE SKILLS PROGRAM HAS RELOCATED TO:

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