




Severe Winter Weather/Power Outage

Situation Manual

10/28/2025

This Situation Manual (SitMan) provides exercise participants with all the necessary tools for their roles in the exercise. Some exercise material is intended for the exclusive use of exercise planners, facilitators, and evaluators, but players may view other materials that are necessary to their performance. All exercise participants may view the SitMan.

EXERCISE OVERVIEW

Exercise Name	Winter Weather Storm/Power Outage
Exercise Dates	10/28/2025
Scope	This exercise is a Tabletop, planned for 9am to 12 noon at Knife River Care Center. Exercise play is limited to KRCC Management, Staff, Local and State Representatives.
Focus Area(s)	Planning and response to severe winter weather and power outage.
Capabilities	Policies, procedures, plans and guidelines.
Objectives	Test the preparedness of KRCC staff and management and response to Severe Winter Weather/Power Outage threat(s).
Threat or Hazard	Severe Winter Weather resulting in power outage forecast up to 2 days to restore power.
Scenario	This exercise is designed to test the preparedness of Knife River Care Center's to respond to a multi-agency, multi-site emergency event involving severe winter weather and power outages
Sponsor	Knife River Care Center
Participating Jurisdictions/ Organizations	14 Knife River Care Center Staff (Managers) and 1 State (BPH SAT SWC)
Point of Contact	<p> Brad Beecher Safety Director Knife River Care Center 118 22nd St. NE Beulah, ND 58523 Office: 701- 873-3175 Cell: 701-880-0667 Fax: 701-873-3182 bradley.beecher@krcc-nd.org </p> 

GENERAL INFORMATION

Exercise Objectives and Capabilities

The following exercise objectives in Table 1 describe the expected outcomes for the exercise. The objectives are linked to capabilities, which are the means to accomplish a mission, function, or objective based on the performance of related tasks, under specified conditions, to target levels of performance. The objectives and aligned capabilities are guided by senior leaders and selected by the Exercise Planning Team.

Exercise Objectives	Capability
Examine pre-incident threat intelligence, information sharing, and notification and communication procedures between public and private sector partners.	<ul style="list-style-type: none"> ✓ Intelligence and Information Sharing ✓ Operational Coordination ✓ Risk Management for Protection Programs and Activities
Evaluate response procedures to Winter Storm/Power Failure event at a healthcare agency with a focus on ICS / NIMS, mass care services, coordination and communication, and evacuation and shelter-in-place procedures.	<ul style="list-style-type: none"> ✓ Operational Communication ✓ Operational Coordination ✓ Planning ✓ Mass Care Services ✓ Public Information and Warning ✓ Public Health, Healthcare, and EMS
Assess recovery and continuity plans in the aftermath of a Winter Storm/Power Failure incident with a focus on prioritizing health (including behavioral health) and reunification.	<ul style="list-style-type: none"> ✓ Infrastructure Systems ✓ Health and Social Services

Table 1. Exercise Objectives and Associated Capabilities

Participant Roles and Responsibilities

The term *participant* encompasses many groups of people, not just those playing in the exercise. Groups of participants involved in the exercise, and their respective roles and responsibilities, are as follows:

- **Players:** Personnel who have an active role in discussing or performing their regular roles and responsibilities during the exercise. Players discuss or initiate actions in response to the simulated emergency.

- **Observers:** Do not directly participate in the exercise. However, they may support the development of player responses to the situation during the discussion by asking relevant questions or providing subject matter expertise.
- **Facilitators:** Provide situation updates and moderate discussions. They also provide additional information or resolve questions as required. Key Exercise Planning Team members also may assist with facilitation as subject matter experts (SMEs) during the exercise.
- **Evaluators:** Are assigned to observe and document certain objectives during the exercise. Their primary role is to document player discussions, including how and if those discussions conform to plans, policies, and procedures.

Exercise Structure

This exercise will be a multimedia, facilitated exercise. Players will participate in the following 3 modules:

- Module 1: Weather Alerts
- Module 2: The storm moves into area
- Module 3: State Emergency
- Module 4: Power Out! -Plan for days to come

Each module begins with a multimedia update that summarizes key events occurring within that time period. After the updates, participants review the situation and engage in functional group discussions of appropriate Winter Storm/Power Failure issues. For this exercise, the functional groups are as follows:

- Knife River Care Center staff and Managers
- ND HANS
- Mercer County Emergency Management
- City of Beulah
- State of North Dakota Emergency Operations

After these functional group discussions, participants will engage in a moderated plenary discussion in which a spokesperson from each group will present a synopsis of the group's actions, based on the scenario.

Exercise Guidelines

- This exercise will be held in an open, no-fault environment wherein capabilities, plans, systems, and processes will be evaluated. Varying viewpoints, even disagreements, are expected.
- Respond to the scenario using your knowledge of current plans and capabilities (i.e., you may use only existing assets) and insights derived from your training.
- Decisions are not precedent setting and may not reflect your jurisdiction's/organization's final position on a given issue. This exercise is an opportunity to discuss and present multiple options and possible solutions.

- Issue identification is not as valuable as suggestions and recommended actions that could improve Knife River Care Center's efforts. Problem-solving efforts should be the focus.
- The assumption is that the exercise scenario is plausible and events occur as they are presented. All players will receive information at the same time.

Exercise Evaluation

Evaluation of the exercise is based on the exercise objectives and aligned capabilities, capability targets, and critical tasks, which are documented in Exercise Evaluation Guides (EEGs). Evaluators have EEGs for each of their assigned areas. Additionally, players will be asked to complete participant feedback forms. These documents, coupled with facilitator observations and notes, will be used to evaluate the exercise and compile the After-Action Report (AAR)/Improvement Plan (IP)

MODULE 1: THE STORM WARNINGS

Scenario

10/27/2025: The Day before the storm

Late Monday evening, the media issue this warning:

"An ice storm warning means severe winter weather conditions are imminent or occurring. Significant amounts of ice accumulations will make travel dangerous or impossible."

Travel is strongly discouraged. If you must travel keep an extra flashlight, food and water in your vehicle in case of an emergency.

Ice accumulations may lead to snapped power lines and falling tree branches that add to the danger."

Key Issues

- National Weather Service that this is a fast moving storm coming quickly out of the Montana/North Dakota Borders.

Questions

Based on the information provided, participate in the discussion concerning the issues raised in Module 1. Identify any critical issues, decisions, requirements, or questions that should be addressed at this time.

The following questions are provided as suggested subjects that you may wish to address as the discussion progresses. These questions are not meant to constitute a definitive list of concerns to be addressed, nor is there a requirement to address every question.

- What does your EOP/Safety Plan call for?
- What are you going to do?

What actions will you take?

- Do you need to activate your incident command at this point?
- What is your ICS structure?

MODULE 2: THE STORM HITS

Scenario

10/28/2025 9:30am

Storm has moved into area and has impacted the whole county.

Key Issues

- By now, there are 3-4 inches of snow and ice in most places.
- The snow and freezing rain continue.
- With the weight of the snow and ice, trees and branches are already breaking and falling around neighborhood.
- You can see some across power lines and roads.
- The local media reports that trees and limbs continue to break and damaging power lines, resulting in power outages.
- You still have power, but you are not sure how much longer it will be on.
- Due to power outages and downed cables, internet service is seriously degraded and intermittent at best.

Questions

Based on the information provided, participate in the discussion concerning the issues raised in Module 1. Identify any critical issues, decisions, requirements, or questions that should be addressed at this time.

The following questions are provided as suggested subjects that you may wish to address as the discussion progresses. These questions are not meant to constitute a definitive list of concerns to be addressed, nor is there a requirement to address every question.

- **What actions should you take based on this realization?**
- **Does your safety plan have contingencies for such a situation?**
- **How have you prepared for the extended time period for sheltering residents and staff?**
- **What should you do about the special needs residents and those who are feeling sick?**

MODULE 3: WEATHERING THROUGH THE STORM

Scenario

10/28/2025 1:00pm

Key Issues

- The area weather remains cold with lows in the teens and 20s.
- The National Weather Service predicts more snowfall through the night and into Wednesday .
- You can expect at least 6-8 more inches of snow on top of the 10 or so which has fallen during the day.
- The storm moved *so* fast and did *so* much damage *so* quickly that the Governor has already issued a Proclamation of Emergency.

Questions

Based on the information provided, participate in the discussion concerning the issues raised in Module 1. Identify any critical issues, decisions, requirements, or questions that should be addressed at this time.

The following questions are provided as suggested subjects that you may wish to address as the discussion progresses. These questions are not meant to constitute a definitive list of concerns to be addressed, nor is there a requirement to address every question.

- What actions should you take based on this realization?
- Does your safety plan have contingencies for such a situation?
- How have you prepared for the extended time period for sheltering residents and staff?
- What should you do about the special needs residents and those who are feeling sick?

MODULE 4: THE STORM CONTINUES

Scenario

10/28/2025 6:00pm

Key Issues

- By 6:30, your power is now out. City estimates it will remain out for 2 more days.

Questions

Based on the information provided, participate in the discussion concerning the issues raised in Module 1. Identify any critical issues, decisions, requirements, or questions that should be addressed at this time.

The following questions are provided as suggested subjects that you may wish to address as the discussion progresses. These questions are not meant to constitute a definitive list of concerns to be addressed, nor is there a requirement to address every question.

- What actions should Knife River Care Center personnel take based on the information from the NWS?
- Knowing that you will have staff and potentially family or visitors staying at facility, what is your back-up plan?
- What do you do about staff who want to leave to be with their own families?
- Will you need to make additional ICS assignments?
- When possible, how will you ensure that everyone (including residents, family, visitors, and staff) is accounted for?
- What is your reunification plan?
- What further actions will you take?
- What additional contingencies must you now prepare for?
- Will you need to address long-term recovery?

APPENDIX A: EXERCISE SCHEDULE

Note: Because this information is updated throughout the exercise planning process, appendices may be developed as stand-alone documents rather than part of the SitMan.

Date	10/28/2025
8:30-9am	Registration
9am-9:10am	Welcome and Introductions
9:10-9:45am	Module 1: The day before
9:45am-10:30	Module 2: The Storm Begins
10:30-11:30	Module 3: Weathering through the storm
	Break
	MODULE 4: THE STORM CONTINUES/AFTERMATH
11:30-12:00pm	Hotwash
	Closing Comments/Lunch

APPENDIX B: EXERCISE PARTICIPANTS

[illegible]

APPENDIX C: RELEVANT PLANS

[Insert excerpts from relevant plans, policies, or procedures to be tested during the exercise.]

Knife River Care Center Emergency Power

Effective: November 2017

Policy:

The facility maintains to provide emergency power when normal power supplies are disrupted without adversely affecting the operations of the facility or the wellbeing of residents.

Policy Explanation and Compliance Guidelines:

1. In the event the normal power supply is disrupted, an emergency generator will be used to supply power to the following:
 - a. EHR Systems/Med cart PC's
 - b. Corridor lighting
 - c. Fire detection, alarm, and extinguishing systems
 - d. Exit signs
 - e. Life support systems (if applicable)
 - f. Telephone/fax/walkies
 - g. Nurse call system
 - h. Exterior and interior lights at exit
 - i. Sprinkler riser room
 - j. Med cart prep area
 - k. Nurse's station
 - l. Patient care equipment
 - m. Red outlets
 - n. Stairwell emergency lighting (if applicable)
 - o. Freezer/refrigerators designated for the safe and sanitary storage of food during an emergency
 - p. Heating/cooling systems designated as required to maintain temperatures to protect residents' health and safety during an emergency
2. Should the emergency generator fail to activate within 10 seconds, the person in charge shall immediately disperse the trained person(s) to manually start the generator. The employees trained include Maintenance supervisor and maintenance aides
3. The generator engine will be maintained and serviced by manufacturer's instructions

4. Generator is located on the lower west side of the building. When the existing building is renovated, the location of the generator will comply with requirements found in the Health Care Facilities code, Life Safety Code, and NFPA 110

Knife River Care Center Emergency Preparedness Plan

Effective: November 2017

Policy:

This facility maintains a written emergency preparedness plan that complies with relevant regulations for plan development. The plan is reviewed and updated at least annually.

Policy Explanation and Compliance Guidelines:

1. The plan will be based on and include a documented, facility and community-based risk assessment utilizing an all-hazards approach, including missing residents.
2. The plan will include strategies for addressing emergency events identified by risk assessment.
3. The plan will consider, among other things, the following:
 - a. All business functions are essential to the facility's operations that should be continued during an emergency.
 - b. All risks or emergencies that the facility may reasonably expect to confront.
 - c. All contingencies for which the facility should plan.
 - d. The facility's location.
 - e. Assessment of the extent to which natural or man-made emergencies may cause the facility to cease or limited operations; and
 - f. What arrangements may be necessary with other health care facilities, or other entities that might be needed to ensure that essential services could be provided during an emergency.
4. The plan will address the facility's resident population and staff, including, not limited to:
 - a. People at risk and identification of residents who would require additional assistance;
 - b. The type of services the facility has the ability to provide in an emergency; and
 - c. Continuity of operations, including delegations of authority and succession plans.
 - i. The plan will identify which staff would assume specific roles in another's absence.

- ii. The following elements will be considered: essential personnel, essential functions, critical resources, vital records and IT data protection, alternate facility identification and location and financial resources.
5. The facility will collaborate with local, tribal, regional State and/or Federal emergency preparedness officials to maintain an integrated response during a disaster or emergency situation, including documentation of the facility's efforts to contact such officials.
6. A communication plan will be developed and maintained as part of the emergency plan that reflects coordination of care within the facility, across health care providers, and with state and local public health departments and emergency systems.
7. Policies and procedures will be developed to provide additional guidance on how to carry out the plan.
8. Training will be provided on the contents of the plan, and drills and exercises will be conducted in order to test the plan.

Knife River Care Center Emergency Staffing Policy

Effective: November 2017

Policy:

It is the policy of this facility to establish procedures for handling staffing challenges in the case of an emergency or disaster. Emergency staff may include volunteers with varying levels of skill and training, to include medical and non-medical expertise.

Policy Explanation and Compliance Guidelines:

1. The number of staff required to meet resident needs daily are determined through the facility assessment. Schedules shall reflect sufficient staff with minimum use of scheduled overtime.
2. In an emergency, off-duty staff will be contacted and asked to work prior to accepting volunteers.
3. The facility shall communicate with federally designated emergency health care professional organizations during the emergency plan review process to verify contact information.

4. The Administrator and key staff (as designated by the facility's Incident Command System) shall meet to brief on staff needs and develop an action plan.
5. The Administrator, Safety Director, or designee shall notify the authority having jurisdiction (i.e Incident Command Center) of any staffing or assistance need.
6. Emergency staff and volunteers will report to a single person for allocation of roles and duties based on their credentials and expertise. Security measures will be taken to verify the credentials of healthcare professional volunteers.
7. Non-medical staff and volunteers will only be assigned to perform non-medical tasks.
8. Staff must be distinctly and easily identifiable and volunteers must be separately identifiable.
9. Job orientation shall be provided for all emergency staff and volunteers to acquaint them with the immediate needs of residents, the physical facility, disaster plan, and specific duties and responsibilities.

Knife River Care Center Emergency Water Supply Policy

Effective: November 2017

Policy:

It is the policy of this facility to establish procedures to ensure that water is available to essential areas when there is a loss of normal water supply.

Policy Explanation and Compliance Guidelines:

1. The Administrator shall maintain a contract with a water supply company responsible for furnishing portable water to the facility in the event of loss of water at the facility. The contract shall specify the minimum amount of water to be supplied based on an estimate of the facility's needs.
2. The volume of water needed is estimated based on the facility's water use records (i.e water and sewer bills), but no less than current CDC guidelines for the number of residents, staff and volunteers. A general guideline is as follows:
 - a. Drinking – 1 gallon per day times the number of residents and staff
 - b. Handwashing – 1 gallon per day times the number of staff
 - c. Cooking – 1 gallon per day times the number of staff
 - d. Toilet flushing – 2 gallons per day times the number of residents
 - e. Miscellaneous – 1 gallon per day times the number of residents and staff

3. The Administrator, Maintenance Director, or designee shall notify the water supply company when water is needed. The company shall be notified in advance, as possible, of any known weather events, construction, or repairs that may result in loss of normal water supply. In the event of disaster or unforeseen event, the company shall be notified as soon as practicable.
4. The Dietary Manager maintains a 3-day supply of bottled water for drinking and cooking, but no less than as specified by state regulations, this water is stored in the mechanical room by Whispering Winds with the emergency food/paper product supply. Additional water is stored in the storage building north of the facility.
5. The emergency water from the water supply company will be supplied through a portable water tank.
6. The portable water tank will be stored outside the kitchen entrance/exit.
7. Water will be distributed from the tanks to containers for essential areas (i.e. kitchen, nursing units, and laundry) by staff using carts from each area. Water will be stored in medication rooms or other clean utility rooms until distributed to individual resident rooms or other point-of-use areas, as needed.

Knife River Care Center Incident Command System

Effective: November 2017

Policy:

It is the policy of this facility to utilize an Incident Command System (ICS) approach to organizing on-scene operations in the event of an emergency.

Policy Explanation and Compliance Guidelines:

1. An Incident Management Team (IMT) has been established for designating roles to be assumed during an emergency. The following positions form the Incident Management Team:
 - a. Facility Incident Commander – The person who organizes and directs the facility's emergency operations. This person gives overall direction for facility operations and makes evacuation and sheltering in place decisions. An alternate Incident Commander (highest qualifying official onsite at the time of the emergency) will be named, who will be responsible for Incident Command in the event the initial designee is unable to assume responsibility.

- i. Public Information Officer (PIO) – Working directly with Incident Commander as part of the Command Team, this is the person who is responsible for the interfacing with the public and media with incident-related information requirements. The PIO's role is to serve as a conduit for information flowing out from the facility regarding the emergency and the facility resident status. The PIO will also supervise communications to residents and family members. The Incident Commander must approve the release of all incident-related information. Only one incident PIO should be designated.
- ii. Liaison Officer – Working directly with the Incident Commander as part of the Command Team, the Liaison Officer is the point of contact for representatives of external agencies, organizations, and/or private entities that need to obtain the status of the facility or provide assistance or volunteers. This person will interact with the state's licensing agency, the local emergency operations center (i.e Incident Command Center), the Red Cross, and the police. Such assistance efforts should be coordinated through the Liaison Officers interacting with Logistics Sections Chief.
 - 1. Contact information for the entities referenced above shall be maintained for timely communication.
 - 2. Information to be relayed to the above entities include, but are not limited to:
 - a. Occupancy information (i.e number of residents currently at the facility and number of available beds).
 - b. Needs of the facility (i.e shortage of provisions, staff shortages, assistance with evacuation and transfers).
- iii. Safety Officer – Working directly with the Incident Commander as part of the Command Team, the Safety Officer monitors the impact of the emergency on facility operations and advises the Incident Commander on all matters relating to operational safety. While the ultimate responsibility for the safe conduct of incident management operations rest with the Incident Commander, the Safety Officer works to ensure the safety of residents, staff, and visitors and to monitor and correct hazardous conditions. The Safety Officer has emergency authority to stop and/or prevent unsafe acts during incident operations.
- b. Logistics Chief – This person organizes and directs those operations associated with providing adequate levels of personnel, food, and supplies to support the facility during an incident.
- c. Planning Chief – This person gathers and analyzes incident-related information across departments. This section chief obtains status and resource projections from all the other sections chiefs for immediate and long range planning, helping the Incident Commander make decisions. From these projections, this chief compiles and distributes the facility's Incident Action Plan, which is a written

plan containing general objectives and strategies for managing the incident. The Incident Action Plan is revised at time intervals set by the Incident Commander, e.g. every 8 hours.

- d. Operations Chief – This person organizes and directs activities related to providing resident care and services, dietary services, and environmental services. These activities are hands-on, on-the-ground actions which serve to care for residents and staff, meet food service needs, and to manage facility grounds during an incident.
 - e. Finance/Administration Chief – This person monitors the utilization of financial assets and the accounting for financial expenditures. This person also services the documentation of expenditures and cost reimbursement activities. This section chief also works to ensure business functions are maintained to the extent possible.
2. Each position on the Incident Management Team will be assigned and documented in the emergency plan.
 3. Members of the Incident Management Team shall receive training on Incident Command System operating principles during employee orientation/probationary period and periodically thereafter.
 4. When an incident occurs, the Incident Management Team shall gather in the Command Center located Conference Room. The alternate location will be Education Classroom.
 5. The incident Commander shall lead briefings on the incident for development of the Incident Action Plan.
 6. Designees will relay information from the incident Action Plan to the relevant staff for carrying out the plan.
 7. The incident Management Team will maintain communication with general staff for needs.
 8. The Incident Action Plan shall be re-evaluated at designated times and revised as needed.
 9. A post-incident review will be conducted to evaluate staff response and effectiveness of the emergency plan for the purposes of improving or updating the emergency plan as needed.

Knife River Care Center Clinical Supplies in Case of Emergency

Effective: November 2017

Policy:

It is the policy of this facility to establish procedures to ensure that needed clinical supplies are available to maintain continuity of care in the case of emergency.

Policy Explanation and Compliance Guidelines:

1. The Administrator shall maintain contracts with various vendors for provision and replenishment of medical and pharmaceutical supplies for day-to-day activities and in the case of emergencies.
2. The amount and types of needed supplies will be estimated in accordance with the facility assessment, and will consider the resident population, clinical needs, and historical use. Essential clinical supplies should be kept in each unit's mechanical room with a storage box. Emergency clinical box should be labeled to represent its use.
3. Par levels of various supplies will be set, based on use, and procedures for reordering will be followed accordingly to ensure availability of supplies on an ongoing basis.
4. Nursing staff will reorder medications per facility protocol to ensure that a minimum three day/dose supply is on hand at all times.
5. Stock medications will be reordered in accordance with par levels and medical supply reordering.
6. IV kit will be maintained in accordance with facility/pharmacy procedures. E-kit in the Shady Lane nurse's station. IV Kit is in the exam room.
7. Emergency/crash carts will be maintained in accordance with facility procedures.
8. Oxygen cylinders will be replaced in accordance with par levels on a bi-monthly basis, and as needed. The DON or designee is responsible for contacting oxygen supplier of additional needs.

Throughout the duration of the emergency, the Administrator and key staff (as designated by the facility's Incident Command System) shall maintain communication with general staff for needs, and will initiate action plans as needed. The nature of any action plans will be relayed to general staff.

Knife River Care Center Emergency Communication Procedures

Effective: November 2017

Policy:

To protect resident health and safety in the event of an emergency or disaster, resident care will be coordinated within the facility, across healthcare providers, health departments and emergency management agencies.

Policy Explanation and Compliance Guidelines:

1. The facility shall maintain accurate contact information for regular and contract staff, residents' physicians, volunteers, and other long term care facilities.
 - a. Each employee (regular or contract) is responsible for notifying the HR Department and his/her supervisor of any changes in contact information, including changes in home address and telephone number(s).
 - b. The HR Director is responsible for maintaining a list of current employees and contact information in the department.
 - c. The HR Director is responsible for compiling a complete listing of volunteers and employees with contact information and placing them in the emergency preparedness binder. A new list shall be provided at least monthly to account for changes in staff, and in advance of any known weather event. The HR Department shall verify the information at least annually, as evidenced by dating the review and each list.
 - d. It is the responsibility of each physician for notifying the Health Information Officer and Director of Nursing of any changes in contact information, including changes in practice address, and telephone number(s). The Health Information Officer and/or the Safety Director are responsible for compiling a list of physicians and contact information or forwarding a copy to the Administrator and Director of Nursing. One copy shall be placed in the emergency preparedness binder. The Safety Director shall verify the information at least annually, as evidenced by dating the review and each list.
 - e. The Safety Director shall maintain a list of other long-term care facilities with contact information. The list shall include, at a minimum, nearby facilities and other facilities within a 100-mile radius. The information shall be verified at least annually and provided to the Administrator for placing in the emergency preparedness binder.
2. The facility shall maintain accurate contact information for federal state, tribal, regional, or local emergency preparedness staff; the State Licensing and Certification Agency; the Office of the State Long-Term Care Ombudsman, and other agencies or entities that may be sources of assistance to the facility during an emergency.
 - a. The Administrator, or designee, shall maintain a list of contact information for the above entities.
 - b. A copy of the list and contact information shall be placed in the emergency preparedness binder for easy access during an emergency.
 - c. The information shall be reviewed and updated at least annually, as evidenced by dating the review and each list.

3. The facility shall establish primary and alternate means of communicating with the facility's staff as well as with federal, state, tribal, regional, or local emergency management agencies.
 - a. Communication with staff members
 - i. The primary method of communication with staff members shall be made through the Ready Op system. The facility will send a notification to the staff member's primary phone number listed on file via phone call and/or text message.
 - ii. Alternative methods of communication with staff members shall include:
 1. Walkie-talkies for in-house communications when in-house phones lines and paging systems are out of order.
 2. Use of personal cellular phones to make relevant, outside phone calls or text messages.
 3. Email communication via company email, if staff member has access to company-owned internet-enabled devices (i.e. smart phones, tablets, laptops).
 4. Email communication via personal email, if staff member has provided this information.
 5. Electronic communication via On Shift/UKG.
 - iii. The Administrator or Director of Nursing will make the final decision regarding communication with staff members during an emergency, including which staff to notify and by what means.
 - b. Communication with federal, state, tribal, regional, or local emergency management agencies
 - i. The Administrator, or Incident Commander, is responsible for communicating with the above entities and /or designation responsibility during the emergency.
 - ii. The primary method of communication with the above entities shall be made through facility telephone or company-owned cellular phones by calling the listed contact number.
 - iii. Alternative methods of communication with the above entities shall include:
 1. Email communication
 2. Radio system – ND State Radios
 3. NOAA Weather Radio System
 4. Satellite phones
 5. Short wave radio

4. The facility shall develop a method for sharing information and medical documentation, protecting information as required under HIPAA, for residents under the facility's care during an emergency.
 - a. The facility will share information and medical documentation with other health care providers to maintain continuity of care.
 - i. KRCC EHR system, Point Click Care (PCC) has an emergency access option that can be turned on to allow remote access. This is for all current users in PCC. All necessary documents and medical information can be accessed off site and printed.
 - ii. Face sheets will be provided and will include at least the resident's name, DOB, and next of kin/emergency contact information.
 - iii. HIM will verify medical information is sent to each resident in the case of any transfer, discharge or evacuation.
 - b. In the event of any evacuation, the facility shall release information in accordance with HIPAA privacy protections.
 - i. A recorded message and/or notification through the Ready Op system will be initiated by the administrator or designee to family members and other interested parties, of the decision to evacuate and the location to which the resident's will be evacuated.
 1. As time permits, and/or staff availability there will be calls placed to family members outlining a status update, the location of their loved one and next step.
 - ii. A resident tracking log will be generated on each nursing unit, specifying the location of each resident, so that accurate information about the general condition and location of resident's can be provided in a timely manner.
 - iii. HIPAA privacy protections are waived in an emergency, but only the necessary information necessary shall be disclosed.
5. The facility shall communicate information about the facility's occupancy, needs, and its ability to provide assistance to the authority having jurisdiction, the Incident Command Center, or designee in accordance with established procedures for the facility's Incident Command System.
6. The facility shall share information from the emergency plan with residents and their representatives in accordance with established procedures.
7. The facility shall review these communication procedures annually, and associate contact information, at least annually and revised as needed.

Knife River Care Center Emergency Food Supply Policy

Effective: November 2017

Policy:

It is the policy of this facility to establish procedures to ensure that food is available for residents, staff and volunteers in the case of emergency.

Policy Explanation and Compliance Guidelines:

1. The Dietary Manager shall maintain a 3-day supply of nonperishable foods and supplies of disposable dishes/utensils. The food will be stored in the kitchen and the supplies will be stored in the mechanical room outside of WW.
2. The amount of food needed is estimated based on the facility assessment, and considers census, total staff, and average number of volunteers/visitors.
3. The type of food will consider resident population and dietary needs, in conjunction with the menu and/or dietary supplies on hand.
4. The Dietary Manager shall maintain a recent list of residents and their diets.
5. The Administrator shall maintain contracts with food and supply vendors. The name, telephone numbers, and ordering information shall be available to the Dietary Manager, and designee. The Dietary Manager, or designee, shall maintain contact with vendors throughout the duration of the emergency for replenishing food and supplies, as needed.
6. Throughout the duration of the emergency, the Administrator and key staff (as designated by the facility's Incident Command System) shall maintain communication with general staff for needs, and will initiate action plans as needed. The nature of any action plans will be relayed to the general staff.

Winter Storm/Blizzard/Ice Immediate Response Prior to arrival of winter storm/blizzard, the Emergency Weather plan will be implemented: All Staff should prepare to stay or arrive before the storm. • Housekeeping will ensure mattresses, linens, towel, washcloths and toiletries are available to staff who are stranded or decide to stay at the facility. These items will be placed in the Employee Locker room. • Dietary will stock snacks, drinks, and various food items in the refrigerators in the Employee Break room and Locker room. • Maintenance will prepare the Education Classroom by moving the tables to allow for mattresses from storage. • Management will call staff and ask to prepare to arrive early or stay if necessary. Assist where necessary to prepare for the storm. • Life sustaining medical equipment should be connected to red cover outlets which are powered by the emergency generator. Next Steps • Ask staff to assist in areas with the most need. • If deemed necessary, implement two shift times instead of three. The

two shifts will be 7:00 a.m.-7:00 p.m. and 7:00 p.m.-7:00 a.m.. Winter Storm/Blizzard/Ice Immediate Response Prior to arrival of winter storm/blizzard, the Emergency Weather plan will be implemented: All Staff should prepare to stay or arrive before the storm. • Housekeeping will ensure mattresses, linens, towel, washcloths and toiletries are available to staff who are stranded or decide to stay at the facility. These items will be placed in the Employee Locker room. • Dietary will stock snacks, drinks, and various food items in the refrigerators in the Employee Break room and Locker room. • Maintenance will prepare the Education Classroom by moving the tables to allow for mattresses from storage. • Management will call staff and ask to prepare to arrive early or stay if necessary. Assist where necessary to prepare for the storm. • Life sustaining medical equipment should be connected to red cover outlets which are powered by the emergency generator. Next Steps • Ask staff to assist in areas with the most need. • If deemed necessary, implement two shift times instead of three. The two shifts will be 7:00 a.m.-7:00 p.m. and 7:00 p.m.-7:00 a.m.. This will be followed by all departments. • Shelter in Place • Keep all exits open by removing snow as necessary. • Use salt, sand, shovels, etc. to remove snow/ice. • If power failure occurs and building temperatures drop, please see Cold Weather Procedures. m.-7:00 a.m.. This will be followed by all departments. • Shelter in Place • Keep all exits open by removing snow as necessary. • Use salt, sand, shovels, etc. to remove snow/ice. • If power failure occurs and building temperatures drop, please see Cold Weather Procedures.

APPENDIX D: ACRONYMS

Acronym	Term
HSEEP	Homeland Security Exercise and Evaluation Program
SitMan	Situation Manual
TTX	Tabletop Exercise
[Acronym]	[Term]
[Acronym]	[Term]
[Acronym]	[Term]
[Acronym]	[Term]
[Acronym]	[Term]