

Appendix L: Recovery Checklist

Authority to call for re-entry

Following an emergency evacuation, re-entry into the facility must be preceded by the approval of appropriate jurisdictional authorities (local, county, state, etc.), including the State Survey agency. Administrator/Director or designee notifies appropriate authorities to request approval for re-entry once it is deemed safe.

In addition to local and state authorities, notify personnel and partner agencies regarding return to normal operations, which may include:

- Police Department
- Fire Department
- Emergency Management Agency
- Vendors
- Insurance Agent
- Other relevant agencies that provide authorization for re-entry
- Notify residents, clinical, ancillary, and administrative staff, Medical Director, all attending physicians, families, and responsible parties of procedure and timeline for re-entry.
- Notify Long Term Care Ombudsman of procedure and timeline for re-entry.
- Implement a return to normal process that provides for a gradual and safe return to normal operations.

Recovery Checklist: Prior to Re-opening

Facility/Agency Recovery Operations

TASK	Date Assigned:	Completed on:
Coordinate with city/county emergency management agency.		
Coordinate with authorities to perform search and rescue if necessary.		
Provide local and state authorities with a master list of displaced, injured, or deceased residents.		
Notify next-of-kin of displaced, injured or deceased residents.		
Provide crisis counseling for residents/families as needed.		
Contact insurance agents		
Coordinate with applicable jurisdiction to reestablish essential services.		
Coordinate with local jurisdictions/agencies to restore normal operations.		

Evaluation

TASK	Date Assigned:	Completed on:
Hazard evaluation conducted prior to re-entry, to include potential structural damage, environmental concerns and items that can affect staff, volunteers, residents, and appropriate personnel.		
Inventory taken of damaged goods.		

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Protective measures taken for undamaged property, supplies and equipment.	
Assure safe access and egress for staff, deliveries, and ambulances.	

Building

Task	Date	Completed on
	Assigned	
Building declared safe for occupancy by appropriate regulatory agency.		
Fire-fighting services available including sprinklers, standpipes, alarms, etc.		
Pest control/containment procedures in effect.		
Adequate environmental control systems in place.		

Facilities/Engineering

Task	Date	Completed on
	Assigned	
Cooling Plant operational.		
Heating Plant operational.		
Distribution System (ductwork, piping, valves and controls, filtration, etc.)		
operational.		
Treatment Chemicals (Water treatment, boiler treatment) operational.		
Notifications made to staff regarding status of communication system(s).		

Electrical Systems

Task	Date	Completed on
	Assigned	
Electrical System declared safe for use by appropriate regulatory agency.		
Main switchboard, utility transfer switches, fuses, and breakers operational.		
Emergency generators, backup batteries and fuel available where needed.		
Transfer switches in working order. Sufficient fuel available for generators.		

Water and Wastewater Systems

Task	Date Assigned	Completed on
Potable water for drinking, bathing, dietary		
service, resident services.		
Water supply and other system components adequate and functional.		
Water available and operational for fire suppression		
Sewer system adequate.		
If located in flooded or damaged areas, is the water/wastewater system		
approved for reuse.		
Oxygen- supply adequate and available onsite.		
Plan in place to replenish equipment and supplies.		
Equipment inspected and cleared prior to resident use.		
Maintenance process in place to maintain resident care equipment that is in		
use.		
Flashlights and batteries (including radio and ventilator batteries) available.		

Waste Management

Task	Date Assigned	Completed on
System in place for trash handling.		
System in place for handling hazardous and medical waste.		

Infection Control

Task	Date	Completed on
	Assigned	
Procedures in place to prevent, identify, and contain infections and		
communicable diseases.		

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Procedures and mechanisms in place to isolate and prevent contamination	
from unused portions of facility.	
Adequate staff and resources to maintain a	
sanitary environment.	
Process in place to segregate discarded,	
contaminated supplies, medications, etc. prior to reopening of facility.	

Administration/Staff

Task	Date	Completed on
	Assigned	
Information Technology, Medical Records, and financial systems in place and		
have a backup system ready to go.		
Management staff available.		
Types and numbers of personnel available.		
Security staff available.		
Security systems available.		

Final Checklist

Task	Date Assigned	Completed on
Repairs and maintenance complete and approved by appropriate authorities.		
Emergency exits, fire extinguishers, carbon monoxide detectors, smoke alarms and other critical systems are working		
Back-up generator fueled and ready for use.		
Air conditioning/heat working		
Rested staff available		

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Task	Date Assigned	Completed on
Counselors available to staff and residents		
Medical, clinical, personal care, food, and water, and building supplies delivered and available		
Residents' families notified of re-opening		
Local authorities (local public health, ambulance service, police, and fire) notified		
State authorities MDH – Compliance Monitoring notified		
Check to see if other services in community are up and running such as local hospital and pharmacy		

Return to facility

The Administrator/Director or their designee is responsible for determining the order in which residents are returned to the facility.

Post-disaster procedures for the facility:

The Incident Management Team (IMT) may continue during the recovery phase to determine priorities for resuming operations, including:

- Physically secure the property
- Conduct damage assessment for residents and the facility.
- Protect undamaged property. Secure building (broken windows, doors, walls, etc.)
- Remove smoke, and water damaged debris.
- Protect equipment against moisture.
- Restore power and ensure all equipment is functioning properly.
- Separate damaged repairable property from destroyed property.
 - Keep damaged property on hand until insurance adjuster has visited the property.
- Report claims to insurance carrier

- Take an inventory of damaged goods. (This is usually done with the insurance adjuster)
- Take time to check on residents/clients and staffs' health and wellness.
 - o See Staff Care section in base plan for resources on health and wellness

Post evacuation and transportation return

Following a disaster, transportation resources are likely to be in high demand and may be difficult to find. Drivers may be limited or unavailable and the entire community may be competing for the same resources, including fuel and specialized vehicles for transporting persons who are frail or have disabilities. This demand will likely outpace resources.

Prior to an emergency, make sure local emergency management officials are aware of the type of transportation likely to be needed by facility residents so that they can receive the appropriate priority when assistance is needed with transport services. Agreements will be in place with public and private transportation agencies, ambulance services, wheelchair accessible services and other transportation options in the community, including family and volunteers.

Return transportation will be arranged by the facility in collaboration with the local EMS and/or emergency management agency. The postevacuation return to the facility may need to occur in stages over days or weeks.