**Policy and Procedure: Shelter-in-Place**

<Incorporate your organization’s existing policies and procedures that apply to these recommendations.>

<FIND and REPLACE WORDS: Look for the words in GREY. Find and replace the following words to shortcut development of this policy and procedure:>

* <insert Organization’s name> = Your Organization’s Name
* Patient, patients, patient = Use the most appropriate words that describes the individuals that your organization services (i.e., patient, resident, participant, client)

Insert additional organizational information in all other areas marked in GREY.

<Delete these instructions in RED>

## Policy: S**helter-in-Place**

The Shelter-in-Place Policy & Procedure should be initiated in response to an emergency where it is not safe for staff, patients, or others to evacuate from a program site(s). The need to shelter-in-place is based on the current situation during an emergency and involves special considerations depending on the threat, patient population, and building specifics.

Shelter-in-place means to “take refuge in a building where external doors and windows have been closed and the heating/air-conditioning has been turned off.” Not all emergency situations require sheltering in place, but, when it becomes apparent that an external danger may result in injury, exposure, or loss of life to of patients, visitors, and staff, the Incident Commander is responsible for ordering a program site(s) to shelter-in-place. This policy was developed to ensure the safety of patients, staff, visitors, and families; provide for patient care and management as appropriate and needed; and to plan for safe reunification and service restoration.

### **Policy and Procedure Objectives:** S**helter-in-Place**

* Provide for the safety of patients, staff, visitors, and families
* Provide for patient care and management
* Conduct safe and rapid shelter-in-place at the program site(s)
* Plan for safe patient, staff, and visitor reunification and service restoration

### **Procedures:** S**helter-in-Place**

This procedure allows staff and senior leadership of <Insert Organization name> to effectively she**lter-in-place during an emergency to ensure the safety and wellbeing of** patients, staff, visitors, and families. This procedure will guide staff if they must shelter-in-place at a program site(s).

### Staff Responsibilities

* Understand and comply with this Shelter-in-Place Policy and Procedure
* Understand their unique role during an emergency
* Follow the Incident Command System assignments
* Follow orders given by public safety authorities (fire, police)
* Remain calm and use common sense and good judgment
* Listen for the shelter-in-place orders over the overhead paging system (Please delete if no overhead paging system or replace with your organizations’ type of public address system) by the person in charge or Incident Commander

### Authority to Activate the Emergency Operations Plan

During a disaster, the Incident Commander has the authority to activate this Shelter-in-Place Procedure.

### Decision to Activate the Emergency Operations Plan during a Disaster

* Shelter-in-place should be ordered by the Incident Commander, based on the credibility of the threat.
* Pre-determined shelter-in-place locations at program site #1 include <insert designated shelter-in-place locations>
* <repeat this to add additional shelter-in-place locations at additional program site(s) of this organization. Delete these instructions in RED>
* The designated shelter-in-place location should have access to a stockpile of emergency food, water, first aid, and other emergency supplies.
* The Incident Management Team will evaluate the nature of threat as it occurs, the availability of resources, and reassess regularly to determine the proper course of action.
* Depending upon the situation, it may be safer for a program site(s) to shelter-in-place than evacuate.
* Patients, staff, and visitors should be sheltered in place only when necessary.

### Immediate Danger due to a Disaster

* During a disaster, removing patients from immediate danger must take **priority** over all other actions.
* If a disaster occurs in or threatens a program site(s) or treatment area, staff should relocate patients and others who are in immediate danger, to a shelter-in-place location.

### When the Immediate Threat has Passed

* If a shelter-in-place order has been activated and patients are not in immediate danger, **WAIT** for additional orders.
* All sheltering and movement of patient’s, staff, and others should be coordinated under the direction of the IMT.
* Assemble with others from your floor and/or department at the designated shelter-in-place location until the shelter-in-place order is lifted by the Incident Commander or Person in Charge.
* Remain at your assigned location until you are released by your supervisor or IMT.