



**Department  
of Health**

**Van Rensselaer Manor**

# **Comprehensive Emergency Management Plan Template**

## **Part II – Template**

**2022**

Van Rensselaer  
Manor  
85 Bloomingrove  
Road, Troy, NY  
12180

# Instructions

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The NYSDOH Comprehensive Emergency Management (CEMP) Template is a tool to help facilities develop and maintain facility-specific CEMPs. For 2020, Appendix K has been updated to include guidance and formatted to provide a form to comply with the new requirements of Chapter 114 of the Laws of 2020 for the development of a Pandemic Emergency Plan (PEP). The plan template is designed to help facilities easily identify the information needed to effectively plan for, respond to, and recover from natural and man-made disasters. All content in this template should be reviewed and tailored to meet the needs of each facility.

Refer to *Part 1 – Instructions* for additional information about completion of this template.

Refer to *Part 3 – Toolkit* for supplementary tools and templates to inform CEMP development and implementation.

# Emergency Contacts

The following table lists contact information for public safety and public health representatives for quick reference during an emergency.

**Table 1: Emergency Contact Information**

Organization	Phone Number(s)
<b>Local Fire Department</b>	Defreetsville FD 518 286-3612 Wynantskill FD 518 283-5506
<b>Local Police Department</b>	North Greenbush PD 518 283-5323
<b>Emergency Medical Services</b>	911
<b>Fire Marshal</b>	N/A
<b>Local Office of Emergency Management</b>	Renss. County 518 270-5252
<b>NYSDOH Regional Office (Business Hours)<sup>1</sup></b>	518 270-2626
<b>NYSDOH Duty Officer (Business Hours)</b>	866-881-2809
<b>New York State Watch Center (Warning Point) (Non-Business Hours)</b>	518-292-2200

<sup>1</sup> During normal business hours (non-holiday weekdays from 8:00 am – 5:00 pm), contact the NYSDOH Regional Office for your region or the NYSDOH Duty Officer. Outside of normal business hours (e.g., evenings, weekends, or holidays), contact the New York State Watch Center (Warning Point).

# Approval and Implementation

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This Comprehensive Emergency Management Plan (CEMP) has been approved for implementation by:

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Kenyatta Walker  
Administrator, Van Rensselaer Manor

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15 August 2021

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John Wasielewski  
Deputy Administrator, Van Rensselaer Manor

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10 December 2021

# Record of Changes

Table 2: Record of Changes

Version #	Implemented By	Revision Date	Description of Change
1.0, Part III, P.6	John Wasielewski, Deputy Administrator	May 1, 2022	Updated Utility Provider Information

# Record of External Distribution

Table 3: Record of External Distribution

Date	Recipient Name	Recipient Organization	Format	Number of Copies
<i>June 1, 2022</i>	Jay Wilson	<i>Rensselaer County Office of Emergency Management</i>	<i>Digital (Email)</i>	1

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# 1 Background

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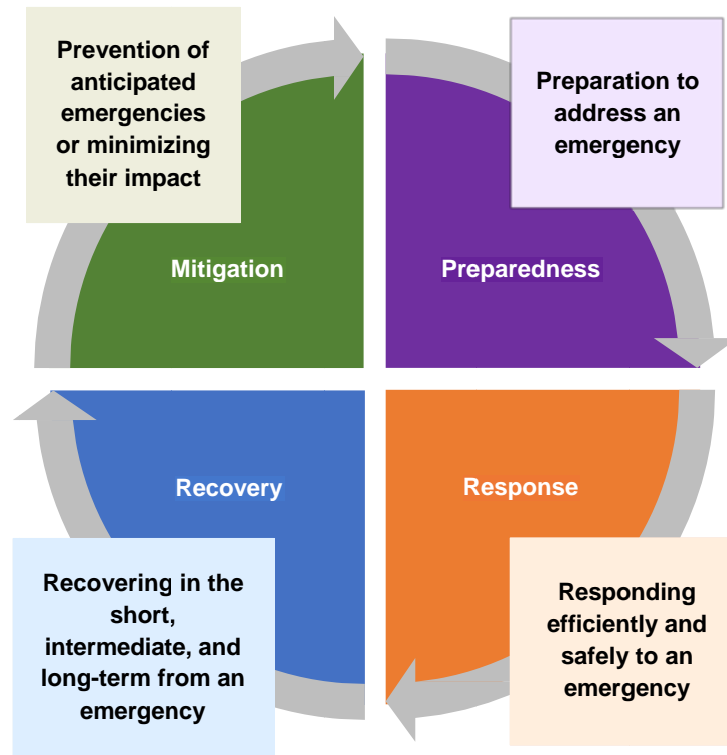
## 1.1 Introduction

To protect the well-being of residents, staff, and visitors, the following all-hazards Comprehensive Emergency Management Plan (CEMP) has been developed and includes considerations necessary to satisfy the requirements for a Pandemic Emergency Plan (PEP). Appendix K of the CEMP has been adjusted to meet the needs of the PEP and will also provide facilities a form to post for the public on the facility's website, and to provide immediately upon request. The CEMP is informed by the conduct of facility-based and community-based risk assessments and pre-disaster collaboration with Rensselaer County Office of Emergency Preparedness, and other mutual aid long term care facilities. This CEMP is a living document that will be reviewed annually, at a minimum, in accordance with *Section 7: Plan Development and Maintenance*.

## 1.2 Purpose

The purpose of this plan is to describe the facility's approach to mitigating the effects of, preparing for, responding to, and recovering from natural disasters, man-made incidents, and/or facility emergencies.

Figure 1: Four Phases of Emergency Management



### 1.3 Scope

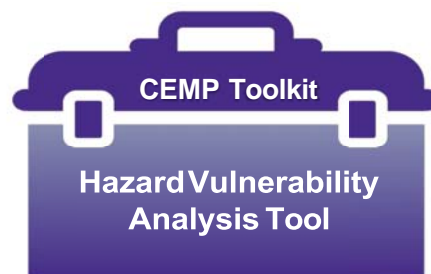
The scope of this plan extends to any event that disrupts, or has the potential to significantly disrupt, the provision of normal standards of care and/or continuity of operations, regardless of the cause of the incident (i.e., man-made or natural disaster).

The plan provides the facility with a framework for the facility's emergency preparedness program and utilizes an all-hazards approach to develop facility capabilities and capacities to address anticipated events.

## 1.4 Situation

### 1.4.1 Risk Assessment<sup>2</sup>

The facility conducts an annual risk assessment to identify which natural and man-made hazards pose the greatest risk to the facility (i.e., human and economic losses based on the vulnerability of people, buildings, and infrastructure). Specifics of the Vulnerability Analysis may be found in the VRM Emergency Management Plan.



The facility conducted a facility-specific risk assessment on March 10, 2022 and determined the following hazards may affect the facility's ability to maintain operations before, during, and after an incident:

- ▲ Mass Casualty Incident (Infectious)
- ▲ Mass Casualty Incident (Trauma)
- ▲ Hazardous Materials Incident
- ▲ Sewer/Water Failure
- ▲ Severe Thunderstorm
- ▲ Severe Snow Storm
- ▲ Violent Behavior

This risk information serves as the foundation for the plan—including associated policies, procedures, and preparedness activities.

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<sup>2</sup> The Hazard Vulnerability Analysis (HVA) is the industry standard for assessing risk to healthcare facilities. Facilities may rely on a community-based risk assessment developed by public health agencies, emergency management agencies, and Health Emergency Preparedness Coalition or in conjunction with conducting its own facility-based assessment. If this approach is used, facilities are expected to have a copy of the community-based risk assessment and to work with the entity that developed it to ensure that the facility's emergency plan is in alignment.

## 1.4.2 Mitigation Overview

The primary focus of the facility's pre-disaster mitigation efforts is to identify the facility's level of vulnerability to various hazards and mitigate those vulnerabilities to ensure continuity of service delivery and business operations despite potential or actual hazardous conditions.

To minimize impacts to service delivery and business operations during an emergency, the facility has completed the following mitigation activities:

- Development and maintenance of a CEMP;
- Procurement of emergency supplies and resources;
- Establishment and maintenance of mutual aid and vendor agreements to provide supplementary emergency assistance;
- Regular instruction to staff on plans, policies, and procedures; and
- Validation of plans, policies, and procedures through exercises.<sup>3</sup>

For more information about the facility's fire prevention efforts (e.g., drills), safety inspections, and equipment testing, please refer to the Van Rensselaer Manor Fire Plan.

## 1.5 Planning Assumptions

This plan is guided by the following planning assumptions:

- Emergencies and disasters can occur without notice, any day, and on any shift.
- Emergencies and disasters may be facility-specific, local, regional, or state-wide.
- Local and/or state authorities may declare an emergency.
- The facility may receive requests from other facilities for resource support (supplies, equipment, staffing, or to serve as a receiving facility).
- Facility security may be compromised during an emergency.
- The emergency may exceed the facility's capabilities and external emergency resources may be unavailable. The facility is expected to be able to function without an influx of outside supplies or assistance for 72 hours.
- Power systems (including emergency generators) could fail.
- During an emergency, it may be difficult for some staff to get to the facility, or alternately, they may need to stay in the facility for a prolonged period of time.

<sup>3</sup> Refer to the "Training and Exercises" section of this plan for additional information about pre-incident trainings and exercises.

## 2 Concept of Operations

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### 2.1 Notification and Activation

#### 2.1.1 Hazard Identification

The facility may receive advance warning about an impending natural disaster (e.g., hurricane forecast) or man-made threat (e.g., law enforcement report), which will be used to determine initial response activities and the movement of personnel, equipment, and supplies. For no-notice incidents (e.g., active shooter, tornado), facilities will not receive advance warning about the disaster, and will need to determine response activities based on the impact of the disaster.

The Incident Commander may designate a staff member to monitor evolving conditions, typically through television news, reports from government authorities, and weather forecasts.

All staff have a responsibility to report potential or actual hazards or threats to their direct supervisor.

#### 2.1.2 Activation

Upon notification of hazard or threat—from staff, residents, or external organizations—the senior-most on-site facility official will determine whether to activate the plan based on one or more of the triggers below:

- ▶ The provision of normal standards of care and/or continuity of operations is threatened and could potentially cause harm.
- ▶ The facility has determined to implement a protective action.
- ▶ The facility is serving as a receiving facility.
- ▶ The facility is testing the plan during internal and external exercises (e.g., fire drills).
- ▶ As determined by the Administrator or their designee



If one or more activation criteria are met and the plan is activated, the senior-most on-site facility official—or the most appropriate official based on the incident—will assume the role of “Incident Commander” and operations proceed as outlined in this document.

### 2.1.3 Staff Notification

Once a hazard or threat report has been made, an initial notification message will be disseminated to staff in accordance with the facility's communication plan.

Department Managers or their designees will contact on-duty personnel to provide additional instructions and solicit relevant incident information from personnel (e.g., status of residents, status of equipment).

Once on-duty personnel have been notified, Department Managers will notify off-duty personnel if necessary and provide additional guidance/instruction (e.g., request to report to facility).

Department personnel are to follow instructions from Department Managers, keep lines of communication open, and provide status updates in a timely manner.

### 2.1.4 External Notification

Depending on the type and severity of the incident, the facility may also notify external parties (e.g., local office of emergency management, resource vendors, relatives and responsible parties) utilizing local notification procedures to request assistance (e.g., guidance, information, resources) or to provide situational awareness.

The NYSDOH Regional Office is a mandatory notification recipient regardless of hazard type, while other notifications may be hazard-specific. **Table 4: Notification by Hazard Type** provides a comprehensive list of mandatory and recommended external notification recipients based on hazard type.



**Notification Recipient**

**New  
CEM**