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was provided by:



Everybody Ready 3.0

Health and Emergency Planning Handbook for Individuals, Families, and Caregivers



**FIRST
RESPONDERS
SEE BACK
COVER**

Who should use this handbook?

This handbook should be used by vulnerable populations, their families and their caregivers to help them prepare for emergencies in our area.



Vulnerable populations can include anyone who would be at a high risk for poor health outcomes during or following an emergency, due to challenges related to the ability to receive, understand, respond to, or act on instructions.

Vulnerable populations can include people who are blind or visually-impaired, children, chronically ill, Deaf or hard-of-hearing, elderly, homebound, homeless, incarcerated, limited-English proficient (LEP), medically or chemically dependent, physically disabled, pregnant or Veterans. Individuals who are lesbian, gay, bisexual, transgender or queer/questioning (LGBTQ) may also be particularly vulnerable in emergencies.

Vulnerable populations can also include individuals with intellectual or developmental disabilities (IDD) and individuals experiencing mental health challenges.

Source: Philadelphia Department of Public Health Division of Disease Control Bioterrorism and Public Health Preparedness Program Outreach Subprogram Vulnerable Populations Plan





Vulnerable populations may need to take extra steps to get ready for emergencies. People may be vulnerable to emergencies due to their **access and functional needs**.

Access and Functional Needs can include but are not limited to:

1. Communication
2. Maintaining Health
3. Independence
4. Safety, Support Services and Self-Determination
5. Transportation

Source: FEMA National Response Framework glossary

Think about functional needs when making emergency preparedness plans for yourself, your family, or your clients.

Be sure to share your emergency preparedness plans with your **support network** of friends, coworkers, neighbors, family, caregivers, and social services providers.

Who Should Use This Handbook



What should I do in an emergency?

Always follow instructions given to you by your local police, fire, health department, emergency management agency, and other government officials.



In an emergency, they may tell you to do one of four things:

- **Evacuate**
- **Shelter In Place**
- **Go to a POD (Point of Dispensing) site**
- **Find out more information**

This handbook will help you plan to evacuate, shelter in place, or go to a POD. It will also give you tips to stay safe, healthy and comfortable in an emergency.

You can use words or phrases to help you remember how to plan.

You may have heard these slogans:

- The American Red Cross says, "Get a kit. Make a plan. Stay informed."
Website: <http://www.redcross.org>
- The Philadelphia Office of Emergency Management says you should plan
"What to Have in Your Head. What to Have in Your Home. What to
Have in Your Hand."





What emergencies can happen in my area?

These symbols show the kinds of emergencies that can happen in our area. In the space next to each symbol, write what you would do (evacuate, shelter in place, go to a POD, or find out more information).



Fire



Flooding/Hurricane



Power Outage



Heat Emergency



Earthquake



Tornado



Winter Weather Event



Chemical Spill



Gas Leak



Radiation



Public Health Emergency



Community Emergency

Plan for Emergencies





Evacuate means to get out of the building or area and move to a safe location.



For evacuations, follow official instructions:

- Follow updates from trusted sources on your local radio or TV stations, social media, and notification systems.
- Grab your evacuation kit.
- Go to the evacuation site as instructed.



Take these steps to plan for an evacuation:

- Plan how to get out of your house and workplace and where to meet, and plan at least two evacuation routes from every room.
- Plan how to get out of your neighborhood and where to meet, and plan at least two neighborhood evacuation routes.
- Post evacuation maps in your home and workplace.
- Think about items you should bring with you to help you communicate, stay healthy, and stay comfortable.
- **Practice** your plans with your family, coworkers, and caregivers.





Evacuation Kit Checklist

Emergencies can happen anywhere. You should keep an **evacuation kit** in your home, one in your car, and one in your workplace. Each kit should have enough supplies to last you until you get to your evacuation site. Your kit should be in a bag or suitcase that is easy for you to carry or wheel around.

Use the checklist below to help you put together your **evacuation kit**:

- | | | |
|--|--|---|
| <input type="checkbox"/> small bottle of water | <input type="checkbox"/> cell phone charger | <input type="checkbox"/> first aid kit |
| <input type="checkbox"/> non-perishable food that meets your dietary needs | <input type="checkbox"/> small bills and change | <input type="checkbox"/> plastic trash bags and duct tape |
| <input type="checkbox"/> manual can opener | <input type="checkbox"/> important papers in a waterproof bag | <input type="checkbox"/> personal care items (eye glasses, hearing aid, etc.) |
| <input type="checkbox"/> whistle | <input type="checkbox"/> list of medications and names of doctors | <input type="checkbox"/> seasonal clothing |
| <input type="checkbox"/> flashlight and extra batteries | <input type="checkbox"/> 3-day supply of medications (if able) | <input type="checkbox"/> one pair of sneakers and two pairs of socks |
| <input type="checkbox"/> battery-powered radio and extra batteries | <input type="checkbox"/> personal hygiene items (toothbrush, toilet paper, hand sanitizer, etc.) | <input type="checkbox"/> pet care supplies (collar, leash, etc.) |
| <input type="checkbox"/> notebook, pen, and marker | | <input type="checkbox"/> books or toys |
| <input type="checkbox"/> other items to consider: | <hr/> | |

Plan to Evacuate





Shelter In Place means that all people and pets should stay inside. You may be told to shelter in place if the air outside is not safe or if there is severe weather (like a snowstorm or tornadoes).



In a shelter-in-place emergency, follow official instructions:

- Follow updates from trusted sources on your local radio or TV stations, social media, and notification systems.
- Stay inside until local authorities say it is safe to leave.
- Bring your shelter-in-place kit with you.



You should **pick a room** in your home and workplace that will be a “**shelter-in-place room**.” In the case of a tornado, the best place to go is in your basement. In all other emergencies, you should go to the room that:

- is on the first floor
- has the least number of windows
- has the least number of doors



Your bathroom might be your best shelter-in-place room. It has running water and a toilet.





Shelter-In-Place Kit Checklist

You should have one **shelter-in-place kit** for your home. Your shelter-in-place kit should have enough items for everyone in your household for at least three days. It is a good idea to keep your shelter-in-place kit in a easily accessible place. Use the checklist below to make sure you have all the things you need in your **shelter-in-place kit**:

- | | | |
|--|--|---|
| <input type="checkbox"/> water (3 gallons per person) | <input type="checkbox"/> list of medications and names of doctors | <input type="checkbox"/> personal care items (eye glasses, hearing aid, etc.) |
| <input type="checkbox"/> non-perishable food that meets your dietary needs | <input type="checkbox"/> 3-day supply of medications (if able) | <input type="checkbox"/> blankets and pillows |
| <input type="checkbox"/> manual can opener | <input type="checkbox"/> personal hygiene items (toothbrush, toilet paper, hand sanitizer, etc.) | <input type="checkbox"/> one change of clothing for each person |
| <input type="checkbox"/> whistle | <input type="checkbox"/> first aid kit | <input type="checkbox"/> pet care supplies (pet food, etc.) |
| <input type="checkbox"/> flashlight and extra batteries | <input type="checkbox"/> plastic trash bags and duct tape | <input type="checkbox"/> books or toys |
| <input type="checkbox"/> notebook, pen and marker | | <input type="checkbox"/> other items to consider (tampons, pads, diapers, infant formula, or anything you use on a daily basis) |
| <input type="checkbox"/> cell phone charger | | |
| <input type="checkbox"/> other items to consider: _____ | | |
-

Check your kits every six months and replace any expired items.

Plan to Shelter In Place





A **Public Health Emergency** is a natural or man-made disaster that can make many people sick or die. Two examples are flu outbreaks and anthrax (deadly bacteria).



In a public health emergency, follow official instructions:

- Follow updates from trusted sources on your local radio or TV stations, social media, and notification systems.
- Follow instructions.



In a public health emergency, authorities may tell you to do some of these things:

- Shelter in place.
- Practice **social distancing** (avoid being around other people).
- Go to a POD (Point of Dispensing).



A **POD (Point of Dispensing)** is a place where you would go to get emergency medicine or vaccines. The POD may be in a school gym or other large building.





POD Checklist

In a public health emergency, you may be told to go to a POD. Be prepared to stand in line. Here are things you should consider:

☐ I will follow updates from trusted sources on these local radio or TV stations, social media, and notification systems:

☐ This is how I will get to the POD:

☐ walk ☐ bike ☐ bus ☐ drive ☐ carpool ☐ other: _____

Have a backup plan in case roads are closed or bus is not running.

☐ This is what I will bring with me to a POD to help me communicate:

☐ cell phone ☐ communications board ☐ other assistive technology

☐ Since I may be at the POD for a long time, I will bring the following items to maintain my health:

☐ water ☐ protein bar ☐ comfort items





Plan for Pets and Service Animals

Many people with functional needs depend on service animals to help them with their activities of daily living.



Plan for how your animals will be cared for in an emergency:

- Add pet care items to your home evacuation kit and shelter-in-place kit.
- Talk with at least two people in your **support network** and arrange for them to check on or care for your pet if you cannot get home.
- Emergency management agencies will identify pet shelters in an emergency.
- If you have a service animal, keep information on your animal and in your home to let first responders know.
- For more tips, visit these websites:
 - www.aspca.org/pet-care/disaster-preparedness
 - www.pasart.us
 - www.avma.org/disaster





Animal Care Items Checklist

If you have pets or service animals, add the following items to your home evacuation kit and your shelter-in-place kit:

- ☐ pet food and bowl
- ☐ extra water
- ☐ photocopies of vaccination records and veterinarian contact information
- ☐ picture of you and your animal together
- ☐ medicines
- ☐ collar with an ID tag, harness, leash, and muzzle
- ☐ toys or other items
- ☐ crate or other carrier (one for each animal)
- ☐ plastic bags for clean up
- ☐ other items to keep your animal healthy and comfortable:





You may be at work when an emergency happens. Every organization should have an **Agency Emergency Plan** that outlines policies and procedures for events such as fires, power outages, or public health emergencies.



Take steps to prepare your agency for emergencies:

- Develop and practice work plans and policies for evacuations, sheltering in place, and public health emergencies.
- Work with your employees to assemble a workplace shelter-in-place kit and evacuation kits.
- Work with your clients to develop their individual plans and kits.
- Contact your local emergency management agency to find out about offerings for training for organizations in your area.





Use the space on this page to write important information about your agency's emergency plans and policies. Some examples are given below:

My workplace emergency plan can be found in this location:

I rely on instructions from my direct supervisor, who is:

If an emergency happens at work, I should immediately call:

If we have to evacuate to another building, we will meet up here:

I last practiced my workplace plan on:

Other information:





Be a Trained Volunteer!

Communities that are prepared for emergencies are more likely to recover from them. Trained emergency response volunteers strengthen communities. They can help save lives and reduce injury, trauma, and property damage. Training and volunteer opportunities are listed on the following page.





Disaster Response Training Opportunities

American Red Cross	www.redcross.org My local Red Cross chapter:
Medical Reserve Corps (MRC)	medicalreservecorps.gov My local MRC chapter:
SERVPA Volunteer Registry	www.serv.pa.gov
Voluntary Organizations Active in Disaster (VOAD)	www.nvoad.org
Community Emergency Response Teams (CERT)	www.citizencorps.gov/cert/ or contact your local Emergency Management Agency and ask about CERT in your area. My local CERT:
Community Animal Response Team (CART)	Contact your local Emergency Management Agency and ask about CART in your area. My local CART chapter:
Online FEMA Trainings	training.fema.gov
Other training opportunities:	

Help with Response





Steps to Take Following a Disaster



Resilience is the ability to recover following an emergency, and to return to normal life.

The more prepared you are **before** an emergency, the calmer you will be **during** the emergency, and the more resilient you will be **after** the emergency.

Take these steps right after an emergency:

- Check the area around you for safety.
- Follow updates from trusted sources on your local radio or TV stations, social media, and notification systems.
- Check in with members of your **support network**.
- Call your local electric or gas provider to report utility outages, gas leaks, or downed wires.
- **Only call 911 for true emergencies or dangerous situations.**

Once you are safe:

- Call your local municipality to report any damages.
- Call your home insurance company to report damages.
- Take pictures of your property to document damages.

Your local emergency management officials will be able to determine if other state or federal resources are available.

Symptoms of depression, substance abuse, and Post-Traumatic Stress Disorder (PTSD) can increase following a disaster, and there are resources that can help.

After an emergency, be sure to check in often with people in your support network. They can tell you if you are acting differently. They can also help you find resources to cope with depression, substance abuse, post-traumatic stress disorder (PTSD), and other challenges following disasters. Together, you can find out if other help is needed, including mental health resources. Keep track of your area resources on the page below.





My Recovery Resources

Use the space below to write information about your local recovery resources.

Utility company numbers:

Municipal and county numbers:

Insurance company name and number:

My insurance policy number and policy holder name:

FEMA Helpline: (800) 621-FEMA (3362)

TTY: (800) 462-7585

Website: www.fema.gov

Mental Health Resources:

Substance Abuse and Mental Health Services Administration

Disaster Help Line: (800) 662-4357

Website: <http://www.disasterdistress.samhsa.gov/>

Other disaster resources in my area:

After an Emergency



Public Alert Systems and Information



Some regional initiatives are listed below. Use them to help you prepare for emergencies. PLEASE NOTE: Not every service may be available in your area. The mention of these services does not indicate endorsement.



Need Help?
Call 2-1-1 or
1 (866) 964-7922 or visit
www.211sepa.org

Get free, confidential information or referral to health and human services including emergency food and housing, job training, childcare, health resources and support for older adults and people with disabilities. 211 may also be used following large-scaled emergencies as a portal for information.





Premise Alert
www.papremisealert.com

The Premise Alert System provides families with a method to alert first responders to the special needs of individuals in their community, by linking it with the 911 system.



Yellow Dot Program
www.yellowdot.pa.gov

The Yellow Dot Program is designed to assist in motor vehicle collisions and other medical emergencies. Placing a Yellow Dot in your vehicle's rear window alerts first responders to check your glove compartment for vital information to ensure you receive the critical medical attention you need. Visit the website to request a kit. You can also find locations where you can pick up a kit.



Vial of Life
www.vialoflife.com

The Vial of Life is designed to speak for you when you can't speak for yourself. The vial contains important medical information that can assist emergency personnel in administering the proper medical treatment.





FEMA/<Mark Wolfe>

You should only call 911 for medical emergencies or dangerous situations. To learn how to be prepared for emergencies *before* they happen, call your local emergency management agency.



Emergency Management Agencies (EMAs) work to ensure public safety involving large-scale emergencies. Some EMAs have social media resources and feeds listed on their websites as well. Phone numbers and websites for Southeastern Pennsylvania EMAs are listed below:

Put a check mark in the box next to your local EMA:

☐ **City of Philadelphia Office of Emergency Management (OEM)**

Dial 311 in Philadelphia, or 215-686-8686 from outside Philadelphia
www.phila.gov/Ready

☐ **Bucks County Emergency Management**

(215) 340-8700

www.buckscounty.org/government/EmergencyServices

☐ **Chester County Department of Emergency Services**

(610) 344-5000

www.chesco.org/des

☐ **Delaware County Emergency Management**

(610) 565-8700

www.co.delaware.pa.us/depts/emergency.html

☐ **Montgomery County Department of Public Safety**

(610) 631-6500

www.dps.montcopa.org

☐ **Other:**





Health Departments work to help people live in healthy communities. Phone numbers and websites for Southeastern Pennsylvania county health departments are listed below.

Put a check mark in the box next to your local health department or office:

☐ **Philadelphia Department of Public Health**

Dial 311 in Philadelphia, or (215) 686-8686 from outside Philadelphia

www.phila.gov/health

☐ **Bucks County Department of Health**

(215) 345-3318

www.buckscounty.org/government/HumanServices/HealthDepartment

☐ **Chester County Health Department**

(610) 344-6225

www.chesco.org/health

☐ **Delaware County Office of Intercommunity Health**

(610) 891-5311

www.co.delaware.pa.us/intercommunity

☐ **Montgomery County Health Department**

(610) 278-5117

www.health.montcopa.org

☐ **Other:** _____





Emergencies Inside and Outside the Home



Emergencies can happen that may leave you unconscious or unable to speak. First responders will look in your wallet or purse to find out who you are, what medical conditions you have, and who to contact in an emergency. **Keep important information on a Health Information Card in your wallet or purse.**



ALL ABOUT ME

Some people with functional needs may have challenges communicating with first responders and emergency caregivers.

The back of this cover provides space for you to write about any communications or medical needs you have. Fill out the back cover and hang this handbook on your refrigerator or in an easy-to-see place.



This information can help first responders communicate with you to keep you safe and comfortable in an emergency.





Health Information Cards

Fill out both copies of the Health Information Cards below and tear them out of this handbook.

Keep one of them in your purse or wallet, and give the other copy to someone in your support network.

ABOUT YOU

Fill out this card with help from your healthcare provider. Keep it with you in your wallet, purse or other safe place.

Name: _____

Phone: _____

Address: _____

Birth Date: _____

Blood Type: _____

Primary Language Spoken: _____

Allergies (medicine, food or other):

Medical Conditions (such as asthma, diabetes, epilepsy, heart condition, high blood pressure, lung problems, kidney disease, chronic hepatitis, HIV infection):

Special Needs (hearing, speaking, seeing, moving):

Special Equipment / Supplies / Other Needs:

EMERGENCY CONTACTS

1st Emergency Contact

Name: _____

Phone: _____

2nd Emergency Contact (someone who lives out of town)

Name: _____

Phone: _____

E-mail: _____

Other Important Numbers (doctor, service providers)

IN AN EMERGENCY:

- Follow your emergency plan and instructions from local officials.
- Keep this important information with you.
- Take medicines and important supplies with you if you have to leave your home.



Health Information Card

ABOUT YOU

Fill out this card with help from your healthcare provider. Keep it with you in your wallet, purse or other safe place.

Name: _____

Phone: _____

Address: _____

Birth Date: _____

Blood Type: _____

Primary Language Spoken: _____

Allergies (medicine, food or other):

Medical Conditions (such as asthma, diabetes, epilepsy, heart condition, high blood pressure, lung problems, kidney disease, chronic hepatitis, HIV infection):

Special Needs (hearing, speaking, seeing, moving):

Special Equipment / Supplies / Other Needs:

EMERGENCY CONTACTS

1st Emergency Contact

Name: _____

Phone: _____

2nd Emergency Contact (someone who lives out of town)

Name: _____

Phone: _____

E-mail: _____

Other Important Numbers (doctor, service providers)

IN AN EMERGENCY:

- Follow your emergency plan and instructions from local officials.
- Keep this important information with you.
- Take medicines and important supplies with you if you have to leave your home.



Health Information Card



YOUR MEDICINE RECORD

- Write all of the prescription drugs, over the counter drugs, vitamins, herbal supplements that you take. ■ Keep this list up to date (cross out medicines you no longer take).
- Fill it out with the help of your doctor, pharmacist or other care provider. ■ Take your medicine how it is prescribed. ■ Prepare to take medicine with you in an emergency.

MEDICINE Name of medication and strength	DOSE How many pills, units, puffs, drops per dose?	WHEN DO YOU TAKE IT? How many times a day? Morning & night? After meals?	PURPOSE Why do you take it?

YOUR MEDICINE RECORD

- Write all of the prescription drugs, over the counter drugs, vitamins, herbal supplements that you take. ■ Keep this list up to date (cross out medicines you no longer take).
- Fill it out with the help of your doctor, pharmacist or other care provider. ■ Take your medicine how it is prescribed. ■ Prepare to take medicine with you in an emergency.

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Who developed this handbook?



This handbook was developed in Spring 2012 and updated in 2014 as a joint effort of the Philadelphia Department of Public Health (PDPH), the Regional Vulnerable Populations Outreach Project (RVPOP), and our partner agencies:

- AIDS Activities Coordinating Office (AACO) Prison AIDS Project
- ActionAIDS
- African Caribbean Health Initiative Task Force
- Alzheimer's Association Delaware Valley Chapter
- American Red Cross Southeastern Pennsylvania Chapter
- Associated Services for the Blind
- Association for Macular Diseases
- Bucks County Department of Mental Health/ Developmental Programs
- Center in the Park
- Chester County Department of Emergency Services
- Fort Washington Fire Company
- Germantown Deaf Ministries Fellowship
- Hayes Manor Retirement Community
- Holy Family University
- Horizon House Inc.
- Institute on Disabilities - Pennsylvania's Initiative on Assistive Technology
- Montgomery County Department of Public Safety
- N.O.R.T.H. – Managers of the Philadelphia WIC Program
- Our Lady of Guadalupe Church in Buckingham
- Paoli-Berwyn-Malvern Lions Club
- Pennsylvania Department of Environmental Protection
- Pennsylvania Department of Health – Southeast District Office
- Pennsylvania School for the Deaf
- Philadelphia Associated Services for the Blind
- Philadelphia Coordinated Health Care (PCHC)
- Philadelphia Medical Reserve Corps
- Public Health Management Corporation (PHMC)
- Resources for Human Development/ New Foundations
- Royer-Greaves School for the Blind
- Philadelphia Office of Emergency Management (OEM)
- The Attic Youth Center
- The Southeastern Pennsylvania Medical Reserve Corps
- The Southeastern Pennsylvania Regional Task Force
- The SEPTA Advisory Committee (SAC)





Name: _____

ALL ABOUT ME

What should first responders and caregivers know about me?

YOU are the best person to know your abilities and needs before, during and after a disaster. Know how to prepare, plan, and communicate your needs and abilities. Think about the information that you will need to share with first responders, including Emergency Medical Services (EMS), police, or health professionals. Write any important information below.

What is the best way to communicate with me?

What objects **MUST** leave with me? (Service animal, medications, mobility walker?)

Who do you need to call? In Case of Emergency (ICE) contact:

Allergies:

Medical Conditions:

Medications:

Other: