

ElderCare at Home, Inc

Nurse Registry License #30211002

COMPREHENSIVE EMERGENCY MANAGEMENT PLAN FOR NURSE REGISTRIES (CEMP)

Section 381.0303(7), F.S., states, “The submission of emergency management plans to county health departments by ...nurse registry providers is conditional upon receipt of an appropriation by the department to establish disaster coordinator positions in county health departments unless the secretary of the department and a local county commission jointly determine to require that such plans be submitted based on a determination that there is a special need to protect public health in the local area during an emergency.” **It is the nurse registry provider’s responsibility to contact the county health department of each of the counties listed on the provider’s license to determine and document whether the Comprehensive Emergency Management Plan (CEMP) should be submitted to that county and, if submission is required, whether the county health department will be reviewing the plan for compliance with Florida Statutes and rules.** If the plan is to be submitted, e-mail with ‘read receipt requested’ or certified mail with return-receipt requested is recommended in order to document proof of submission.

In Compliance with: s. 400.506(15), (16), Florida Statutes
59A-18.018, Florida Administrative Code

Date: April 2, 2021

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Instructions: Answer each of the items directly on the form. Once it is completed please e-mail it to the comprehensive emergency management plan (CEMP) reviewer for your county or multi-county area. If any changes are needed, the reviewer will send comments to your nurse registry via e-mail or regular mail with a due date for corrections to be forwarded back to the reviewer. The CEMP reviewer for your area is listed at our website at http://ahca.myflorida.com/MCHQ/Licensee_Provider_Resources.shtml. Click on “Nurse Registry” Look under Emergency Management Plan for the Emergency Management Plan Review Contacts... The CEMP reviewer will let you know when your plan is approved. Remember to update the plan on an annual basis or as needed.

I. INTRODUCTION

Insert any appropriate introductory or overview remarks.

Please provide responses for each item describing how the nurse registry will provide the following:

1. The procedures on how key workers/independent contractors will be oriented and informed prior to an emergency, as to their roles and responsibilities during an emergency:

At the time key staff or independent contractors (IC) register with ElderCare at Home, they are oriented as to their role & responsibilities to the organization and/or patient during an emergency. They are provided with (and a review is done) of the **ElderCare at Home Comprehensive Emergency Management Plan**, which further outlines their duties and responsibilities.

2. The person(s) who will provide the orientation, as well as the orientation content (to include a definition of what constitutes an emergency, when the emergency management plan will go into effect, the roles and responsibilities of essential and non-essential staff, the procedures for educating patients about the emergency management plan and the special needs registry):

At time of orientation all ElderCare at Home Independent Contractors will, be oriented by a staff member of the Contractor Relations Department and will:

- complete an emergency plan that discloses the Independent Contractor's choice to provide patient care or not to provide patient care in the event of an emergency;
- be provided with definitions of what constitutes an emergency;
- discuss when the emergency plan will go into effect;
- be provided with the ElderCare at Home Comprehensive Emergency Management Plan together with Appendix B.

Full time in-house/administrative staff with ElderCare at Home will:

- be required to complete a personal emergency plan;
- be provided with definitions of what constitutes an emergency;
- be educated as to their role and responsibilities as an essential or non-essential staff member, including:
 - their role in the education of patients,
 - review of client's emergency plans,
 - identification and enrollment of clients in Special Needs Shelter,
 - the implementation of ElderCare at Home's emergency plan;
- discuss when the emergency plan would go into effect;
- be provided with the ElderCare at Home Comprehensive Emergency Management together with Appendix B.

3. The nurse registry administrative staff person responsible for orientating new independent contractors regarding their disaster related roles and responsibilities:

It is the responsibility of the staff of the Contractor Relations Department to provide orientation to all IC's with regard to their disaster roles and responsibilities.

4. The procedures for informing independent contractors on how they can work (if they choose to do so) with the local, state or county agency which will be managing and staffing special needs shelters during an emergency (pursuant to s. 456.38, F.S., and s. 381.0303, F.S.,) are as follows:

Each IC a copy of the ElderCare at Home Comprehensive Emergency Management Plan at the time of orientation, which includes a list of local, State and County agencies who will be managing and staffing special needs shelters during an emergency. They will be informed that they may contact each shelter how they can work with them should they choose to do so.

II. IDENTIFYING INFORMATION ON NURSE REGISTRY

1. Basic Information

| | |
|----------------------|---|
| Nurse Registry Name: | ElderCare at Home, Inc. NR#30211002 |
| Administrator Name: | Terrence Forgie |
| Address: | 2290 10 th Avenue North, Suite 404 Lake Worth, FL 33461 |
| Phone Number: | 561-585-0400 800-209-4342 |

2. Person in Charge During Emergency (Key Staff)

| | |
|--------------------------------------|--|
| Primary Name/Title:(Safety Liaison*) | Elayne Forgie, President/Safety Liaison |
| Home Phone Number: | |
| Work Phone Number: | 561-585-0400 800-209-4342 |
| Cell Phone Number: | 561-371-1750 |
| Alternate Name/Title: | Terrence J Forgie, Administrator |
| Home Phone Number: | |
| Work Phone Number: | 561-585-0400 |
| Cell Phone Number: | 561-398-0575 |

Insert additional alternates as appropriate.

3. Registry Owners

| | |
|--------------------|---|
| Owner Name: | Elayne & Terrence Forgie |
| Address: | 2290 10 th Avenue N., #404 Lake Worth, FL 33461 |
| Work Phone Number: | 561-585-0500 |
| Pager Number: | |
| Cell Phone Number: | Elayne 561-398-0575 Terrence 561-371-1750 |

III. CONCEPT OF OPERATIONS

Insert any appropriate introductory or overview remarks.

Please provide responses for each item describing how the nurse registry will provide the following:

A. Responsibilities in Emergency Situations

1. The chain of command to ensure continuous leadership and authority in key positions:

Elayne Forgie, President/CEO, will be the individual responsible for activating ElderCare at Home's Emergency Management Plan and serves as the NR "Safety Liaison". Under her direction, the office staff will, as assigned, work directly with the IC's, clients and family members to ensure that those client's requiring continuing service will receive it during an emergency. If the President/CEO is unavailable, the NR Administrator will be responsible for activating and implementing the Plan.

2. The procedures to ensure timely activation of the nurse registry plan and staffing of the nurse registry during an emergency:

When an Emergency Warning is issued by any Federal, State or local authority, for any county serviced by ElderCare at Home, the in-house administrative staff all clients and/or responsible parties will be contracted beginning with Special needs clients.

*Per x. 408.821 (1) F.S., revised 7/1/09: A licensee required to have an emergency operations plan must designate a "Safety Liaison" to serve as the primary contact for emergency operations.

3. The NR "Safety Liaison" is Elayne Forgie, President and CEO and serves as the primary contact for emergency operations and is the designated staff member to be involved in all emergency measures.

4. The operational and support roles of all those nurse registry administrative staff who are designated to be involved in emergency measures during times of emergency:

Special needs clients (those registered to be evacuated to a Special Needs Shelter) will be contacted and confirmation of evacuation to the Special Needs Shelter will be obtained. At the direction of the client and/or responsible party, assistance will be given in contacting the shelter and/or the transport company. Note of all assistance provided will be documented in the patient file located on HomeTrak.

Through conversation with the client and/or responsible party, any client requiring continued services and who is not registered with a Special Needs Shelter will be asked to provide the NR with a schedule of services requested during and immediately following an emergency. Each client and /or responsible party is informed that the NR will do its best to provide them with continued care during the storm however it may not be possible due the desire of the IC to not be available during this time.

Management of patients who will continue to receive services in the home, assisted living facilities (ALF) and in adult family care homes (AFCH) by the nurse registry's independent contractors during an emergency:

Each IC provided to a client is informed of the expected schedule for care and the expectation that they are to remain with the client until the emergency has passed and, as the nature of the emergency demands, that power has been restored, and an alternate IC can be assigned to assume care.

***Informing Patients Prior to an Emergency**

1. The procedures for notifying patients or patients' caregivers about the nurse registry's management plan:

All families are contacted in April to review the NR emergency plan and to obtain updates on the client's own emergency plan and the need for pre-registration in a Special Needs Shelter, where applicable.

2. The nurse registry procedures for instructing nurse registry administrative staff of their responsibilities for discussing with those patients who need continued services either in the home, ALF or AFCH (and who are not registered with the special needs registry), the patients' plan prior to and during, and immediately following, an emergency:

At the time of hire, all administrative personnel are given a copy of ElderCare at Home's Comprehensive Emergency Management Plan. The Assistant Care Manager, Community Relations personnel, and any other employee responsible for meeting with patients and/or representatives to complete new client paperwork prior to the start of care, are trained to discuss with the patient and/or the responsible party, the patients plan prior to, during and immediately following an emergency, and for continued service at home, for all patient's not choosing to register with the Special Needs Shelter.

The patient and/or responsible party, is responsible for indicating, in writing, on the Client Objectives, their preferred plan of action in the event of an Emergency. Staffing Department personnel are trained to place a copy of the patient's Client Objectives into the **ElderCare at Home Comprehensive Emergency Management Plan Binder**, which is kept in the Staffing Department.

3. The procedures for instructing nurse registry administrative staff as to their responsibility to discuss the special needs registry with those patients who will require to be evacuated to a special needs shelter (pursuant to s. 252.355, F.S.) during an emergency:

The Assistant Care Manager, Community Relations personnel, and any other employee responsible for meeting with families to complete new client paperwork prior to the start of care, are trained to discuss with the patient and/or the responsible party, the patients plan prior to, during and immediately following an emergency, and to determine if the patient will be required to be evacuated to a Special Needs Shelter.

The patient and/or responsible party will be provided with the Palm Beach County Special Needs Program brochure and the Registration form for the Palm Beach County Special Needs Registration and the NR employee will assist the patient and/or representative in completing the registration form

The NR will document in the patient's file if the patient plans to evacuate or remain at home; if the patient's caregiver or family can take responsibility during the emergency for services normally provided by independent contractors referred by the registry; or if the registry needs to make referrals in order for services to continue. If the patient has a case manager through the Community Care for the Elderly or the Medicaid Waiver programs or any other state funded program designated in law to help clients register with the special needs registry, then the nurse registry will check with the case manager to verify if the patient has already been registered. If so, a note will be made in the patient's file by the nurse registry that the patient's need for registration has already been reviewed and handled by the other program's case manager.

The NR has designated the Executive Assistant with the responsibility of sending the Special Needs Registration from, together with any and all appendix, to the *Division of Emergency Management*, immediately upon receipt.

Staffing Department personnel are required to place a copy of the Palm Beach County Special Needs Registration, together with a copy of the Client Objectives, into the **ElderCare at Home Comprehensive Emergency Management Plan Binder**.

4. The nurse registry's procedures for collecting patient registration information for the special needs registry, (pursuant to 59A-18.018 (6), F.A.C.) which must be done prior to an emergency, not when an emergency is approaching or occurring:

Upon initial contract for services, and at a minimum on an annual basis, the NR shall inform patients and patient caregivers, by the best method possible as it pertains to the person's disability, of the special needs registry and procedures for registration at the special needs registry maintained by their county emergency management office.

If the patient is to be registered at the special needs registry, the nurse registry shall assist the patient with registering, and will document in the patient's file if the patient plans to evacuate or remain at home; if the patient's caregiver or family can take responsibility during the emergency for services normally provided by independent contractors referred by the registry; or if the registry needs to make referrals in order for services to continue.

If the patient has a case manager through the Community Care for the Elderly or the Medicaid Waiver programs or any other state funded program designated in law to help clients register with the special needs registry, then the nurse registry will check with the case manager to verify if the patient has already been registered. If so, a note will be made in the patient's file by the nurse registry that the patient's need for registration has already been reviewed and handled by the other program's case manager.

Staffing Department personnel are required to place a copy of the patient's Palm Beach County Special Needs Registration, together with a copy of the Client Objectives, into the ElderCare at Home Comprehensive Emergency Management Plan Binder, at the time the patient enters into a contract with the NR.

5. The procedures on how independent contractors and nurse registry administrative staff will be informed of their responsibility to educate patients about maintaining their medication, supplies and equipment list (refer to Appendix B, Section 2):
At the time of orientation, all independent contractors will be informed of their responsibility to educate patients about maintaining their medication, supplies, and equipment list, and will be provided with "Appendix B – Information for Nurse Registry Patients".

6. The nurse registry will discuss important information with those patients registered with the special needs registry (in accordance with Appendix B, Sections 1 and 3). This will also include the limitations of services and conditions in a shelter; that the level of services may not equal what they receive in the home; that conditions in the shelter may be stressful and may even be inadequate for their needs; and that special needs shelters are an option of last resort. Specific procedures for disseminating this information include:

The Assistant Care Manager, Community Relations personnel, and any other employee responsible for meeting with patients and/or representatives to complete new client paperwork prior to the start of care, are trained to discuss the limitations of services and conditions in a shelter; as well as describing to the patient and/or representative, that the conditions at the shelter may not be equal to what they receive in their home; and that shelter conditions might be stressful and inadequate to meet their needs, and should be used as a last resort. All patients are provided with the Palm Beach County Special Needs Program brochure.

C. Notification

1. The procedures on how the nurse registry administrative staff in charge of the emergency plan implementation will receive warnings of emergency situations, including off hours, weekends and holidays:

The NR management staff consisting of the President/CEO, Administrator/Safety Liaison and Director of Contract Relations will be responsible for monitoring local T.V. news and radio broadcasts to receive warnings of emergency situations. This monitoring will continue to happen during the hours when the NR main office are closed.

Should Emergency Plans need to be implemented during hours when the NR main offices are closed the President/CEO and Administrator/Safety Liaison will contact ElderCare at Home administrative staff and implementation of Emergency Management Plans will be enacted at their direction.

2. If the nurse registry provides skilled care, the nurse registry's 24-hour contact number, if different than the number listed in the introduction, is:
The NR 24-hour contact number is 561-585-0400 for all patients receiving care, including any patient that receives skilled care.

3. The procedures on how those independent contractors who are providing services to clients registered (pursuant to s. 252.355, F.S.) will be alerted:

Once an Emergency Warning has been issued or notification of an emergency has been received, assigned NR administrative staff will make every attempt to contact each IC

working in a client's home via their clients contact telephone and then via the IC's personal phone, cell phone and via text message. IC's not working in a client's home will be contacted via their personal phones, cell phones and via text message.

4. The policies and procedures for reporting to work for staff and other key workers, when the nurse registry remains operational:

The Policy of ElderCare at Home is to provide a continuation of care to all clients as long as it is safe to do so. The NR administrative staff and IC's are expected to report to work if at all possible.

All IC's and administrative staff will be provided with all contact numbers for the NR. Before, during and immediately after administrative staff as designated by the President/CEO and Administrator/Safety Liaison will be assigned to monitor all incoming calls. Any IC or administrative staff person who is unable to report to work as assigned is required to contact designated staff with enough notice for coverage to be arranged.

5. The procedures on how patients will be alerted, and the precautionary measures that will be taken, including but not limited to independent contractors continuing the same type and quantity of services to patients registered (pursuant to s. 252.355, F.S.), unless the emergency situation is beyond the control of the independent contractor:

All clients and/or responsible parties will be alerted by telephone starting with the main contact number listed on the Client Objectives. ElderCare at Home has made a Prioritized sequence as follows:

Priority One Clients:

- Y Clients receiving live-in services.
- Y Clients receiving 12+ hour services
- Y Clients registered with a Special Needs Shelter
- Y Clients who are bed bound
- Y Clients in an ALF.

Priority Two Clients:

- Y Clients receiving 8-11 hours of care
- Y Clients with less than 8 hours and have no family local to assist with their needs and/or help in time of disaster.

Priority Three Clients:

- Y Clients who have fewer than 8 hours of care
- Y Clients that have family local and plan to be with that family member if at all possible.
- Y Clients with fewer than 8 hours and do not want Independent Contractor to help in event of a hurricane/disaster.

All IC's working in the home of a client at the time an emergency is declared will be instructed that they are to remain with their client during the duration of the emergency and that the Plan of Care for the client must be followed as much as safety possible during that time.

6. The procedures for alternate means of notification should the primary system fail (pursuant to s. 400.506, F.S.):

Should the NR be unable to reach the client and/or responsible party using the main number listed on the Client Objectives, emergency numbers and contacts will be utilized. If the NR is unable to reach a client and/or the responsible party, an administrative staff person may be assigned to drive directly to the client's home. If during the course of notification, the NR determines that a medical emergency may exist, 911 will be contacted.

In an emergency situation, television and radio outlets will be contacted should it be necessary to report the need to voluntarily cease operations of the NR.

7. The nurse registry will maintain a current prioritized list of patients that are registered (pursuant to s. 252.355, F.S.) who are located in a private residence, ALF and AFCH and who need continued services during an emergency. This list shall comply with the requirements of s. 400.506(16) (b), F.S. The procedures on how this list shall be furnished to county health departments and to local emergency management agencies, upon request (pursuant to s. 400.506(16) (b), F.S.):

The NR keeps a prioritized list of all patients who live in a private residence who will required continued service during an emergency in the **ElderCare at Home Comprehensive Emergency Plan Binder**.

The Executive Assistant is responsible for providing this list, by email, US Mail or facsimile, to the county health department and local emergency management agencies, upon request.

D. During an Emergency

1. During an emergency, when there is not a mandatory evacuation, some patients registered (pursuant to s. 252.355, F.S.), may decide to stay in their homes, ALF or AFCH. The procedures on how the nurse registry will make every reasonable attempt to assure that all patients needing continuing care will receive it, either from the independent contractor referred by the nurse registry or through arrangements made by the patient or the patient's caregiver:

The NR will make every effort to ensure continuity of care for all clients during an emergency through use of the IC normally providing care for the client. Should the NR be unable to do this, efforts will be made to find and alternate IC. Should NR be unable to provide care through these methods the client and/or responsible party will be called and authorization will be sought to allow the NR to contact another agency on their behalf.

2. The means by which the nurse registry will continue to provide the same type and quantity of services to its patients who evacuate to special needs shelters which were being provided to those patients prior to evacuation per s.400.506 (16).

The NR will keep a record of every client registered for a Special Needs Shelter and every effort will be made to ensure that each client registered with a Special Needs shelter will be provided with continuity of care and that the NR knows who is to accompany them during the evacuation. If requested by the client the NR will contact the shelter and/or transport company on their behalf. When contacted by NR administrative staff prior to evacuation, all updated information on medicine, supplies and equipment will be reviewed with the person accompanying the client to the Special Needs Shelter.

3. How the nurse registry will establish links to local emergency operations centers to determine a mechanism by which to approach specific areas within a disaster area per s. 400.506 (16)

The NR Administrator will contact the local Emergency Management Operation center following the emergency, to determine whether it is safe to approach the specific area.

Palm Beach County

Palm Beach County Emergency Management
20 South Military Trail
West Palm Beach, FL 33415
Phone: (561) 712-6321
Fax: (561) 712-6464
Website <http://discover.pbcgov.org/publicsafety/dem/Pages/default.aspx>

Broward County

Broward County Emergency Management
201 Northwest 84 Avenue
Plantation, FL 33324
Phone: (954) 831-3900
Fax: (954) 831-3376
Website: <http://www.broward.org/disaster/>

**Martin County
Emergency Management**

Martin County Emergency Management

800 Monterey Road

Stuart, FL 34994

Phone: (772) 252-789-4530

Fax: (772) 286-7626

Website:

http://www.martin.fl.us/portal/page?_pageid=350,522034&_dad=portal&_schema=PORTAL

**St. Lucie County
Emergency Management**

St. Lucie County Emergency Management

15305 W. Midway Rd

Ft. Pierce, FL 34945

Phone: (772) 462-8100

Fax: (772) 462-8484

Website: <http://www.stlucieco.gov/eoc>

**Okeechobee County
Emergency Management**

Okeechobee County Emergency Management

707 NW 6th St

Okeechobee, FL 34972

Phone: (863) 763-3212

Fax:

Website: <http://www.okeechobeeec.com/>

**Indian River County
Emergency Management**

Indian River County Emergency Management

4225 43rd Avenue

Vero Beach, FL 32967

Phone: (772) 226-3859

Fax: (772) 567-9323

Website: <http://www.ircgov.com>

E. Evacuation

1. The procedures that facilitate the efforts of the independent contractor to establish, and keep updated, medication, supplies and equipment lists (as defined in appendix B) to be kept in the homes of special needs patients:

Prior to start of care “Client Objectives” are completed by the client or family member and a copy is left in the home for the caregiver. The Client Objectives contain the names and telephone numbers of those individuals to be contacted on behalf of the client, in the event of an emergency. The Client Objectives contain the clients written instructions as to how their care should be provided in the event of an emergency. Each patients Client Objectives are reviewed at least annually, or whenever there has been a change in the patient’s condition. All shelter information, medication, supplies and equipment shall be discussed with the client and/or caregiver at the time the Client Objectives are updated.

2. The procedures for educating and helping the patient and caregiver, e.g. family members, friends, etc., understand that the caregiver is to remain with the patient in the special needs shelter, and to take the list established by the independent contractor as well as other necessary items to the special needs shelter when there is mandatory evacuation underway due to the emergency:

The Assistant Care Manager, Community Relations personnel, and any other employee responsible for meeting with families to complete new client paperwork prior to the start of care, are trained to discuss with the patient and/or the responsible party, the patients plan prior to, during and immediately following an emergency, and to determine if the patient will be required to be evacuated to a Special Needs Shelter. The employee will provide the patient and caregiver with Appendix B – Information for Nurse Registry Patients, and advise them that the caregiver is to remain with the patient in the special needs shelter.

3. The resources necessary to continue essential care or services or referrals to other organizations subject to written agreement including how the nurse registry will continue to provide care to ALF and/or AFCH patients who relocate in the same geographic service area or relocate outside the geographic service area:

The NR will provide in its written agreements with other organizations, how the NR will continue to provide care to patients and how to relocate patients in the same geographic service area or how to relocate the patient outside of the geographic service area.

4. The procedures for contacting the emergency operation center after the disaster to report on the registry’s damage, if any, and their availability to continue services to their patients in the special needs shelter:

Following the emergency, the Administrator shall contact the emergency operations center to report any damage, and the NR availability to continue services to patients in the special needs shelter.

F. The Patients Return Home

1. The procedures on how the nurse registry will re-establish contact with patients in their homes, ALF or AFCH in order that the independent contractor or alternate independent contractor can resume provision of care:

Once the emergency is concluded, the caregiver and client may return to the client's home. Upon arrival the caregiver will call the NR and report any damages to the home as well as any changes in the client's condition.

For those clients that do not receive nurse registry services during the emergency, the nurse registry shall call them and determine whether or not they wish to resume care as soon as weather, road and availability of IC's permits.

2. The procedures on how the nurse registry will re-establish contact with independent contractors in order that they may re-start patient care:

Once the emergency is concluded the NR will contact all IC's and determine their desire and availability to resume care to clients.

3. The procedures on how the nurse registry will provide or arrange for prioritizing care should the emergency result in fewer independent contractors being available immediately following the disaster:

Following an emergency, should the nurse registry determine that there are more clients that have requested services than there are IC's willing to accept referrals and provide care, the NR shall prioritize referrals to clients in the following manner:

- Clients with a diagnosis of Alzheimer's disease, dementia, or any other physical or mental condition that require the client to receive full assistance with their activities of daily living and their instrumental activities of daily living. This includes clients requiring 24-hour care and all clients who require assistance with self-administration of medications.

IV. APPENDICES

The appendices that follow are provided in support of the nurse registry's comprehensive emergency management plan.

APPENDIX A: AGREEMENTS AND UNDERSTANDINGS

List on this page and insert copies on following pages, to include any mutual agreements entered into between the nurse registry and any local, state and county entities having responsibility during a disaster.

No Mutual Agreements

APPENDIX B: INFORMATION FOR NURSE REGISTRY PATIENTS

Insert copy on next page.

APPENDIX B: INFORMATION FOR NURSE REGISTRY PATIENTS

The following information should be supplied by the nurse registry to those patients registered with the special needs registry, so they will be prepared prior to an evacuation to a special needs

Please note: The special needs shelter should be used as a place of last refuge. The evacuee may not receive the same level of care received from independent contractors in the home, and the conditions in a shelter might be stressful.

(1) If the patient has a caregiver¹, the caregiver must accompany the patient and must remain with the patient at the special needs shelter.

(2) The following is a list of what special needs patients need to bring with them to the special needs shelter during an evacuation:

- Bed sheets, blankets, pillow, folding lawn chair, air mattress
- The patient's medication including the dose, frequency, route, time of day and any special considerations for administration, supplies and equipment list, including the phone, beeper and emergency numbers for the patient's physician, pharmacy and, if applicable, oxygen supplier; supplies and medical equipment for the patient's care; Do Not Resuscitate (DNRO) form, if applicable;
- Name and phone number of the patient's nurse registry
- Prescription and non-prescription medication needed for at least 5 to 7 days; oxygen for 5 to 7 days if needed.
- A copy of the patient's plan of care, if applicable
- Identification and current address
- Special diet items, non-perishable food for 5 to 7 days and 1 gallon of water per person per day
- Glasses, hearing aides and batteries, prosthetics and any other assistive devices
- Personal hygiene items for 5 to 7 days
- Extra clothing for 5 to 7 days
- Flashlight and batteries
- Self-entertainment and recreation items, like books, magazines, quiet games.

(3) Shelterees need to know the following:

- If the patient has a caregiver, the caregiver(s) shall be allowed to shelter together in the special needs shelter. If the person with special needs is responsible for the care of individuals without special needs, those persons may also shelter together.
- The shelter caregiver will have floor space provided. The caregiver must provide his or her own bedding.
- Service dogs are allowed in the shelter. However, check with your local Emergency Management office to see if other pets are permitted.
- Bring personal snacks, drinks, and any special dietary foods for 72 hours. It is possible only sparse meals will be provided.
- Caregivers who regularly assist the patient in the home are expected to continue to do the same care in the shelter.

¹ Caregivers can be relatives, household members, guardians, friends, neighbors and volunteers.

APPENDIX C: SUPPORT MATERIAL

List on this page and insert copies on following pages.

1. [Palm Beach County Special Needs Registration](#)
2. [Broward County Special Needs Application](#)
3. [Martin County Special Needs Registration](#)
4. [St. Lucie County Special Needs Registration](#)
5. [Okeechobee County Special Needs Registration](#)
6. [Indian River County Special Needs Registration](#)
7. [Florida Department of Health – Contact Information for Submitting Comprehensive
Emergency Management Plan](#)