

Emergency Preparedness

**How Well Prepared are Older
Adults to Survive the First 72
Hours of an Emergency?**

A Report of the Area Agency on Aging 1-B
Advisory Council Emergency Preparedness
Ad Hoc Study Committee

NOVEMBER 2007

**Area
Agency on
Aging 1-B**
Advocacy • Action • Answers on Aging



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Table of Contents

Introduction	1
Executive Summary	2
Action Plan	4
Findings	7
Conclusions	11
Recommendations	12
Appendix A: Preparing for Disaster	16
Appendix B: Emergency Preparedness Survey	19

Introduction

The Area Agency on Aging 1-B (AAA 1-B) was established in 1974 under a federal mandate of the Older Americans Act and the state Older Michiganians Act to serve the needs of over 465,000 older adults who reside in the southeast Michigan counties of Livingston, Macomb, Monroe, Oakland, St. Clair, and Washtenaw. The AAA 1-B is dedicated to: 1) educating and advocating on issues of concern to older persons; 2) allocating federal and state funding for social and nutritional services; 3) developing new older adult services; 4) coordinating activities with other public and private organizations; and 5) assessing the needs of vulnerable older persons and linking them with community-based long term care services. The AAA 1-B depends upon a strong network of direct service providers to achieve its mission of preserving the independence, dignity, and quality of life of older adults, family caregivers, and adults with disabilities.

The AAA 1-B Advisory Council helps achieve the agency mission by identifying needs and concerns of Region 1-B residents, and planning and developing appropriate actions that assure older persons have access to high quality, efficient and effective services. Each summer, the AAA 1-B Advisory Council establishes an ad hoc study committee to explore selected issues of concern to older adults. For 2007, the Advisory Council chose to address the question, "How well prepared are older adults to survive the first 72 hours of an emergency?". To help answer it the AAA 1-B Ad Hoc Study Committee called on several emergency planning and preparedness experts from across the region that included representatives from law enforcement, local and county emergency management systems (EMS), and fire & rescue. This report is an outcome of that investigation and contains significant findings as well as recommendations for the AAA 1-B to affect change.



Executive Summary

The terrorist attack of September 11, 2001; the Great Blackout of 2003; Hurricane Katrina in 2005; and the wildfires sweeping through southern California are all stark reminders that emergencies can and will happen at any time and any place. Unfortunately, though these events have served to raise awareness of the need for individuals to prepare for emergencies, they seem to have done little to motivate people to actually take preparatory action. Data from national surveys indicate that despite these devastating events, most Americans still remain woefully unprepared.

Data from a post-Katrina survey conducted in October 2005 by Macro International Incorporated, an Opinion Research Corporation company (ORC Macro) for the U.S. Department of Homeland Security Office of Community Preparedness indicate that only 17% of Americans have taken all the steps necessary to adequately prepare for an emergency. Data from a survey conducted by the Council for Excellence in Government between May 4 and June 10, 2006 called the Public Readiness Index (PRI) indicate that only 8% of Americans are adequately prepared. The PRI also found that nearly 1/3 of Americans have taken no action to prepare for an emergency or disaster. Of those Americans that took at least some action, those age 65 and older were the least prepared.

Because of these statistics and the fact that emergency planning experts indicate that during the first forty-eight to seventy-two hours of an emergency most individuals will need to fend for themselves, the Area Agency on Aging 1-B (AAA 1-B) Advisory Council established an Ad Hoc Study Committee to investigate the state of readiness of older adults in Region 1-B to survive the early stages of an emergency. Specifically, the Committee was convened to address the following question: "How well prepared are older adults in Region 1-B to handle an emergency?" with particular emphasis on surviving the first 72 hours.

From June through September, 2007 the Ad Hoc Study Committee held a series of meetings at which it heard from several experts and stakeholders, including representatives from city and county emergency management offices, county sheriffs' departments, county health departments, community mental health authorities, county Emergency Management System (EMS) offices, and the American Red Cross. As a result of these meetings, the Committee learned that:

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- Effective emergency preparedness and response requires a strong public-private partnership. In the event of an emergency, EMS will rely heavily on its partners - local public and private/non-profit agencies - to ensure that the immediate needs of those in danger are addressed.
 - The initial task of those that first respond to an emergency (first responders) is to determine the extent of the emergency and the resources needed to effectively address it. Attention and effort will be directed first toward individuals that are in immediate, life-threatening danger and then toward ensuring that those whose jobs it is to provide assistance during emergencies (i.e., firefighters, police officers, physicians, nurses, EMS, etc.) are able to do so as safely as possible.
 - All emergencies start as local emergencies. If the demands of the emergency grow to exceed the capacity of local personnel to meet them, then assistance will be requested from escalating levels of government - city, county, state, federal - until sufficient resources are in place to effectively address the emergency.
 - A majority of Region 1-B adults, including older adults, are not adequately prepared to survive the first 72 hours of an emergency. Expert testimony to the Committee indicated that only approximately 20% of adults have taken the necessary steps to properly prepare for an emergency.
 - Little is known regarding the emergency preparedness status of home-bound older adults. These individuals tend to live alone and are often socially isolated. The ability to survive the first 72 hours of an emergency, therefore, is critical for this segment of the population.

Based on a careful analysis of these findings, the Ad Hoc Study Committee developed a series of recommendations designed to encourage and help older adults better prepare for emergencies. To facilitate implementation of these recommendations the Committee devised an Action Plan that identifies for each recommendation a strategy, responsible parties, target audience, and expected outcome. This Action Plan is presented immediately following this summary. The Committee believes that through implementation of these recommendations, older adults will enhance and improve their ability to survive the first 72 hours of an emergency.

ACTION PLAN TO HELP OLDER ADULTS BETTER PREPARE FOR EMERGENCIES

I. FINDING/ISSUE				
<p>A survey conducted in December 2005 by Macro International, Inc., an Opinion Research Corporation company (ORC Macro) for the U.S. Department of Homeland Security, indicated that approximately 70% of adults (including older adults) do not feel adequately prepared to survive the first 72 hours of a long-term emergency or disaster. Reasons given for lack of preparation include:</p> <ul style="list-style-type: none"> • Belief that nothing an individual can do would be effective (fatalism). • Don't know how to prepare. • Lack of time. • Too costly. • Low likelihood of an emergency occurring. • Belief that emergency service personnel or other first responders will rescue them. 				
A. Recommendation	Strategy	Collaborative Partners	Target Audience	Expected Outcome
<p>The AAA 1-B should strongly encourage older adults to take personal responsibility for their own emergency preparedness. The AAA 1-B should identify and promote use of tested strategies that move individuals through the process of disaster preparedness from awareness to intention to action.</p>	<p>The AAA 1-B should promote "Do 1 Thing!", a twelve month emergency preparedness program developed and tested by the Tri-County Office on Aging to address the most common barriers to preparedness by:</p> <ul style="list-style-type: none"> • Developing and distributing at least annually a communiqué to the Region 1-B aging network and senior centers on "Do 1 Thing!" that includes a link to the "Do 1 Thing!" website. • Distributing "Do 1 Thing!" printed promotional materials at the AAA 1-B caregiver fairs. • Writing and publishing one or more articles in Access at least annually on emergency preparedness that references and promotes "Do 1 Thing!" • Adding a link on the AAA 1-B website to the "Do 1 Thing!" website. 	<p>AAA 1-B, Tri-County Office on Aging, Region 1-B aging network, Senior centers</p>	<p>Older adults, Family members, Caregivers</p>	<p>More Region 1-B senior centers and other aging network organizations will disseminate information on emergency preparedness activities, which will encourage older adults to better prepare for the first 72 hours of an emergency/ disaster.</p>

ACTION PLAN TO HELP OLDER ADULTS BETTER PREPARE FOR EMERGENCIES

B. Recommendation	Strategy	Collaborative Partners	Target Audience	Expected Outcome
<p>The AAA 1-B should develop and pilot a hands-on emergency/disaster preparedness workshop targeted toward older adults that guides participants through the process of personally preparing for an emergency. Participants will develop and implement a personal emergency preparedness plan.</p>	<p>The AAA 1-B should work in collaboration with the City of Southfield Emergency Management Department to modify and customize the city's existing disaster preparedness workshop to address the emergency preparedness needs of older adults. The modified workshop should be piloted/tested to determine its effectiveness in helping older adults better prepare for emergencies/disasters.</p>	<p>AAA 1-B, City of Southfield Emergency Management Department</p>	<p>Older adult residents of Southfield and/or their caregivers.</p>	<p>The Older Adult Emergency Preparedness Workshop will be validated as a tool that successfully helps older adults increase their preparedness to survive the first 72 hours of a long-term emergency/ disaster.</p>
C. Recommendation*	Strategy	Collaborative Partners	Target Audience	Expected Outcome
<p>The AAA 1-B should facilitate the use of the Older Adult Emergency Preparedness Workshop referenced in Issue I, Recommendation B (see above) by aging network service providers and other interested stakeholders throughout Region 1-B.</p>	<p>The AAA 1-B should provide "train the trainer" training to aging network service providers and other interested stakeholders on how to conduct the Older Adult Emergency Preparedness Workshop referenced in Issue I, Recommendation B (see above).</p>	<p>AAA 1-B</p>	<p>AAA 1-B aging network service providers, senior centers, & other interested stakeholders</p>	<p>AAA 1-B aging network service providers and other interested stakeholders will be better prepared to assist older adults in preparing for disasters and other emergencies.</p>
D. Recommendation	Strategy	Collaborative Partners	Target Audience	Expected Outcome
<p>The AAA 1-B should develop, produce, and distribute a short video that features an older adult going through the process of planning and preparing for a long-term emergency/disaster.</p>	<p>The AAA 1-B Communications Department should take the lead in writing, directing, producing, and distributing the video, assembling any necessary expertise it needs to successfully complete the project.</p>	<p>AAA 1-B Communications Department, AAA 1-B Advisory Council, AAA Board of Directors</p>	<p>Older adults, Family members, Caregivers</p>	<p>Older adults will better understand the process involved in preparing for a long-term emergency or disaster and be better prepared to survive the first 72 hours.</p>

ACTION PLAN TO HELP OLDER ADULTS BETTER PREPARE FOR EMERGENCIES

II. FINDING/ISSUE					
Expert testimony to the AAA 1- B Advisory Council Emergency Planning Ad Hoc Study Committee indicated that little information is available regarding the emergency/disaster preparedness status of home-bound older adults.					
A. Recommendation	Strategy	Collaborative Partners	Target Audience	Expected Outcome	Expected Outcome
The AAA 1-B should assess the state of emergency/disaster readiness of home-bound older adults in its region.	The AAA 1-B should identify a valid survey currently being used to measure emergency/disaster readiness and distribute it to a subset of its home delivered meals clients.	AAA 1-B, Macomb County Senior Nutrition Program	Older adult home delivered meal clients	The AAA 1-B will gain a better understanding of how well prepared home-bound older adults are to survive the first 72 hours of a long-term emergency or disaster and the factors related to their level of preparedness.	
B. Recommendation	Strategy	Collaborative Partners	Target Audience	Expected Outcome	Expected Outcome
The AAA 1-B should analyze data on the state of readiness of home-bound older adults to survive the first 72 hours of a long-term emergency or disaster.	The AAA 1-B should collaborate with home delivered meal providers to develop and implement a plan to increase home-bound older adults preparedness to survive the first 72 hours of a long-term emergency or disaster.	AAA 1-B, Home delivered meal providers	Older adult home delivered meal clients	More home-bound older adults will be better prepared to survive the first 72 hours of a long-term emergency/ disaster.	

*Issue I, Recommendation C is based on the assumption that the Older Adult Emergency Preparedness Workshop referenced in Issue I, Recommendation B (see above) is validated as a tool that successfully helps older adults increase their preparedness to survive the first 72 hours of a long-term emergency/disaster.

Findings

I. Effective emergency preparedness and response requires a strong public-private partnership.

According to Livingston County Emergency Management Director Richard Winsett, the fundamental goal of any emergency management system is to mitigate, prepare for, respond to, and recover from major threats to lives, livelihoods, and property. For true emergency preparedness to become a reality, there must be concern, interest, support, and participation by everyone in the community.

In the event of an emergency, the emergency management system will rely heavily on its partners - local public and private/non-profit agencies - to ensure that the immediate needs of those in danger are addressed. Identified in advance, these partners are viewed as experts in their particular fields with respect to understanding the emergency needs of their particular clientele and may be called upon during an emergency to provide assistance.

Individual citizens also have a key role to play in this partnership. Emergency management personnel from across the region informed the Committee that if individuals capable of taking care of themselves during the initial stages of an emergency actually did so because they had made advance preparations, rescue personnel would be able to better allocate their resources during emergency situations. Hence, the primary role of citizens in this partnership is to adequately and properly prepare in advance for emergencies.

The Federal Emergency Management Agency in cooperation with the American Red Cross has identified steps individuals should take to adequately prepare for an emergency, which are excerpted in Appendix A.

II. The initial task of those who first respond to an emergency (first responders) is to determine the extent of the emergency and the resources needed to effectively address it.

Mike Loper, Emergency Management Specialist for Oakland County informed the Committee that during the early stages of an emergency, the role of emergency per-

sonnel, in addition to attending to persons whose lives are in immediate danger, is to mitigate or lessen the impact of the emergency. Included as part of this responsibility is ensuring that the infrastructure and systems currently in place to protect public safety and provide assistance to those unable to help themselves stay intact. Hence, depending upon the emergency, an initial response may consist of making sure that roads are clear of debris; that hospitals have electric power; or that first responders are provided with anti-viral medication.

The initial response to an emergency, therefore, is designed to first “help the helpers” so that they can then help those who aren’t able to help themselves. This process often takes time (up to 72 hours), hence Mr. Loper stressed that it is imperative for individuals capable of taking care of themselves and their families during an emergency to make the necessary plans and take the requisite actions to prepare. Failure to do so could mean the difference between a positive or negative outcome.

III. All emergencies start as local emergencies.

Emergency management personnel from Livingston County indicated that all emergencies start locally and are usually identified through a call to the 911 system. Emergencies are dynamic and fluid events and often change as conditions change. The nature, scope, and extent of a given emergency, therefore, are not expected to remain static. Consequently, emergency responders utilize an incident command structure.

The incident commander or person in charge of the emergency decides how to best manage the emergency and determines the assets and resources needed to handle it. The professional who serves as the incident commander is determined by the nature of the emergency, and thus may be from the health department, sheriff’s department, fire department or other public safety organization. The incident command may also be a joint command consisting of two or more public safety professionals from different disciplines.

As emergencies escalate and increase in scope and size, the incident commander may as needed involve assets from a larger geographic ring surrounding the emergency. Most communities have mutual aid agreements that allow them to assist each other during emergencies when, due to the extent of the emergency, local assets become insufficient to meet the demands of the emergency. These mutual aid agreements can and often cross county as well as state lines. For this additional help to be

provided, however, it must first be requested. It is the responsibility of the incident commander to make the request.

IV. A majority of Region 1-B adults, including older adults, are not adequately prepared to survive the first 72 hours of an emergency.

Data from a post-Katrina survey conducted in October 2005 by ORC Macro for the U.S. Department of Homeland Security Office of Community Preparedness indicates that only 17% of Americans have taken all the steps necessary to be adequately prepared for an emergency. This finding is supported by data from a survey conducted between May 4 and June 10, 2006 by the Council for Excellence in Government called the Public Readiness Index (PRI) that indicates only 8% of Americans are adequately prepared for an emergency. With regard to Region 1-B, expert testimony revealed that at best only 20% of adults in the region are prepared. In terms of age groups, older adults (age 65 and older) are the least prepared.

Data from the PRI, the ORC Macro survey, and expert testimony revealed that adults who don't prepare, don't do so for the following reasons:

- Belief that nothing an individual can do would be effective.
- Don't know how to prepare.
- Lack of time.
- Too costly.
- Low likelihood of an emergency occurring.
- Belief that emergency service personnel or other first responders will rescue them.

V. Little is known regarding the emergency preparedness status of home-bound older adults

Emergency management personnel from across Region 1-B indicated that little is known about the emergency preparedness status of the region's home-bound older

adults. These individuals tend to live alone and are often socially isolated, therefore, their ability to survive the first 72 hours of an emergency on their own without adequate preparation is tenuous.

Conclusions

Despite recent catastrophic events and the efforts of local, state, and federal emergency management personnel, Americans of all ages - and in particular older adults - remain astonishingly unprepared to survive the early stages of an emergency. If individuals capable of taking care of themselves during the first few hours of an emergency prepared in advance for that possibility, fewer negative outcomes would result should an emergency occur.

To help Michigan's older adults better prepare for emergencies, the 2007 AAA 1-B Advisory Council Emergency Preparedness Ad Hoc Study Committee conducted a thorough and extensive review of the findings presented in this report. From this analysis, the Committee developed a set of recommended actions designed to help older adults acquire the knowledge and skills they need to effectively prepare for emergencies. The ultimate goal of these recommendations is to increase the number of older adults in Region 1-B that are adequately prepared to survive the first 72 hours of an emergency.

Recommendations

Despite the terrorist attack of September 11, 2001; hurricane Katrina and other recent disasters, Americans have yet to take the necessary steps to adequately prepare for such large scale emergencies. In an effort to understand and explain why Americans remain unprepared, the U.S. Department of Homeland Security Office of Community Preparedness, in conjunction with ORC Macro, developed the Citizen Corps Personal Behavior Change Model for Disaster Preparedness (PDP Model).

The PDP Model incorporates two prominent social science models: the Extended Parallel Process Model (EPPM) and the Stages of Change/Transtheoretical Model. The intent of the model is to identify various segments of the population for specific and targeted outreach efforts in an attempt to affect positive behavior change, namely engagement in recommended emergency preparedness behaviors.

According to the model, individuals focus their response to threats in two general ways. They either engage in solution-based behaviors aimed at controlling the danger (e.g. making a plan, preparing an emergency supply kit, etc.) or in non-solution based behaviors aimed at controlling fear (e.g. denial, rationalization, escapism, etc.). Which of these two general behaviors an individual elicits, depends upon two factors: his/her belief that an effective response to the emergency exists and his/her perceived ability to successfully affect this response. The model further indicates that the degree to which an individual engages in these behaviors is dependent upon his/her state of readiness to take action.

According to the model, a person's readiness to act can be placed into one of five categories or stages (see table 1). These stages indicate an individual's readiness to attempt, make, or sustain behavior change. For an individual to sustain a changed behavior, he/she must move through each of these five stages. Helping move an individual from one stage to the other requires

TABLE 1: Stages of Behavior Change

Stage	Description
Precontemplation	In this stage an individual has no intention of taking action and has not even considered or thought about taking action.
Contemplation	In this stage an individual has begun to think about taking action and intends to act, but has not yet engaged in any behavior directed toward taking action.
Preparation	In this stage an individual has begun engaging in behaviors designed to ready himself/herself to act such as gathering information, but has still not yet engaged in the intended action.
Action	In this stage an individual is actively engaged in the intended action.
Maintenance	In this stage the intended action has been successfully integrated into the individual's regular, ongoing behavior.

different strategies and approaches specific to the particular stage in which he/she is categorized. Consequently, each of the recommendations contained in this report were developed with this in mind.

The recommendations that follow were developed in full consideration of the PDP Model and have been designed to increase the number of Region 1-B older adults prepared to survive the first 72 hours of an emergency.

Recommendation #1. The AAA 1-B should strongly encourage older adults to take personal responsibility for their own emergency/disaster preparedness.

As indicated in the Findings section of this report, the primary reasons given by individuals for not adequately preparing for emergencies pertain to either lack of information or inaccurate information. Many individuals mistakenly believe that in the event of an emergency, emergency personnel will rescue them, hence, they don't need to prepare. Many also mistakenly believe that any preparations they take would not adequately protect them during an emergency or believe the likelihood of an emergency occurring is so low that preparing for one would be a waste of time, money, and/or effort.

Consequently, the Committee recommends that the AAA 1-B conduct an educational campaign that dispels many of the myths associated with emergency planning and that encourages older adults to take personal responsibility for their own emergency preparedness. The Committee has identified an ideal vehicle for this educational campaign called "Do 1 Thing!".



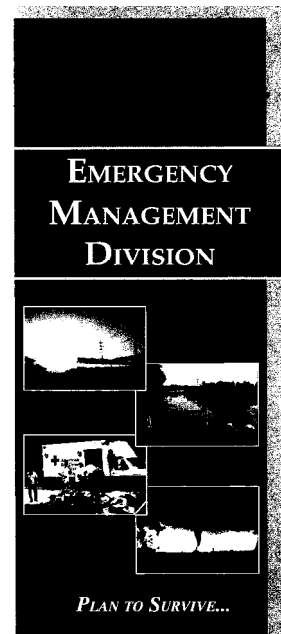
"Do 1 Thing!" is a twelve month emergency preparedness program developed and tested by the Tri-County Office on Aging. This program, in addition to addressing the above, addresses another often cited barrier to emergency preparedness: lack of time. The program encourages individuals, families, and businesses to take small steps toward being prepared for an emergency by focusing on a different preparedness topic each month and presenting easy, and often inexpensive ways to become better prepared. Additional information about the program can be found at www.do1thing.us.

Recommendation #2. The AAA 1-B should develop and pilot a hands-on emergency/disaster preparedness workshop target toward older adults that guides participants through the process of personally preparing for an emergency.

According to the Council for Excellence in Government, of those adults not prepared for an emergency, 21% indicate that they have not done so because they don't know how to prepare. Consequently, the Committee recommends that the AAA 1-B develop a workshop targeted toward older adults that provides them with the assistance and skills they need to adequately and effectively prepare for an emergency.

During testimony to the Committee, Frank Coutts, Director of the City of Southfield Emergency Management Department expressed a willingness to work collaboratively with the AAA 1-B to modify and customize Southfield's existing disaster preparedness workshop to specifically address the needs of older adults. The modified workshop would be piloted and tested to determine its effectiveness in helping older adults better prepare for emergencies.

In the event that the workshop is validated as a tool that successfully helps older adults prepare for emergencies, the AAA 1-B should facilitate its use by promoting it to aging network service providers, senior centers and other interested stakeholders throughout the region. This would be accomplished by providing "train the trainer" training on how to properly conduct and implement the workshop.



Recommendation #3. The AAA 1-B should develop, produce, and distribute a short video that features an older adult going through the process of planning and preparing for any emergency/disaster.

Data from the Council for Excellence in Government indicates that of those individuals that have not yet prepared for an emergency, 18% have not done so because it takes too much time while 16% report that it costs too much money. To dispel these beliefs, the Committee recommends that the AAA 1-B Communications Department take the lead in writing, directing, producing, and distributing a video that features an older adult

going through the process of planning and preparing for an emergency. The video will provide accurate information regarding the length of time it takes to prepare for an emergency and the cost, and will vividly demonstrate that older adults can acquire the skills needed to adequately prepare for an emergency.

Recommendation #4. The AAA 1-B should assess and analyze the state of emergency/disaster readiness of home-bound older adults in its region to survive the first 72 hours of an emergency/disaster.

Because little is known about the state of emergency preparedness of home-bound older adults in Region 1-B, the Committee recommends that the AAA 1-B survey its home delivered meals clients to assess their state of emergency preparedness. Based on the results of this sample survey, the AAA 1-B should collaborate with its home delivered meal providers to develop and implement a plan to improve the emergency preparedness of the region's home-bound older adults. A survey instrument developed for this purpose by the Macomb County Community Services Agency Senior Nutrition Program patterned after those used by ORC Macro and the Council for Excellence in Government can be found in Appendix B.

Appendix A

Excerpts from the
Federal Emergency Management Agency & American Red Cross Booklet:

PREPARING FOR DISASTER Four Steps to Preparedness

A. GET INFORMED

- Contact your local emergency management office or local American Red Cross Chapter to gather the information you will need to create a plan.
- Identify the specific hazards that threaten your community (e.g. tornadoes, blizzards, floods) and your risk from those hazards.
- Learn about community response plans, evacuation plans, and designated emergency shelters where you live, work, and play.
- Find out how local authorities will warn you of a pending emergency and provide you with information during and after the emergency.

B. MAKE A PLAN

- Meet with your family to review the information you gathered about community hazards and plans.
- Choose an out-of-town contact and make sure everyone knows his/her phone number.
- Decide where to meet in the event you become separated from your family.
- Complete a family communication plan that includes contact information for family members, work, school, and your out-of-town contact as well as other important information (a form for this purpose can be found at www.ready.gov or www.redcross.org/contactcard).

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- Establish escape routes and designate safe places. Be sure everyone in your family knows the best escape routes out of your home as well as where the safe places are in your home for each type of emergency (i.e., tornado, chemical spill, etc.).
 - Prepare for different hazards since the actions you would take to protect yourself from a tornado are different than those you would take for a fire.
 - Store vital family records and other important documents (e.g. birth and marriage certificates, social security cards, passports, wills, etc.) in a safe deposit box or other safe location.
 - Take a first aid and CPR class.
 - Plan for your pets.
 - Practice your plan (at least two times a year).

C. ASSEMBLE AN EMERGENCY SUPPLY KIT

- An emergency supply kit is a collection of basic items a person (and their pets) would need to stay safe and be more comfortable during and after an emergency. Emergency supply kit items should be stored in a portable container as close as possible to the exit door and reviewed annually.
- Prepare an emergency supply kit for each vehicle owned, as well as for work.
- A list of recommended emergency kit supplies can be found at <http://www.ready.gov/america/getakit/index.html>

D. MAINTAIN YOUR PLAN

- Review your plan every six months and quiz your family about what to do.
- Conduct fire and emergency evacuation drills on a regular basis.
- Check food and medicine supplies for expiration dates and discard, or replace stored water and food every six months.

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- Test your smoke alarms monthly, change the batteries every year, and replace every ten years.
 - Read the indicator on your fire extinguisher(s) and follow the manufacturer's instructions to recharge.

Appendix B

MACOMB COUNTY MEALS ON WHEELS EMERGENCY PREPAREDNESS SURVEY

SECTION I

	YES	NO
Do you feel prepared to shelter in place for 72 hours if there were a weather related emergency (i.e., blizzard)?		
Do you have emergency supplies to assist in sheltering in place that are stored in a designated location in your home?		
Please mark yes for all emergency supply items which you have:		
3 day supply of non-perishable food		
3 day supply of bottled water		
First aid kit		
Flashlight		
Battery operated radio		
Extra batteries		
Personal hygiene items		
Prescription medications		
Clothing		
Blankets		
Other (please list)		
If you don't have emergency supply items in your home, what is the main reason?		
I don't think I am at risk for an emergency.		
I don't know how to put an emergency kit together.		
It takes too much time to gather.		
It costs too much money.		

**MACOMB COUNTY MEALS ON WHEELS
EMERGENCY PREPAREDNESS SURVEY**

SECTION II

	YES	NO
Do you feel prepared to evacuate your home if there were a natural disaster related emergency (i.e., fire)?		
Do you have a bag of emergency supplies to take with you in the event of an evacuation?		
Please mark yes for all the emergency supplies which you have in place for an evacuation:		
Cash		
Emergency contact numbers		
Personal hygiene items		
Prescription medications		
Clothing		
First aid kit		
Flash light		
Battery operated radio		
Other (please list)		
If you don't have emergency supply items in your home, what is the main reason?		
I don't think I am at risk for an emergency.		
I don't know how to put an emergency kit together.		
It takes too much time to gather.		
It costs too much money.		