How to Write Your Facility Emergency Action Plan (FEAP)

A Guide for Facility Managers

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For more information about emergency preparedness at UMBC, please visit:
https://police.umbc.edu/services/emergency-preparedness/

- Purpose

- EM Program elements and key points of the plan.

- Plan contents and getting started.

- Using content controls.

- Follow the checklist actions for each section of the plan.
  - ❑ Complete the provided actions for each section.
  - ❑ Some fields, items, or entire sections may not apply to your facility. Other information may need to be added based on your requirements. Imbedded instructions describe how to handle these situations.
  - ❑ Sensitive information not appropriate for this plan may be documented elsewhere. Indicate when this is required in the relevant fields.

- Online document sharing and storage.
  - – [Completed Plans will remain in Box](#).
  - – You will have sharing access to your facility's folder.
  - – Keep copies/updates of your draft and final plans here.
 - – Add any other supporting documents needed.

- Facilitate workplace, learning space, and living area readiness.
- **Every** UMBC facility will have a FEAP. Your plan will:
  - **Centralize** all EM information unique to your facility in one document.
  - Improve **readiness** to take immediate action and mitigate incident impacts.
  - Improve **situational awareness** of your facility's unique, complex systems and operations.
  - Capture **institutional knowledge** by documenting essential details using a standardized method.

We may determine that a facility does not need a written plan based on its operations, activities, or occupants.
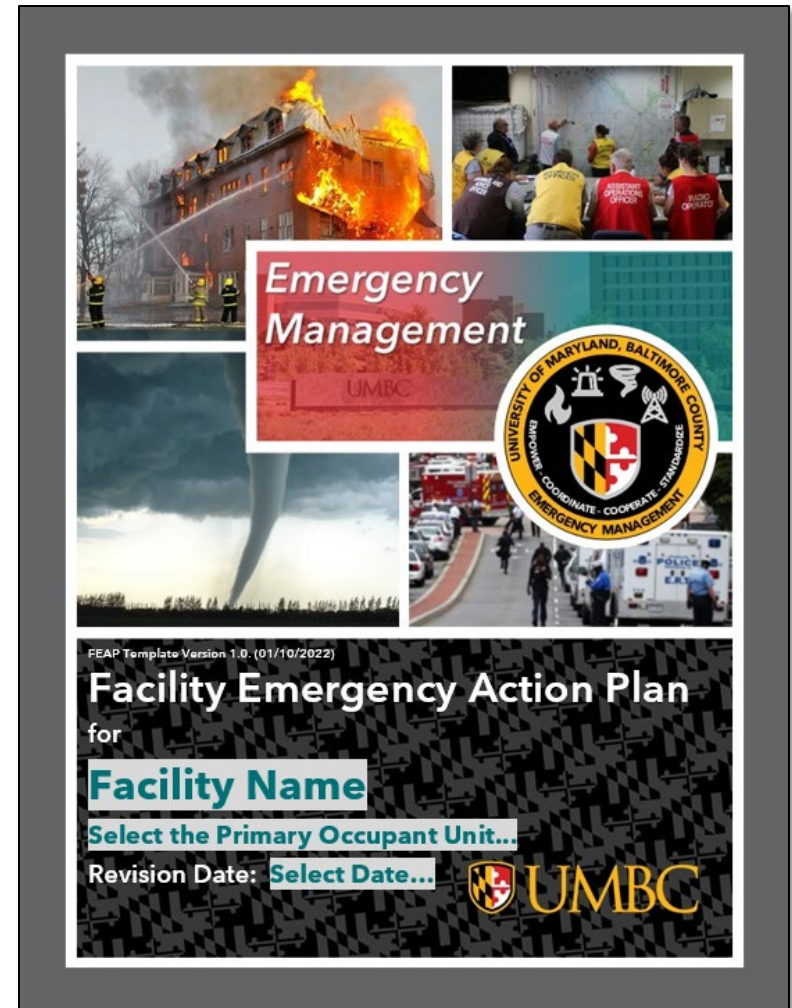
- Where does the FEAP fit in the EM program?
  - 3 EM leadership levels: Executive, Strategic, and Tactical.
  - Each has 3 components: Preparedness, Incident Management, and Crisis Management.
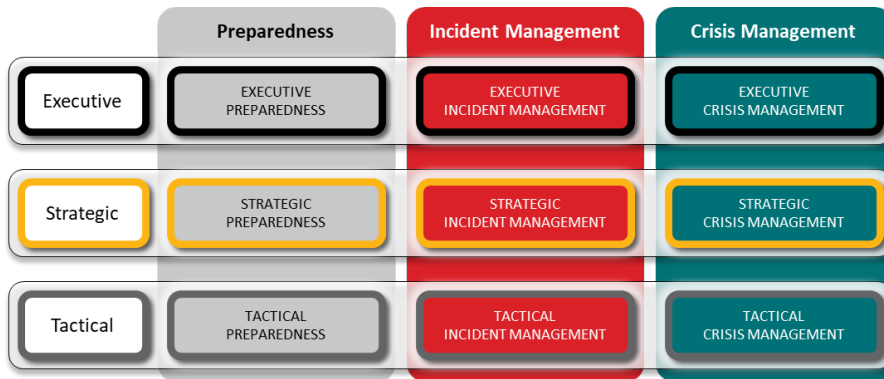
  - Level + Component = EM program element.
  - Your FEAP is a *Tactical Preparedness* element of our EM framework as described in the Base Emergency Operations Plan (EOP).
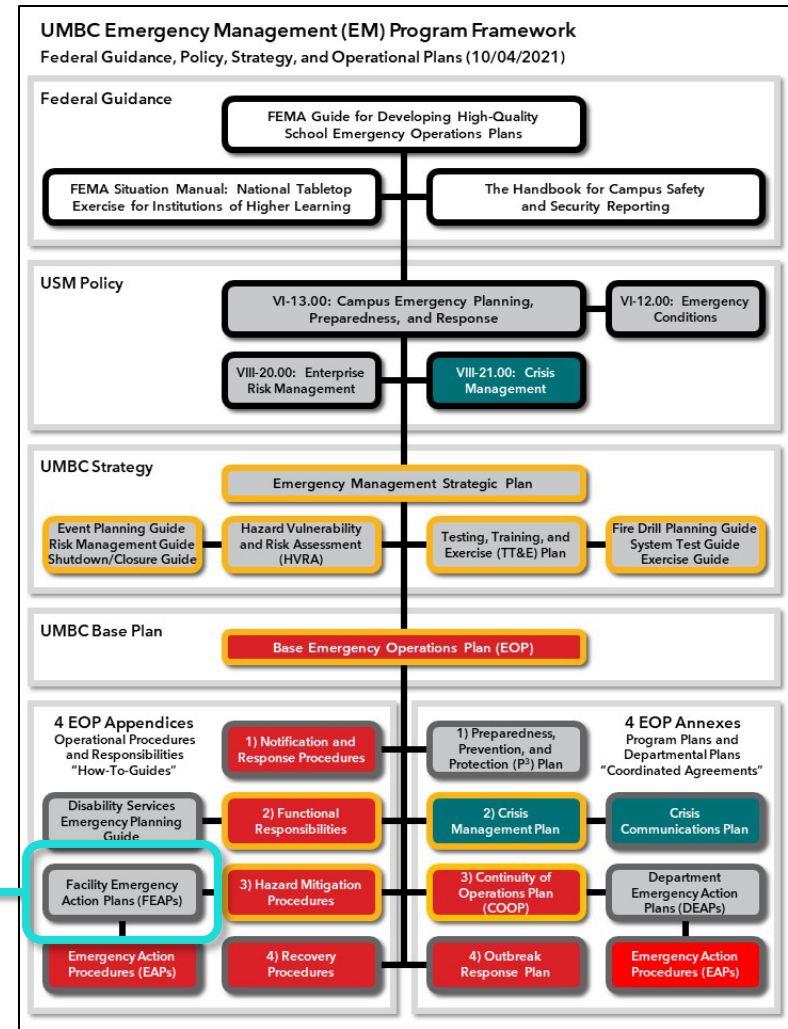
- **Version Control:** V1.0. (01/10/2022). You will be notified of any changes to the template to incorporate revisions.
- The FEAP is a reference guide that provides situational awareness.
- Does not change or dictate any office's internal procedures.
- A **standardized** format to facilitate EM training products and services.
- Informs Emergency Action Procedures (EAP) development.
- Bookmarks facilitate navigation.
- Questions or recommendations? Use the online FEAP Help Form.

- 5 main parts:

| Part 1	Part 2	Part 3	Part 4	Part 5
Introduction	**Responsibilities**	**Mitigation**	**Response**	**Recovery**
• Purpose	• Occupant Units	• Advanced Notice or Immediate Danger	• Establishing On-Scene Command	• Communicating the All-Clear
• Objectives	• Building Emergency Action Team (BEAT)	• After-Hours Response	• Facilitating First Responder Actions	• Recovery Objectives
• Requirements	• Supervisors	• Primary Emergency Action Procedures	• Warnings, Communications, and Radios	• "Safe-to-Reoccupy" Determination
• Terms and Definitions	• Classroom and Lab Instructors	• Tests, Training, and Exercises	• Moving Occupants to Safety/Managing Prolonged Response	
• References	• Physical Assistance for Access and Functional Needs		• Safety During Protests and Demonstrations	

- 9 attachments:

1	2, 3, & 4	5	6	7	8	9
HAZMAT Management and Quick Response Guide	**Resource, Research, and Asset Protection**	**Emergency Action Procedures (EAPs)**	**Floor Plans and Evacuation Routes**	**Life Safety, Security, and Utilities**	**Emergency Preparedness Information**	**Summary of Changes**
• Emergency Notifications	2. Critical Resources	• Evacuation Actions		• Fire Detection Systems	• Description, Operations, and Location	
• Response Materials	3. Research Materials	• Shelter-in-Place Actions		• Fire Alarm Notification Systems	• Entry, Egress, and Parking	
• Clean-Up Procedures	4. High Value Assets	• Active Assailant/Workplace Violence Actions		• Fire Suppression Systems	• Generators and Emergency Power	
		• Medical Emergency Actions		• Security Systems	• Known Hazards and Safety Concerns	
		• BEAT Roster and Immediate Actions		• Utility Shutoff Systems	• Occupant Units and Totals	

- Development of your FEAP may be a long-term project.
  - The good news…most of your plan has already been written for you.
  - Your job…add the knowledge unique to your facility.
  - If you don't know…investigate.
- Start by accessing your Box folder and downloading the template.
  - Save the template as your draft using the convention: "*Draft FEAP Building Number Building Name DDMMYYYY*."
  - Example: ***Draft FEAP 851 Biological Sciences Building 12152021***
  - Review the template, find a section you are knowledgeable about, and start writing.

- Question/answer fields throughout the document specify required information.
  - Directions for each field are listed in **comments**.
  - **Highlighted** fields let you to add facility-specific info to the template. Click on the field and type your text.
  - If you delete your text, the field will revert to template form…***be careful not to delete the field itself***.
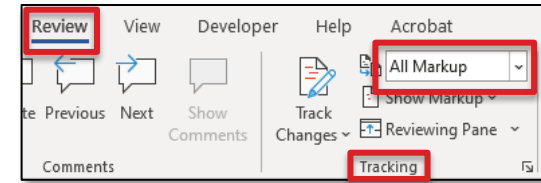
To see comments, go to the **Review** tab and in the **Tracking** section select **All Markup**.

1. Tests. **Describe which systems at this facility are regularly tested and how often tests are scheduled**.

Figure 3.3. System Test Schedule

Systems Tested	Testing Schedule	Test Objectives
System	**Testing Schedule**	**Testing Objectives**

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1. Tests. Describe which systems at this facility are regularly tested and how often tests are scheduled.

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Figure 3.3. System Test Schedule. For each system listed, provide a testing schedule and objectives.

  - Fields with **Select…** (or **Select…**) provide a predetermined list of options. If the list does not include an option you need, inform EM.

Unoccupied Floors	⁝Tunnels	floors: **List any unoccupied floors, including subfloors/penthous**
Service Tunnels	**Select…**.▼	
PA System	Select…	
	This facility IS CONNECTED to campus service tunnels and mechanical areas	
HAZMAT	This facility IS NOT connected to campus service tunnels or mechanical areas	

Comments

John Schaible July 27, 2021
Service Tunnels: Use the drop-down list to select:
- This facility IS CONNECTED to campus service tunnels and mechanical areas, or
- This facility IS NOT connected to campus service tunnels or mechanical areas.

- 3 actions:
  - ❑ Provide the facility name (as stated on the UMBC Master List of Building Designations).
  - ❑ Select primary occupant unit.
  - ❑ Select the date of the current revision.

- 2 actions :
  - ☐ Facility Manager review and signature.
  - ☐ **Designated Official (DO)** or Designee Approval: Use the template memo to designate the DO.

The DO for emergency preparedness: This is the **senior University official** from **the primary occupant unit** at this facility. This role **may be delegated to a designee** selected by mutual agreement of occupant units. The DO (or designee) is responsible for organizing the BEAT and ensuring team members attend training. During emergency conditions, the DO oversees immediate BEAT safety actions prior to first responder arrival. **The DO does NOT have Incident command** during emergency conditions.

- Facility Profile: "Vitals" for your building.
  - Provides situational awareness, 2 actions:
  - ❑ Provide required information.
  - ❑ Select appropriate options from the drop-down lists.
- Emergency Contacts, 2 actions:
  - ❑ Describe how 911 is used.
  - ❑ List additional emergency contacts as needed.

Name/Number	**Facility Name** (**Abbreviation**) **Bldg. Number**
Primary Use	**Summarize this facility's primary purpose or activity**.
Criticality	**(Select...)**.
Location and Patrol	**Select...**. Police Patrol: **Select...**.
Normal Hours	**HH:MM AM/PM** to **HH:MM AM/PM**, **Day** – **Day**. **(Select...)**.
Primary Occupant	**State the College, Division, or Office with primary operational responsibility**.
Occupant Units	**List other Colleges, Divisions, Offices, and external partners with a physical presence at this facility (i.e. occupants, workspace, or material resources)**.
Total Occupants	Normal Hours: **Approximate Number**. After Hours: **Approximate Number**.
Occupied Floors	**Number** floors: **List all occupied floors and approximate total occupants on each**.
Unoccupied Floors	**Number** floors: **List any unoccupied floors, including subfloors/penthouse**.
Service Tunnels	**Select...**.
PA System	**(Select...)**.
HAZMAT	**(Select...)**.
Natural Gas	**(Select...)**.
Emergency Power	**(Select...)**.
Critical Resources	**(Select...)**.
Research Materials	**(Select...)**.
High Value Assets	**(Select...)**.
Classrooms/Labs	**(Select...)**.
Assembly Areas	Primary: **State the primary evacuation assembly area**. Alternate: **State the alternate evacuation assembly area**.
Shelter Areas	Primary: **State the primary indoor shelter location**. Alternate: **State the primary indoor shelter location**.
Elevators	**If present, list their numbers or designations, and locations, or state "N/A"**.
Stairwells	**If present, list their numbers or designations, and locations, or state "N/A"**.
Fire Panel Location	**State the location of the main fire panel for this facility**.
AEDs	**If present, list any AEDs and their specific locations, or state "N/A"**.
Assistance Resources	**If present, list any resources for occupant accessibility, or state "N/A"**.

- 4 actions:
  - ❑ 1.E.8. List any other references that apply to specific operations at this facility.
  - ❑ 1.E.8. Add the reference with internet link.
  - ❑ 1.E.8. Provide the long title and publication date.
  - ❑ 1.E.9. – 1.E.??? Copy/paste additional lines as needed.

- 5 actions:
  - ❑ 2.A.1. Provide the primary occupant unit.
  - ❑ 2.A.2. Provide any additional occupant units.
  - ❑ 2.A.3 – 2.A.??? Copy/paste additional lines as needed
  - ❑ Figure 2.2. Specify any assistance resources to support occupants with accessibility needs.
  - ❑ Figure 2.2. List any assistance resources and their locations. Copy/paste additional lines as needed.

- 5 actions:
  - ❑ 3.B.1. Describe any occupants and activities after-hours.
  - ❑ 3.B.2. Describe any special concerns for emergencies after normal hours of operation.
  - ❑ Figure 3.1. List additioinal emergency contacts, names, titles, and phone numbers. Copy/paste additional lines as needed.
  - ❑ 3.D.1. Describe which systems are regularly tested and how often tests are scheduled.
  - ❑ Figure 3.3. For each system listed, provide a testing schedule and objectives. Copy/paste additional lines as needed.

- 13 actions:
  - ❑ Select Patrol Post (confirm with University Police Dispatch).
  - ❑ 4.A.6. Describe any additional unique actions to establish on-scene command.
  - ❑ 4.B.1. Explain how Police may escort first responders to this facility.
  - ❑ 4.B.2. Coordinate with ESH to describe the nearby fire lanes.
  - ❑ 4.B.3. Indicate if there are nearby bollards.
  - ❑ 4.B.4. If this facility has an on-site Knox Box, describe where it is located.
  - ❑ 4.B.5. Explain first responder access to confined spaces.
  - ❑ 4.B.6. Indicate access to campus service tunnels.
  - ❑ 4.B.7. State locations for mechanical rooms. Describe equipment present.
  - ❑ Figure 4.1. Select the warning modes.
  - ❑ 4.C.3. Indicate if additional radio channels are in use.
  - ❑ Figure 4.3. Indicate additional department channels in use. Copy/paste additional lines as needed.
  - ❑ 4.C.4. Indicate users of UMBC issued radios.

- 6 actions:
  - ❑ Figure 4.4. Provide callsigns and contacts for users of UMBC issued radios. Copy/paste additional lines as needed.
  - ❑ 4.C.5. Indicate users of other radios that do NOT use UMBC channels.
  - ❑ Figure 4.5. Provide callsigns and contacts for users of these other radios. Copy/paste additional lines as needed.
  - ❑ 4.D.1. Explain how officials determine the need to move occupants away from an assembly area. State any pre-identified safe havens and procedures to ensure continued accountability.
  - ❑ 4.D.4. State any predetermined relocation sites for occupants of this facility. Include procedures for notifying occupants of this decision.
  - ❑ 4.E.6. Describe any additional actions for a protest or demonstration.

- 4 actions:
  - ❑ 5.B. Summarize recovery objectives to return to normal conditions.
  - ❑ 5.B.1. – 5.B.??? For each objective, specify requirements or actions necessary to achieve the objective. Copy/paste additional lines as needed.
  - ❑ 5.C. Summarize conditions or actions necessary to determine if this facility is safe to reoccupy.
  - ❑ 5.C.1. – 5.C.??? For each condition or action, specify requirements or actions necessary to achieve the condition. Copy/paste additional lines as needed.

- 2 actions:
  - ❑ Figure A1.1. Provide HAZMAT Classifications and Locations.
  - ❑ Ensure there is a line for every floor. Provide a separate line for different hazard classes found on the same floor. Copy/paste additional lines as needed.

Figure A1.1. HAZMAT Classifications and Locations at this Facility

Floor	Hazard Class and Name	Hazard Division	Location on this Floor
1	(Select...)	(Select...)	Location
1	(Select...)	(Select...)	Location
2	(Select...)	(Select...)	Location
2	(Select...)	(Select...)	Location
3	(Select...)	(Select...)	Location
3	(Select...)	(Select...)	Location

- 6 actions:
  - ❏ Indicate if resources **_critical_** to UMBC operations are/are not present.
  - ❏ Figure A2.1. Identify critical resources and owners. Specify If each resource can be moved or relocated. Copy/paste additional lines as needed.
  - ❏ 2.A. Summarize the protection plan for each resource in Figure A2.1.
  - ❏ 2.A.1. – 2.A.??? For each protection action listed, describe the activity necessary for this action. Copy/paste additional lines as needed.
  - ❏ 2.B. Summarize the removal or relocation plan for each resource in Figure A2.1.
  - ❏ 2.B.1. – 2.B.??? For each removal or relocation action listed, describe the activity necessary for this action. Copy/paste additional lines as needed.

Critical resources will be described in the Department Emergency Action Plan (DEAP) and the University Continuity of Operations Plan (COOP). Critical resources are designated as **_mission essential_** and necessary for the continuation of University, College, Division, or Office operations.

- 6 actions:
  - ❑ Indicate if **research materials** are/are not present.
  - ❑ Figure A3.1. Identify research materials and owners. Specify If materials can be moved or relocated. Copy/paste additional lines as needed.
  - ❑ 3.A. Summarize the protection plan for materials in Figure A3.1.
  - ❑ 3.A.1. – 3.A.??? For each protection action listed, describe the activity necessary for this action. Copy/paste additional lines as needed.
  - ❑ 3.B. Summarize the removal or relocation plan for materials in Figure A3.1.
  - ❑ 3.B.1. – 3.B.??? For each removal or relocation action listed, describe the activity necessary for this action. Copy/paste additional lines as needed.

Not all research materials may need to be included. Coordinate with the owning College, Division, Office, or external partner to **appropriately** prioritize inclusion.

- 6 actions:
  - ❑ Indicate if **high value assets** are/are not present.
  - ❑ Figure A4.1. Identify assets and owners. Specify If each asset can be moved or relocated. Copy/paste additional lines as needed.
  - ❑ 4.A. Summarize the protection plan for each asset in Figure A4.1.
  - ❑ 4.A.1. – 4.A.??? For each protection action listed, describe the activity necessary for this action. Copy/paste additional lines as needed.
  - ❑ 4.B. Summarize the removal or relocation plan for each asset in Figure A4.1.
  - ❑ 4.B.1. – 4.B.??? For each removal or relocation action listed, describe the activity necessary for this action. Copy/paste additional lines as needed.

High value assets are those NOT identified as critical to UMBC operations and are NOT research related, though, if impacted, could have significant monetary consequence for the University or an external partner in terms of replacement or repair. Not all assets may need to be included in this plan. Coordinate with the owning College, Division, Office, or external partner to **appropriately** prioritize inclusion.

- Emergency Action procedures (EAPs) help reduce incident impacts.
  - These are your immediate actions.
  - Use for reference, preparedness, and training.
  - During an incident? **Use as guides only if safety and time allow**.
  - EAPs can be printed and posted or distributed for training and review.
  - EAPs can also be found on the [UMBC Emergency Preparedness website](#).
- **Four** primary EAPs focus on the most likely threats to occupant safety and security:
  - Evacuations.
  - Shelter-in-place.
  - Active assailant/workplace violence.
  - Medical emergencies.

An additional EAP covers positions, contact information, and immediate actions for the Building Emergency Action Team (BEAT).

- 8 actions:
  - ❑ Section 3. Secondary Notifications (table). Item 3) Provide contact information for the BEAT Leader.
  - ❑ Section 3. Secondary Notifications (table). Item 4) Provide contact information for the Facility Manager.
  - ❑ Primary assembly area location. Describe the primary assembly area's location and indicate its boundaries.
  - ❑ Primary assembly area safety. Describe any potential hazards or safety concerns near the primary assembly area.
  - ❑ Insert primary assembly area map (see instructions in comments).
  - ❑ Alternate assembly area location. Describe the alternate assembly area's location and indicate its boundaries.
  - ❑ Alternate assembly area safety. Describe any potential hazards or safety concerns near the alternate assembly area.
  - ❑ Insert alternate assembly area map (see instructions in comments).

- 8 actions:
  - ❑ Section 3. Secondary Notifications (table). Item 3) Provide contact information for the BEAT Leader.
  - ❑ Section 3. Secondary Notifications (table). Item 4) Provide contact information for the Facility Manager.
  - ❑ Primary shelter location. Describe the primary shelter location and indicate its boundaries.
  - ❑ Primary shelter location safety. Describe any potential hazards or safety concerns near the primary shelter location.
  - ❑ Insert primary shelter location floor plan.
  - ❑ Alternate shelter location. Describe the alternate shelter location and indicate its boundaries.
  - ❑ Alternate shelter location safety. Describe any potential hazards or safety concerns near the alternate shelter location.
  - ❑ Insert alternate shelter location floor plan.

- No actions necessary.
  - The Active Assailant EAP is meant as *a reference guide* for training and preparedness *ONLY*.
  - Occupants are not expected to use this guide for immediate actions during an actual workplace violence incident.
  - EAPs can be printed and posted or distributed for training and review.

- 3 actions:
  - ❑ Section 2. Secondary Notifications (table). Item 3) Provide contact information for the BEAT Leader.
  - ❑ Section 2. Secondary Notifications (table). Item 4) Provide contact information for the Facility Manager.
  - ❑ AED Quantity and Location on Each Floor (table). Ensure there is a line in the table for every floor of this facility. Copy/paste additional lines as needed. For each listed, state the number of AEDs on the floor and each AED's location.

- Team Positions and Contact Information. For each team member *identified*, provide:
  - ❑ Last and first name.
  - ❑ Room number.
  - ❑ Department, College, or Office.
  - ❑ Title.
  - ❑ UMBC E-mail address.
  - ❑ Office and cell phone numbers.
  - ❑ Distribute BEAT immediate actions to those identified. Separate training will be forthcoming.

Team vacancies are expected and okay…fill as many volunteer positions as you can.

- Actions:
  - ❑ Individual Floor Safety Plan Graphics. Pages are available in this document to add graphics for a subfloor, a ground floor, and a 1st through 10th floor as well as a roof/penthouse plan. Delete any of these pages that are not needed.
  - ❑ Use the drop-down list to select the appropriate floor name on each page.
  - ❑ Floor plans completed by FM will be available in your facility's Box folder.
  - ❑ Follow instructions in comments.

- 24 actions:
  - ❑ 7.A.1. State how manual fire alarm pull stations function. Insert picture of a pull station for reference. Describe how an evacuation is initiated.
  - ❑ Figure A7.2. Ensure there is a line for every floor of your facility. State the number of manual pull stations on each floor and their locations.
  - ❑ 7.A.2. State locations and describe activation of smoke detectors/strobes.
  - ❑ 7.A.3. State locations and describe activation of heat detectors.
  - ❑ 7.A.4. Describe how any other fire detection systems are managed/function.
  - ❑ 7.B.1. Describe fire alarm audio/visual signals and how often they are tested.
  - ❑ 7.B.2. Describe fire alarm control panel location and access.
  - ❑ 7.B.3. Provide the fire alarm annunciator static map and digital panel location.
  - ❑ 7.B.4. State where the DMP is located and who has access.
  - ❑ 7.B.5. Describe how any other fire notification systems are managed/function.
  - ❑ 7.C.1. Describe where any FDCs are located.
  - ❑ 7.C.2. Describe where hydrants are located closest to this facility.
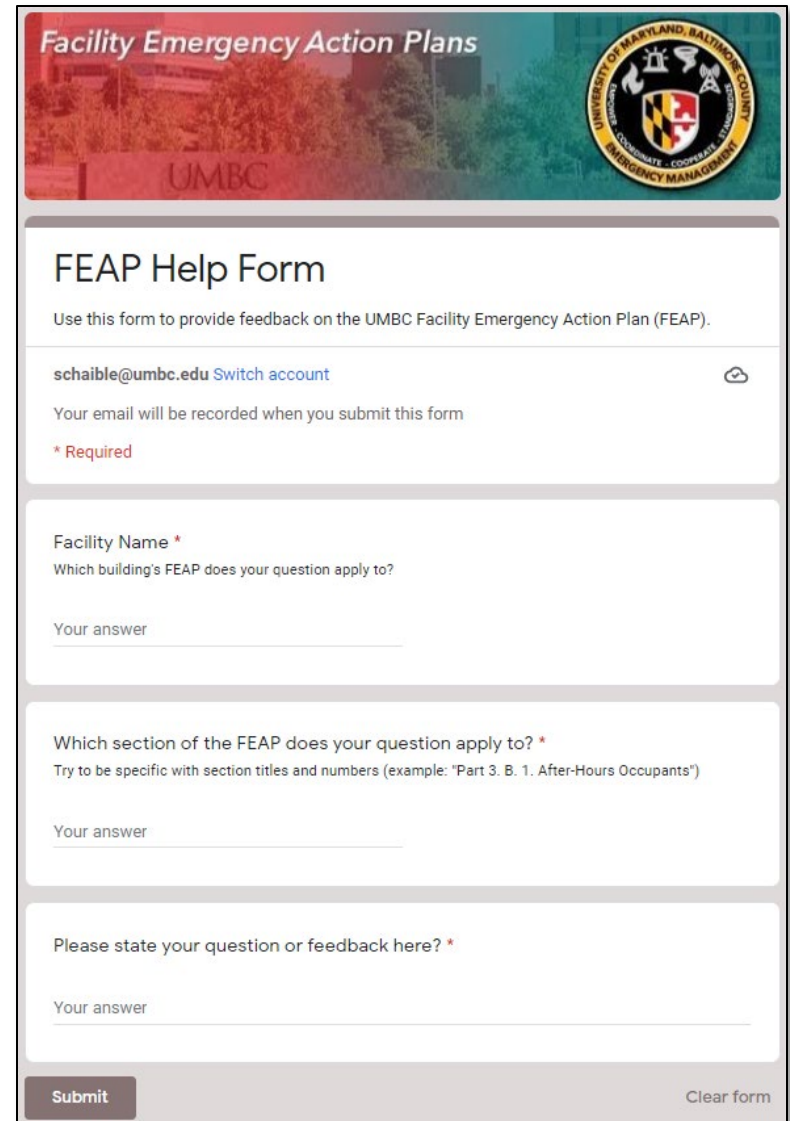 - ❑ 7.C.3. State locations and describe activation of sprinkler systems.

- ❑ Figure A7.3. Ensure there is a line for every floor of your facility. State the number of fire extinguishers on each floor and their locations.
- ❑ 7.D.1. Describe campus card access control.
- ❑ 7.D.2. Describe lock and key access control.
- ❑ 7.D.3. State if there is digital surveillance and who monitors the system.
- ❑ 7.D.4. State if there are emergency "ring-down-lines" (direct to Police dispatch).
- ❑ 7.D.5. Describe any localized alarms NOT connected to the DMP that do NOT relay to Police dispatch. State areas monitored, who is responsible, distinctive audio/visual signals used, and the testing schedule.
- ❑ 7.D.6. Describe other security systems present. State areas monitored, who is responsible, distinctive audio/visual signals used, and the testing schedule.
- ❑ 7.E.1. Indicate natural gas presence/use. Describe shutoff functions if present.
- ❑ 7.E.2. Describe water shutoff functions.
- ❑ 7.E.3. Describe electricity shutoff functions.
- ❑ 7.E.4. Describe other utility shutoff functions.

- 22 actions:
  - ❏ Figure A8.1. Insert campus map excerpt (see instructions in comments).
  - ❏ 8.A.1. Describe the facility's location on the campus map.
  - ❏ 8.A.2. Provide a physical description of the facility.
  - ❏ 8.A.3. Describe normal, day-to-day-operations at the facility .
  - ❏ 8.B. Provide a general description of how occupants enter and exit the building under normal conditions.
  - ❏ 8.B.1. Provide information on elevators.
  - ❏ 8.B.2. Describe how alarm system activation impacts elevators.
  - ❏ 8.B.3. State if/how elevators remain operational during a power outage.
  - ❏ Figure A8.2. Insert picture of the elevator emergency panel and call button.
  - ❏ 8.B.4. State the number of stairways, how they are numbered, and their locations.
  - ❏ Figure A8.3. Ensure there is a table for every designated emergency exit. Follow instructions in comments.

- ❑ 8.B.6. Describe on-site parking.
- ❑ 8.B.7. Indicate adjacent street parking, numbers/name of nearby parking lots.
- ❑ 8.B.8. Describe on-site loading dock location(s).
- ❑ 8.B.9. State any procedures to notify owners to move vehicles during an emergency.
- ❑ 8.C.1. Indicate presence of emergency backup power capabilities.
- ❑ 8.C.2. Provide information on generators in use at the facility.
- ❑ 8.C.3. State any other sources of emergency power in use at the facility.
- ❑ Figure A8.4. Ensure there is a line for each system supported by generators or backup emergency power. Describe how emergency power is managed.
- ❑ 8.D. Describe any local known hazards or safety concerns other than HAZMAT.
- ❑ Figure A8.5. Ensure there is a line for each floor of the facility. List units on each floor, their approximate number of occupants, and approximate total number of occupants on each floor.
- ❑ Figure A8.6. Ensure there is a line for each floor of the facility. List classroom and lab locations on each floor (see instructions in comments).

- Major changes in content or structure require a revision review with signature from the Designated Official.

- Minor changes do not require a full review or a new revision date.

- Ensure all changes are listed on this attachment.

- Provide a new row in the bale for each change made and state

  ❑ The date the change was made.

  ❑ The page and section number of the change.

  ❑ A BRIEF change description.

  ❑ For each documented change, select "in draft" or "approved."

- Use the online FEAP Help Form.
  - https://docs.google.com/forms/d/e/1FAIp QLScebWvVWk5WeNnFNCUNS1xL4JH- 6cnQBcoUcDobdtZ9--ECxFg/viewform
  - EM will provide replies.
  - Questions and answers will be collected on a Google Sheet for review.