

We Have a Plan....

NOW WHAT?

Objective

Identify actions you can take to:

- Meet regulatory requirements

- Fine-tune plan details

- Incorporate best practices

- Integrate into the planning and response community in your area

Four Core Elements of Emergency Preparedness

Risk Assessment and Emergency Planning

Communication Plan

Policies and Procedures

Training and Testing



Risk Assessment

Hazards likely in geographic area

Including:

Care-related emergencies

Equipment and Power failures

Interruption in Communications, including cyber attacks

Loss of all/portion of facility

Loss of all/portion of supply chain



Emergency Preparedness Plan

Designated Disaster Coordinator
Continuity of Operations
Situational awareness monitoring
Release of information
Actions and responsibilities of staff
Mode of communication and procedures
Triage and tracking of clients
Provide client/family with information
Orient and train staff annually
Review and exercise annually



Fine Tuning

Introduction Statement: Does your emergency plan provide a brief overview of your organization?

Type & level (acuity) of care provided by your organization (i.e. medically dependent, assistance, independent, hospice, home care/inpatient)?

Purpose Statement: Does your emergency plan include an overview of the purpose and what types of hazards that will be applied during specific situations?

Does the purpose statement clearly state who the plan applies to (e.g. staff, residents, patients, family members, etc)?

Does the purpose statement clearly indicate the emergency plan is comprehensive for all-hazards preparedness?

Fine Tuning

Direction and Control: One person who is designated in the plan that has overall authority and responsibility for a facility's response to a disaster.

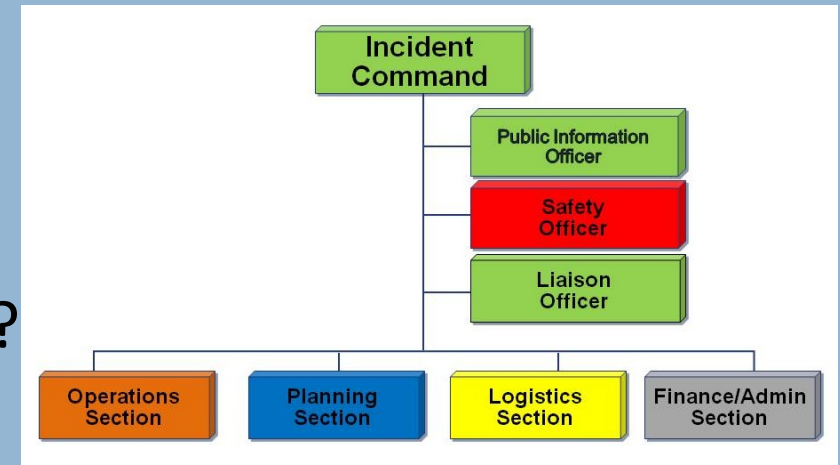
Who is responsible for the Overall Plan?

Who has authority 24/7 to make crucial decisions?

Who is responsible for ensuring that clients/families are educated and informed?

Who is responsible for medications/home deliveries/etc?

Has the facility assigned or designed a leadership structure



Fine Tuning

Evacuation: Does your organization have evacuation plans?

Are you located in the Storm Surge or Hurricane Evacuation Zone areas? Are your staff/Clients?

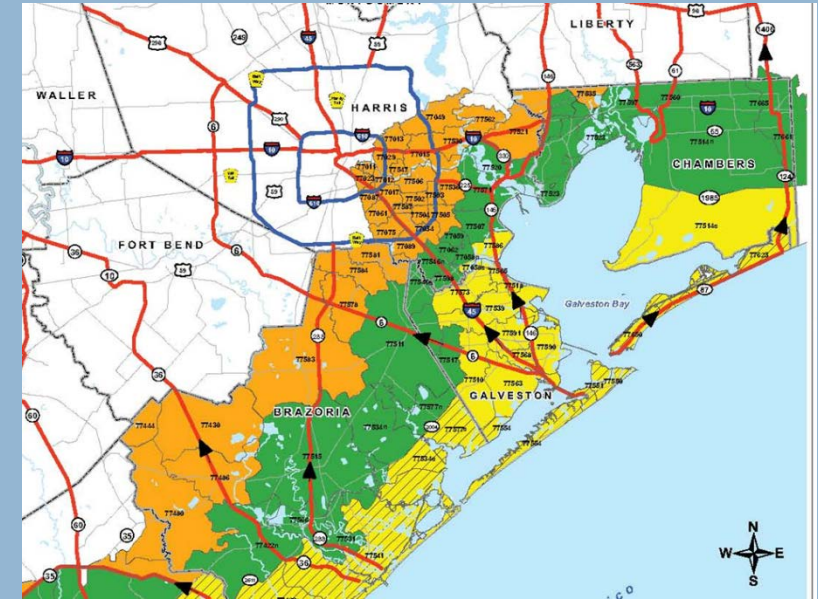
What about fires?

How do you plan to evacuate your facility? Will staff accompany residents? Meds/supplies?

Do you have an agreement with host facilities and transportation?

Have you exercised your evacuation plan?

Does the organization have measures to keep track of residents/clients once an evacuation has taken been initiated?



Fine Tuning

Medical Care and Resources:

How does the organization plan to identify and secure vital needs for its residents to continue medical care?

Does the organization have a plan that accounts for accurate and detailed lists of needed vital supplies, staff, crucial equipment, and records?

Do you have redundant vendors/suppliers?



Communication Plan

Complies with Federal and State laws

Redundant and interoperable

System to contact staff, including patients' physicians, other necessary persons

Well-coordinated within the facility, across health care providers, and with state and local public health departments and emergency management agencies.

Fine Tuning

Notification/Warning:

How does the organization receive notification/warnings?

Does the organization have primary and secondary methods to notify key staff?

Can staff be contacted at anytime (24 hours)?

Has an alternate communication system been established if regular communications is inoperable?

How does the organization plan to communicate with clients/family members of actions that are taking place during a disaster?

How does the organization communicate with local authorities?



Policies and Procedures

Based on:

Emergency Management Plan

Command Structure/Authority

Staffing, supplies, equipment needs

Risk Assessment

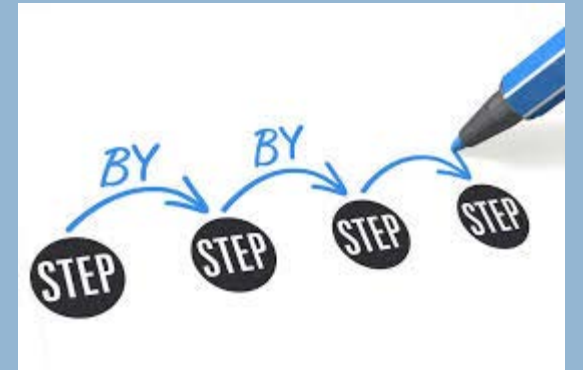
Hurricane/Severe Weather

Utility Outage

Communications Plan

Internal – staff and patients

External – families and outside agencies



Training and Exercise

Develop and maintain training and testing programs:

Initial Training: Initial training in policies and procedures and demonstrate knowledge of emergency procedures

Annual Training: All staff every year

Exercises: A full-scale exercise that is community- or facility-based; An additional exercise of the facility's choice.



Fine Tuning

Staff and Client Education:

Is STEAR information regarding evacuation assistance provided to Clients?

Are Clients provided self care information and community resource information?

Is your facility registered in STEAR?

Are staff educated on their roles/responsibilities?

Is plan reviewed and exercised annually?

<https://www.dps.texas.gov/dem/stear/nursingAsstdLvngRegForm.pdf>

The image shows the top portion of a form titled "2017 State of Texas Emergency Assistance Registry (STEAR)". At the top center is the State of Texas seal. Below the title are four input fields: "Local Jurisdiction:", "Organization Collecting Information:", "Organization Contact Telephone:" (with an "Ext:" field to its right), and "Organization Contact E-mail:". Below these fields is a yellow box containing the text: "STEAR Individual Registration Form", "Not for use by assisted living facilities or nursing homes. That form can be found <https://hhs.texas.gov/laws-regulations/forms/1000-1999/form-1085-state-texas-emergency-assistance-registry>", and "One (1) form should be completed for each registrant."

The image shows a form titled "State of Texas Emergency Assistance Registry (STEAR)" with the subtitle "Contact Information for Data Collector". It contains a table with four rows and two columns: "Organization:", "Contact Name:", "Contact Area Code and Telephone No.", and "Contact Email:". Below the table is the text: "STEAR Facility Registration Form – For use by assisted living facilities, nursing homes, etc. One form should be completed for each facility." followed by a numbered list of fields: "1. Name of the facility", "2. Street address" (with "Apt/Suite No." to its right), "3. City", "4. ZIP code", "5. County", "6. Contact area code and telephone", "7. Estimated daily average census", "8. Do you have an evacuation plan for your facility residents if there is an emergency?..... Yes No", and "9. Are there any additional comments or notes I should enter into your record?".

Best Practices

Direction and Control:

Incident Command Structure
Corporate?
Medical Operations Centers

Notifications:

EmResource, Everbridge, etc

Evacuation:

Redundant locations and contracts
Pink Vests
Check back process
Patient tracking



Best Practices

Medical Care and Resources:

Medications, DME

Emergency numbers

Community Resources

Redundant vendors/suppliers

Staff and Client Education:

Zip Zones

Self Care 5-7 days



Healthcare Coalitions

22 Trauma Service Areas

8 Coalitions

Hospitals

EMS

FSED

Long Term Care

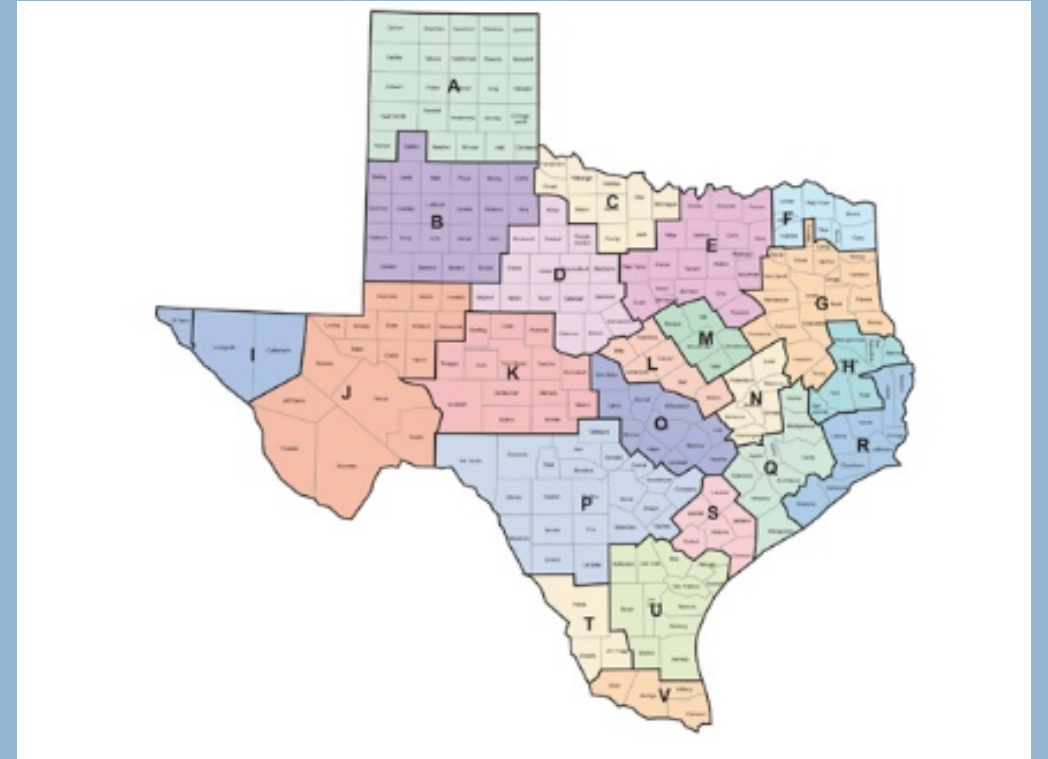
Home Health/Hospice

Dialysis

DME

Public Health

OEM



Coalitions Purpose

Enhance Planning

Increase Integration

Provide Coordination



Now What?

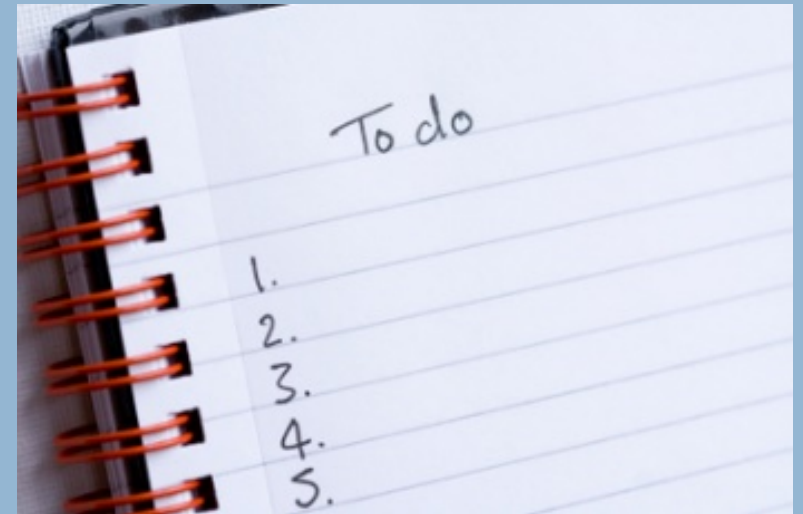
Review and fine tune your plans

Reach out to key partners

Integrate with your Healthcare Coalition

Participate in planning, training, exercises and response

Educate your staff and clients regularly



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