Disaster Preparedness: Planning to Improve Outcomes

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Consumer Voice Conference 2010
St. Rita’s Nursing Home, St. Bernard Parish, La.

Photo by Reuters
Facts About St. Rita’s

- They had a disaster Plan
- They did not evacuate
- They felt secure to shelter in place
- Flooded after the storm passed
- 35 residents died
St. Rita’s Nursing Home
New York Times Photo
Wall of Water
Pouring over levee
Lafon Nursing Home of the Holy Family

LA Times Photography
Nursing Home Evacuations

Photo by Red Top

Photo by Mari’s Paradise Images, N.O.
What Have We Learned From These Incidents

• Take Mandatory Evacuation Orders Seriously
• Louisiana does not require Nursing Homes to follow mandatory evacuation orders
• Louisiana meaning of evacuation
University of Minnesota

Nursing Home Regulations Plus

Disaster and Emergency Preparedness

How State Regulations Differ From, or Expand on, Federal Regulations
Numerous Studies and Reports Were Generated by the Hurricane Disasters of 2004 and 2005
Health and Human Services Department

Office
Of the
Inspector General
2006
After reviewing Nursing Home Emergency Plans and Outcomes of Evacuations and Sheltering for the 2004 and 2005 Hurricane Seasons, the OIG suggested that the Center for Medicare and Medicaid Services Strengthen Emergency Management Standards for Long Term Care Facilities
Nursing Homes Inspected Nationwide in 2004 and 2005

- Facilities Inspected: 16,125
- 94% met Federal Standards for Emergency Plans
- 80% Met Standards for Emergency Training
2526 Facilities Inspected in Al, Fl, La, Ms, and Texas

• Similar Rates

• In many cases the facilities did not follow the disaster plan

• Lacked transportation or other resources to put the plan into effect during a disaster
In Depth Look at 20 Nursing Homes Caught in Hurricanes

- Ivan  September 2004
- Katrina  August 2005
- Rita  September 2005
- Wilma  October 2005
All 20 Nursing Homes Had:

- Problems whether they sheltered in place or evacuated
- Transportation contracts which were not honored
- Physical and emotional stress on residents
- Complicated medical care that was needed
- Receiving facilities that were not available or unprepared to have evacuees
Sheltering in Place

had staff and supply issues but....

Overall Less Problems
Of the 20 Nursing Homes

- 5 Deviated from the Prepared Plan
- 6 Had No Instructions on how to evacuate to an alternative site
- 9 Had No Guidelines or Criteria to determine whether to evacuate or shelter in place
- 11 Did not have any instructions on how to return to the homes after an evacuation
The Journal of the American Medical Director’s Association

cited another research study done in 2007 in Louisiana that included parishes hit by Hurricanes Katrina and Rita
In Depth Phone Interviews with 20 Facilities

- 9 Evacuated Before Hurricane
- 11 Sheltered in Place
- 6 Evacuated after Hurricane
Reported Consequences Related to the Evacuation Process

6 of 15: Reported Resident Morbidity or Mortality
5 of 15: Had Transportation Issues
3 of 15: Had Staffing Difficulties
Reported Consequences for those Sheltering in Place

8 of 11: Had Supply Shortages
5 of 11: Had Facility Damages
4 of 11: Had staffing Issues
Conclusions/Recommendations

- The Facilities felt abandoned by State and Federal Emergency Response Apparatus before and after the storm
- There was substantial physical and technical difficulty in evacuating frail nursing home residents
- Staff retention was critical regardless of the evacuation decision
- Recommendation to learn from the experience and incorporate into future disaster planning.
Disaster Plans

- Fires/Wildfires
- Hurricanes
- Tornadoes and Severe Weather
- Bomb Threats
- Floods
- Severe hot or cold weather
- Earthquakes
- Chemical spills
- Pandemics/Salmonella
Some Disasters More Easily Lend Themselves to Improved Outcomes with Careful Planning
Hurricanes

- Get Advance Notice of Impending Disaster
- You Have a Good Idea of the Severity
- You Know the Potential Peril if you Stay in Your Location
Saffir Simpson Scale

1. Wind Speed: 74-95 MPH
   Storm Surge: 4-5 Feet Above Normal

2. Wind Speed: 96-110 MPH
   Storm Surge: 6-8 Feet Above Normal

3. Wind Speed: 111-130 MPH
   Storm Surge: 9-12 Feet Above Normal

4. Wind Speed: 131-155 MPH
   Storm Surge: 13-18 Feet Above Normal

5. Wind Speed: Over 155 MPH
   Storm Surge: Over 18 Feet Above Normal
Long Term Care Facilities---as well as Individuals---are encouraged to be **Self Supporting** for 3-7 Days after a storm or any major disaster.
Minimum Supplies Include:

- CDC says a minimum of 1 gal./water/day + non-potable water
- Enough food for 3-7 days
  - non-perishable snack food
  - non-electric can opener
  - paper plates/plastic utensils
  - special foods for elderly
Minimum Supplies (cont.)

- First Aid Kit
- Medicines/Prescription Drugs
- Flashlights/Batteries
- Battery Powered Lantern
- Blankets/Pillows
- Telephone—Traditional Set (not cordless)
- Fully charged cell phone with extra battery and a car charger
- Battery powered radio and/or TV, plus a NOAA Weather Radio
Minimum Supplies (cont.)

- Cash with some small bills
- Books and games—compact, such as cards, scrabble, etc.
- Important documents
- Tools and Repair Items
- Personal Items
- Pet Care Items
Floods
Earthquakes
Hurricanes, Tornadoes, and Earthquakes

Phone & Power Supply May be Disrupted

- Have a contact outside your area
- Call immediately to report your status and update, if possible
- Family members should have contact information
Our Goal is to Keep the Residents Safe
U. S. Dept. of Health & Human Services

The Agency for Healthcare Research and Quality

Brought together focus groups to Gather Suggestions after the Storms of 2004 and 2005
Disaster Preparedness & Planning Activities

- Facilities have not done specific bioterrorism or infection disease planning
- All Nursing Homes should conduct drills & staff trainings highly dependant on location & natural disaster prevalent in that location
- There are differing levels of local coordination around disasters
Special Needs of Nursing Homes

- Concerns About Caring for Special Resident Populations
  1. Alzheimer's and Other Dementias
     Monitoring Systems May Stop. Additional Staff Needed
  2. Residents at High Risk for Falls
  3. Possible Destruction or Loss of Mobility Equipment
Special Needs of Nursing Homes (cont.)

- Staffing in an Emergency
- Running Out of Pharmaceutical and other Medical Supplies
- Fuel for Generator
- Sufficient Food and Water
One Participant in Study Said:

“We do have a three day supply. Anything after that, we would be pretty much competing with everybody else who wanted to get water. But, I think we are kind of high on the list.”
Dr. Charles A. Cefalu, M.D., M.S.

Disaster Preparedness for Long Term Care Facilities

Annals of Long Term Care
September 1, 2006
Disaster Plans

- Review every year
- Regular drills
- Verification of Evacuation Shelter with which Nursing Home has contracts
- Written bus service contract
- Emergency supplies separate and Inspect regularly
Dr. Cefalu Continues

- Pharmacy provider maintain electronic pharmacy records offsite
- Emergency Kits for every bus prepared in advance
- Clearly designate staff responsibilities
- Notify families regarding evacuation
  
  [www.notification.com](http://www.notification.com)

- Triage
  - For specific buses
  - Two staff members/bus minimum
Resident Vital Medical Information

Charles A. Cefalu, M.D., M.S.

- Notebook with pictures of each resident
  - Face Sheet
  - Insurance Carrier
  - Current Physician
- Color coded armbands ----to acuity level of resident
  - Name
  - Facility
  - Cell Phone Contact #
  - Code Status
  - Diet
  - Attending Physician
- Families who remove resident given copies of Medical Records
Marty Goetz, CEO

River Gardens Hebrew Home
Jacksonville, Florida
Florida Gold Seal Facility
(only 14 Gold Seal Facilities out of 689 Nursing Homes in Florida)
Marty Brought Staff Together

- Told them to forget Regulations, Rules, and Regulators
- Asked them---What do we do to sustain for a week without outside help
Some of their suggestions

- Garbage was a problem---Hook compactor to generator
- Ice Maker---Also hook up to generator
- Volunteers, Family and Staff must be cared for
- Pets---Changed policy
- Bought a chain saw
- Needed cash
Think Outside The Box
Anita Sloan Westafer, M.D.

Family Practice Physician

Geriatric Credentials

Medical Director

Bay Breeze Nursing Home

Gulf Breeze, Florida
Dr. Westafer’s Resident Centered Care

- Identify all Residents:
  - At high risk for dehydration
  - Dialysis Residents
  - With high Anxiety/Panic
  - Prone to Elopement

---and make appropriate intervention orders
Dr. Westafer (cont.)

- Stock before Storm
  - Extra IV Fluids
  - Rocephin Injection for IM
  - Oral Antibiotics
  - Plenty of Pain Meds, Nitroglycerin, Tylenol, Etc.
- Did Staff training on Early Identification of Dehydration
Dr. Westafer (cont.)

- Stocked Extra Glucose Monitoring Strips
- Bought Extra Fans to Help with Cooling Those we Felt at Highest Risk of Heat Exhaustion
- Make Sure Ice Makers Running Well
- Get Extra Ice Chests
Dr. Westafer (cont.)

- Looked at Foods They Were Stocking
  - Easy Meals
  - Not High in Sodium and Potassium
  - Highly palatable for Pickiest Eaters Who May Eat Less Under Stress

- Dialysis Residents
  - Stocked extra Kayexalate
  - Verified Fluid Restriction Protocols with Nephrologist
  - With Extremely Fragile---Get an Early Dialysis In
Dr. Westafer (cont.)

- Ordered Extra Stock of Resident’s Routine Meds
- Activity Director Purchased
  - New Games/Puzzles/Cards---to Entertain
  - Extra Dolls and Stuffed Animals for Comfort for Dementia Residents---who would Benefit
- Asked Every Nurse to go over her regular residents’ needs to see if new P.M. orders are appropriate if not possible to reach the physician
“As Medical Director I visited the Nursing Home the last thing before the roads closed and the first thing after they opened. I stayed a few miles away at the Gulf Breeze Hospital during the Hurricane.”
Dr. Westafer (cont.)

- Made Sure:
  - Emptied all trash cans and infectious waste containers prior to hurricane
  - Stocked extra red and black garbage bags
  - Got extra garbage cans
  - Replaced all dressings before storm hit
  - Stocked lots of big flashlights and stand alone lanterns
Two Days Before They Prepared Numerous “Passes” for Healthier Long Term Care Residents who Wanted to Evacuate Out of Town with Relatives

- Medication Orders
- Medical Information
This Facility Sheltered in Place During Ivan, Dennis, and Katrina with Excellent Results
EVACUATION OF HOSPITALS AND NURSING HOMES
GAO Report 2006

- Administrators frequently make the decision whether to evacuate
- They evacuate only as a last resort
- Emergency plans are designed primarily for Sheltering in Place
- Risks/Benefits to Resident when Making Decision
  - Adequate resources to Shelter in Place
  - Risks to Evacuate
  - Availability of Transportation
  - Receiving facility able to accept residents for possible long time
NDMS---National Disaster Medical System
- provides assistance for the evacuation of hospital patients
- Nursing Homes not included.

Critical that Disaster Plans are well thought through

Nursing Homes Need to be Integrated into Community Disaster Planning
- Nursing Homes need to be Classified as an Emergency Priority (such as Hospitals)
Pioneer Network Film

THE BIG UNEASY: KATRINA’S UNSUNG HEROES
In 2004 Hurricane Ivan Approached the Northern Gulf of Mexico

It Came Ashore Near the Florida/Alabama Line.
Baldwin County in Alabama (Gulf Shores)
Escambia County in Florida (Pensacola)
Santa Rosa County in Florida (Navarre, Gulf Breeze and Milton)
Each Had Massive Devastation
Hurricane Ivan 2004
Ivan 2004

2 Days After Storm Hit...
Water Still Over a ft. deep
Ivan 2004
Ivan 2004
Ivan
2004
Guest Room
with Special Air Conditioning
Ivan 2004
Ivan 2004
Ivan 2004
Ivan 2004
Princess Ivan 2004
Red Cross, Church Groups, and Other Volunteers Were Wonderful
After Working Almost Two Weeks and Multiple Loads to the Dump...

Recovery Lasted from Sept. until April 2005
Sunrise After the Storm