

CHATHAM COUNTY

NURSING HOME & ASSISTED CARE FACILITY

EVACUATION PLANNING GUIDE

CHATHAM EMERGENCY MANAGEMENT AGENCY
124 Bull Street, Suite 140
Savannah, GA 31401

A fundamental responsibility of government is to provide for the safety and welfare of its citizens. One of the most fragile and dearest components of our society are the residents of our nursing homes, assisted care facilities, and hospices. While these facilities are regulated by a variety of agencies and organizations, the following information is not intended to limit or exclude procedures that a facility needs to satisfy other requirements, or to address other arrangements that have been made for emergency preparedness.

Chatham County and the Chatham Emergency Management Agency have developed this guide to provide a consolidated yet comprehensive manual of how to prepare an evacuation plan. Because this information satisfies basic contingency requirements, this criteria serves as the format for a comprehensive evacuation plan.

Nursing homes, assisted care facilities and hospices are encouraged to use this material to prepare for emergencies that may occur in or threaten our community. Please contact the Chatham Emergency Management Agency at (912) 201-4500 if you have questions, concerns, or requests for specialized assistance.

Sincerely,



Clayton S. Scott

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NURSING HOME & ASSISTED CARE FACILITY EVACUATION PLAN FORMAT

PURPOSE:

To provide guidance in the development of an evacuation plan containing detailed information, instructions, and procedures that can be engaged in any emergency situation necessitating either a full or partial evacuation of the nursing home or assisted care facility. This plan must incorporate staff roles and responsibilities essential to this process. Staff must be educated in their role(s). Drills and reviews must be conducted to ensure that the plan is workable. The plan must include back up measures for all components.

Activation Criteria

- Identify the title, not name of the person that makes the decision to activate the plan.
- Identify the title, not name of the alternate person that activates the plan if the primary person is not available.
- Define how the plan is activated.
- Define the phases of implementation and the activation requirements for each (staff notification, accessing available resources and equipment, preparation of residents and essential resident supplies).

Identification of the Alternate Site(s)

- Identify alternate/receiving facilities.
- Identify and have on-hand, written documentation that confirms the commitment of these facilities such as a Memorandum of Understanding or Contract
- Explain the process for ensuring these facilities remain available at the time of the evacuation.
- Explain the process of notifying identified facilities that a decision has been made to evacuate residents to their facilities.

Special thanks go to the State of New York for providing information that was essential to the development of this manual

Resources/Evacuation

- Identify resources and equipment that are available to move residents from rooms/floors, which include elevators that may not be in operation.
- Identify where this equipment is stored and ensure that the area is clearly marked for staff access during an evacuation.
- Explain how the staff can access this equipment 24/7.
- Explain the protocols for staff training on equipment use.
- Define the inventory protocol in place for this equipment.

External Transportation Resources

- Indicate the transportation resources that have been identified.
- Provide written documentation that confirms the commitment of the transportation resources to the facility when needed such as a Memorandum of Understanding or Contract.
- Provide a means to keep these agreements current.
- List the secondary/alternate transportation resources identified and available if needed.
- Ensure transportation resources meet the resident's needs (supine, wheelchair, ambulatory, life support, etc.).
- Define the protocols that ensure the recurrent assessment of residents for specific transportation needs.
- Identify the means by which resident' transportation needs are identified (Interdisciplinary Care Plan) and explain how this information kept current.

Resident Evacuation Destination

- List any resident's pre-determined destination (other nursing home, hospital, home with family).
- Explain the protocols used to determine if the destinations are specific to individual resident care needs.

- Explain where this information is maintained and how it is kept current.

Tracking Destination/Arrival of Residents

- Explain the process that is in place to track the pre-determined destination of each resident.
- List who (title[s], not names[s]) is responsible for tracking resident arrival at their destination.
- Provide instructions explaining the protocol for informing the resident and/or their emergency contact of this predetermined destination.
- Provide a written process to ensure the residents a well-organized return to the original facility at the conclusion of the situation requiring the evacuation.

Family/Responsible Party Notification

- Define the procedure for notification of the resident's emergency contact of an evacuation.
- Explain the protocol that identifies those residents who are unable to speak for themselves. Provide instructions for the process for assigning staff members in this situation.
- Identify the person(s) (title, not name) responsible for this notification.
- Explain the process for creating the script for the notification process (where, why, how, when, etc.).
- Identify the person(s) (title, not name) responsible for composing the script.
- Explain the process for tracking completion of family/emergency contact notifications.

Governmental Agency Notification

- Define the procedure for notifying regulatory authorities of an evacuation.
- Identify other governmental (local) agencies that will be notified of an evacuation (Chatham Emergency Management Agency, Ombudsman, etc.; list phone numbers).
- Identify the person(s) (title, not name) responsible for these notifications.

Evacuation Confirmation

- Explain the protocol to verify that rooms have been evacuated (tags or markings on door).
- Explain the protocol for staff training and conducting drills on room evacuation.
- Identify the means to ensure that all facility staff are aware of this protocol.
- Ensure that this protocol is included in annual and orientation education.
- Define the means used to ensure the fire department and other facility first responders been made aware of the protocol.

Transport of Records and Supplies

- Explain the procedure for transport of Medication Administration Records and medical records.
- Explain how confidentiality will be maintained during transport and relocation.
- Explain how resident-specific specialized treatment supplies will be identified for transport.
- Define the protocol for transport of resident-specific medications (a minimum five day supply) to the receiving facility.
- Identify the protocol for transport of resident-specific controlled substances (a minimum three day supply) to the receiving facility.
- List the procedures are in place for controlled substances to record receipt, full count, and signatures of both transferring and receiving personnel.
- Identify how the elements outlined above will be kept current. And how this information will be maintained (Interdisciplinary Care Plan).

TRANSPORTATION GUIDELINES

PURPOSE

To provide guidance in the development of transportation needs for residents and staff. These needs must be addressed prior to the onset of conditions warranting an evacuation. Hurricanes are not the only conditions requiring evacuation; fire, chemical spills and a myriad of other more localized events could initiate a requirement for evacuation. Every facility needs transportation agreements that include certificates of insurance and that identify potential travel restrictions such as distance, county or state lines.

General

- Ensure that the facility has approved emergency and evacuation plans.
- Include Disaster Readiness as an ongoing topic at monthly training sessions.
- The facility transportation plan should be aligned with the evacuation status of the facility. If the facility has to evacuate, plan to be out of the facility for at least three days; this means that transportation has to be planned for the relocation of staff in order to continue to care for the residents at the receiving facility.
- Make sure the transportation contracts spell out return expectations.

Contracts

- Determine if there is adequate transportation available through contractual agreements and include the contracts as a part of the facility plan.
- Renew contracts annually.

Supplies

- Supply transport is the method by which the supplies will be taken to a host facility. Determine if the vendors will assist with this requirement. or if resident and supply transportation should be the same.

- Have a complete list of the supplies being transported to a host site, supplies to be delivered to a host site, and as applicable, supplies the host facility will provide.
- Check vendor agreements to ensure the delivery of emergency supplies, food provisions, nursing equipment, and laundry needs to host site. These agreements must be current and must include all supplies that might be needed.
- Take all emergency medical and resident related supplies with the residents to the receiving facility. (Including documentation, assignment sheets, etc.).
- Coordinate transporting medication carts by unit. Try to send the medication/treatment carts on the same bus as residents from that unit. If that is not feasible, have the vehicle transporting the medication/treatment supplies for designated units follow the bus with the residents. This helps ensure that supplies arrive at the correct location.
- Use rental trucks to transport mattresses and wheel chairs. Make sure all equipment (walkers, chairs, etc.) is labeled with the resident's name and the facility name. Restorative aides should check this on a weekly basis during hurricane season.
- Keep an updated list of rented equipment, as well as durable medical equipment provided through cooperative facilities. Decide if rental equipment should be transported.

Residents

- Send resident-specific supplies on the buses with the residents. Include an emergency drug kit, hydration, and snacks for the residents and staff.
- Facility vehicles should be fully fueled when the area is threatened by a condition warranting a potential evacuation.
- Bus staffing should have adequate staff.
- Identify and plan for special needs residents such as residents on dialysis and oxygen, residents in need of special lifting equipment, etc.

- Keep an updated copy of the Resident Roster; this will help in the management of resident specific needs. List the following:
 - Type of transportation required, recommended transferring and lifting techniques, and aligned staffing. Include a list of who may need oxygen during transport.
 - Fax the data sheets to the receiving facility if possible. Also, ambulances will need this information for transport.
 - Have identification bands for all residents with name, specific requirements, etc. Put the family contact name and number on both the face sheet and the identification bands.
 - Have nametags for all staff.

Communications

- Notify regulatory authorities of the impending evacuation; these telephone numbers should be posted for easy access.
- Maintain a roster of family contact person's name and telephone number from the sending facility so they can be updated with the latest information on their family member.
- Notify families of relocation plans and provide families or resident representatives with the name and address of the receiving facility.
- Consider that families/resident representatives may need to also evacuate. Obtain current information on where families/resident representatives will be located and their contact numbers.
- Provide for back-up communications. Consider cell and/or satellite phones. Ensure both vehicle and household battery chargers are available.
- It is possible for the phone company to reroute a facility's telephone number to another number. Note that the receiving facility will not want to have their phone calls doubled with calls from sending facility family members. Consider an alternative number for this purpose.

Re-entry

- Confirm that regulatory authorities have approved the facility for a return.
- Reverse the process for returning the residents, medication carts, supplies, etc.
- Emphasize the need for patience and stress management by staff and residents; everyone will be tired.
- Ensure adequate replacement staff are available in all departments for return to the facility.

**NURSING HOME & ASSISTED CARE FACILITY
EMERGENCY PLAN CHECKLIST**

PURPOSE:

To provide guidance that is supplemental to but does not supercede or replace State or Federal requirements, in the development of an evacuation plan containing detailed information, instructions, and procedures that can be engaged in any emergency situation threatening or occurring at a nursing home or assisted care facility. This plan must incorporate staff roles and responsibilities essential to this process and must include back up measures for all components.

Reviewed: _____ Title: _____ Date: _____

Administrator: _____ Date: _____

ITEM	Item Complete		Review Date	Revision Date
	Y	N		
PROGRAM MANAGEMENT				
Facility Chain of Command established & current				
Emergency Management Committee established & current				
Local partnerships established & renewed				
a. Chatham Emergency Management Agency				
b. Emergency Responders (Police, Fire & EMS)				
c. Health Care Network/Providers				
Other public/private responders & resources				
Plan activation triggers defined & understood				
Staff assigned for implementation of an emergency management program				

Emergency Plan & Procedures reviewed & revised twice each year				
Transfer agreements established & current				
COMMUNICATION				
24/7 Communication capability with redundancy				
Emergency power				
Protocols for rapid notification of staff				
a. Staff				
b. Chatham Emergency Management Agency				
c. Oversight agencies				
d. Public & private resources				
e. Facility Ombudsman Program				
System & staff in place for communication with resident & staff families, media, etc.				
24-hour contact info for above with numbers current & verified				
HAZARD VULNERABILITY ANALYSIS				
Facility internal hazard analysis completed				
Facility external hazard analysis completed				
Communication & facility hazard analysis integrated				
RISK REDUCTION FACTORS (Mitigation) Identification				
Implementation plan established				
CAPABILITY ASSESSMENT				
Able to respond to hazards based on existing plans &				

resources				
Consistent with hazard analysis & risk reduction actions				
EMERGENCY PLANNING & RESPONSE				
Procedures to respond to the following hazards:				
a. Hurricane & Tropical Storm				
b. Disruption of essential services				
c. Biological				
d. Chemical/Hazardous Materials				
e. Nuclear/Radiological				
f. Catastrophic				
Shelter in place plan & protocols				
Shutdown of air handling equipment & implementation of smoke, gas, dust dissipation facilities				
Implementation of protocols for use of staff & resources				
Plan for ID of responding staff & emergency workers				
RECOVERY				
Plan for team to assess damage prior to reentry				
Plan to restore services				
Plan to restore/repair infrastructure				
Plan to restore programs				
Plan for continuity of staff & operations				
EVACUATION PLAN				
Activation criteria established				
Identification and mutual agreement of alternate site(s)				

Resources to physically move residents identified & on-hand				
External transportation arrangements & written contract				
Evacuation destination (specific to care needs) predetermined & current				
System to identify & track resident's destination arrival				
Family/responsible party notification protocol				
Government agency notification protocol				
Confirmation of facility evac.				
Transport that medical records, meds & specialized treatment supplies are with residents				
DRILLS & EXERCISES				
Emergency preparedness drills (min 2 times each year)				
Written critique & review of each exercise				
Written critique & review of actual incidents				
Revisions initiated & corrective action completed				
Participation in community wide exercise program				
EDUCATION				
All staff educated within four weeks of plan revision				
Staff familiar with Emergency Management Program & roles				

Note: Any checklist has shortcomings in that it cannot measure the reality of a given event, or actual capabilities of facility staff.

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