Emergency Operations in PACE: Reports from the Field

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Session Objectives

• Synthesize results of the Hazard Vulnerability Risk Assessment (HVA) into an operational disaster plan, policies, and procedures

• Enhance disaster preparedness capabilities through preparing, training, exercising, and evaluating

• Examine and apply lessons learned from actual disasters experienced by PACE Programs into your Emergency Operations Plan
Housekeeping

Packet / Handouts

Index Card

Interactive
When you hear the words....

*Watch*  *Alert*  *Warning*

*Lockdown  Shelter in Place  Evacuation  State of Emergency*

...what types of events come to mind?
Index Cards

In a few words on your index card describe:

1. What is the most concerning to you?
2. Why?
3. Has your PO had an actual experience with this type of disaster?

When finished, pass your card to the end of the table
CMS Regulation 42 CFR 460.72: Why the change?

- Fairly generic

- The Physical Environment Regulation was a hotchpotch consisting of:
  - Physical space, Equipment
  - Fire Safety, Life Safety Code, Hand sanitizer dispensers
  - Emergency and Disaster Preparedness

- CMS felt the current “patchwork of federal, state, and local laws & guidelines fell short of what is needed."
CMS Proposed Rule: 42 CFR 460.84 Emergency Preparedness

- Developed December 2013 as a stand alone regulation
  
  “Establish a more comprehensive national emergency preparedness requirements....”

  “Consistent, flexible, and dynamic regulatory approach with variations for each of the 17 provider types”

- PACE specific; Hospital specific; Long Term Care specific

- The proposal calls for all the requirements to be implemented within one year of the publication of the final rule.
  (Late 2016 early 2017)
Proposed Rule: Four Critical Elements

**Emergency Plan:** Perform a risk assessment before developing an emergency plan. Use an all-hazards approach to focus on capabilities critical to preparedness for a spectrum of emergencies (Emergency Operations Plan: EOP)

**Policies & Procedures:** Develop and implement policies and procedures based on the Risk Assessment and Emergency Plan

**Communications Plan:** Develop and maintain an emergency preparedness communication plan that complies with both federal and state law

**Train and Test:** Develop and maintain a training and testing program that includes annual training in emergency preparedness policies and procedures.
The Emergency Operations Plan (EOP):

- Proposed PACE Regulation:
  42 CFR 460.84: Emergency Preparedness

  “The PACE Organization must develop and maintain an emergency preparedness plan that must be reviewed and updated at least annually”

- Your EOP will describe how you will respond to, and recover from, all hazards
The EOP: Where do I begin?

Know what to include in your plan:

1. Results of your facility & Hazard Vulnerability Assessment (HVA)
2. Capabilities: Types of services you are able to provide in an emergency
3. Strategies: Disruption in service, continuity of care
4. Collaboration with local, tribal, regional, state and federal emergency preparedness officials
5. Participant Population / Acuity Level

Policies & Procedures must support the plan
#1: The HVA

Conduct and Analyze your HVA

- Several models are readily available, & can be tailored to meet your needs
- Look at the geography and history of your area
- Include your participant population

Develop or modify your EOP based on the results

- Conduct annually
- Include events/information gathered from the prior year
- Include your current participant population
HVA Models

Vulnerability / Probability of Occurring:
  Natural, Technological, Human, etc.,

Impact / Consequence:
  Human  Property  Business

Preparedness / Mitigation:
  Pre-planning  Internal response  External response
HVA Models: Parent Organization...

<table>
<thead>
<tr>
<th>POTENTIAL EMERGENCIES</th>
<th>AFFECTS DEMAND FOR SERVICES</th>
<th>AFFECTS ABILITY TO PROVIDE SERVICES</th>
<th>LIKELIHOOD (EMERGENCIES RANKING ORDER)</th>
<th>CONSEQUENCES</th>
<th>LIKELIHOOD + CONSEQUENCES</th>
<th>PREPAREDNESS SCORE</th>
<th>ACTION</th>
<th>WILL COMMUNITY RESOURCES BE NEEDED</th>
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<tbody>
<tr>
<td></td>
<td>Y-N</td>
<td>Y-N</td>
<td>3-2-1-0</td>
<td>5-4-3-2-1-0</td>
<td>Combined Score</td>
<td>An Action Score</td>
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<td>Yes = Y</td>
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<tr>
<td>Priorities as set by assistance from Community</td>
<td>Yes = Y</td>
<td>Yes = Y</td>
<td>Life Threatening (5)</td>
<td>Health-Safety (4)</td>
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<td>2. Epidemic/Pandemic *</td>
<td>Y</td>
<td>Y</td>
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<td>Type Needed</td>
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<td></td>
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<td>5. Hostage Situation/Shooter</td>
<td>Y</td>
<td>Y</td>
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<td>Low Potential (1)</td>
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<td>7. Fire/Explosion</td>
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<td>8. Comm. Failure - Internal</td>
<td>N</td>
<td>Y</td>
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<td>High Potential (2)</td>
<td>Low Potential (1)</td>
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<td></td>
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<td>9. Chemical Spill</td>
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<td>Y</td>
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<td>Y</td>
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<td>11. Steam Failure</td>
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<td>Y</td>
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<tr>
<td>12. Water Failure</td>
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<td>Y</td>
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<td>13. Severe Thunderstorm</td>
<td>N</td>
<td>Y</td>
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<td>14. Snow/Blizzard</td>
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<td>Y</td>
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<td>15. Flood - Internal</td>
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<td>Y</td>
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<td></td>
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<td>16. Electrical Failure</td>
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<td></td>
<td></td>
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<td>17. Tomato/Windstorm</td>
<td>Y</td>
<td>Y</td>
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<td>High Potential (2)</td>
<td>Low Potential (1)</td>
<td>Developing Policy</td>
<td></td>
<td></td>
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<tr>
<td>18. External Comm. Failure</td>
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<td>Y</td>
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<td>High Potential (2)</td>
<td>Low Potential (1)</td>
<td>No Plan/No Policy</td>
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<tr>
<td>19. Hurricane</td>
<td>Y</td>
<td>Y</td>
<td>History + Incidents (3)</td>
<td>High Potential (2)</td>
<td>Low Potential (1)</td>
<td>Plan</td>
<td></td>
<td></td>
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<tr>
<td>20. Earthquake</td>
<td>Y</td>
<td>Y</td>
<td>History + Incidents (3)</td>
<td>High Potential (2)</td>
<td>Low Potential (1)</td>
<td>Developing Policy</td>
<td></td>
<td></td>
</tr>
<tr>
<td>21. Bomb Threat</td>
<td>Y</td>
<td>Y</td>
<td>History + Incidents (3)</td>
<td>High Potential (2)</td>
<td>Low Potential (1)</td>
<td>No Plan/No Policy</td>
<td></td>
<td></td>
</tr>
<tr>
<td>22. Emergency Gas Failure</td>
<td>N</td>
<td>Y</td>
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<td>Plan</td>
<td></td>
<td></td>
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<tr>
<td>23. HVAC Failure</td>
<td>N</td>
<td>Y</td>
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<td>High Potential (2)</td>
<td>Low Potential (1)</td>
<td>Developing Policy</td>
<td></td>
<td></td>
</tr>
<tr>
<td>24. Medical/Vacuum Failure</td>
<td>N</td>
<td>Y</td>
<td>History + Incidents (3)</td>
<td>High Potential (2)</td>
<td>Low Potential (1)</td>
<td>No Plan/No Policy</td>
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<td></td>
</tr>
<tr>
<td>25. Civil Disturbance</td>
<td>Y</td>
<td>Y</td>
<td>History + Incidents (3)</td>
<td>High Potential (2)</td>
<td>Low Potential (1)</td>
<td>Plan</td>
<td></td>
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</table>

* Indicate highest priority
### HVA Models: Internet Search

#### HAZARD AND VULNERABILITY ASSESSMENT TOOL

**NATURALLY OCCURRING EVENTS**

<table>
<thead>
<tr>
<th>EVENT</th>
<th>PROBABILITY</th>
<th>HUMAN IMPACT</th>
<th>PROPERTY IMPACT</th>
<th>BUSINESS IMPACT</th>
<th>PREPAREDNESS</th>
<th>INTERNAL RESPONSE</th>
<th>EXTERNAL RESPONSE</th>
<th>RISK</th>
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<tbody>
<tr>
<td></td>
<td>Likelihood this will occur</td>
<td>Possibility of death or injury</td>
<td>Physical losses and damages</td>
<td>Interruption of services</td>
<td>Preparing</td>
<td>Time, effectiveness, resources</td>
<td>Community, Natural Aid staff and supplies</td>
<td></td>
</tr>
<tr>
<td></td>
<td>0 = N/A</td>
<td>1 = Low</td>
<td>2 = Moderate</td>
<td>3 = High</td>
<td>0 = N/A</td>
<td>1 = Low</td>
<td>2 = Moderate</td>
<td>3 = Low or None</td>
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<tr>
<td>Blizzard</td>
<td>0</td>
<td>2</td>
<td>2</td>
<td>2</td>
<td>2</td>
<td>3</td>
<td></td>
<td>0%</td>
</tr>
<tr>
<td>Dust/Sand Storm</td>
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<td>1</td>
<td>2</td>
<td>2</td>
<td>2</td>
<td>2</td>
<td></td>
<td>22%</td>
</tr>
<tr>
<td>Earthquake, Local</td>
<td>3</td>
<td>3</td>
<td>3</td>
<td>3</td>
<td>3</td>
<td>3</td>
<td></td>
<td>24%</td>
</tr>
<tr>
<td>Epidemic/Natural</td>
<td>2</td>
<td>3</td>
<td>2</td>
<td>2</td>
<td>3</td>
<td>3</td>
<td></td>
<td>94%</td>
</tr>
<tr>
<td>Flood, Local</td>
<td>2</td>
<td>3</td>
<td>3</td>
<td>3</td>
<td>3</td>
<td>3</td>
<td></td>
<td>63%</td>
</tr>
<tr>
<td>Hurricane</td>
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<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td></td>
<td>0%</td>
</tr>
<tr>
<td>Infectious Disease</td>
<td>0</td>
<td>3</td>
<td>2</td>
<td>3</td>
<td>3</td>
<td>3</td>
<td></td>
<td>31%</td>
</tr>
<tr>
<td>Landslide</td>
<td>1</td>
<td>1</td>
<td>2</td>
<td>2</td>
<td>3</td>
<td>3</td>
<td></td>
<td>24%</td>
</tr>
<tr>
<td>Severe Thunderstorm</td>
<td>1</td>
<td>1</td>
<td>1</td>
<td>1</td>
<td>2</td>
<td>2</td>
<td></td>
<td>17%</td>
</tr>
<tr>
<td>Snow/Ice/Hail Storm</td>
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<td>2</td>
<td>2</td>
<td>2</td>
<td>3</td>
<td>3</td>
<td></td>
<td>56%</td>
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<td>Temperature Extremes</td>
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<td>1</td>
<td>1</td>
<td>1</td>
<td>2</td>
<td>2</td>
<td></td>
<td>17%</td>
</tr>
<tr>
<td>Tsunami - Tidal Wave</td>
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<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td></td>
<td>0%</td>
</tr>
<tr>
<td>Tornado</td>
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<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td></td>
<td>0%</td>
</tr>
<tr>
<td>Volcano</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td></td>
<td>0%</td>
</tr>
<tr>
<td>Wild Fire</td>
<td>2</td>
<td>3</td>
<td>2</td>
<td>3</td>
<td>3</td>
<td>2</td>
<td></td>
<td>59%</td>
</tr>
</tbody>
</table>

**AVERAGE SCORE**

|               | 1.06 | 1.65 | 1.53 | 1.76 | 2.06 | 2.06 | 1.76 | 21% |

*Risk increases with percentage.*

*Events in Bold have occurred previously*
## HVA Models:

### Naturally Occurring Events

<table>
<thead>
<tr>
<th>Event</th>
<th>Probability</th>
<th>Consequence</th>
<th>Mitigation</th>
<th>Risk Management</th>
<th>Action Required</th>
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</thead>
<tbody>
<tr>
<td><strong>Likelihood of Occurrence</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>Possibility of Death or Injury</td>
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<td></td>
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<td></td>
</tr>
<tr>
<td>Physical Losses and Damages</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Interruption of Services</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Probability x Consequence</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Score</strong></td>
<td>0 = Very Low</td>
<td>1 = Low</td>
<td>2 = Moderate</td>
<td>3 = High</td>
<td>4 = Very High</td>
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<tr>
<td>Hurricane</td>
<td>2</td>
<td>2</td>
<td>2</td>
<td>2</td>
<td>4.00</td>
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<tr>
<td>Tornado</td>
<td>1</td>
<td>3</td>
<td>3</td>
<td>3</td>
<td>3.00</td>
</tr>
<tr>
<td>Severe Thunderstorm</td>
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<td>1</td>
<td>1</td>
<td>1</td>
<td>3.00</td>
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<td>Snow Fall</td>
<td>3</td>
<td>2</td>
<td>1</td>
<td>2</td>
<td>5.00</td>
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<tr>
<td>Blizzard</td>
<td>1</td>
<td>2</td>
<td>1</td>
<td>3</td>
<td>2.00</td>
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<tr>
<td>Ice Storm</td>
<td>2</td>
<td>3</td>
<td>1</td>
<td>3</td>
<td>4.67</td>
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<tr>
<td>Temperature Extremes</td>
<td>2</td>
<td>3</td>
<td>1</td>
<td>1</td>
<td>3.33</td>
</tr>
<tr>
<td>Drought</td>
<td>0</td>
<td>1</td>
<td>0</td>
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<td>0.00</td>
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<tr>
<td>Volcano</td>
<td>0</td>
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<td>0</td>
<td>0</td>
<td>0.00</td>
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<tr>
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<td>1</td>
<td>1</td>
<td>0.00</td>
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<tr>
<td>Flood, External</td>
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<td>3</td>
<td>4</td>
<td>6.67</td>
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<td>0</td>
<td>0.00</td>
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<td>3</td>
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<td>Epidemic</td>
<td>1</td>
<td>3</td>
<td>0</td>
<td>4</td>
<td>2.33</td>
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<tr>
<td><strong>Average Score</strong></td>
<td>1.20</td>
<td>1.67</td>
<td>1.13</td>
<td>1.80</td>
<td>2.42</td>
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</table>
# HVA Model

## Community Hazard Vulnerability Assessment Tool

<table>
<thead>
<tr>
<th>Probability</th>
<th>Human Impact</th>
<th>Property Impact</th>
<th>Business Impact</th>
<th>Mitigation</th>
<th>Preparedness Impact</th>
<th>Response Impact</th>
<th>Recovery</th>
</tr>
</thead>
<tbody>
<tr>
<td>Likelihood of house occurrence and facility response</td>
<td>Low (0-10 events per year)</td>
<td>1 = Low (1-10% affected)</td>
<td>1 = Low (5-10% affected)</td>
<td>Internal (jurisdictional)</td>
<td>Internal (jurisdictional)</td>
<td>Internal (jurisdictional)</td>
<td>0 - 10%</td>
</tr>
<tr>
<td>Likelihood of property occurrence and facility response</td>
<td>Moderate (2-5 events per year)</td>
<td>2 = Moderate (10-50% affected)</td>
<td>2 = Moderate (1-10% affected)</td>
<td>External (regional)</td>
<td>External (regional)</td>
<td>Internal (jurisdictional)</td>
<td>0 - 10%</td>
</tr>
<tr>
<td>Likelihood of business occurrence and facility response</td>
<td>High (1-10 events per year)</td>
<td>3 = High (10-50% affected)</td>
<td>3 = High (1-10% affected)</td>
<td>External (regional)</td>
<td>External (regional)</td>
<td>Internal (jurisdictional)</td>
<td>0 - 10%</td>
</tr>
</tbody>
</table>

## National Planning Scenarios

<table>
<thead>
<tr>
<th>Biological Attack - Aerosol Anthrax</th>
<th>Occurrence</th>
<th>Response</th>
</tr>
</thead>
<tbody>
<tr>
<td>Biological Attack - Food Contamination</td>
<td>3</td>
<td>1</td>
</tr>
<tr>
<td>Biological Attack - Foreign Animal Disease</td>
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<td>2</td>
</tr>
<tr>
<td>Biological Attack - Plague</td>
<td>3</td>
<td>1</td>
</tr>
<tr>
<td>Biological Disease Outbreak - Pandemic</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>Chemical Attack - Bacteriological Agent</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>Chemical Attack - Chemical Tank Explosions</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>Chemical Attack - Nerve Agent</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>Chemical Attack - Toxic Hospital Contamination</td>
<td>1</td>
<td>2</td>
</tr>
</tbody>
</table>

## Naturally Occurring Events

<table>
<thead>
<tr>
<th>Event</th>
<th>Occurrence</th>
<th>Response</th>
</tr>
</thead>
<tbody>
<tr>
<td>Average</td>
<td>1.13</td>
<td>2.13</td>
</tr>
</tbody>
</table>

## Version 1.0 (06/03)

<table>
<thead>
<tr>
<th>Risk Occurrence</th>
<th>Risk Response</th>
<th>Non-Weight</th>
</tr>
</thead>
<tbody>
<tr>
<td>63%</td>
<td>63%</td>
<td>126%</td>
</tr>
<tr>
<td>63%</td>
<td>63%</td>
<td>126%</td>
</tr>
<tr>
<td>42%</td>
<td>42%</td>
<td>81%</td>
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<tr>
<td>21%</td>
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<td>63%</td>
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<tr>
<td>21%</td>
<td>21%</td>
<td>63%</td>
</tr>
</tbody>
</table>
Conducting Your HVA: 50 mile radius
Geographic & Traffic

I-95 Corridor

LIFE
Hazardous Cargo Transportation:
Road, Rail & Waterways
Military Installations: Human & Technological Vulnerabilities

- Aberdeen Proving Grounds
- Dover AFB
- McGuire AFB
- PA National Guard
- DE National Guard
Impact from other states

Hope Creek Nuclear Generating Station New Jersey
VIP Events: Papal Visit
Road Restrictions & Closures
Severe Weather: Spring & Summer Events
Weather Extremes: Fall & Winter
Vulnerability: Know your surroundings
#2 Assess your Capabilities: In-Center Operations

When considering the type of services you able to offer consider:

- Facility Location, Elevation, HVAC System, Generator

- Communication Capabilities:
  - Phone system; “Panic” button; Internal / External Emergency Radios

- Can your facility stand alone for several days? Does it need to?

- Supplies
  - Do you really need to maintain food for 3 days?
    - If so, consider including Medications, Cots, Blankets, Pillows, Flashlights
    - Sufficient staffing?

CMS Proposed Rule does not require the same basic subsistence needs as hospitals
#3 & 4 Strategies & Collaboration: You are not alone!

- Think outside the box! Utilize:
  - Parent Organization
  - Local & Government Emergency Officials

- How would you evacuate your participants?
  - Where would you take them?
  - Have a Plan B & C

- How will you handle a short term disruption of services?

- Staff Members: Work–Life Balance They have families too!

24/7 does not mean Homecare is the automatic solution to everything
PACE is a TEAM Effort
#5 Participant: Determining Acuity Levels

Points to consider when assigning an Acuity Level

- **Scoring system:**
  - What scoring system does your EMR support?

- **Health Status/ Frailty:** Consider....
  - Equipment & Supplies: 24/7 Oxygen, Daily IV’s
  - Chronic Conditions: CHF or COPD exacerbations
  - Life Dependent Treatments: Dialysis, Ventilator support

- **Environment:**
  - Consider housing type and access to EMS

- **Care Giving Support System**
  - Family & Contracted
#5 Participant: Acuity Level Response

- In an emergency how will your plan respond to each acuity level?
- High, medium, low priority what does each level mean?
- How will you respond to someone who is at the low priority vs a high priority? (Nurse visit for safety check, phone call by nurse, Phone call by MSW?)
- The type and duration of an Emergency situation will determine how many of your plans will respond to each acuity level.
#5 Participant: Assess & Reassess Acuity Level

Periodic Review

- Keep a current list all members to include:
  - Acuity Level
  - Medical need related to the acuity
  - Address
  - Phone number
  - Advance Directives

- Updates
  - Recommend updating at the daily IDT meeting
Policy and Procedure Development

General Best Practices

• Full regulatory range
  • Spirit and scope of federal, state, and local laws, ordinances, and regulations.

• Limited but appropriate
  • Meet the regulations but don’t write yourself into a corner
  • Agency imposed vs regulatory requirement
  • Protocols and workflow diagrams for granular level details.
Policy and Procedure Development

General Best Practices (cont’d)

• Owned & time bound
  • Avoid the royal “We”
  • Identify an actor (by job title or discipline) for each action.
  • Reasonable and specific timeframes (e.g., ‘within 3 business days’ rather than ‘as soon as possible’)

• Flexible
  • Create for use across the spectrum rather than separate P&Ps specific to each event
  • Balance full-spectrum with size
Policy and Procedure Development

Emergency Preparedness Framework

• Develop and implement emergency preparedness policies and procedures based on
  • Risk assessment
  • Emergency plan
  • Communication plan

• Reviewed and updated at least annually.

• Address management of medical and nonmedical emergencies
  • Care-related emergencies at the center
  • Care-related emergencies after hours or away from center
  • Non-medical emergencies
Policy and Procedure Development
Emergency Preparedness Considerations

- Staff and Participant Tracking
  - Who is where and when (e.g., weekends, weekday morning, etc.)
  - Rosters
    - Media type - electronic and/or paper
    - Updating
    - Storage and confidentiality
    - Access by incident command/staff
  - How will participants or staff who are not at the center learn about center closures
Policy and Procedure Development

Emergency Preparedness Considerations (cont’d)

• **Evacuation**
  - Location and under what circumstances
  - Participant care during evacuation
  - Transportation
    - What is plan for vehicles that are on the road at the time of the emergency
    - How will you use transportation after the danger is over
• Shelters (Civil Defense, Community, Local)
• Communication options if the site is evacuated or phone lines are down
Inform emergency preparedness officials about participants in need of evacuation from their place of residence.

- Prioritize beforehand
  - No caregiver in the home
  - Caregiver in the home or congregate living
  - At the center

- Continuity of care
  - Acuity list, health care wishes, etc.
  - Key information first responders need to know

- Home safety planning with participant upon enrollment and updated regularly

- PACE responsibility vs. the responsibility of local authorities
  - Risk Tolerance - boundaries
  - What does 24/7 mean with regard to disaster prep
Policy and Procedure Development

Emergency Preparedness Considerations (cont’d)

- **Shelter-in-Place**
  - Safety zones
  - Emergency supplies/food
  - Recliners/cots/amenities
  - Plan for after 3-days
  - Employee’s responsibility to self and family
    - *Are you prepared to require that staff stay at, or come to, the job site in the event that a disaster impacts their family and loved ones.*
Emergency Preparedness Considerations (cont’d)

• Medical documentation that protects PHI
  • HIPAA privacy and security
  • Backup system (remote access to EHR, paper, etc)
  • Access (who and under what conditions)

• Volunteers or other emergency staffing strategies
  • Proximity of staff to work site
  • Local, state, or federal groups likely provide volunteers (non-staff)
  • Volunteer access to PHI
Policy and Procedure Development

Emergency Preparedness Considerations (cont’d)

• Partnering with PACE organizations or other providers
  • Proximity to the emergency
  • Capacity (space, skills, staffing ratios)
  • Transferring phone lines / on-call
  • Pharmacy / Medication delivery

• Alternate Care sites identified by emergency management officials
  • What are likely sites for alternate care in the event of center-based, neighborhood-based, city-based, region-based emergencies
  • What are minimum requirements specific to PACE participants
Policy and Procedure Development

Emergency Preparedness Considerations (cont’d)

- **Emergency equipment**
  - Maintenance, logs, calibration of emergency equipment
  - Who is trained to use the equipment
  - Is there always a trained person on-site
  - Outside sources for emergency medical assistance if needed
  - Back-up plan in the event that 911 is not accessible
Communication Plan

Emergency Preparedness Framework

• Compliant with Federal and State law

• Reviewed and updated at least annually

• Linked to risk assessment and to policies & procedures
Communication Plan

Emergency Preparedness Consideration

• **Contact information**
  • How will contact info for staff, volunteers, contractors be maintained and stored
  • How will contact info be accessed
  • Who are your Federal, State, tribal, regional, and local emergency preparedness staff
  • What is next level of contact if area impacted includes normal contact.
  • Messaging content for each entity
Communication Plan

Emergency Preparedness Consideration (cont’d)

• **Primary and alternate means for communication**
  
  • Ensure multiple options
    • Landlines, cell phones, radio, text
    • Battery back-up and charging
    • Generator – brownout protocol when in use

• Phone trees

• Television/radio announcements for facility closures
Communication Plan

Emergency Preparedness Consideration (cont’d)

- **Sharing medical information**
  - What info is necessary to ensure continuity of care
  - Use and disclosure of PHI
    - Notice of Privacy Practices
    - Business Associate Agreements
  - Method of communication (e.g., electronic, telephonic, hard copy, etc.)

- **Means of providing info about the PO’s needs, and its ability to provide assistance, to the authority having jurisdiction, the Incident Command Center, or designee**
Disaster Plan Implementation: Training & Testing your Plan

• **Training**
  • New Hire Orientation & Annually

• **Testing**
  • HVA: Prioritize the “Top 5” identified vulnerabilities

• **Realistic Scenarios** (eg., Lock-down situation)
  • Consider physical & psychological impact on participants, caregivers, staff & contracted providers
  • Ability to Communicate
  • Include situation or wild card: “Prt becomes distraught & combative”
  • What do you do when the event extends beyond business hours?
    
    **Duty to Work vs. Duty to Family**
Plan Implementation: Drills & Exercises

Planned Drills & Exercises

- Types
  - Tabletop:
    - Walk-through
    - Internal / external response
    - Identifies gaps
    - Staff availability: Backup?
  - Center:
    - Announced & Unannounced
  - Joint Drills & Exercises
    - Hospital: Engage local Emergency Response Coordinator
  - Community:
    - Fire, Police, EMS
    - Inventory of Community Emergency Response assets

Recipe for Success: Document, test, update, repeat
After Action Reports (AAR)

- **When do you write an AAR?**
  - After all exercises & drills including table top exercises
  - Take credit for real world events in which you participated

- **How to write a good AAR?**
  - The AAR should include
    - Scenario
    - Goal/Objectives
    - Summary of the event
    - What went well; Lessons learned; Corrective actions;
    - Plan for future events: Evaluate the corrective actions taken

- **Was this a Level II reportable event?**
  - Include in your AAR
Events: Lessons from the Field

- Earthquake
- Hurricane
- Phone: “Communication Outage”
- Power Outage
- Snow
Lessons from the Field

**Event Description:**
- Duration
- Impact on PO, participant’s, staff
- Communication
- Preparedness

**After Actions:**
- What went well
- Areas of Improvement
- Take away: What would you do differently now, based on the experience?

**Report as a Level I or II event**
An innocent stroll about the complex?
It may not always be as it appears

Is a power outage, simply a power outage...or something else?
Weather Forecast Snow Totals

PACE Center
Lake-effect snow 2014:
Catholic Health LIFE
Catholic Health LIFE: Snovember
NY Hospital Prepares for Baby Boom 9 Months After Storm
Putting it all together

Back to the Beginning

YOUR

Identified Events and Concerns
Emergency Preparedness Resources

Additional resources for emergency preparedness information


6. Centers for Disease Control: Hospital All-Hazards Self-Assessment - Centers for Disease Control: [www.cdc.gov](http://www.cdc.gov)

7. Sample Hazard Vulnerability Analysis Tool: [http://www.hasc.org](http://www.hasc.org)

8. NPA: National PACE Association: [www.npaonline.org](http://www.npaonline.org)


11. State Hospital Association

12. State Division of Public Health or Division of Health & Human Services

13. State Emergency Management Agency

14. Parent Organization
Thank you

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