

HOSPICE EVACUATION PLAN FORMAT

PURPOSE

The following criteria are to be used when developing Emergency Management Plans for all hospices. These criteria also serve as the format for the plan since they satisfy basic contingency requirements. They are not intended to limit or exclude additional information that a hospice needs to satisfy other requirements, or to address other arrangements that have been made for emergency preparedness.

The Public Health Department has a comprehensive program that addresses assistance for persons with special needs; please contact (912) 356-2160 to obtain additional information regarding this program. Special needs registrants are those persons registered the Public Health Department that require assistance during times of disaster and who live at home or with their caregivers. Special needs registrants are not those who reside in residential health care facilities. Residential health care facilities are required to have written agreements with other residential health care facilities in the event there is a need to evacuate.

Introduction

- Name of the hospice, physical and mailing address, emergency contact phone number, pager and cell phone number (if available), and fax number.
- Identification, by position and title, of the person in charge during emergencies, including home and work phone numbers, pager or cell phone numbers, if available. Identify 2 alternate(s), should that person be unavailable, with contact information for the alternate(s) by position and title.
- Name of the corporation, owner(s) if applicable, and chief operating officer of the hospice, addresses, work and home telephone numbers, pager or cell phone numbers, if available.
- Name, address, work, and home telephone numbers of person(s) who developed this plan.
- List the names, addresses, telephone numbers, and other contact information of the hospice's chief operating officer and the position and title of the key disaster personnel. Include information for normal and after-hour communication of the key disaster personnel.
- List the name of the hospice's contact person, telephone number and address of emergency service providers such as transportation, emergency power, fuel, water, police, fire, rescue, emergency management, etc.

Direction and Control

- Identify the chain of command to ensure continuous leadership and authority in key positions.
- State the procedures to ensure timely activation of the comprehensive emergency management plan and staffing of the facility during an emergency.

Education of Residents

- Describe procedures for educating residents and residents' caregivers about the facility's comprehensive emergency management plan.
- Describe procedures for discussing with those residents who need continued services, which are not registered with the special needs registry, their plans during, and immediately following, an emergency.
- Describe procedures for providing written materials about the special needs registry in their area, with those residents who will require evacuation to a special needs shelter during an emergency.
- Describe the facility's procedures for collecting resident registration information during admission for the special needs registry. Residents must be registered with the special needs registry prior to an emergency, not when an emergency is approaching or occurring.
- Describe how residents will be educated in the role of administering their own medication, and maintaining their own supplies and equipment.
- Describe procedures for discussing with those residents registered with the special needs registry, the following: The limitation of services and conditions in a shelter will not equal what they receive in the facility; that conditions in the shelter may be stressful and may be even inadequate for their needs; and that the special needs shelters are an option of last resort.

Notification

- Explain how the facility staff in charge of emergency plan implementation will receive warnings of emergency situations, including off hours, weekends and holidays.
- Identify by position and title, the facility's 24-hour contact number, if different than the number listed in the introduction.
- Explain how key field staff will be alerted.
- Explain how residents will be alerted, and the precautionary measures that will be taken, including but not limited to voluntary cessation of the facility's operations.
- Identify alternative means of notification should the primary system fail.
- Identify how the facility will maintain a current prioritized list of residents who need continued services during an emergency. The list should indicate how services will be continued in the event of an emergency or disaster for each resident and if the resident is to be transported to a special needs shelter.

The list should also indicate if the resident is receiving services and the resident's medication and equipment needs. The list shall be furnished to County Health Department and to the Chatham Emergency Management Agency, upon request.

During an Emergency

- During an emergency, when there is not a mandatory evacuation, some residents may decide to stay in their homes. Describe procedures the hospice will take to assure that all residents requiring continuing care will receive it, either from the hospice or through arrangements made by the resident or the resident's caregiver.
- During an emergency, when there is a mandatory evacuation, some residents may decide to stay in their homes. Describe procedures to notify residents that there may be a temporary disruption of services and when they can expect services to be restored.
- Identify procedures for the hospice to assure that all residents needing continuing care will receive it, either from the hospice, through a special needs shelter, or through arrangements made by the resident or the resident's caregiver.
- Identify procedures for maintaining hospice care and services, and safeguarding residents in the hospice residential or in-resident unit, maintaining services for residents who must remain in the hospice facility, evacuating residents during emergencies and disasters if mandated by the local officials, and notifying the regulatory authority, family members of residents and other responsible parties.
- Develop and maintain a comprehensive emergency management plan for disasters and emergencies including hurricanes, tornadoes, building fires, wildfires, disruption of public utility services, destruction of public utility infrastructure, floods, bomb threats, acts of terrorism, exposure to hazardous materials, and nuclear disasters.

Evacuation The following criteria shall be addressed to allow the hospice to respond to the evacuation of residents who require assistance with evacuation whether registered as a special needs registrant or in a facility.

Special Needs

- Identify procedures for the hospice to make arrangements to make the list of medication, supplies, and equipment available to each special needs registrant during evacuation to a special needs shelter.
- Identify procedures for educating the resident and caregiver concerning the medication, supplies, and equipment list and the need for this list and other items to accompany the resident during the evacuation.
- Identify resources necessary to continue essential care or services or referrals to other organizations subject to written agreement.

Facility Identify transportation to be used during an evacuation including agreements of understanding with other entities.

Re-entry Once residents have been evacuated from their homes or the hospice facility, procedures need to be in place for the return of residents and the resumption of hospice services.

Shelter

- Describe how the hospice will re-establish contact with residents in the residents' home and resume resident care.
- Describe how the hospice will re-establish contact with employees and re-start resident care.
- Describe how the hospice will provide or arrange for prioritizing care should the emergency result in less staff being available immediately following the disaster.

Information, Training, and Exercise

- Identify how employees will be instructed, prior to an emergency, in their roles and responsibilities during an emergency.
- Identify a schedule for all employees and who will provide the training. Training shall include a definition of what constitutes an emergency, when the comprehensive emergency management plan will go into effect, the roles and responsibilities of essential and non-essential staff, the procedures for educating residents about the comprehensive emergency management plan and the special needs registry.
- Identify the provisions for training new employees regarding their disaster related roles and responsibilities.

MOUs Provide copies of annual updated mutual agreements, memoranda of understanding, or any other understandings entered into between the hospice and any County or State entities, other health care entities, and service providers that have responsibility during a disaster. This is to include reciprocal host hospice agreements, transportation agreements, or any other current agreements needed to ensure the operational integrity of the plan.

Evacuation Map The emergency plan should include a map of the primary and secondary evacuation routes and description of how to travel to receiving facility.

Support Material

- Any additional material needed to support the information provided in the plan that is determined necessary by the hospice.

- Copy of the hospice's facility letter of approval of the annual fire inspection plan by the local fire authority.

HOSPICE RESIDENTS REGISTERED WITH SPECIAL NEEDS REGISTRY

The following information shall be supplied by the hospice to those residents registered with the special needs registry, so they will be prepared prior to an evacuation.

Please note: Shelters are intended to be places of last refuge. The evacuee may not receive the same level of skilled care received from staff in the hospice, and the conditions in a shelter might be stressful.

- 1) It is recommended that if the special needs registrant has a caregiver, the caregiver accompany and remain with the registrant at the shelter.
- 2) The following is a recommended list of what special needs registrants need to bring with them to the special needs shelter during an evacuation:
 - ◆ Bed sheets, blankets, pillow, folding lawn chair, air mattress;
 - ◆ The special needs registrant's medication, supplies and equipment list supplied by the hospice, including the phone, beeper and emergency numbers for the special needs registrant's physician, pharmacy and, if applicable, oxygen supplier; supplies and medical equipment for the special needs registrant's care; advance directives including the Do Not Resuscitate Order (DNRO) form, if applicable;
 - ◆ Name and phone number of the special needs registrant's hospice;
 - ◆ Prescription and non-prescription medication needed for at least 72 hours; oxygen for 72 hours, if needed;
 - ◆ A copy of the special needs registrant's plan of care;
 - ◆ Identification & current address;
 - ◆ Special diet items, non-perishable food for 72 hours & 1 gallon of water per person per day;
 - ◆ Glasses, hearing aides and batteries, prosthetics and any other assistance devices;
 - ◆ Personal hygiene items for 72 hours;
 - ◆ Extra clothing for 72 hours;
 - ◆ Flashlight and batteries; and
 - ◆ Self-entertainment and recreational items, i.e., books, magazines, games.
- 3) Special needs registrants need to know the following:
 - ◆ It is recommended that if the registrant has a caregiver, the caregiver accompany the special needs registrant. A special needs shelter can accommodate one caregiver at a time, and other family members, friends, etc. should go to a general population shelter.
 - ◆ The special needs registrant's caregiver will have floor space provided. The caregiver must provide his or her own bedding.
 - ◆ Service animals are allowed in shelters; but other pets are not permitted.
 - ◆ Bring personal snacks, drinks, and any special dietary foods for 72 hours. It is possible only sparse meals will be provided.
4. Caregivers who regularly assist the special needs registrant in the home are expected to continue to do the same care in the shelter. Caregivers can be relatives, household members, guardians, friends, neighbors and volunteers.

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.
- Where possible evacuate during a Hurricane Watch but consider moving residents after the sun goes down when environmental temperatures have dropped. This makes it more comfortable for both the residents and the staff and reduces the risk of hypothermia.

Contracts

- Determine if there is adequate bus and emergency vehicle transportation available through contractual agreements and include the contracts as a part of the facility plan.
- If there is inadequate availability of transportation vehicles in case of a disaster, work through the CEMA to plan accordingly.
- Renew contracts annually with companies that spell out the means of transportation.
- If there is the potential for distance travel, plan for different venues such as private bus companies.

Supplies

- Supply transport is the method by which the supplies will be taken to an out-of-town host facility. Determine if the vendors will assist with this requirement. A signed and current contract is required or an addendum saying that the resident and supply transportation are 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.
- Include in the facility plan the means to transport supplies/beds/staff to the receiving facilities. A facility must not wait to get a rental van on the day of the evacuation.
- Reserve truck(s) well before the beginning of hurricane season. Anticipate going outside the area to access transportation.
- Move the emergency supplies with the residents or contact the food supplier for adequate food.
- 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 are fully fueled and extra fuel available in an approved container.
- Bus staffing should include at a minimum one nurse and 2-3 assistants for every 25 residents.
- Keep an updated copy of the Resident Roster; this will help in the management of resident specific needs.
- Identify and plan for special needs residents such as residents on dialysis and oxygen, residents in need of special lifting equipment, etc.
- Keep a running list of residents (updated weekly) for their evacuation status. 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.
 - Involve the therapy department in the ongoing provision of lift, transfer, and transport training for staff. Involve therapy with the coordination of resident specific transportation guidelines, and reviews for transferring residents onto buses and other vehicles.

- Identification of special needs, e.g. insulin for diabetics.
- Have a binder with resident data that is updated daily of all current residents. 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 such as thickened liquids, 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.
- Notify families of relocation plans for their loved ones.
- Provide families or resident representatives with the name and address of the receiving facility.
- Provide the contact person's name and telephone number from the sending facility so they can be updated with the latest information on their family member.
- 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.
- Buy or rent satellite phones (\$10 a day estimated rental - they only work outside), for use during evacuation; have at least one cell phone with battery charger.
- 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

- 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.
- Confirm that regulatory authorities have approved the facility for a return.
- Ensure that food products, power restoration, supplies, and medications are available at the sending facility.
- Ensure adequate replacement staff are available in all departments for return to the facility.
- Make sure the transportation contracts spell out the return expectations.