

DISASTER PLANNING

Do It Now!

OBJECTIVES

- **To provide logical and easy take away tips that assist you in preparing your teams, your patients and their families, and your extended support vendors for emergencies large or small.**

Law Requires a Plan

- That Plan includes a written approach
- That Plan includes team and patient education
- That Plan includes back-up support systems
- That Plan includes supplies to perform treatments
- That Plan includes ongoing updates
- That Plan makes provision for staffing needs

Emergencies are Real

- **Power Failures**
- **Water Failures or Problems**
- **Winter Storms , Blizzard, Ice and Snow**
- **Flash Flooding, Rains with Tidal Surge**
- **Fire**
- **Hurricanes**
- **Tornadoes**
- **Bomb Threats**

Getting Prepared

- **Call lists: patients, staff, vendors**
- **Medical Records: Prescriptions for dialysis, medication, dietary orders, safety support meds**
- **Local News and Broadcast station information**
- **Emergency Call numbers local and national**

Who Do You Call?

- **FEMA National and Local**
- **FIRE AND RESCUE LOCAL NUMBERS**
- **REDCROSS National and Local**
- **CHURCHES AND SCHOOL NUMBERS**
(for transport and shelter assist)
- **VENDORS: Va Power, Telephone service, Radio, TV, Municipal Water, other “water suppliers”, Generator Co. (Agrecco), Fuel Company, Taxi and Bus Services**
- **MEDICAL SUPPLIERS**

WRITE IT DOWN

- **WHO IS RESPONSIBLE**

- WHO CONTACTS THE TEAM, THE PATIENTS, THE SUPPORT SERVICES

- **WHO DO YOU NOTIFY**

- WITHIN YOUR OFFICE, YOUR COMPANY, YOUR COMMUNITY (keep a PHONE log of all emergency numbers)

- **WHERE WILL YOU/YOUR PATIENTS RELOCATE OR EVACUATE TO**

- PLACE, ADDRESS, CONTACT NAME AND PHONE NUMBER

HELP YOUR PATIENTS

- **Educate, Educate, Educate!**
- **“INDEX” Card w/Emergency Numbers**
- **Updated Medication list**
- **Emergency diet instructions**
- **Emergency Prep list (flashlight, radio, water, meds, phone list, dry clothes, foods, etc..)**
- **“I have evacuated to” sign to post in window**
- **Teach patients your evacuation site if emergency occurs during their treatment**
- **Talking up the plans ongoing**

EMERGENCY INSTRUCTIONS

If patient not in the facility

- **STAY AT HOME, unless you are hurt.**
- **BEGIN SURVIVAL DIET (2 c. fluid/24 hours. No fruit, no vegetable)**
- **WAIT AT HOME FOR INSTRUCTIONS (about your dialysis on TV, Radio, Messenger or Phone)**
- **IF YOU MUST GO TO A SHELTER, tell the person in charge of your special needs.**
- **Remember: hospitals might not be equipped to do maintenance dialysis treatments.**

I, _____

Have evacuated to _____

(place)

(address)

(phone)

I am a dialysis patient and I dialyze at

The Best Dialysis Center Known

231 Wonderful Place

Rainbow City, Nebraska, 26790

888-765-4321

876-543-2100 emer. contact

(Do this on an Index Card)

Emergency Contacts

Radio Station	101.3FM	Emergency updates
Wavy TV	10	Emergency updates
Riverside Regional Hospital	757-000-0000	
Dominion Virginia Power	888-776-3000	
Verizon Telephone	800-483-1000	
Rescue Squad	911	
My Dialysis Center	987-654-3210	
Doctor	_____	_____
_____	_____	_____
_____	_____	_____

Your Best Support in a Disaster

- **Are Highly Responsible People :MSW, RD, Clinical Nurse Manager, Unit Secretary, Care-giver team, Techs and Medical Director/physicians**
- **Specific tasks assignments**
- **Patient records kept current w/contact resources**
- **Vendor knowledge of what you do and need**
- **Patient readiness in education, dietary and relocation strategy, and medication preparedness**

Do a **MOCK DISASTER!**

- **You DO NOT need to remove patients from clinic**
- **Hand out updated patient packets**
- **Update patient contact files during this process**
- **Tune in all TV's/Radios to NOAH station during the drill**
- **Have staff go through the activities that they will be responsible for (mock call to 911, to FEMA, to Red Cross)**
- **Mock Hand out “special Rx’s” acquired from pharmacy in patients names for High Potassium Patients**
- **Talk with patients about Implementing Emergency Diet.**

Scenario

- **Hurricane prep was done and hurricane landed with severe flooding and power failure. Your facility is not damaged, but has no power and the water is questionable. Your sister facility is badly damaged, and cannot support the needs of the patients. A total of 200 patients need treatment between the two facilities. Both facilities did great prep work and gave out patient instructions, emergency diet was implemented and emergency K+ support meds were acquired by/for the patients. All had full treatments on Friday and Saturday just prior the Hurricane hitting on Sunday at 2:00 am. What now?**

Disaster Aftermath

- You have already contacted your resources for Generator support, but you need special Electrical connections before it can be used. VA Power has you on 1st priority but damage in the area is confirmed for 7 days before power returns. Call that electrician!
- You call your Medical Director and fill him/her in on status of the clinic and needs of your area.
- You call the Municipal water for input. Water is not safe.
- Where do we get water? Other counties. Who delivers?
- Water Delivery is available in transport trucks. (prepare ahead)
- Contact your resources for DI tank backups
- Schedule Fuel deliveries for Generator.
- Contact all patients to “stay where they are and give them a call time to contact you”

.....cont.

- **Form a schedule of all patients. Contact MD for orders required to reduce treatment times**
- **Contact assistances for Patient Transport (busing might be needed. School buses are great!)**
- **Plan to run 24 hours. Notify all staff of “hours they are needed”**
- **Post a staff schedule and have it available for calls**
- **“Remember this is “disaster dialysis.”**

Show Team Cohesion Before and After

- Establish contacts with all physicians of care
- Support communication between physicians
- Share leadership positions. Allow visiting manager to support 'her/his' team while in your facility
- Have joint team meetings
- Communicate, communicate, communicate (it can get stressful)
- De-Stress your patients too. 😊

1st After Disaster Dialysis Day

- **Follow Patient Schedule. But be prepared for emergency needs.**
- **Worst patients-first patient.**
- **Permission to Dialyze for all patients from other facilities is needed.**
- **Single use-limits water**
- **Do 5-minute “check-in” with team before start of each shift**
- **Continue to reinforce emergency diet needs until full run times available**
- **Assure team takes meal breaks and that there is rest time between shifts.**

Let's Hope

- **Your Disaster's are few**
- **Your Disasters are small**
- **Your patients are prepared**
- **Your team is rested and ready to assist**
- **Your support vendors are highly responsive**
- **You NEVER have to implement your disaster plan**



The END! ☺