

Long Term Care Facilities: Are they equipped to respond to Disasters?

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Canada



WHAT WERE YOU
DOING AT 7 PM ON
JUNE 20/2013?

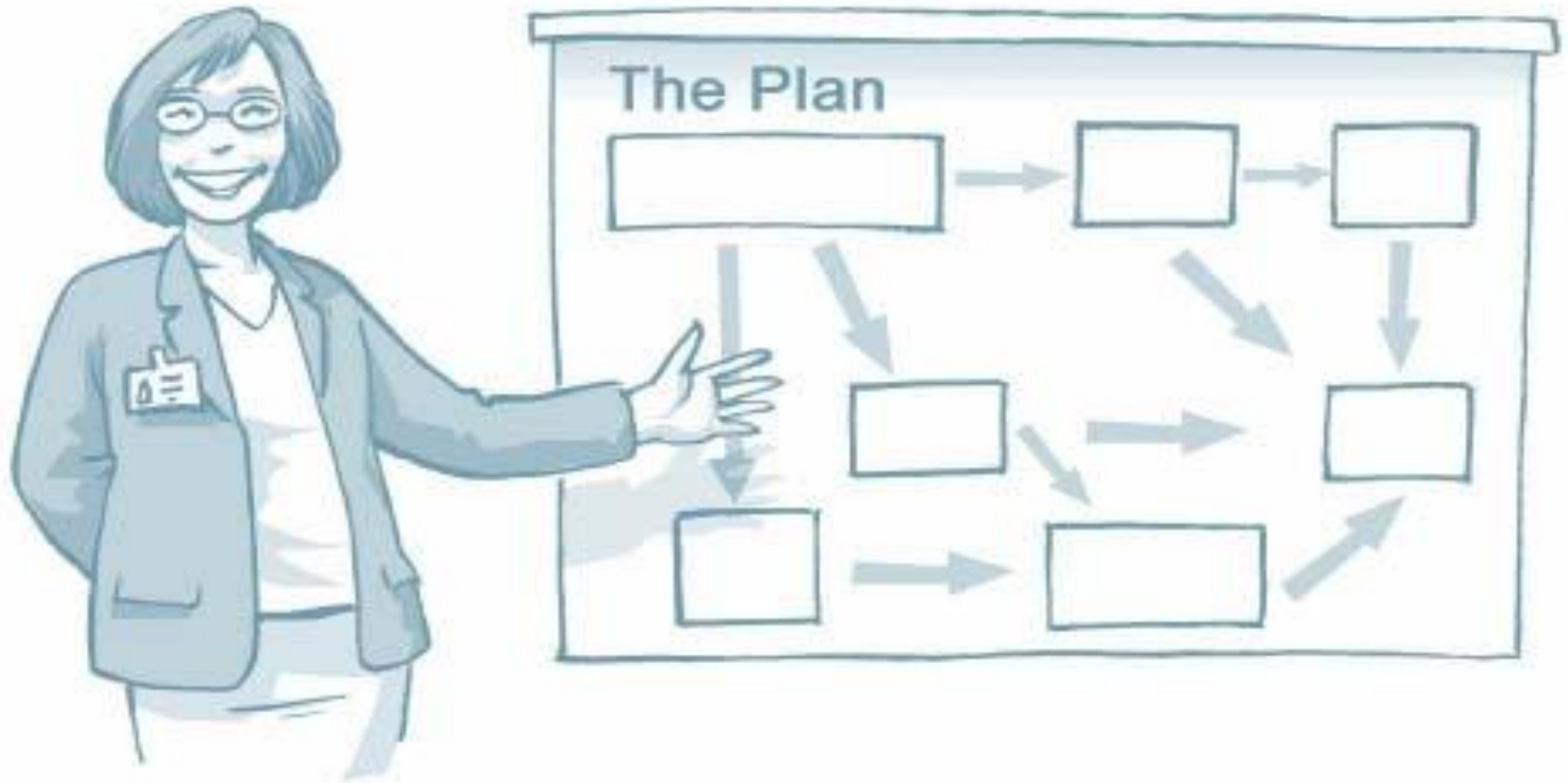
At approximately 7.01
pm, word of a
possible mandatory
evacuation was
received.

The Bow River that
usually provided a
beautiful view for our
residents was about to
BREACH and
OVERFLOW.

- Key staff were called in and some staff came on their own; decision to clear basement level.



- We implemented a plan (within 5 minutes) to secure the basement, save what we could, and ready to move out.



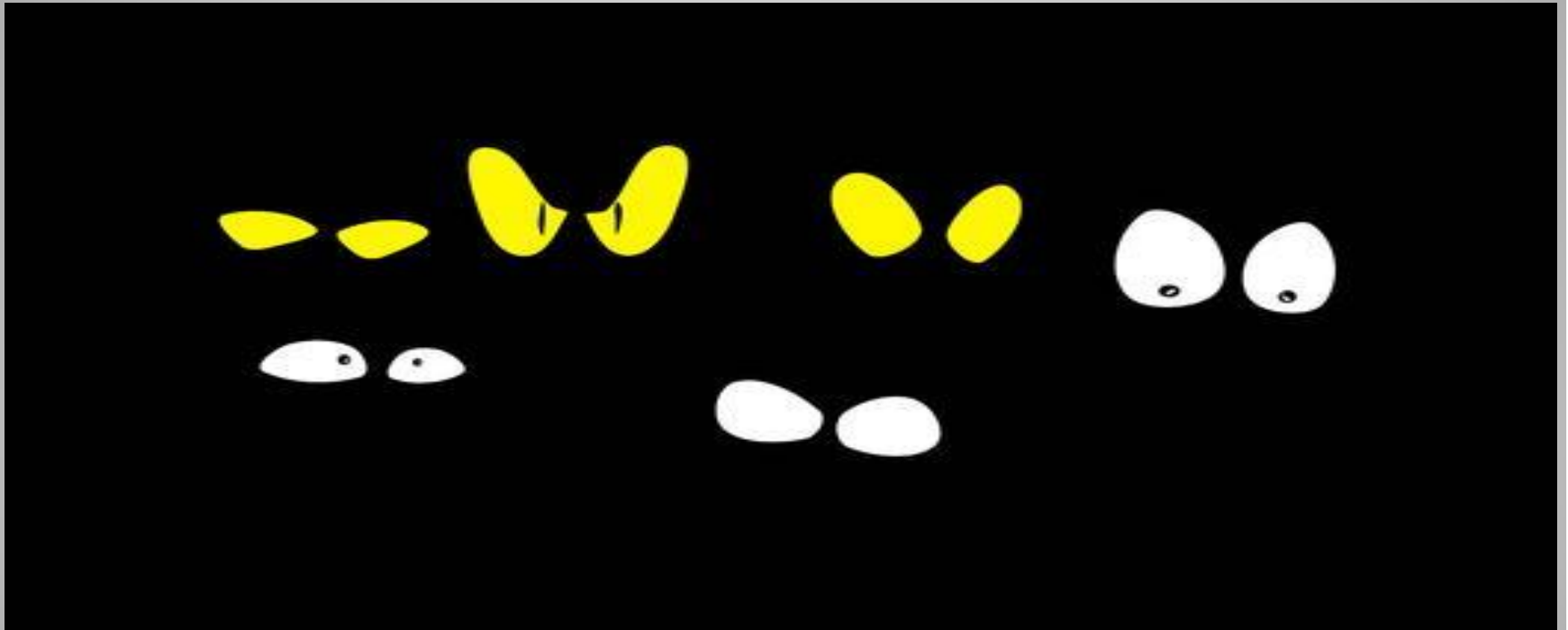
WHAT DID WE DO?

- We saved files, linens, incontinent products, chairs, computers, keyboards, milk, ice cream, paper plates, paintings, dry & canned food products, and alcohol (used for resident cocktail hours).
- Filled tubs and large pots with water in case the water became contaminated.

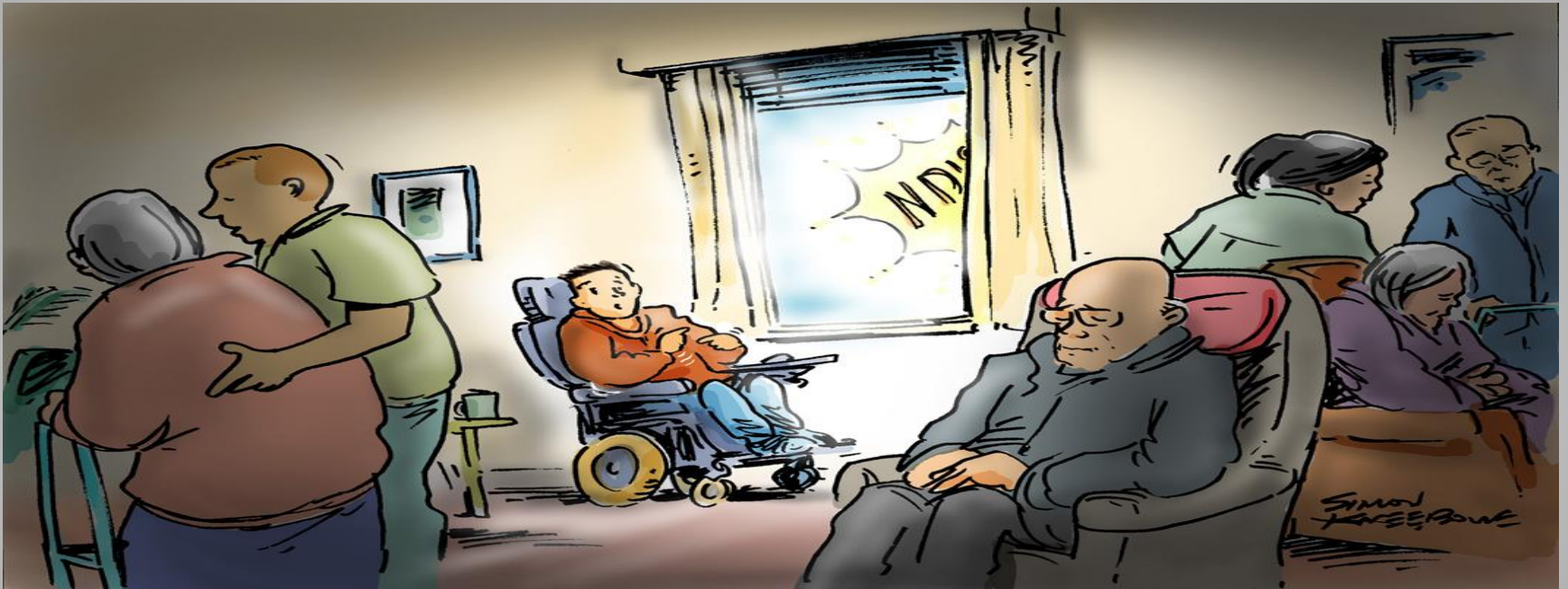


WHAT DID WE DO?

- After a couple of us walked directly into walls, we decided to use our I PHONE FOR LIGHT SUPPORT.
- We downloaded the Light App into all phones and used it to SURVIVE the remaining of the night.



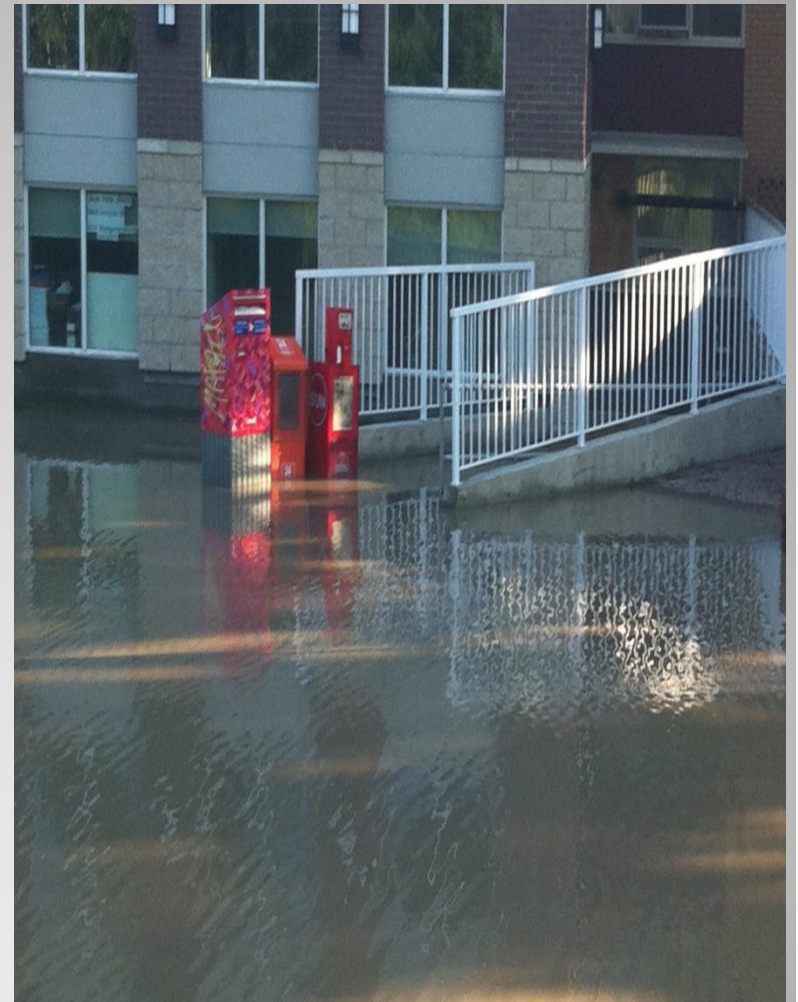
- By 7 am, the next day, breakfast was ready as we had saved all our cereals and moved the fridges from the basement kitchen area. Staff who stayed overnight prepared breakfast and lunch was also being worked on.
- WE COULD HAVE STAYED IN PLACE FOR 3 TO 5 DAYS.



- Afternoon of June 21, the mandatory evacuation order was given by emergency personnel.
- One hundred and sixty one residents of Bow View Manor were evacuated.



WATER AT OUR FEET



WATER AT OUR FEET

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- Our residents were placed into the 1 large gym area.



THE EVACUATION SITE

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- Some family members came to help with their loved ones at the site.
- One family member brought lounge chairs and read with his parents for the whole day.





- By 10.00 pm, we had managed to get another room where our aggressive residents could be placed.
- Our residents needed to sleep. They were tired!
- WHERE ARE THE BEDS?
- COTS ARE COMING FROM EDMONTON (3 hrs drive) AND PILLOWS AND BLANKETS?

- The next day, we received news that our residents would have to be transferred to LTC and Acute Care Sites as they could not stay in the gym.
- By 1 pm, the Recreation Centre became a Bus Depot as we were gathering residents and getting them ready for transport.
- Have you ever transferred 22 residents who are ambulatory, aggressive, and have severe dementia?
- Our staff followed our residents to settle them at the sites and by midnight all of our residents were safely sleeping in beds.

THE NEXT DAY



- For the next 3 days, our residents were cared for by our staff that we deployed at the sites.
- By June 25 and June 26 (4 to 5 days later), most of our residents were transported back to Bow View Manor.
- Have you ever tried to get a ambulatory, aggressive and with severe dementia resident off a bus?



- Our amazing team work and our staff
- Cooperation with key partners was excellent
- Organization of the evacuation site
- Amazing volunteer support especially during the clean up period
- Evacuation plan
- Our evacuation process-lists were current and clips for residents were current as well
- Communication between sites and Alberta Health Services
- Handibus transportation, EMS, and Police services were outstanding
- Well trained staff that were able to work under less than ideal circumstances to provide high quality care
- Our preparation for sheltering in place

WHAT WORKED WELL?

- Fan out not initiated
- No phone lines so communication was through personal cell phones
- Due to loss of computer network, ability to pull information and contact families through email was impossible
- Command centre at evacuation site should have been outside the hold area and not inside
- Poor discharge from evacuation site due to transportation not being coordinated
- No resident charts
- Due to loss of infrastructure staff scheduling, payroll, etc, no tracking sheets
- Evacuation site was not ready to accommodate residents when transferred

WHAT DID NOT WORK WELL?

- We are now considering of having a stock of sandbags
- We need to become more computer savy so that we could have used Tweeter, Tweets, Instagram as we could have communicated with families and staff
- We need to have our server stored off site in a secure site that will not FLOOD
- Bring charts and extra batteries for the lifts
- We would have evacuated residents to our own sites first therefore decreasing the amount of residents transferred to the evacuation site
- Contact families to pick up residents sooner
- We would have contacted our Medical Site Leader
- We would taken clothes for residents, we had lots of incontinent products!. Now using pillow case
- Should have taken our nurse charge call phone which could have been used as the contact at the evacuation site

**WHAT WOULD HAVE WE DONE
DIFFERENTLY?**

- We have reviewed the evacuation plan and made changes based on what we learned from the flood and debriefing
- We have moved our servers off site
- We have developed a new website so we can communicate through it when needed
- We have stressed our disaster management in our corporate education
- We have looked at alternative for sandbags and equipment - evacsleds
- We have recognized that we have leaders that we are developing to move within our corporate ladder
- We have written a business continuity plan
- We have developed forms and put them into our Evacuation Kits
- We have developed a emergency response action plan that would be used at the site

POST FLOOD

Legend: D = Dietary L = Laundry
H = Housekeeping M = Maintenance
IP&C = Infection Control N = Nursing

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[illegible]

Employee Sign In – Sign Out Sheet

In order for Payroll and Scheduling to correctly keep track of your hours, please sign in at the beginning of your shift and then sign out at the end of your shift. You must have the Charge Nurse or designate sign the form before you leave at the end of your shift.

Date: _____ **Location:** _____

[illegible]

REPORT FOR DISASTER MANAGEMENT

Name of Facility: _____ Date: _____

Contact Name: _____

RESIDENT

		From	To	Returned
Census				
Discharged in the last 24 hours				
Number transferred to Acute Care				
Number evacuated				
Evacuation site				
In the event of infectious disease, number ill				

STAFF

Number of vacant positions				
In the event of infectious disease, number ill				

BUILDING

Secure				
Number of beds available				

Adapted, with permission, from AHS

Record of Supplies and Equipment

Facility: _____

Page #: _____

Administrator: _____

Location: _____

Director of Nursing (Care): _____

Equipment Or Supply	# on Hand	# Need ed	# Order ed	Price or Borrow ed	Source of Request	Date Bought Or Borrowed	Date Returned