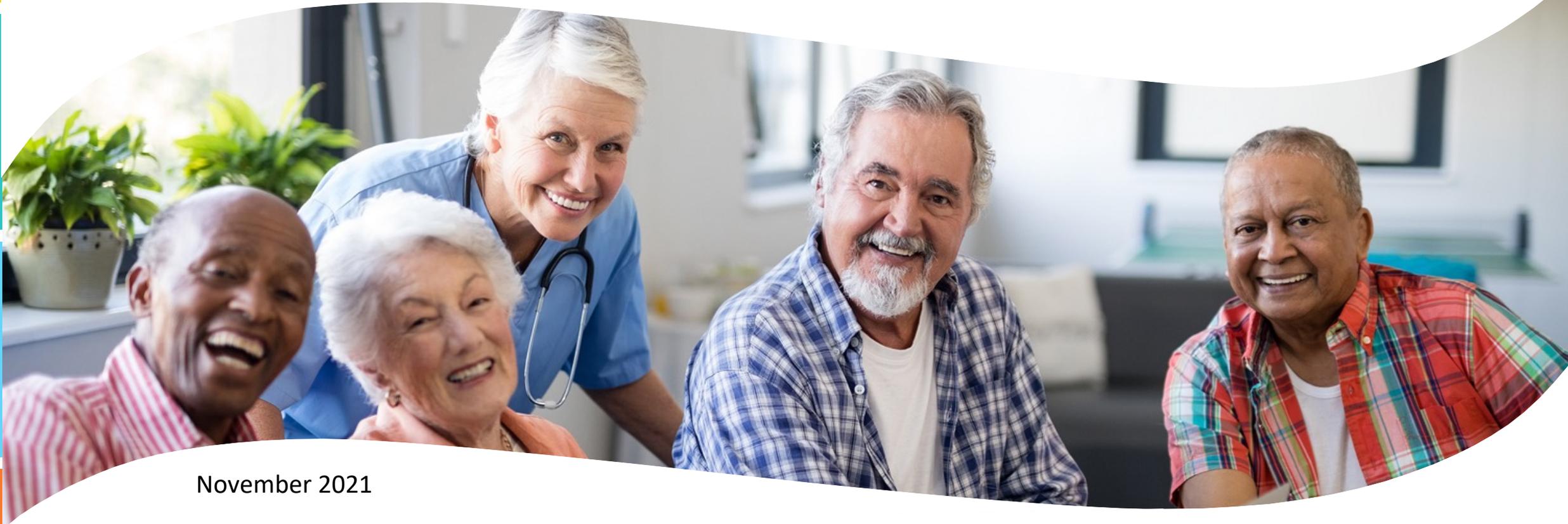


# Alliant Health Solutions Nursing Home Affinity Group: Managing Simultaneous Disasters in a COVID-19 World



November 2021

## Event Hosts:

Carolyn Kazdan, MHSA, LNHA  
Danyce Seney, RN, BSN, RAC-CT  
Julie Clark, BS, LPTA  
Julie Kueker, MBA, BS MT(ASCP)

Beth Greene, MSW, LGSW  
Melody Brown, MSM Florida Health Care  
Association Georgia Health Care Association  
North Carolina Health Care Facilities Association

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QUALITY IMPROVEMENT & INNOVATION GROUP

# Making Health Care Better *Together*



# Elizabeth (Betty) Shiels, PhD, MSSW, LCSW

**DIRECTOR, NORTH CAROLINA CMP LONG TERM CARE (LTC) EMERGENCY PREPAREDNESS INITIATIVE AND THE KY CMP LTC EMERGENCY PREPAREDNESS INITIATIVE**

Elizabeth (Betty) Shiels, Ph.D., MSSW, LCSW, is the director of the North Carolina CMP Long-Term Care (LTC) Emergency Preparedness Initiative and the KY CMP LTC Emergency Preparedness Initiative. She was the director of the KY Emergency Preparedness for Aging & Long-Term Care Program, funded by the KY Department for Public Health Hospital Preparedness Program (ASPR DHHS) and CDC PHEP, which were recognized by ASPR as “best practices” in emergency preparedness for LTC. Dr. Shiels is the director of the LTC2Prepare Program at the University of Louisville. She has presented to state, regional and national audiences on LTC emergency preparedness, quality improvement for long-term care and person-centered care initiatives. She has developed training curricula, training tools, and distance learning resources across continuing education programs for long-term care for the past 15 years.



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# Managing not One but Two Disasters Simultaneously!

Betty Shiels, PhD, MSSW, LCSW  
Director, LTC2Prepare Initiative  
Kent School of Social Work  
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LTC2Prepare Initiative is funded through NC Emergency Preparedness Training for Long Term Care Facilities Project CMS request number 2020-04-NC-0204 - Contract #00041922



# Learning Objectives

At the end of the workshop, learners will be able to:

- Identify the multiple types of disasters experienced by long term care facilities in Alabama, Florida, Georgia, Kentucky, Louisiana, North Carolina and Tennessee during the COVID-19 pandemic,
- Describe differences in disaster response and planning for a simultaneous infectious disease pandemic and natural and/or manmade disaster,
- Report increased knowledge of the challenges in managing two disasters at the same time and effective alternative approaches to emergency response, and
- Identify lessons learned which can be applied across LTC to improve existing emergency plans.



# Who We Are

- Betty Shiels, PhD, MSSW, LCSW  
Director, LTC2Prepare  
University of Louisville,  
Kent School of Social Work
  
- Diana Jester, MSSW  
Program Manager, LTC2Prepare  
University of Louisville,  
Kent School of Social Work



# The LTC2Prepare Program

- Seventeen (17) years experience with nursing facility preparedness engaging all KY LTC in emergency preparedness, response, and recovery planning through Healthcare Preparedness Program.
- Funding was provided by the KY Department for Public Health Preparedness branch and the Office of the Secretary for Preparedness and Response (ASPR, DHHS). Additional program funding was received from the CDC Center for Preparedness and Response, Public Health Emergency Preparedness Program (PHEP).
- The program served as the ESF #8 partner for first response on behalf of KY LTC and health care coalitions. It developed the *KY LTC Emergency Preparedness Manual (2017)* and was selected by ASPR, DHHS, as the “best practice” for nursing facility emergency preparedness.



# The LTC2Prepare Program

- The staff of the program engaged LTC in emergency preparedness training, and participated with health care coalitions, supported LTC disaster exercises and provided consultation to county jurisdictions, Emergency Management, Hospital Associations, the state Association for Health Care Facilities and Leading Age as well as the KY SSA.
- KY ranks among the top 10 states in the U.S. in the number of Presidential Declarations of Disaster.
- We have received CMS CMP funding for the KY Person-Centered Care Initiative , 6-State Quality Improvement Initiative and the Emergency Preparedness Initiative for the LTC2Prepare Program in KY and NC.



# Risk Assessment: Revised Final Rule

Hazards likely in geographic area

Care-related emergencies

Equipment and Power failures

Interruption in Communications, including cyber attacks

Loss of all/portion of facility

Loss of all/portion of supplies

Plan is to be reviewed and updated at least annually



# COVID-19 Plus.....

Presidential Declarations of Disaster 2020 - 2021							
Type of Event	AL	FL	GA	KY	LA	NC	IN
Hurricane	2	3			6	1	
Tropical Storms		2	1		6	2	
Severe Storms	4		1	3	1	1	5
Severe Winter Storms					2		
Flooding	1			2	1	1	5
Mudslides/Landslides				3			
Straight-Line Winds	2						3
Tornadoes	2		1		1	1	
Fire		3					
Building Collapse		1					
Explosion							1
COVID-19	*	*	*	*	*	*	*

# Disaster Impacts

- Wind Damage
- Power Outages
- Communications
- Flooding
- Evacuation
- Transportation
- Fuel
- Staffing
- Supplies



# Hazard Vulnerability Analysis: Manmade Hazards

- May not reach Presidential Level of Disaster
- Hazardous Materials Spill/Release
  - Roadway
  - Train Derailment
  - Plant/Depot
  - Nuclear Power
- Active Shooter
- Bomb Threat
- Law Enforcement Activity
- Workplace Violence



# Hazard Vulnerability Analysis: Facility-Based Hazards

- Care-Related
  - Missing Residents
- Equipment and Utility Failures
  - Power
  - Water
  - Gas
- Interruptions in Communication
  - Cyberattacks
- Interruptions in the Supply of Essential Resources
  - Water
  - Food
  - Fuel
  - Medications & Medical Supplies



# For Discussion

1. Please share the experiences your facility has faced in the 2020-2021 period in addition to COVID-19.
2. If there were no additional disasters, please discuss how your facility planning might have responded to a similar disaster to those shared by your peers.
3. How did your emergency plan help or hinder the management of an infectious disease pandemic in addition to a simultaneous natural or manmade disaster?
4. Did you utilize the Incident Command System (ICS) for the COVID-19 response and/or the other emergencies?

# For Discussion

5. Were the response partners different between COVID-19 and natural or manmade disasters?
6. What pressures did managing two disasters at the same time place on your COVID-19 response?
7. What were the similarities in your response between COVID-19 and the additional disaster/s?
8. What have been the successes in managing staffing shortages?

# For Discussion

9. What improvements to your facility plan did the After Action Report/Improvement Plan (AAR/IP) identify?
10. Have the experiences of 2020-2021 created opportunities to tweak your exercise plans?
11. What are you looking forward to most as the intensity of COVID-19 response hopefully wanes?

# Our Funders

- LTC2Prepare Initiative is funded through NC Emergency Preparedness Training for Long Term Care Facilities Project CMS request number 2020-04-NC-0204 - Contract #00041922



# For Additional Information



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**Questions?**



# CMS 12<sup>th</sup> SOW Goals



## Behavioral Health Outcomes & Opioid Misuse

- ✓ Promote opioid best practices
- ✓ Decrease high dose opioid prescribing and opioid adverse events in all settings
- ✓ Increase access to behavioral health services



## Patient Safety

- ✓ Reduce risky medication combinations
- ✓ Reduce adverse drug events
- ✓ Reduce C. diff in all settings



## Chronic Disease Self-Management

- ✓ Increase performance on ABCS clinical quality measures (i.e., aspirin use, blood pressure control, cholesterol management, cardiac rehab)
- ✓ Identify patients at high-risk for developing kidney disease & improve outcomes
- ✓ Identify patients at high risk for diabetes-related complications & improve outcomes



## Quality of Care Transitions

- ✓ Convene community coalitions
- ✓ Identify and promote optimal care for super utilizers
- ✓ Reduce community-based adverse drug events



## Nursing Home Quality

- ✓ Improve the mean total quality score
- ✓ Develop national baselines for healthcare related infections in nursing homes
- ✓ Reduce emergency department visits and readmissions of short stay residents

# Making Health Care Better *Together*



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