



Nursing Home Incident Command System

Introduction to the Nursing Home Incident Command System

Really Ready, Too!
Disaster Preparedness Conference
for Long Term Care
September 29, 2009

California Association of Health Facilities



Nursing Home Incident Command System

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Center for HICS Education and Training with
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within are provided for Nursing Homes and
other Long Term Care Facilities in
development of emergency preparedness and
response programs.*





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Faculty

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Objectives

At the end of this presentation, the learner will:

- Discuss the importance of all hazards emergency response and planning for Nursing Homes
- Understand the fundamental concepts of the Incident Command System and its application to Nursing Homes
- Discuss the NHICS toolkit applications for emergency preparedness and response



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Who....


- Recognized leaders in Long Term Care
- Recognized leaders in Hospital Incident Command System




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Who




- CAHF Leadership
 - Jocelyn Montgomery*
 - Tom Medley*
- The Center for HICS Education and Training
 - Craig DeAtley* *Wendy Clark*
 - Mary Massey* *Dean Morris*
 - Ann Potter* *Melinda Stibal*
 - Sheri Waldron*



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Who ...

- Secondary review group
 - California based subject matter experts in nursing home and long term care
 - Provided project input at inception
 - Ongoing review of materials as developed
 - Input into guidance documents and toolkit



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Why ...




- Unforeseen changes in plans, policies and agreements
- Priorities among responders and leadership may shift
- Disaster impact cannot be predicted
- Disasters may last for longer than anticipated



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Why...

- Disasters strike at every level... no facility or agency is outside the strike zone
- Because no one agency, facility or person can response alone
- Because history tells us so!





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Disaster Impacts on Nursing Homes

Northridge Earthquake

- Surveyed 144 nursing facilities
- 23 sustained severe damage, 5 closed (625 beds), and 72 lost vital services
- Of 87 nursing facilities implementing disaster plans, 56 cited problems that plans did not adequately address, including absent staff, communication problems, and generator and fuel shortages

Salbia, D., Buchanan, J., Kighton, R.S. (2004) Function and response of nursing facilities during community disaster. *Am J Public Health*. 94:1436-1441



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Disaster Impacts on Nursing Homes

Michigan nursing home fire sends 70 to hospitals
March, 2006 USA Today

- Mather Nursing Center
- 122 bed facility
- 360 miles from Detroit
- 108 elderly residents in total

Carbon monoxide forces nursing home evacuation
 High carbon monoxide levels forced the evacuation of 150 seniors from a Northwest Side NH in Chicago in February 2008



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Disaster Impacts on Nursing Homes

Nursing Home Emergency Preparedness and Response During Recent Hurricanes

- All 20 selected Gulf State nursing homes experienced problems, whether they evacuated or sheltered in place.
- Of the 13 Nursing Home's that decided to evacuate, each encountered unforeseen problems:
 - Transportation contracts not always honored
 - Evacuation travel took longer than expected
 - Medication needs complicated travel
 - Host facilities were unavailable or inadequately prepared
 - Facilities could not maintain adequate staff
 - Food and water shortages occurred or were narrowly averted
 - Prompt return of residents to facilities were difficult

American Journal of Public Health July 2008
 Sarah B. Laditka, PhD, James N. Laditka, DA, PhD, Sudha Xirasagar, PhD, MBBS, Carol B. Common, BS, PA, RN, Courtney B. Davis, MEd and Jane V.E. Ritchey, DrPH, RN, CHES

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How...

- Review of available disaster planning tools for nursing homes and other health care providers
- Discussion with CAHF and subject matter experts
- Review of applicability of Hospital Incident Command System (HICS) materials
- Review of regulatory requirements



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How



- Understand the unique needs and capabilities of Nursing Homes
 - Limited resources in personnel, supplies, equipment
 - Role in healthcare system of safety net
 - Variance in size, mission, census
 - Location, location, location



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How...



- Acknowledge the limitations
 - Limited staff to address disaster preparedness issues
 - Limited time to address disaster preparedness issues
 - Administrative support
 - Community buy-in and support



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What ...



- Customization of Incident Command System to the unique needs and capabilities of Nursing Homes
- Guidance document: NHICS Guidebook
- Planning and Response Tools
- Educational Materials



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Customization of Incident Command System



- Review traditional organizational chart of ICS and Incident Management Team Chart of HICS
- Develop scalable IMT for Nursing Homes
 - Allows even more customization
 - Allows for facility based customization: make it your own

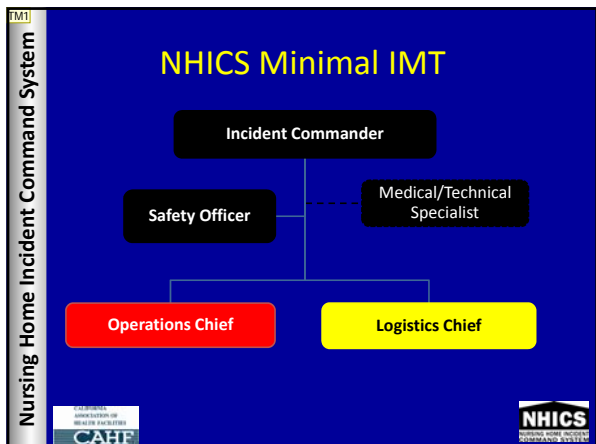


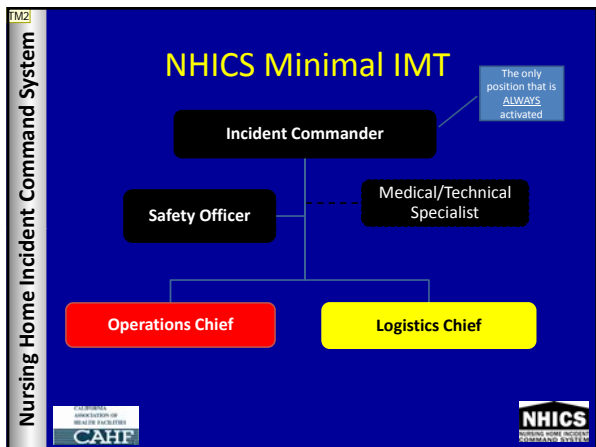
Nursing Home Incident Command System

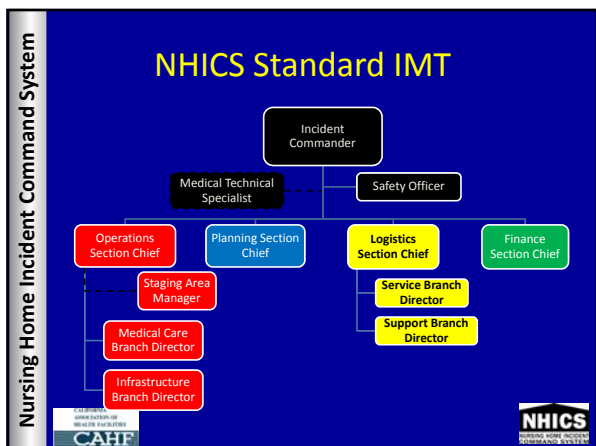
IMTs for Nursing Homes

- Minimal
 - Core positions to respond to events of all sizes
- Standard
 - Additional positions added to manage and respond to the event
 - As complexity grows, positions are added
- Optimal
 - Greatest number of positions
 - Used for larger facilities when response roles are greater in number and scope







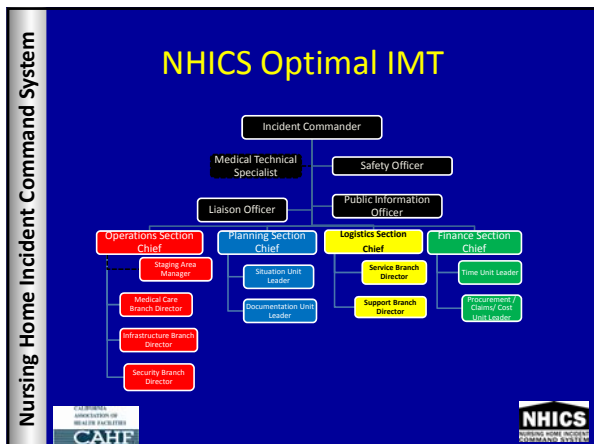


Slide 19

TM1 to improve the flow and reinforce learning it is suggested to put the optimal IMT first, standard second and minimal last.
, 8/3/2009

Slide 20

TM2 to improve the flow and reinforce learning it is suggested to put the optimal IMT first, standard second and minimal last.
, 8/3/2009



- ### NHICS Guidebook
- How-to guidance for use of the NHICS
 - Detailed explanations of the sections, Command and General staff positions
 - Overview of planning and response guides and tools
 - Customization guidance for incorporating the NHICS into your facility
- CAHF logo: CALIFORNIA ASSOCIATION OF HEALTH FACILITIES
NHICS logo: NURSING HOME INCIDENT COMMAND SYSTEM

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CAHF logo: CALIFORNIA ASSOCIATION OF HEALTH FACILITIES
NHICS logo: NURSING HOME INCIDENT COMMAND SYSTEM

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Planning and Response Tools



- Incident Planning Guides
 - Identify actions to consider in the planning for hazards most commonly faced by Nursing Homes
 - Severe Weather
 - Fire
 - Earthquake
 - Power Failure
 - Flood
 - Disease Outbreak
 - Sectioned by phases of emergency management: mitigation, preparedness, response and recovery

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Incident Planning Guide: Severe Weather



INCIDENT PLANNING GUIDE	
Does your Emergency Operations Plan Address the following issues?	
Mitigation & Preparedness	
	Does your nursing home regularly monitor pre-event weather forecasts and projections?
	Does your nursing home participate in pre-event local severe storm response planning with emergency management officials?
	Does your nursing home have a plan to initiate severe storm nursing home hardening actions (i.e., protect windows, secure outside loose items, test backup generators, obtain supplemental supplies of essential items (food, water, medications, lighting), protect basement high risk areas, relocate at risk items to higher levels, activate auxiliary radio operators, log-off fuel tanks, etc.)?
	Does your nursing home have plans for loss of power or loss of other utilities and services?
	Does your nursing home have a surge capacity plan that includes triggers and criteria for activation?
	Does your nursing home have MOUs with fuel suppliers to ensure a supply of fuel for emergency generators and vehicles, if needed?
	Does your nursing home identify and/or have MOUs with contractors that can perform repairs after the storm?
	Does your nursing home consider relocating hazardous materials/chemical agents to prevent contamination in case of flooding?
	Does your Emergency Operations Plan include triggers or criteria for activation of the Emergency Operations Plan, incident command and the command center?

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Incident Response Guides

- Provides a direction (mission) for the response
- Critical actions to be taken when the emergency or disaster strikes
- Customize to your facility!
- Sectioned by IMT role
- Grouped in chronological order
 - Immediate 0-2 hrs
 - Intermediate 2-12 hrs
 - Extended ≥ 12 hrs

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IRG: Severe Weather

Mission: To safely manage the operations of the nursing home (including providing for the safety of residents, visitors, and staff) during a severe weather emergency such as an ice storm, snowstorm, rain, flooding, etc.

Directions

- Read this entire response guide and review incident management team chart.
- Use this response guide as a checklist to ensure all tasks are addressed and completed.

Objectives

- Account for all residents, visitors and staff.
- Minimize impact on nursing home operations
- Communicate situation to staff, residents, media and community officials
- Maintain resident care management and safety
- Restore normal operations as soon as feasible

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Immediate (Operational Period 0-2 Hours) COMMAND

(Incident Command):

- Activate the nursing home Emergency Operations Plan
- Activate Command Staff and Section Chiefs, as appropriate
- Communicate with local emergency management of nursing home situation status, critical issues and resource requests
- Communicate with local EMS and ambulance providers about the situation and possible need to evacuate or relocate residents
- Communicate with other health care facilities to determine:
 - Situation status
 - Surge capacity
 - resident transfer/bed availability
 - Ability to loan needed equipment, supplies, medications, personnel, etc.

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IRG: Tools for the Response

Documents and Tools

- Nursing Home Emergency Operations Plan
- Severe Weather Emergency Procedure
- Business Continuity Plan
- Emergency communications plans
- Emergency power plans

Key Concept: Customize the IRG, from the actions to the tools, to your facility



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Planning and Response Tools: NHICS Forms



- Incident Action Planning
 - Guide to the response
 - Identifies command objectives : the mission
 - Identifies strategies and tactics
 - Assigns and documents roles and responsibilities
 - Assigns resources
 - Provides a reference

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NHICS Forms



- 20 forms developed
- Consistent with forms used by healthcare, fire/EMS/law and emergency management
- Used throughout the activation: mitigation, response and recovery

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NHICS Forms



Number	Name	Purpose
NHICS 201	Incident Briefing	Document initial response and actions
NHICS 202	Incident Objectives	Defines the command objectives and key messages
NHICS 203	Org. Assignment List	Documents the IMT positions
NHICS 204	Branch Assignment List	Assigns branch positions and its duties
NHICS 205	Communications Plan	Documents communication technology and contacts
NHICS 206	Staff Medical Plan	Identifies the care for employees
NHICS 207	Organizational Chart	Illustrative chart of IMT
NHICS 213	Message Form	Documents critical messages and response
NHICS 214	Operational Log	Documents duties performed in the position
NHICS 251	Facility Status Report	Assessment of the facility infrastructure

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NHICS Forms



Number	Name	Purpose
NHICS 252	Personnel Time Sheet	Tracks hours worked during the response
NHICS 254	Patient Tracking Form	Identifies patients received at the NH
NHICS 255	Resident Evacuation Tracking Form	Tracks all residents evacuated
NHICS 256	Procurement Summary Report	Documents supplies / equipment procured for the response
NHICS 257	Resource Accounting Record	Tracks the expenditures
NHICS 258	NH Resource Directory	Critical contact information
NHICS 259	Casualty & Fatality Report	Documents injury or death of residents
NHICS 260	Pt Evacuation Form	Documents individual evacuated patient
NHICS 261	IAP Safety Analysis	Directs a safe response

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NHICS Forms



- Only use the forms you need
- Despite the number, the “basic” or foundational forms can be completed rapidly
 - Advantage: clear documentation of times, actions, responsibilities
 - Advantage: a quality assurance tool
 - Advantage: can assist in reviewing the response
 - Advantage: can assist in financial recovery

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NHICS Forms

- Consistency on forms
 - Name
 - Number
 - Operational Period
 - Date / Time
 - Year/month/day format
 - 24 hour clock
 - Instructions for completion
 - Person Responsible

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NHICS Forms

- Customizable but consistent....
 - Do not change the name or number of the form
 - Do place individual facility logos on forms
 - Do complete some forms (ex.: NHICS 258 Resource Directory) during the planning stage
 - Do place NH specific guidance on the forms
 - Routing for forms
 - Use of internet for documentation

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Educational Materials

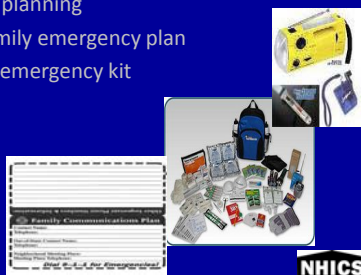
- 5 Modules developed
- Can be used for individual or in-classroom training
- Provide basic concepts for emergency preparedness and introduction to Nursing Home Incident Command System

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Module 1: Personal Preparedness

- Understand the importance of personal emergency planning
- Create a family emergency plan
- Prepare an emergency kit



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Module 2: Introduction to the Incident Command System

- Discuss ICS and the three purposes of the Incident Command System (ICS)
- Outline the fundamental features of ICS
- Describe the five management functions
- Define ICS terminology
- Describe the six steps of the incident planning process

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graph TD; Command[Command] --- Operations[Operations]; Command --- Planning[Planning]; Command --- Logistics[Logistics]; Command --- FinanceAdmin[Finance/Administration];
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NHICS

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Module 3: Applying ICS in Nursing Homes

- Understand how general Incident Command principles apply to Nursing Homes
- Understand why and incident management team is implemented, including Command and General Staff roles and responsibilities
- Demonstrate how to build and implement a Nursing Home incident management team

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Module 4: NHICS Toolkit




- Review the tools developed for NHICS planning and response to emergencies
- Discuss the Incident Planning and Response Guides and their applicability
- Understand the purpose of Job Action Sheets
- Review the Incident Action Planning forms customized for use in Nursing Homes

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Module 5: Implementing NHICS Into Your Facility



- Be familiar with administrative steps for NHICS implementation
- Describe how to adopt NHICS materials
- Discuss creating a Command kit for each IMT role
- Outline key elements of a FCC
- Identify how staff can be trained on NHICS
- Discuss conducting an exercise



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Summary

- Goals in Developing NHICS
 - Provision of a standard system that promotes and facilities interoperability
 - Usable, scalable system
- Results
 - Nursing Home specific tools for response and recovery
 - Guidance on implementation and customization



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Questions

