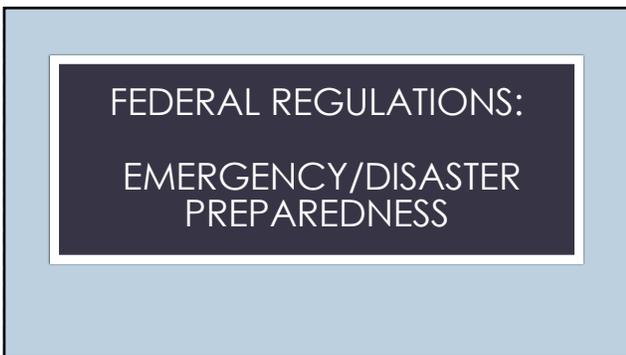


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Hurricane Helene and Milton

- 403 healthcare facilities in Florida evacuated in preparation for Milton
- 222 Assisted living facilities, 76 nursing homes
- By October 15, about 124 healthcare facilities were still evacuated, including four hospitals, two hospital emergency departments (EDs), 68 assisted living facilities, and 15 nursing homes

US NEWS

Some North Carolina nursing homes still don't have water weeks after Hurricane Helene: 'Unable to shower or wash hands'

By Steve Janosi
Published Oct. 20, 2024, 3:07 p.m. ET

45 Comments

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Hurricane Helene and Milton

Tom Akins, president and CEO of LeadingAge North Carolina, said he had talked with several member facilities in the Asheville, NC, area, where the damage has been devastating. A number of facilities were without power or cell service and lacked access to running water and food as of midday Monday.

"They are trying to pull together to care for residents when they don't have access to power, they don't have access to water," Akins said. "They are trying to find access to food and other supplies they need to care for their residents."

"This is all against a transportation backdrop of how to get staff to their facilities," he added, noting that in many cases staff can't get to work because the roads are damaged or impassable. In some areas near Asheville, emergency supplies were being [delivered by mule](#), the Associated Press reported.

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Possible Hazards

Power blackout	Armed individuals	Bioterrorism	Loss of heat	Loss of cooling mechanism	Bioterrorism
Terrorist attack	Nuclear power plant	Gas leak	Civil unrest	Radiologic emergencies	Chemical threat
	Cyber attack	Bomb threats	Missing resident	Economic disruption	

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- September 2001 Terrorist Attacks
- Anthrax Attacks
- Hurricanes in Gulf States in 2005
- Flooding in the Midwestern States 2009
- 2009 H1N1 Influenza Pandemic
- Tornadoes and floods in the spring of 2011
- Hurricane Sandy 2012

CMS used information from past emergencies/ disasters to help establish the final rule on emergency preparedness

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Emergency Preparedness Requirements for Medicare and Medicaid Participating Providers and Suppliers Final Rule

- Established September 6, 2016
- Compliance required by November 15, 2017
- Purpose: CMS reviewed existing Medicare regulatory preparedness requirements for providers and suppliers and determined they were not comprehensive enough to address the complexities of actual emergencies/disasters

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4 Key elements to the Emergency Preparedness Program

- Emergency plan based on a risk assessment and incorporates an all-hazards approach
- Policies and procedures
- Communication plan
- Training and testing program

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Policies and Procedures

Regulation E-0015 At a minimum, the policies and procedures must address the following:

1. The provision of subsistence needs for staff and patients whether they evacuate or shelter in place, include, but are not limited to the following:
 - A. **Food, water**, medical and pharmaceutical supplies
 - B. Alternate sources of energy to maintain the following:
 1. Temperatures to protect patient health and safety and for the safe and sanitary storage of provisions.
 2. Emergency lighting.
 3. Fire detection, extinguishing, and alarm systems
 - C. Sewage and waste disposal

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Communication Plan

- A communication plan helps to inform all staff, residents, families, and community and regulatory agencies about the emergency plan
- Health providers, state and local public health departments and emergency systems should be included

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Training and testing program

- Provide annual trainings and conduct drills and exercises or participate in an actual incident that tests the plan
- Staff familiarity with plan is one of the best ways to prepare for an actual emergency



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CMS Emergency Food/Water Requirements

- There are no requirements for set amounts of provisions (including food) for facilities to have on hand
 - Some states have their own requirements
 - This is driven by the facility or systems policies and procedures
- **A 3-day supply of emergency food and water is recommended at minimum**
- Contracts/agreements need to be in place with vendors to provide additional supplies
 - Vendors may be able to supply alternative refrigeration
- Plan for patients/residents, staff, and additional people (i.e. family member, rescue worker etc)

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CMS Emergency Food/Water Requirements

- Understand your facility specific policy
 - 3 vs 7 Day Supply
 - Consider state, local and county requirements
- Water requirements
 - FEMA, CDC and Red Cross recommend **1 gallon per person per day**

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Survey Procedures

- Regulation instructs surveyors to:
 - Verify the emergency plan includes policies and procedures for the provision of food, water and pharmaceutical supplies for patients and staff
- Emergency food/water citations may be cited as an E-Tag (emergency), K-Tag (life safety), or under F812
 - Not following facilities policy and procedures for emergency supplies
 - Not having enough food/water on hand per policy
 - Expired emergency supply items

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Putting it into Practice -

How to prepare your food and nutrition services department for an emergency/disaster

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Are You Prepared? Best Practices

- Emergency supplies are on site & follow facility policy & procedures manual
- Emergency menu has necessary menu extensions
- Posted emergency policy & procedures
- Yearly all staff in-service on emergency plan
- Additional recommendations:
 - Have phone numbers of the Red Cross, community emergency services available
 - Post evacuation route & floor plans, place a copy with your plan in case the location is destroyed during the disaster

EMERGENCY
EVACUATION
ROUTE

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Where to get Policy and Procedures/Emergency Menus

- Food Vendors
- Registered Dietitian Consulting Companies
- Emergency Preparedness Vendors
 - Dehydrated meals
- Additional Resources: US Department of Health and Human Services Healthcare Emergency Preparedness Information Gateway
 - <https://asprtracie.hhs.gov/technical-resources/52/long-term-care-facilities/47>

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Be Prepared – Keep on hand

- Emergency food
 - Follow policy and procedure menu
- Emergency water
- Enteral feeding formula + infusion supplies
- Disposable dishes, trays/silverware
- Sanitation supplies and gloves
- Alternate method for heating up food
 - Battery operated equipment
 - BBQ grill
 - Sterno fuel and containers

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Types of Emergency Food Supplies

- Use your food in fridges/freezers/storage first
 - Know your refrigerator capacity to hold temperature
- Traditional canned supplies
- Dehydrated/freeze dried meals
- MREs
- Supplements
- Texture altered emergency supplies
- Water - is it accessible?
- Inventory supplies regulatory for adequacy and prevent pilferage



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Be prepared

- Documents needed for meal service and regulatory purposes
 - Menus
 - Recipes
 - Menu extensions - liberalized
 - Temp logs
 - Troy tickets
- Vendor agreements/contracts
 - Backup contract for additional emergency food and water supplies
 - Plan in advance

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Be Prepared – Menu Considerations

- Choose comforting and familiar foods for residents and staff
 - Include sweets/desserts
- Beverage options
 - Coffee or caffeinated options
- What can be served safely with no heat or power source?
- Storage capabilities
 - Temperature and security of storage facility room

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Be Prepared - Food and Beverage Considerations

- How will you prepare food with no utilities?
- Mechanically altered diets
 - How will you prepare an IDDSI level 4
 - Therapeutic diets
 - Gluten restricted
- Thickened liquids
- Food safety

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Be Prepared – Kitchen Assessment

Know your utilities

- Are any outlets/equipment on emergency power?
- What equipment is fully powered by gas?
- Do you have emergency lights in your kitchen?
 - Do you have alternative light sources? Do they work?
- How to access water if unavailable?
 - How to sanitize?
- How to prepare mechanically altered diet textures?
 - Thickened liquids
- Computer access
 - Diet roster, traycards



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Are You Emotionally Prepared?

Food and beverages are important emotionally

What is important to your residents?

What is important to your teams?

What is needed for family members?

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Emergency Staffing Plan

- Pre-determine dietary staff members roles during emergency
- Team A - staff on-site during emergency
- Team B - relief staff after emergency
- May have non-dietary staff helping with dietary
- Staff contact information available

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Staffing Considerations

- Inservice staff on emergency preparedness
 - On hire and at least annually
- Have a practice "Emergency Day"
 - Helps with comfort levels
 - Hard to learn and figure out things during stressful times
- Encourage staff to be willing to do the unexpected in an emergency, such as helping with evacuations and luggage if needed, assisting with housekeeping and other tasks, and trying to reassure and comfort residents and patients

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Other Considerations

- Evacuation vs sheltering in place
- Post and drill evacuation routes and floor plans
- How will you move food and water in case you have to evacuate?
- Who else will you be feeding?
 - Staff, family members

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Lessons Learned: Hurricane Irma

Study: Hurricane Irma caused 400 senior deaths in Florida

A university study says the aftereffects of 2017's Hurricane Irma caused the deaths of more than 400 people in Florida nursing homes

By The Associated Press
October 13, 2020, 5:42 AM • 2 min read

'Absolute nightmare': 4 former Florida nursing home staffers charged in 12 Hurricane Irma deaths

By Jorge L. Ortiz
USA TODAY
Published 6:00 p.m. ET Aug. 27, 2019

4 employees to face charges in Florida nursing home deaths after Hurricane Irma, lawyer says

By Susan Scutti and Jamiel Lynch, CNN
Updated 8:25 PM EDT, Mon August 26, 2019

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Key Takeways

- 1

Know your emergency preparedness policies and procedures
- 2

Stock and rotate appropriate food and water amounts per your policy and state/local regulations
- 3

Train staff on emergency preparedness upon hire and at least annually
- 4

Anticipate other resident and staff needs during an emergency
- 5

Be prepared to do the unexpected in the event of an emergency/disaster

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