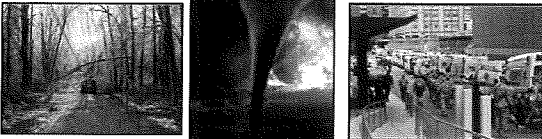




**MASSACHUSETTS LONG TERM CARE
MUTUAL AID PLAN (MassMAP)
2015 Annual Meeting**





**MASSACHUSETTS
SENIOR CARE**
ASSOCIATES

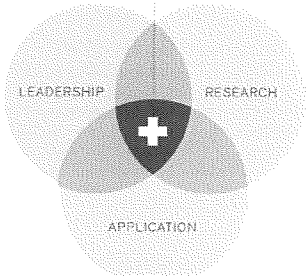
Helen Magliozzi, Program Lead
Denise DeSimone, Admin. Coordinator



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Jim Garrow, MassMAP Project Manager
Andy McGuire, Fire & Emergency
Management Consultant


RPA
EFFECTIVENESS



Our goal is to assist you in being as well prepared as possible for a fire or other

Program Agenda

- +MassMAP and why we are here today
- +Recent Disasters
- +Emergency Reporting: Rapid Analysis of Regional Issues and Capabilities
- +Disaster Exercises, Past, Present, and Future
- +Proposed CMS Standards and Assisted Living Regulations. Industry Best Practices?



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Assisted Living 2015 Regulations


(11) Disaster and Emergency Preparedness Plan: Each Residence shall have a comprehensive emergency management plan to meet potential disasters and emergencies, including fire; flood; severe weather; loss of heat, electricity, or water services; and residents with specific needs, such as a nursing resident. The plan shall be designed to reasonably ensure the continuity of operations of the Residence.

(a) Plan Requirements:


1. The plan and any changes to the plan, which shall be developed in conjunction with local and state emergency planners, must include the following elements:
 - a. an evacuation strategy for both immediate evacuations, for such events as fires or gas leaks, as well as delayed evacuations, for such events as impending severe weather;
 - b. an established Mutual Aid plan that addresses essential issues, such as supplies, staff, and beds;
 - c. actions necessary to ensure supply, equipment and pharmaceutical support in the event such services are interrupted;
 - d. an established relationship with local public safety officials and with local Emergency Management Services (EMS) officials;
 - e. participation in Health and Household Alert Network (HHAN);
 - f. and protocols for full participation in the Silver Alert System.
2. The plan shall indicate the location of emergency exits; evacuation procedures; and the telephone numbers of police, fire, ambulance, and emergency medical transport to be contacted in an emergency.
3. The plan shall address the physical and cognitive needs of residents, and shall include special staff response, including the procedures needed to ensure the safety of any resident. The plan shall include provisions related to individuals residing in a Special Care Residence, and shall be amended or revised whenever any resident with unusual needs is admitted.
4. The plan shall provide for the conducting of annual simulated evacuation drills and rehearsals for all shifts.
5. The Residence shall provide every Resident with a copy of the instructions they will be given under the Disaster and Emergency Preparedness Plan, and shall have available

Department of Health and Human Services
**OFFICE OF
INSPECTOR GENERAL**

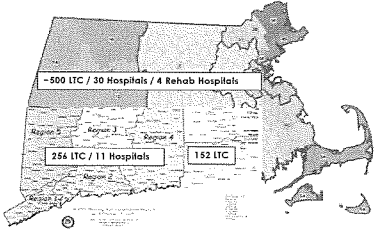
**GAPS CONTINUE TO EXIST IN
NURSING HOME EMERGENCY
PREPAREDNESS AND
RESPONSE DURING
DISASTERS: 2007-2010**




Robert R. L. Sullivan
Inspector General
April 2012
DHHS-10-000000000000000000



Southern New England Mutual Aid Plan



Plan Operation is first within your town/city. Additional support will come from your region - then other regions in a widespread disaster.

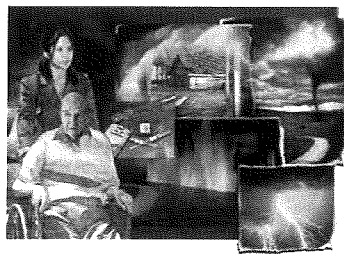


The Basics

- +Identify needs and provide **supplies/equipment/ pharmaceuticals**
- +Assist with **transportation**
- +Provide **staffing** support
- +Place and support **evacuated residents**



Recent Disasters



Recent Mutual Aid Plan Activations

- + January 2014 & 2015 – Blizzards effecting Southern New England
- + May 2014, Boston, MA – Partial Facility Evacuation at 1:30AM due to flooding and electrical failure
- + July 2014, Danbury, CT – Dryer fire forces horizontal evacuation and need for open bed reporting in the area
- + August 2014, New London, CT – Water Main Break causes loss of water pressure to facilities



Recent Incidents in Mutual Aid Plan

Case Studies

- + November 2014, Storm Knife – Buffalo, NY
- + January 2015, Blizzard – Southern New England
- + January 2015, Frost Quake – Silver Springs, NY
- + January 2015, Sprinkler Pipes burst - Iowa
- + February 2015, Sprinkler Pipes burst – East Providence, RI



Winter Storm Knife, Buffalo, NY, November 2014



Winter Storm Knife Buffalo, NY, November 2014

NOT THE SMARTEST THING
TO DO!!

THE MOST SNOW EVER
RECORDED IN THE LOWER
48 STATES




4 WEATHER	STORM TOTALS
	ESTIMATED WEEK LONG TOTALS
Cowlesville	88.0"
Lancaster	74.0"
Wales Center	69.3"
Orchard Park	63.0"
Blasdell	61.0"
Alden	57.5"
West Seneca	55.5"
Corfu	49.0"
Troyden	22.1"
Amherst	8.5"



Actions


- + Life Safety:
 - + Building Infrastructure
 - + Snow Removal (Access)
- + Review Staffing Plans
- + Review Supplies and Equipment



BREAKING NEWS
ROOF COLLAPSES AT NURSING HOME IN BUFFALO
 Residents evacuated; no deaths reported
... MUCH UNMANAGEABLE ... MORE THAN 6,500 TONS OF SNOW ...


Plan Support

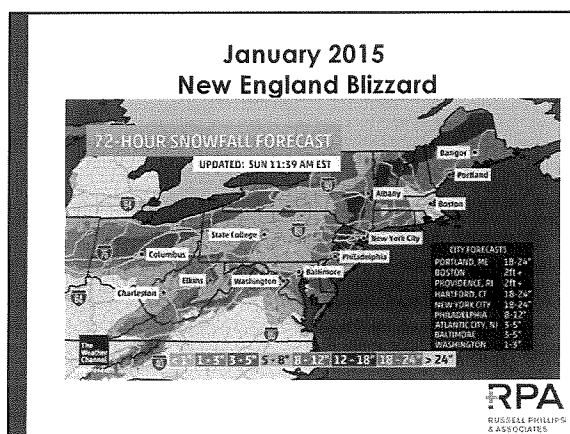
- + Long Term Care Coordinating Center activated in Rochester to support the Nursing Home Evacuation and the Region M
- + Members provided available beds
- + Identified available Transportation
- + Assisted with Resident Tracking



Challenges

- + Staffing Issues – Employees came to work on Monday and in some cases didn't leave until Thursday.
- + Supplies:
 - + Medications – Deliveries became an issues by day 3 & 4. Local Hospitals assisted
 - + Vendors – Snow plow vendors struggled to keep up with amount of snow and needing bigger equipment
- + Life Safety:
 - + Roof weight was a major concern along with the flooding potential





Actions

- + Life Safety
- + Staffing Plans
- + Supplies and Equipment
- + Transportation Plans (Lack of Public Transportation)

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Plan Support

- + LTC Coordinating Center / RMCC Remote Activation
- + Members provided Emergency Reporting prior to and post storm to identify:
 - + Operational Issues and Open Beds A
 - + Follow up calls were made to Non- Reporting Facilities
 - + Status Reports were provided to MassMAP Partners (DPH, MEMA & Associations)
- + Provided Vendor Support

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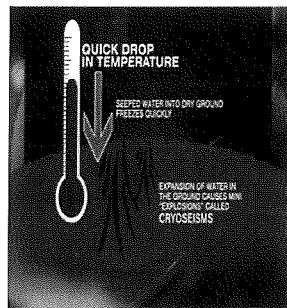
Challenges

- + Vendor Support MassMAP
 - + Issue with a Pharmacy Vendor being non-essential and ticketed (not verified).
 - + DPH Contacted and received meds from another facility
 - + DPH followed up with State PD and it appears there was no ticket issued
- + Staffing Issues:
 - + Boston Facilities
 - + Need to have a robust Staffing Plan resources to assist



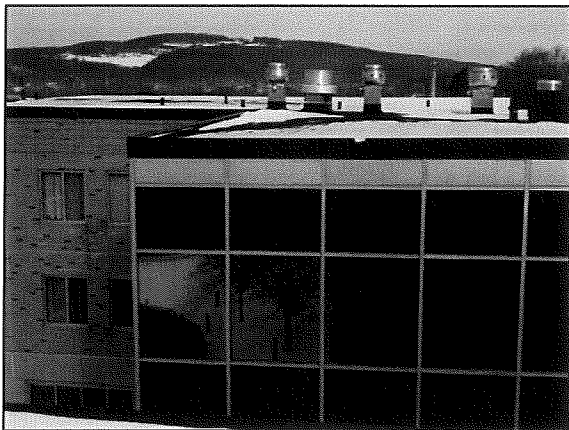
"Frost Quake"

A cryoseism, also known as an **ice quake** or a **frost quake**, may be caused by a sudden cracking action in frozen soil or rock saturated with water or ice as water drains into ground, it may eventually freeze and expand under colder temperatures, putting stress on its surroundings. This stress builds up until relieved, explosively in the form of a cryoseism









Actions

- + Evacuated 81 Residents due to Structural Damage (Initial call to EM was car into the building)
- + Internal Actions:
 - + Established Command Center
 - + Identified Resident Accepting Facilities
 - + Identified Transportation Needs and Resources
- + Identified what is going with the residents and informed staff:
 - + Medical Records
 - + Medications
- + Notified Families and MDs

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Plan Support

- + Facility activated the Western New York Mutual Aid Plan (WNY Mutual Aid Plan)
- + The WNY Mutual Aid Plan stood up their LTC Coordinating Center to support:
 - + Resident Placement
 - + Transportation (Wheelchair and Van Only)



Challenges

- + Incident Command System (ICS)
 - + Initially not established. No clear objectives.
 - + Once Emergency Manager arrived on scene a Command Center was established
- + Transportation of Medication
 - + With no EMS the transportation of Medications (Narcotics) became an issue. RNs drove Meds. to Receiving Facilities



Challenges

- + Family and Physician Notifications:
 - + Extremely time consuming. Initially assigned one staff member. Added two more on next round of calls
 - + Provided a phone number directly to the Social workers for family. Receptionist was overwhelmed
- + Communications:
 - + Need for more phones in the Command Center
 - + Need more portable radios and a repeater
 - + Need to train all staff on the use of radios

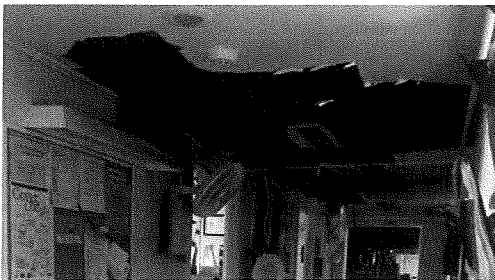


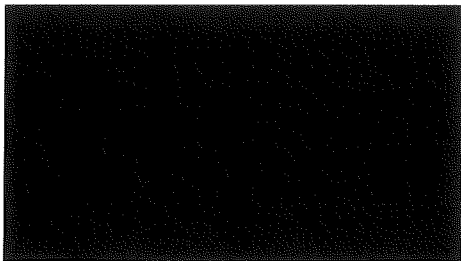
Challenges

- + Recovery:
 - + Insurance Adjusters onsite within 24 hours
 - + Very time consuming process
 - + They brought in two different types of engineers.
 - + Approved clean up process 72 hours post incident
 - + Some residents back in within 48 hours but unable to use the area of the building that sustained the structural damage.
- + Insurance payments:
 - + No reimbursement as of March 13, 2015. Expect sometime in April



Sprinklers Flooding





Iowa Facility Actions

- + Evacuation of 43 Residents due to water damage
- + Took 11 EMS agencies & 16 Ambulances to evacuate all the residents
- + Transported all residents to sister facilities
- + Residents transported with Medical Records and Medications
- + No Injuries occurred from evacuation



Challenges / Discussions

- + Transportation Evacuation Survey
 - + Utilized 11 EMS agencies within a 25 mile radius
 - + Stressed local EMS ?
- + Comment by FD that some residents were struggling with the change and transition
 - + Relocation Stress Syndrome / Transfer Trauma
 - + What could you do to mitigate this ?
- + No on Camera Interview:
 - + Is there a benefit to an on camera interview ?
 - + Press Statement (Good or Bad)
 - + Critical to establish a PIO



Successful Rhode Island Activation



Actions

- + 156 Bed LTC Facility:
 - + 52 Bed Nursing Home
 - + 104 Assisted Living (31 Memory Care Unit)
- + 7:30 pm, two burst sprinkler pipes:
 - + 5th Floor
 - + Kitchen area (1st Floor)
- + Relocated residents to other areas of facility
- + Local FD, Restoration and Plumber Onsite
- + HEALTH Notified



Plan Support

- + HEALTH activated the Mutual Aid Plan at 7:20PM requesting all facilities provide Emergency Reporting and report on:
 - + Operational Issues
 - + Open Beds
 - + Available Transportation that can be provided
- RCC provided various resources to assist



Successes


Current Plan Status: Active
Reason for Activation: Incident at Facility
Affected Facilities: [Redacted]
Affected City(ies): East Providence
Affected Region(s): Northern, Southern
Activated By: Joseph Pappas
Activator's Phone: 617-617-6261
Activator's Email: joseph.pappas@health.nj.gov
Incident Description:
 They are experiencing an issue with two sprinkler lines that have broken. One in the kitchen area and one on the 5th floor and has required relocation of residents. The problem is in the assisted living side of the facility which is 104 bed facility. The 52 bed skilled nursing home is not affected at this time. East Providence Fire is on site and working with the facility. At this time we are not evacuating the facility. Just being prepared if it is needed.

OPERATIONAL STATUS
NO RESIDENTS EVACUATED




Successes

Total Operational Issues:	3	Operational Issues	Primary Contact	Last Updated
Region: Northern				
<ul style="list-style-type: none"> Pocasset Bay Retirement Living, Johnsons Main # (401) 272-0080 	2	Minor IMPACT: Affected Systems: <ul style="list-style-type: none"> • Ext Issues / External • Norporia 	Karen Elst (401) 471-6610	2/16/2015 7:45 PM
<ul style="list-style-type: none"> Victoria Court, Cranston Main # (401) 946-5522 		Minor IMPACT: Affected Systems: <ul style="list-style-type: none"> • Building Damage • Ice dams cause water damage material 	Lillian Jean Delmonico (401) 946-5522	2/16/2015 7:42 PM
Region: Southern				
<ul style="list-style-type: none"> Seawanh East Greenwich, The East Greenwich Main # (401) 354-5095 	1	Minor IMPACT: Affected Systems: <ul style="list-style-type: none"> • icicles (no protection) • burst sprinkler line 	Yv Rolly (401) 354-5095	2/16/2015 7:44 PM



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Overview of the Mutual Aid Plan



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Scenario-based Focus


Scenario 1: Single Facility / Isolated Incident

Scenario 2: Single Facility / Local or Area-wide Incident

Scenario 3: Multiple Facilities / Regional

KEY IN EVERY SITUATION:

Continuity in process for managing the event



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Facilities Must Be Ready

A facility still must have:

- + An Incident Command System (ICS / NHICS)
- + Full Building Evacuation Plan
- + Influx of Residents / Surge Capacity
- + Resources & Assets planning for 96 hours



Member Responsibilities

- + Memorandum of Understanding (MOU)
 - If no MOU = no transfer agreement (per MassHealth)
- + Who are they qualified to care for? (# and type)
 - + Accept 110% of licensed beds
- + Required Plan Forms
 - + Resident Emergency Evacuation Form
 - + Resident / Medical Record / Staff / Equipment Tracking
 - + Influx of Residents Log
- + Exercise Annually



Memorandum of Understanding (MOU)

- + A voluntary agreement
- + Facilities agree to abide by MOU terms
- + Incorporate into Emergency Operations Plans



Required to Receive? NO

Why?

- + If facility is impacted, it could be dangerous to accept residents
- + Infrastructure
- + Staffing

Example: Superstorm Sandy (CT experience)



Disaster Struck Facility



Scene Size-Up

Disaster Struck Facility

- + **Who** – Contact name and phone number
- + **Where** – Facility information
- + **What** – What is the issue
- + **When** – Window of time
- + **Why** – Reason



Disaster Struck Facility Actions

- + **Notifications:**
 - + 911
 - + Internal (Your Team)
 - + DPH: (Nursing Homes)
 - + Emergency Preparedness Duty Officer
 - + DPH Division of Healthcare Quality (DHCQ)
 - + EOE (Assisted Living)



Actions of Disaster Struck Facility

- + **ACTIVATE:** Emergency Reporting System
 - + www.massmap.org
 - + LTC Coordinating Center / RMCC
- + **PREPARE:** Evacuation? staffing? equipment? supplies?
- + **PREPARE:** Transportation evacuation tool



HANDOUT #1

Transportation Evacuation

HANDOUT #1

- + Communicate resource needs to Public Health, Fire, EMS & Emergency Management
- + Ambulances, wheelchair vehicles, and buses
- + Consider completing with monthly fire drills
- + Automated tool on website



Transportation

CCT - Bariatric	ALS	ALS - Bariatric	BLS	BLS - Bariatric	Chair Car / Wheelchair	Chair Car / Wheelchair - Bariatric
0	3	1	11	2	91	4
		1		2	42	1

Transportation Results: 154 RESIDENTS

- 0 Advanced Life Support Ambulance (Paramedic)
- 17 Basic Life Support (BLS) Ambulance (EMT)
- 3 BLS – Bariatric Transport
- 73 Chair Car / Wheelchair Vehicle (limited assist)
- 4 Chair Car / Wheelchair Vehicle – Bariatric
- 57 Ambulatory

NOTE:

- 17 Continuous O2
- 6 Special Medical Equipment
- 70 Dementia Secured

Transportation Resources

Southern New England Resources:

- + 799 Vehicles
- + 7,253 Total seats
- + 1,046 Residents in Wheelchairs
 - + **Capacity: 8,299 Transportable Patients**
- + Supplies/Equipment: 145 Trucks & Pick-ups

Pre-established Evacuation Sites

- + Primary sites should be pre-selected
 - + **Patient Categories of Care**
- + **Address highest acuity** residents first
- + **Address surge numbers next**
 - + assume they have no open beds
 - + **110% surge**
- + Process to communicate
 - + where they are, point person and contact information
- + Need to identify one facility at least fifty miles away as an evacuation site



LTC Patient Care Categories

LTC Patient Care Categories

- Massachusetts Long Term Care Mutual Aid Plan (MassMAP) & Healthcare Mutual Aid Plan (HMAP)
- FacilityType = "AL"
- Region = "1, 5"
- Time Zone: Eastern

Region: 5

[illegible]

LTC Coordinating Center



Long Term Care (LTC) Coordinating Center Regional Medical Coordinating Center (RMCC)

- + Each region has a Coordinating Center
- + LTC Coordinating Center / RMCC back each other up
- + Volunteer responder group that trains 2 times per year, drills 4 times per year and exercises annually



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Long Term Care (LTC) Coordinating Center Regional Medical Coordinating Center (RMCC) Locations

- + Region 1 – Jewish Geriatric Services, Longmeadow
- + Region 2 (RMCC) – CMED, Holden
- + Region 3 – Aviv Centers for Living, Peabody
- + Region 4 – Hebrew Rehabilitation, Roslindale
- + Region 4 – Stephen Lawler Medical Intelligence Center (MIC)
- + Region 5 – Sarah Brayton, Fall River



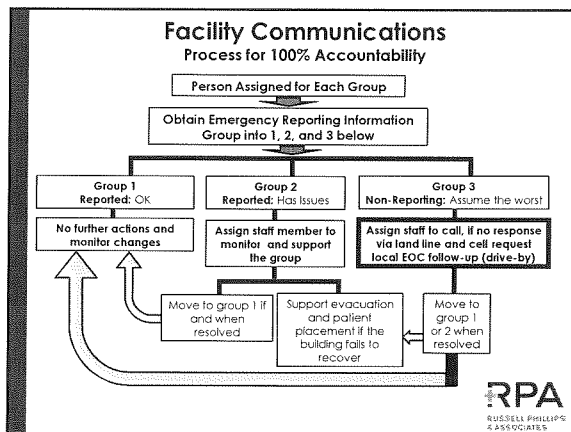
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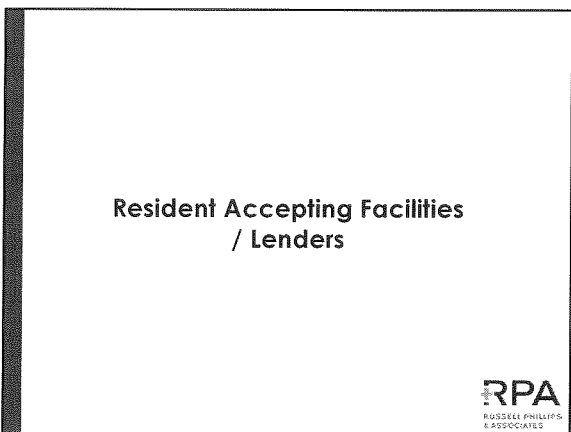
The LTC Coordinating Center / RMCC "Air Traffic Control"

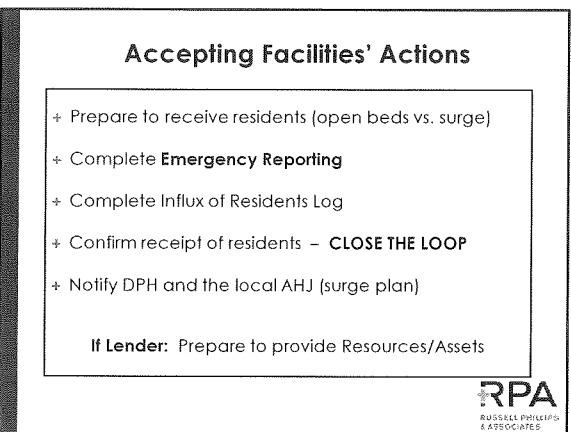
- + Staffed by Mutual Aid Plan volunteers
- + Assist with resident placement
- + Support resident tracking – "Close The Loop"
- + Assist with staff, supplies and equipment needs
- + Assist with transportation
- + Support interaction with local and state agencies

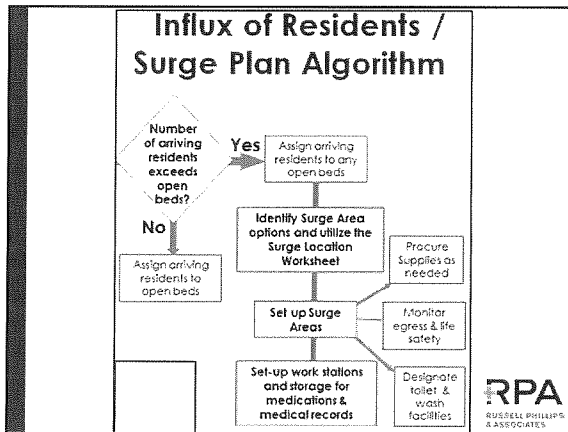
Ensure all members are accounted for!

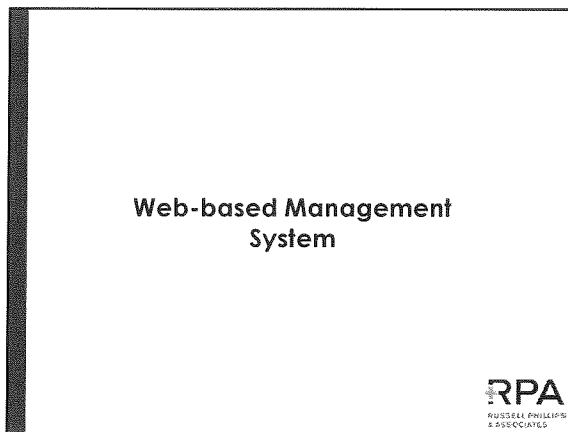
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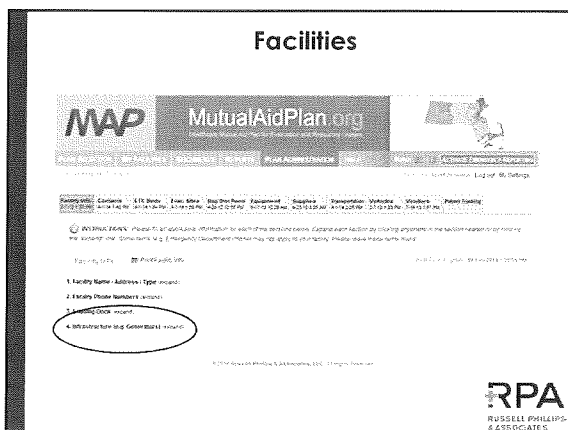








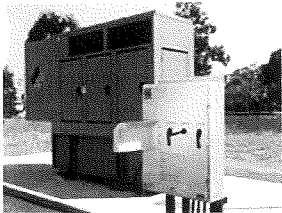




Generator Information

You need assistance
due to a Generator
failure

Your Vendor is unable
to support you!!



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View / Edit Generator Detail print generator detail ref # 4303

Voltage: Volts

Amperage: Amps

Kilowatt Rating (kW): kW

Primary Fuel Type: (Diesel, Natural Gas, etc.)

Backup Fuel Type: (if applicable)

Is there a quick connection installed for emergency generator hookup? ☐ Yes ☒ No

What is the cable run necessary to hook up rental generators? feet

Building or Area served by this generator:


Last Tested - Date & Time:

Last Tested - Load Test % (e.g., generator tested at 50% load):

Notes (e.g., date of last major service and minor service; areas not covered by generator; other notes about your generator capabilities):


[Save Changes and Close](#)

Key
generator
information
in advance
of an
emergency



MutualAidPlan.org

Web-based Mutual Aid Plan for Substation and Equipment Failure



Emergency Reporting

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Emergency Reporting

- + Operational Issues at your facility (other plan members)
- + Open Beds
- + Available Transportation for
 - + Resident Transportation
 - + Movement of Supplies and Equipment
- + Resources & Assets (needed)
- + Resources & Assets (you could provide)
 - + Equipment
 - + Supplies
 - + Staffing



Operational Issues

Emergency Reporting System (ERS) - Step 5: Operational Issues

Where? Steps

1. Input Facility
2. Input Plan Facility
3. Your Contact Information
4. Previous Responses
5. Operational Issues
6. LTC Open Beds
7. Hospital Open Beds
8. LTC Open Beds
9. Hospital Open Beds
10. Equipment and Supplies
11. Transportation
12. LTC Staff
13. Hospital Staff
14. Equipment and Supplies
15. Transportation
16. Complete

INSTRUCTIONS: Please describe any Operational issues you are experiencing at your facility. If you do not have any Operational issues, please enter "None" in the bottom of the page.

Are you experiencing any Operational issues? ☐ Yes (on street power) ☐ No (on generator)

Do you have access to any of the following?

☐ Building Damage

☐ Water at Facility

☐ Air Conditioning

☐ Heating

☐ Water (potable)

☐ Water (fire protection)

☐ Sewage

Do you have access to any of the following?

☐ Bed Room / Outbreak

☐ Telephone

☐ Internet

☐ Camera Staffing (not reporting to work, getting to facility)

☐ Support Staff

☐ Food Supply

☐ Linens

☐ Pharmacy/ Lab

Save & Next Step



Open Beds

ERS - Step 6: LTC Open Beds

INSTRUCTIONS: Please enter the information about Long Term Care Beds at your facility.

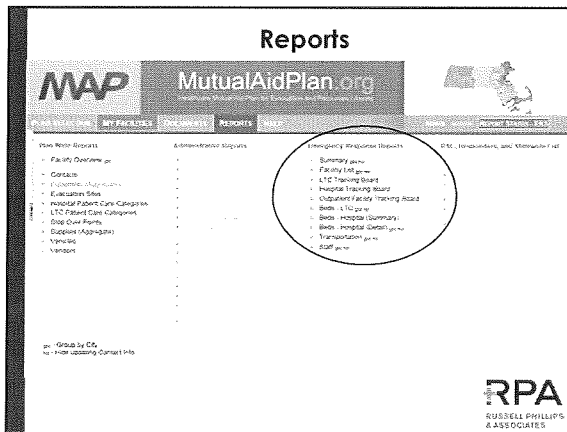
Long Term Care Beds

Category	Total Licensed Beds	Total Open Beds	Male	Female	Other	Demiside Secured	Vent Dependent	Beds Specifications (Type Of Care, etc.)	Additional Beds 24 Hours
Nursing Home	272	12	4	3	5	5	1	2 can be side rooms, 3 in quarters enclosed and can be other made or portable	6
Assisted Living	110	2			3				2

Back

Save & Next Step





Emergency Reporting System (ERS): Summary			
Created: 1/20/2015 9:18 AM ET			
Page: 1 of 1			
<ul style="list-style-type: none"> Massachusetts Long Term Care (MLTC) Cutoff Period: All (Report) Facility Types = "All" Group By City = "False" Region = "All" Time Zone: Eastern 			
Total Operational Issues:	9	Operational Issues	Print
Region: 4	9		
Boston Home, Boston Main #: (617) 825-3905		MINOR IMPACT: Affected Systems <ul style="list-style-type: none"> Clinical Staff Support Staff 	Cont (617)
Charleett House, Norwood Main #: (781) 762-7700		SEVERE IMPACT: Commercial Power / Generator Commercial Power: No Generators At Facility: No Generator Status: This is a drill. Generator failure. Need to evacuate. Fuel Status: N/A	Jess (781)
Marlborough Hills Rehabilitation & Health Care Center, Marlborough Main #: (508) 455-4040		SEVERE IMPACT: Commercial Power / Generator Commercial Power: No Generators At Facility: Yes Generator Status: This is a drill. Our generator caught fire and is now none operational. This is a drill. Fuel Status: N/A Affected Systems <ul style="list-style-type: none"> Building Damage This is a drill. Multiple trees down and many resident windows are busted. This is a drill. Affected Systems <ul style="list-style-type: none"> Clinical Staff This is a drill. Support staff have left to check on families.	Hol (508)

HANDOUT #2

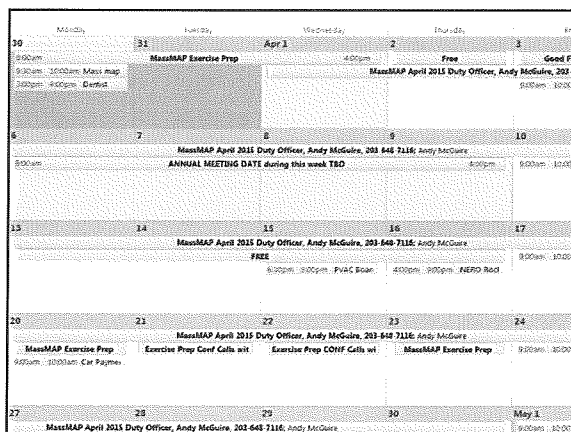
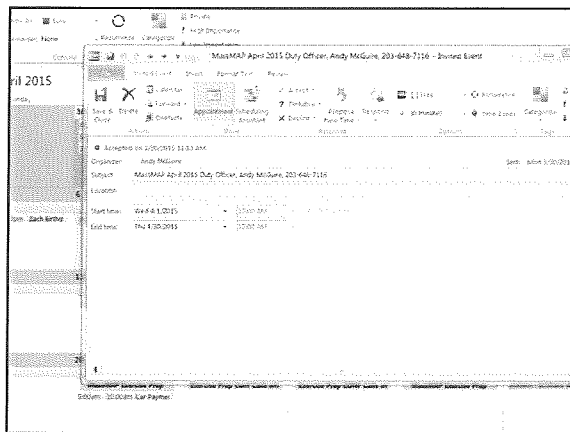
By The Numbers

HANDOUT #2

- + HHAN contacts for all facilities (3-7 contacts)
- + 255 facilities have detailed generator info
- + 20 emergency clean-up & reconstruction
- + 64 fuel companies
- + 28 generator firms
- + 35 mattress/bed companies
- + 20 water vendors

MassMAP Duty Officer

- + First to contact to the Disaster Struck Facility upon activation
- + Stand up the LTC Coordinating Center / RMCC
- + Ensure MassMAP Emergency Reporting is activated
- + Resource for plan members and partners



MassMAP 2015 Exercises

- + Severe thunderstorms, heavy rains and snow run off
- + Evacuation of multiple facilities will take place in each region

Mock residents will be evacuated to other facilities

Escalating Situation Member **"Raising the Bar"**



MassMAP 2015 Exercises

Objectives: What are we testing:

- + Disaster Struck Facilities:
 - + Plan activation, resident evacuation and resident tracking
- + LTC Coordinating Center / RMCC:
 - + Ability to support event and provide accountability
- + Resident Accepting Facilities:
 - + Ability to manage an influx of residents
- + Escalating Situation Members:
 - + Ability for members to test their plans with injects that will escalate their internal response.



MassMAP 2015 Exercise Dates

- Region 1 – April 30 9:00am - 12:45pm
- Region 2 – April 27 1:00 pm - 4:45pm
- Region 3 – April 28 9:00am - 12:45pm
- Region 4 – April 29 9:00am - 12:45pm
- Region 5 – May 1 9:00am - 12:45pm

* Mock Patients need to arrive at DSFs one hour earlier (8:00 am / 12:00 pm)



**MassMAP 2015 Exercises
Disaster Struck Facilities (DSFs)**

- DSF Region 1 – Craneville of Dalton, Dalton
- DSF Region 1 – Kimball Farms Assisted Living, Lenox
- DSF Region 1 – Chapin Center, Springfield
- DSF Region 2 – Eisenberg Assisted Living, Worcester
- DSF Region 2 – Holden Rehabilitation and Nursing Center
- DSF Region 3 – Abbott Terrace, Lynn
- DSF Region 3 – Pilgrim Rehabilitation, Peabody
- DSF Region 4 – Orchard Cove, Canton
- DSF Region 4 – Mary Ann Morse Healthcare Center, Natick
- DSF Region 5 – Longmeadow of Taunton, Taunton
- DSF Region 5 – Cedar Hill Health Care Center, Randolph

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**MassMAP 2015 Exercise Preparation
Conference Call Handout 3**

HANDOUT #3 **Wednesday April 15, 2015** **HANDOUT #3**

Session 1 - 10:30 – 11:30am
Session 2 - 1:30 – 2:30pm

Conference Call In Number #
888-864-4735
Passcode
704016#

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**MassMAP 2015 Exercises
RAF Exercise Online Questionnaire**

- Notifications
- Emergency Reporting
- Command & Control
- Influx and Surge
- Resources and Assets
- Resident Tracking

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MassMAP 2015 Exercise RAFs Providing Mock Residents

- Region 1 – 5
- Region 2 – 9
- Region 3 – 9
- Region 4 – 0
- Region 5 – 4



MassMAP Leadership Recruitment

- Regional Steering Committee Members
- LTC Coordinating Center / Regional Medical Coordinating Center Responders
- Introduction of Steering Committee Members



Questions?

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