Disaster Struck Facilities (DSFs) Conference Calls:

**Dates:** May 28, 2019 or May 29, 2019

**Times:** 10:30 AM - 11:30 AM (Morning Session)

or 1:30 PM - 2:30 PM (Afternoon Session – *Only Available on May 28, 2019*)

**Dial-In # 712-770-4340**  **Access Code 654492**

Thank you for participating in the upcoming RI LTC-MAP 2019 Exercises. Listed below are the dates of the exercises for each Region.

- **Southern Region** – June 18, 2019 (1:00pm-4:45pm)
- **Northern Region** – June 19, 2019 (9:00am-12:45pm)

**Focus of Exercise:** Similar to last year, the focus of this exercise is to have all LTC-MAP members test their ability to perform the actions necessary of a Disaster Struck Facility (DSF). This will create an opportunity for all participating members in the state to:

- Review facility evacuation plans.
- Determine what information Rhode Island Department of Health (RIDOH) Center for Emergency Preparedness and Response (CEPR) would need in order to assist you in an evacuation.
- Determine what leadership staff would be part of your Incident Command structure.
- Stand up Command Centers, with participation from community partners.
- Who would be part of an Incident Command System within your organization.
- Complete steps necessary to safely relocation / evacuate residents, including Transportation Evacuation Surveys to identify transportation requirements for each resident.
- Manage Holding Areas with mock residents.
- Review what steps to take in recovering / repopulating your facility.

One of the many areas we will be focusing on in this exercise will be having all RI LTC-MAP members conduct a Transportation Evacuation Survey as well as provide documents (Incident Command System Organization Chart, Key Contact(s), etc.) to RIDOH CEPR which would be needed in real-world events.

**Objectives of the Exercise:** Specific exercise objectives can be found in the Exercise Plan. The Exercise Plan will be under the 2019 Exercise Documents column along the right-hand side within the Mutual Aid Plan website ([www.mutualaidplan.org/ri](http://www.mutualaidplan.org/ri)).

**ALL FACILITIES ARE REQUESTED TO PARTICIPATE IN THIS EXERCISE.**
2019 RI LTC-MAP
Disaster Struck Facilities (DSFs) Exercise Guide

PLEASE NOTE: IN ORDER TO BE IN COMPLIANCE WITH CMS, ALL SKILLED NURSING RI LTC-MAP MEMBERS ARE REQUESTED TO PARTICIPATE (SEE CMS FINAL RULING ON EMERGENCY PREPAREDNESS BELOW)

§ 483.73 Emergency preparedness.
The LTC facility must comply with all applicable Federal, State and local emergency preparedness requirements. The LTC facility must establish and maintain an emergency preparedness program that meets the requirements of this section. The emergency preparedness program must include, but not be limited to, the following elements:
(i) Participate in a full-scale exercise that is community-based or when a community-based exercise is not accessible, an individual, facility based. If the LTC facility experiences an actual natural or man-made emergency that requires activation of the emergency plan, the LTC facility is exempt from engaging in a community-based or individual, facility-based full-scale exercise for 1 year following the onset of the actual event.

There will be a lot of activity on the exercise days, and we want to ensure everyone has the information they need to make this opportunity a success. Below are details concerning your facility’s role during the exercise.

Exercise Day:

1:00pm / 9:00am: **STARTEX**: Exercise commences with an alert from the Rhode Island Health Notification System.

1:15pm / 9:15am: All plan members from the participating LTC-MAP Region (Northern or Southern) complete Emergency Reporting. Include Operational Issues and reason for evacuation of your facility in the Emergency Reporting. All plan members complete Emergency Reporting by 1:30pm / 9:30am.

1:20pm / 9:20am: All Plan members from the participating LTC-MAP Region activate their Command Centers and review internal actions that must be conducted (complete Transportation Evacuation Survey, create Incident Action Plan, review holding area plans, etc.).

1:30pm / 9:30am: **Regional Conference Call**. All Plan members from the participating Region join call for a Situational Briefing. (See dial-in number and access code below)

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1:45pm / 9:45am  LTC-MAP members will fill out Incident Command System organization chart with Point of Contact for building. This shall be sent to RIDOH for review. This chart can be download via
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www.mutualaidplan.org/ri under 2019 Exercise documents. During the exercise, members will be told how to send completed chart.

1:50pm / 9:50am: Each DSF will determine proper placement for their most acute mock residents (up to five) based on top ten RAF within each LTC-MAP member website page and categories of care provided by the DSF.
- Establishing holding area
- Physically moving mock resident(s) into holding area (factoring in multi-level facilities when applicable)

2:00pm / 10:00am: All DSFs fill out Rhode Island Emergency Evacuation Forms for up to five mock residents using real clinical information from residents but substituting fake names for real ones.

Please note: You can print these forms off at www.mutualaidplan.org/ri.
You do not have to use your triplicate forms; however, the use of the triplicate forms is up to each individual LTC-MAP member.

2:30pm / 10:30am: With the list of mock RAF beds, DSFs complete Rhode Island Staff / Equipment / Tracking Sheets and finish determining proper placement of mock residents.
- Review how to package the residents
- Review staffing levels pertaining to the evacuation
- Review pickup locations of arriving transportation

3:00pm / 11:00am: DSFs review recovery efforts.
- Contacting vendors for supplies and equipment that would be needed to bring the facility back operating status
- Messaging to family / media about reopening the building and any actions needed from them

3:30pm / 11:30am: ENDEX: Exercise concludes via an alert from the Rhode Island Health Notification System.

3:45pm / 11:45am: All exercise participants to join the Hotwash Conference Call with their internal teams.

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4:45pm / 12:45pm: Exercise Hotwash Conference Call concludes
Pre-Exercise Assignments: (Complete by June 8, 2019)

1. Review appropriate emergency plans, the contents of your RI LTC-MAP binder. Please update and e-mail addresses.

2. Go to the RI LTC-MAP website, http://www.mutualaidplan.org/ri, and log in to your facility. Review the following tabs and be sure they are up to date: (If you are unable to log on click the help button and request assistance)
   - Facility Information, specifically:
     o Facility address, phone and fax numbers
     o Generator information
   - Contact information for: (At a minimum 3 leadership team members)
     o Email address, office, cell and home numbers for the Administrator, Director of Nursing, and Facilities Manager
   - LTC Beds:
     o Update your Categories of Care and information about the number of residents in dementia-secured units (if applicable)
     o Run a Category of Care Report by going to Reports. Select plan-wide reports on the left, click on LTC – Patient Care Categories, and then click on your region and facility type.
   - Evacuation Sites:
     o List your top 10 evacuation sites (cross-reference with categories of care)
   - Vendors:
     o Update all your vendors, as needed. At a minimum, you should have your critical vendors listed: generator repair, generator fuel, food, medical supply, restoration and bed vendors.

Full-Scale Exercise Definition:
Full-Scale Exercises (FSEs) are typically the most complex and resource-intensive type of exercise. They involve multiple agencies, organizations and jurisdictions and validate many facets of preparedness. In an FSE, events are projected through an exercise scenario with event updates that drive activity at the operational level. FSEs are usually conducted in a real-time, stressful environment that is intended to mirror a real incident. The FSE simulates reality by presenting complex and realistic problems that require critical thinking, rapid problem solving and effective responses by trained personnel. The level of support needed to conduct an FSE is greater than that needed for other types of exercises. The exercise site for an FSE is usually large and site logistics require close monitoring. Safety issues, particularly regarding the use of props and special effects, must be monitored. Throughout the duration of the exercise, many activities occur simultaneously.

Please review (below) the elements of the RI LTC-MAP 2019 full-scale exercise that reference the above definition of FSEs.
ALL DSFs should address each of the following elements of the exercise:

1. **Mock Residents:** This year, it is the responsibility of each DSF to arrange for volunteer mock residents (5) to be at its facility for the functional portion of the exercise. We recommend using off-shift staff, regular volunteers at your facility, or residents’ family members as mock residents. The mock residents will not be leaving your facility; rather, they will be brought to your internal Holding Area and prepared for simulated evacuation. The purpose is to determine proper Holding Area location, setup and simulated evacuation flow. Please reference Holding Area Coordinator Checklist at [www.mutualaidplan.org/ri](http://www.mutualaidplan.org/ri) under 2019 Annual Exercises Documents.

   During the exercise, we recommend you assign each mock resident a name tag, Emergency Evacuation Form, medical charts, equipment and personal belongings. Please fill out the Emergency Evacuation Forms using true clinical information from residents. The more realistic you make this portion, the more your facility will benefit from the exercise.

2. **Evaluators:** Have one to two evaluators (staff member, local emergency manager, fire department / EMS representative, red cross, restoration companies or others) within the Holding Area and the Command Center and have them evaluate the process of preparing residents to evacuate as well as any communication takes place internally and with external agencies. Evaluator Forms will be at [www.mutualaidplan.org/ri](http://www.mutualaidplan.org/ri) under 2019 Annual Exercises Documents.

3. **Transportation Evacuation Survey:** During the exercise days, all RI LTC-MAP members must conduct an internal transportation evacuation survey. This helps local fire departments and emergency medical services, transportation companies, and others understand the transportation needs of your residents. To assist with this, we recommend downloading the “Instructions - Transportation Evacuation Survey (Online Version)” at [www.mutualaidplan.org/ri](http://www.mutualaidplan.org/ri) under 2019 Annual Exercises Documents folder.

4. **Emergency Reporting:** The day of your exercise, complete Emergency Reporting at [www.mutualaidplan.org/ri](http://www.mutualaidplan.org/ri) within 30 minutes of receiving the Rhode Island Health Notification System alert.

   ***YOU DO NOT HAVE TO BE SIGNED IN TO CONDUCT EMERGENCY REPORTING***

Use this as a training opportunity. Complete with your leadership team. The goal is that all members of your team have the ability to complete Emergency Reporting. Since all members are DSFs, the emergency reporting must reference WHY you are evacuating. This can be based off potential real-world problems/issues that may arise at your facility/community a disaster. What could force you out?
Please note, the way the Rhode Island Health Notification System is programmed, both Regions (Northern and Southern) will get alerts on both days. You only have to report on your day’s exercise.

5. **Activate your facility Command Center:** On the day of the exercise:
   a. Assemble your team.
   b. Simulate communications with the appropriate external agencies as appropriate.
   c. Alert on duty and off duty staff as to the disaster
   d. Determine what staff are available to come back to work if need be
   e. Create Incident Action Plan(s)
   f. Utilize components of your internal emergency operation plan

   **IMPORTANT:** For ALL real communications (radio, phone, verbal or other), please be sure to begin and end all transmissions with the phrase: “This is a drill.”

6. **Incident Command Chart:** Using the chart provided by RPA, a Jensen Hughes Company, during the May education, DSF will fill out applicable information using the Incident Command Structure. This document along with job action sheets are available online at [http://www.mutualaidplan.org/ri](http://www.mutualaidplan.org/ri) under Home Page Documents or use the search bar for Incident Command Chart and/or Job Action Sheets. Please download and print these documents. We recommend the job actions sheets be reviewed by applicable staff who may fit that position during the exercise.

7. **Establish your Holding Area:** Fully set up the area where you would hold residents as they prepare to evacuate facility. Identify the staffing and equipment necessary to support this area. The objectives for this area are to:
   a. Clinically assess residents prior to evacuation
   b. Review all medical records / forms / personal belongings
   c. Identify:
      i. Medical diagnoses
      ii. Current medications and last dose
      iii. Allergies
      iv. Mental status
      v. Mobility
      vi. Special precautions
   d. Medical Records: Review process on how you would provide medical records (either paper or electronic), depending on the facility to which they’ll go (e.g., can you transfer electronic records to other facilities within your parent company vs. those that are not?). Walk through this process to ensure your clinical team is clear on how you would accomplish this.

8. ** Relocate Mock Residents to Holding Area:** Determine the process of getting the residents to the holding area, factoring in mobility, dementia residents, vertical movement for facilities over two stories, etc. Each mock resident should be run through the activities described in #7 when they arrive in the Holding Area.
9. **Mutual Aid Plan Binder:** Ensure you have one hard copy of the Mutual Aid Plan printed and in the facility Command Center or another accessible location.
   a. Education should take place internally on the Plan for leadership positions and those who could answer incoming calls. Utilize the PowerPoint Presentation located online at [http://www.mutualaidplan.org/ri](http://www.mutualaidplan.org/ri) under Home Page Documents or use the search bar for Facility PowerPoints for Education of Leadership and Staff Orientation. Be sure to maintain documentation of this as annual training, as required by the CMS Emergency Rule.

10. **Community Involvement:** To be CMS-compliant, you need to involve your community partners. Invite them now to your building for the day of your exercise to observe and/or serve as an evaluator. This includes the fire department, local emergency manager and EMS. Please document this process throughout, including ensuring that all community partners sign in.

   **Note:** If your community partners cannot attend or do not respond, please document this by saving email correspondence. Be sure to maintain this documentation, to provide to surveyors demonstrate compliance with the exercise requirements in the CMS Emergency Rule.

10. **Photos and Inject Response:** Please provide all requested Injects and Documents to in **ONE (1) email** to [photos@mutualaidplan.org](mailto:photos@mutualaidplan.org)
   a. Subject Line – Your Facility Name and Region Number
   b. Attach the following:
      i. 2-3 Photos of your involvement
      ii. All inject responses

11. **Facility After Action Report (AAR):** After the exercise, all RI LTC-MAP members will complete their own After-Action Report. In order to be compliant with the CMS Emergency Rule, facilities will need to complete the RPA-provided facility AAR template. The objective of the facility AAR is to take lessons learned from the exercise and to incorporate them into and improve your Emergency Operations Plan. The facility AAR template will be provided by RPA via [http://www.mutualaidplan.org/ri](http://www.mutualaidplan.org/ri) in the 2019 Exercise folder.

   **Please note:** All members must save their Facility After Action Report with your internal documents/process. Neither RPA nor RIDOH CEPR will be collecting copies of these reports.