



# Metro Boston Homeland Security Region (MBHSR) / Massachusetts Long Term Care Mutual Aid Plan (MassMAP)

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**for Evacuation & Resources / Assets**

Presented By: Jim Garrow

**Russell Phillips & Associates, LLC**

Fire and Emergency Management for Healthcare Facilities

# Today's Agenda

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- Presentation on the Long Term Care Mutual Aid Plan Concepts (MassMAP)
- Complete Tour of the Building
  - Transportation Evacuation Survey
  - Surge Capacity Options/Capabilities
- Data Collection to Support a Successful Disaster Outcome

# Metro Boston Homeland Security Region (MBHSR)

Boston Public  
Health  
Commission

Mayor's Office of  
Emergency  
Management

Russell Phillips &  
Associates (RPA)

MassMAP

Massachusetts  
Senior Care  
Association  
(MSCA)

# Who is Russell Phillips & Associates?

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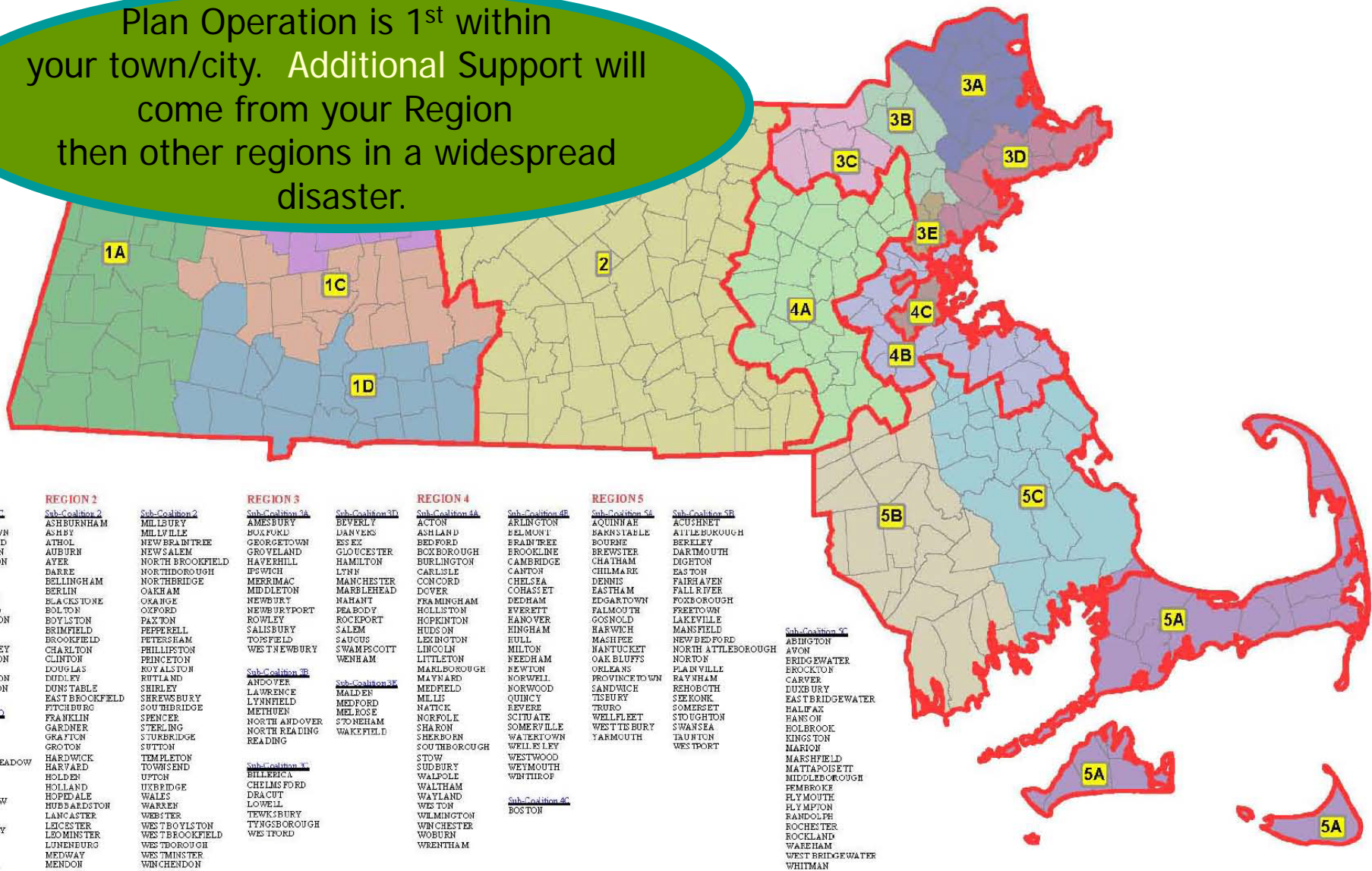
- Since 1976 – Fire, Emergency Management & Life Safety Code Compliance Exclusively for Healthcare
- 1,300 Healthcare Clients (representing more than 2,200 facilities)
- Provides SOC, Emergency Management & Fire Safety Services to more than 300 hospitals and long term care facilities in MA
- Reviewers of Local & National Disasters – 9/11, Tropical Storm Allison (Houston), Katrina, California Wildfires, Joplin and Springfield Tornado, Tropical Storm Irene, etc.
- National Committees
  - Advisors on The Joint Commission *Committee for Healthcare Safety*
  - NFPA 99-12 – Healthcare Emergency Mgmt. Technical Committee
  - NFPA 101 – Voting Member

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# PLAN OVERVIEW

# Emergency Preparedness Regions by Sub-Coalitions

Plan Operation is 1<sup>st</sup> within your town/city. Additional Support will come from your Region then other regions in a widespread disaster.



## REGION 2

### Sub-Coalition 1C

- AMHERST
- ASHBURNHAM
- ASHBY
- ATHOL
- AUBURN
- AYER
- BARRE
- BELLINGHAM
- BERLIN
- BLACKSTONE
- BOLTON
- BOYLSTON
- FELHAM
- FLAINGFIELD
- SOUTH HADLEY
- SOUTHAMPTON
- WARE
- WESTAMPTON
- WORTHINGTON

### Sub-Coalition 1D

- AGAWAM
- BLANDFORD
- CHESTER
- CHICOPEE
- EASTLONGMEADOW
- GRANVILLE
- HAMPDEN
- HOLYOKE
- LONGMEADOW
- LUDLOW
- MONSON
- MONTGOMERY
- PALMER
- RUSSELL
- SOUTHWICK
- SPRINGFIELD
- TOLLAND
- WESTSPRINGFIELD
- WESTFIELD

## REGION 3

### Sub-Coalition 2A

- AMESBURY
- BOXFORD
- GEORGETOWN
- GROVELAND
- HAVEHILL
- IPSWICH
- MERRIMAC
- MIDDLETOWN
- NEWBURY
- NEWBURYPORT
- ROWLEY
- SALISBURY
- SALEM
- TOPSFIELD
- WESTNEWBURY

### Sub-Coalition 2B

- ANDOVER
- LAWRENCE
- LYNNFIELD
- METHUEN
- NORTH ANDOVER
- NORTH READING
- READING

### Sub-Coalition 2C

- BILLERIKA
- CHELSEA
- FORD
- LOWELL
- WEBSTER
- WESTBOYLSTON
- WESTBROOKFIELD
- WESTMINSTER
- WESTBOROUGH
- WESTPORT
- WORCESTER

## REGION 4

### Sub-Coalition 3A

- ACTON
- ASHLAND
- BEDFORD
- BOXBOROUGH
- BURLINGTON
- CANTON
- CHELSEA
- COHASSET
- DEDHAM
- EVERETT
- HANOVER
- HINGHAM
- HULL
- MILTON
- NEEDHAM
- NEWTON
- NORWELL
- NORWOOD
- QUINCY
- REVERE
- SCITUATE
- SOMERVILLE
- WATERBURY
- WATERBURY
- WESTWOOD
- WEYMOUTH
- WINTHROP

### Sub-Coalition 3B

- MALDEN
- MEDFORD
- MELROSE
- STONEHAM
- WAKEFIELD

### Sub-Coalition 3C

- MALDEN
- MEDFORD
- MELROSE
- STONEHAM
- WAKEFIELD

## REGION 5

### Sub-Coalition 4A

- ARLINGTON
- BELMONT
- BRANTREE
- BROOKLINE
- CAMBRIDGE
- CARLETON
- CONCORD
- DOVER
- FRAMINGHAM
- HOLLISTON
- HOPKINTON
- HUDSON
- LEXINGTON
- LINCOLN
- LITTLETON
- MARLBOROUGH
- MAYNARD
- MEDFIELD
- MILLIS
- NATICK
- NORFOLK
- SHARON
- SHERBORN
- SOUTHBOROUGH
- STOW
- SUDBURY
- WALPOLE
- WALTHAM
- WAYLAND
- WESTON
- WILMINGTON
- WINCHESTER
- WOBURN
- WRENTHAM

### Sub-Coalition 4B

- MALDEN
- MEDFORD
- MELROSE
- STONEHAM
- WAKEFIELD

### Sub-Coalition 4C

- MALDEN
- MEDFORD
- MELROSE
- STONEHAM
- WAKEFIELD

### Sub-Coalition 4D

- BOSTON

## REGION 5

### Sub-Coalition 5A

- ACUSHNET
- ATLANTIC
- BERKLEY
- DARTMOUTH
- DIGHTON
- EASTON
- FAIRHAVEN
- FALL RIVER
- FOXBOROUGH
- FREETOWN
- LAKEVILLE
- MANSFIELD
- NEW BEDFORD
- NORTH ATTLEBOROUGH
- NORTON
- PLAINVILLE
- RAYNHAM
- REHOBOTH
- TAUNTON
- WESTPORT

### Sub-Coalition 5B

- ACUSHNET
- ATLANTIC
- BERKLEY
- DARTMOUTH
- DIGHTON
- EASTON
- FAIRHAVEN
- FALL RIVER
- FOXBOROUGH
- FREETOWN
- LAKEVILLE
- MANSFIELD
- NEW BEDFORD
- NORTH ATTLEBOROUGH
- NORTON
- PLAINVILLE
- RAYNHAM
- REHOBOTH
- TAUNTON
- WESTPORT

### Sub-Coalition 5C

- ACUSHNET
- ATLANTIC
- BERKLEY
- DARTMOUTH
- DIGHTON
- EASTON
- FAIRHAVEN
- FALL RIVER
- FOXBOROUGH
- FREETOWN
- LAKEVILLE
- MANSFIELD
- NEW BEDFORD
- NORTH ATTLEBOROUGH
- NORTON
- PLAINVILLE
- RAYNHAM
- REHOBOTH
- TAUNTON
- WESTPORT

### Sub-Coalition 5D

- BOSTON

## REGION 5

### Sub-Coalition 5E

- ACUSHNET
- ATLANTIC
- BERKLEY
- DARTMOUTH
- DIGHTON
- EASTON
- FAIRHAVEN
- FALL RIVER
- FOXBOROUGH
- FREETOWN
- LAKEVILLE
- MANSFIELD
- NEW BEDFORD
- NORTH ATTLEBOROUGH
- NORTON
- PLAINVILLE
- RAYNHAM
- REHOBOTH
- TAUNTON
- WESTPORT

### Sub-Coalition 5F

- ACUSHNET
- ATLANTIC
- BERKLEY
- DARTMOUTH
- DIGHTON
- EASTON
- FAIRHAVEN
- FALL RIVER
- FOXBOROUGH
- FREETOWN
- LAKEVILLE
- MANSFIELD
- NEW BEDFORD
- NORTH ATTLEBOROUGH
- NORTON
- PLAINVILLE
- RAYNHAM
- REHOBOTH
- TAUNTON
- WESTPORT



# OVERVIEW

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- Place and support the care of **evacuated** residents
- Provide **supplies/equipment** as necessary
- Assist with **transportation** of supplies / staff / evacuated residents
- Provide **staffing** support (whether a facility is evacuating or isolated)

# Member – Who they are?

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## Responsibilities of?

- Nursing Homes, Assisted Living, Rest Homes
  - Memorandum of Understanding (MOU) – signed by all
    - Process for reimbursing each other
    - Provides transfer agreements with all members
  - Number and Type of Residents
    - Type: What are you qualified to care for
    - Surge Capacity Levels – 10% of licensed beds
- Planning Purposes (not mandated)**



# RESPONSIBILITIES OF MEMBERS

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- Attendance/Participation at Meetings and Drills/Exercises
- Activation of Command Center at Facility – must be done to get support
- Documentation:
  - Forms (see handouts)

# Actions of Disaster Struck Facility

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- Disaster Struck Facility
  - *Size-up the Situation*
    - Resource & Assets needs to stay operational
    - Failure of infrastructure to remain in the facility
  - 5 W's
    - **Who** – Your contact name and phone number
    - **Where** – Facility Name, Address and Town/City
    - **What** – Resources you need / Evacuating or Potential to evacuate
    - **When** – Window of time the resources will be required in / How long until the evacuation must commence
    - **Why** – Reason

# Actions of Disaster Struck Facility

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- Disaster Struck Facility (NOTIFICATIONS)
  - *911 or Local Public Safety Answering Point (PSAP) Number*
  - *Internal Activation / Activation of Command Center*
  - *ACTIVATION: MassMAP Plan – Health & Homeland Alert Network (HHAN) notification via DPH*
  - *ACTIVATION: LTC Coordinating Center*
  - *ACTIVATION: Emergency Reporting System*
  - *DPH Reportable Incidents Line*
  - *Complete the Transportation Evac. Survey (if evacuating)*

# Actions of Disaster Struck Facility

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## ■ **Slow Evacuation**

- Priority: Transfer directly to open beds in other LTCF
- Secondary Plan (regional disaster): See Fast Evacuation

## ■ **Fast Evacuation**

- Consider moving to Stop Over Point OR
- Transfer directly to a LTC Facility (surge to 110% if necessary)

## ■ **Resource Needs**

- Work with Vendors
- Work with LTC Coord. Center for medical needs
- Work with Local EOC for non-medical needs

# Pre-planned Evacuation Sites

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- Primary sites should be pre-selected
- Address highest acuity residents first
  - Who matches up best with you
- Address their surge numbers next
  - Always assume they have no open beds
  - How many of your residents can they accept at 110% surge
- Process to communicate with them
  - Know where they are
  - Know who the point people are and contact information

# Actions of Resident Accepting Facilities / Lenders

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- Prepare to receive residents
  - Open beds vs. Surge Area
  - Beds with Confirmed Admissions may be held open for incoming residents
- Provide Emergency Reporting
- Complete Influx of Residents Log as they arrive
- Confirm with DSF or LTC Coord. Center that the residents are received – “**CLOSE THE LOOP**”
- Start a new chart for resident
- Notify DPH about activating a Surge Plan (Influx / Surge Guidelines)
- **If Lender:** Prepare to provide Resources & Assets



# Emergency Reporting

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- A tool to assist the Long Term Care Coord. Center and Individual Facilities in identifying:
  - Open Beds
  - Operational Issues at the LTC Facilities
  - Available Transportation for
    - *Resident Transportation*
    - *Movement of Supplies and Equipment*
  - Resources & Assets (needed)
  - Resources & Assets (you could provide)
    - *Equipment*
    - *Supplies*
    - *Staffing*



# MutualAidPlan.org

Healthcare Mutual Aid Plan for Evacuation and Resources / Assets

[PLAN SELECTION](#)
[LOG IN](#)
[REGISTER FOR MEMBERSHIP](#)
[HELP](#)
[Plan Status](#)

[REPORT YOUR STATUS](#)


## Welcome to the Connecticut Hospital and Long Term Care Mutual Aid Plan Facility Information Website

### Long Term Care Mutual Aid Plan (LTC-MAP) and Healthcare Mutual Aid Plan (HMAP) for Evacuation and Resources / Assets

This plan establishes a course of action and an agreed commitment among participating hospitals, nursing homes and assisted living residences to assist each other as needed in the time of a disaster.

Assistance may come in the form of:

- Providing pre-designated evacuation locations for patients during a disaster; and/or
- Providing or sharing supplies, equipment, transportation, staff or pharmaceuticals to a facility when a disaster overwhelms their own community or exceeds the capability of internal emergency operations plans.

### Why is this initiative underway?

It has been identified in local, regional and national disasters that each community must have a proactive disaster plan and all disasters start locally. To supplement the State of Connecticut Emergency Support Function 8 (ESF 8 - Health & Medical) operations, this unique plan, coordinated in Region 3 through the Capitol Region Council of Governments (CRCOG)/Capitol Region Emergency Planning Committee (CREPC) and in Regions 1, 4 & 5 through the Regional ESF 8 group, will work to prepare all of the healthcare facilities to stand together in a disaster with preplanned resources and assets.

Benefits to the plan include:

- Preplanned Evacuation Strategy - fast evacuation (i.e. Fire/Gas Leak) and delayed evacuation (i.e. Hurricane/Loss of Emergency Power.)
- Preplanned Staffing, Supplies, Equipment and Pharmaceutical Support when Isolated.
- Provide local public safety incident commanders with easy on-site access to user-friendly plans including contact information for evacuation resources and key personnel.
- Provide local EMS commander with resources needed to efficiently identify, transfer and track patients to pre-designated receiving sites.
- Development of proactive Communications for ALL parties (healthcare, emergency agencies).
- Ensures coordination with CMED, Local Emergency Operations Centers (EOCs) and the Regional

**Current Plan Status: Active**

**Reason for Activation:** Drill / Exercise

**Affected City:** TESTING

#### EXERCISE INFORMATION

- [Calendar of Events - All Regions](#)
- [Region 1 LTC-MAP \(General Information\)](#)
- [Region 3 LTC-MAP \(General Information\)](#)
- [Region 3 HMAP \(General Information\)](#)
- [Region 4 LTC-MAP \(General Information\)](#)
- [Region 5 LTC-MAP \(General Information\)](#)
- [Exercise Information](#)
- [Exercise After Action Report \(AAR\)](#)
- [After Action Reports \(AAR\)](#)
- [Transportation Evacuation Survey Tool](#)
- [Driving Directions](#)

## Emergency Reporting System (ERS) - Step 5. Operational Issues

### Wizard Steps

- ▶ 1. Plan Facility
- ▶ 2. Non-Plan Facility
- ▶ 3. Your Contact Information
- ▶ 4. Previous Response
- ▶ **5. Operational Issues**
- ▶ 6. LTC Open Beds
- ▶ 7. Hospital Open Beds
- ▶ 8. LTC Surge Capacity / Resource Needs
- ▶ 9. Hospital Surge Capacity / Resource Needs
- ▶ 10. Equipment and Supplies
- ▶ 11. Transportation
- ▶ 12. LTC Staff
- ▶ 13. Hospital Staff
- ▶ 14. Complete

**i INSTRUCTIONS:** Please describe any Operational Issues you are experiencing at your facility.

Are you operating on commercial/street power?  Yes  No  
(Select 'No' if you are operating on full or partial generator power)

Operational impact to your Facility:

Please describe the status of your generator:  
(e.g. generator down for part of the building,  
inability to get fuel vendor, etc.)

We have had some intermittent failures. Everything appears to be working OK right now, but there is concern by our clinical team that we consider relocation of our higher acuity patients.

Please describe your fuel status:  
(full, empty, half, etc. and when is your next  
projected refill)

Full with 3 days supply

Do you have issues with any of the following?

- Building Damage
- Medical Gases
- Air Conditioning
- Heating
- Water (potable)
- Water (fire protection)
- Flooding

Do you have issues with any of the following?

- Telephone
- Internet
- Clinical Staff (e.g staff reporting to work, getting to facility)
- Support Staff
- Food Supply
- Linens
- Pharmaceuticals

Save & Next >>



## Emergency Reporting System (ERS) - Step 6. LTC Open Beds

### Wizard Steps

- ▶ 1. Plan Facility
- ▶ 2. Non-Plan Facility
- ▶ 3. Your Contact Information
- ▶ 4. Previous Response
- ▶ 5. Operational Issues
- ▶ **6. LTC Open Beds**
- ▶ 7. Hospital Open Beds
- ▶ 8. LTC Surge Capacity / Resource Needs
- ▶ 9. Hospital Surge Capacity / Resource Needs
- ▶ 10. Equipment and Supplies
- ▶ 11. Transportation
- ▶ 12. LTC Staff
- ▶ 13. Hospital Staff
- ▶ 14. Complete

**i** **INSTRUCTIONS:** Please enter the information about Long Term Care Beds at your Facility.

### Long Term Care Beds

Category	Total Licensed Beds	Total Open Beds <b>?</b>	Male	Female	Either	Dementia Secured	Vent Dependent	Beds Specifications (Type Of Care, etc.)	Additional Beds 2-4 Hours <b>?</b>
Nursing Home	277	<input type="text" value="12"/>	<input type="text" value="4"/>	<input type="text" value="3"/>	<input type="text" value="5"/>	<input type="text" value="5"/>	<input type="text" value="1"/>	2 can be tube feeders; 5 in dementia secured unit can be either male or female	<input type="text" value="6"/>
Assisted Living	110	<input type="text" value="3"/>	<input type="text"/>	<input type="text"/>	<input type="text" value="3"/>	<input type="text"/>			<input type="text" value="2"/>

<< Back

Save & Next >>



## Emergency Reporting System (ERS) - Step 8. LTC Surge Capacity / Resource Needs

### Wizard Steps

- ▶ 1. Plan Facility
- ▶ 2. Non-Plan Facility
- ▶ 3. Your Contact Information
- ▶ 4. Previous Response
- ▶ 5. Operational Issues
- ▶ 6. LTC Open Beds
- ▶ 7. Hospital Open Beds
- ▶ **8. LTC Surge Capacity / Resource Needs**
- ▶ 9. Hospital Surge Capacity / Resource Needs
- ▶ 10. Equipment and Supplies
- ▶ 11. Transportation
- ▶ 12. LTC Staff
- ▶ 13. Hospital Staff
- ▶ 14. Complete

**i INSTRUCTIONS:** If you are in need of resources or requested to surge to 110% of your licensed beds, what equipment, supplies or staffing would you need from the Disaster Struck Facility or other groups (Mutual Aid Plan, City EOC)?

Our facility will require 7 beds and mattresses if requested to surge. Additionally, we will require 2 RNs and 1 CNA if we are unable to get them from our staffing pool.

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Wizard Steps

- ▶ 1. Plan Facility
- ▶ 2. Non-Plan Facility
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- ▶ 6. LTC Open Beds
- ▶ 7. Hospital Open Beds
- ▶ 8. LTC Surge Capacity / Resource Needs
- ▶ 9. Hospital Surge Capacity / Resource Needs
- ▶ 10. Equipment and Supplies
- ▶ **11. Transportation**
- ▶ 12. LTC Staff
- ▶ 13. Hospital Staff
- ▶ 14. Complete



**INSTRUCTIONS:** Please enter the information requested below about the vehicles at your facility.

Indicate a number for each category:

*\*NOTE: The facility will receive a call to confirm transportation information prior to any requests being made to redeploy transportation vehicles.*

# of Vehicles that can transport Patients (Hospitals) / Residents (Long Term Care)?

# of Vehicles that can transport Supplies/Equipment?

# Drivers available?

# of Total Patients/Long Term Care Residents (combined total) that can be transported by all of your vehicles?

# of Total Wheelchair Patients/Long Term Care Residents who can be transported by your vehicles that have lifts?

What time would you be able to send vehicles to the Disaster Struck Facility (enter a specific time that your vehicles will be ready to depart - ex: 10:15 AM)?

Provide additional details as necessary.

Please contact us to let us know where we should send this vehicle to if requested.

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Save & Next >>



**Wizard Steps**

- ▶ 1. Plan Facility
- ▶ 2. Non-Plan Facility
- ▶ 3. Your Contact Information
- ▶ 4. Previous Response
- ▶ 5. Operational Issues
- ▶ 6. LTC Open Beds
- ▶ 7. Hospital Open Beds
- ▶ 8. LTC Surge Capacity / Resource Needs
- ▶ 9. Hospital Surge Capacity / Resource Needs
- ▶ 10. Equipment and Supplies
- ▶ 11. Transportation
- ▶ **12. LTC Staff**
- ▶ 13. Hospital Staff
- ▶ 14. Complete

**i INSTRUCTIONS:** Please enter the information requested below about the LTC Staff at your facility.

Indicate the number of staff available, in each category, to be loaned to the Disaster Struck Facility:

*\*NOTE: The facility will receive a call to confirm staffing information prior to any requests being made to redeploy staff.*

Staff Type	Number Available	Staff Type	Number Available
MD	<input type="text"/>	Administrator / Asst. Administrator	<input type="text"/>
DON/DNS	<input type="text" value="1"/>	Pharmacist	<input type="text" value="1"/>
RN	<input type="text" value="3"/>	Registered Dietician	<input type="text"/>
LPN	<input type="text"/>	Food Service Supervisor / Cook / Staff	<input type="text"/>
CNA	<input type="text" value="5"/>	Housekeeping Supervisor / Housekeeper	<input type="text"/>
Resident Care Director	<input type="text"/>	Laundry Supervisor / Staff	<input type="text"/>
Respiratory Therapist	<input type="text"/>	Maintenance Supervisor / Staff	<input type="text" value="1"/>
Physical / Occupational Therapist	<input type="text"/>	Other (Please Specify)	<input type="text"/>
		<input type="text"/>	

What time would you be able to loan staff to the Disaster Struck Facility (enter a specific time that your staff will be ready to depart - ex: 10:15 AM)?

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Save & Next >>

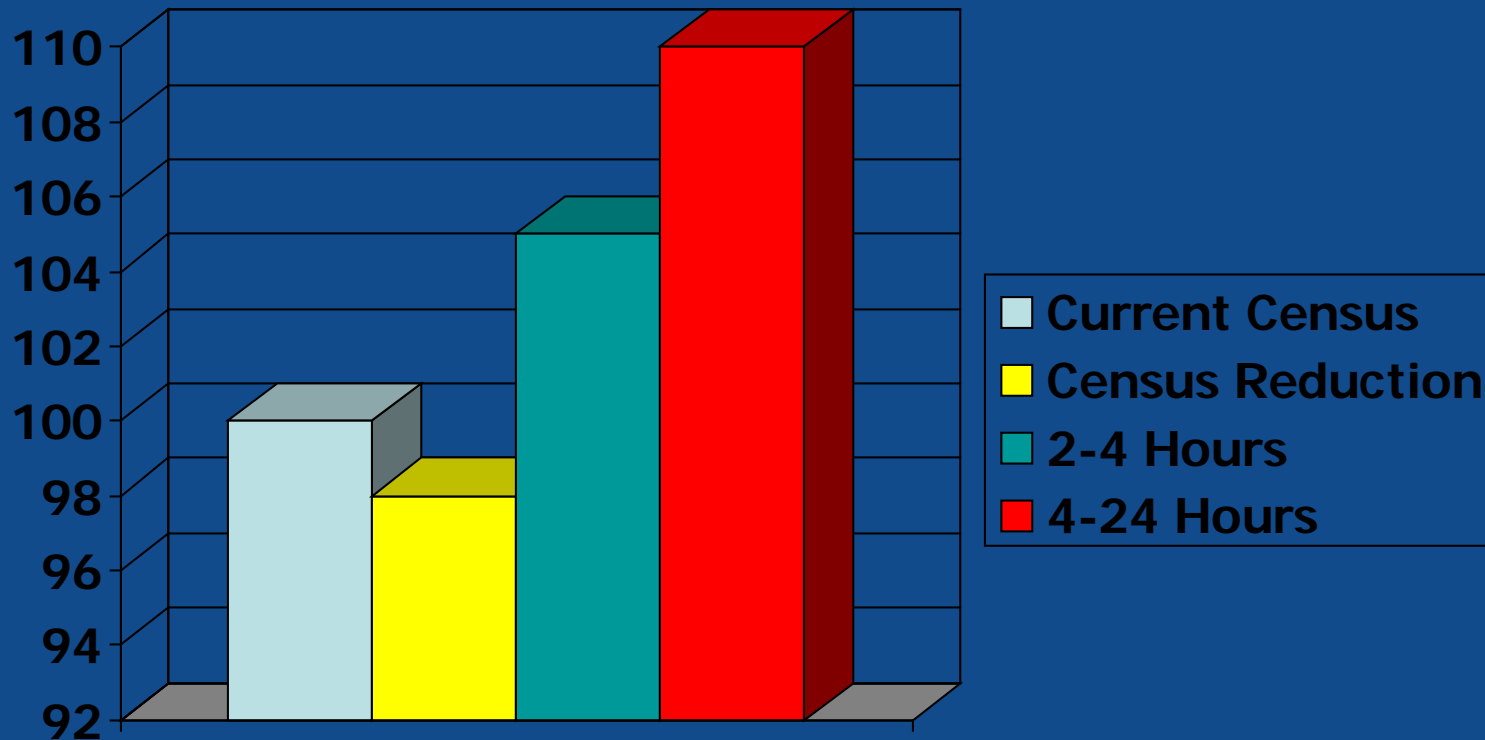
# What happens when that call comes at 2:00 am?

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- Anyone who might answer the phone:
  - Basic knowledge that there is a LTC Mutual Aid Plan
  - Get the name of the person calling, facility, contact number and issue or request
  - Inform the Nursing Supervisor ASAP
- Nursing Supervisor – Scope will determine actions
  - Immediate analysis of open beds – M / F / Either
  - Activate internal emergency notification tree
  - Complete Emergency Reporting
  - Evacuation: Prepare to receiving incoming residents
  - Resource & Asset Request: Prepare to provide staff, equipment, supplies or transportation

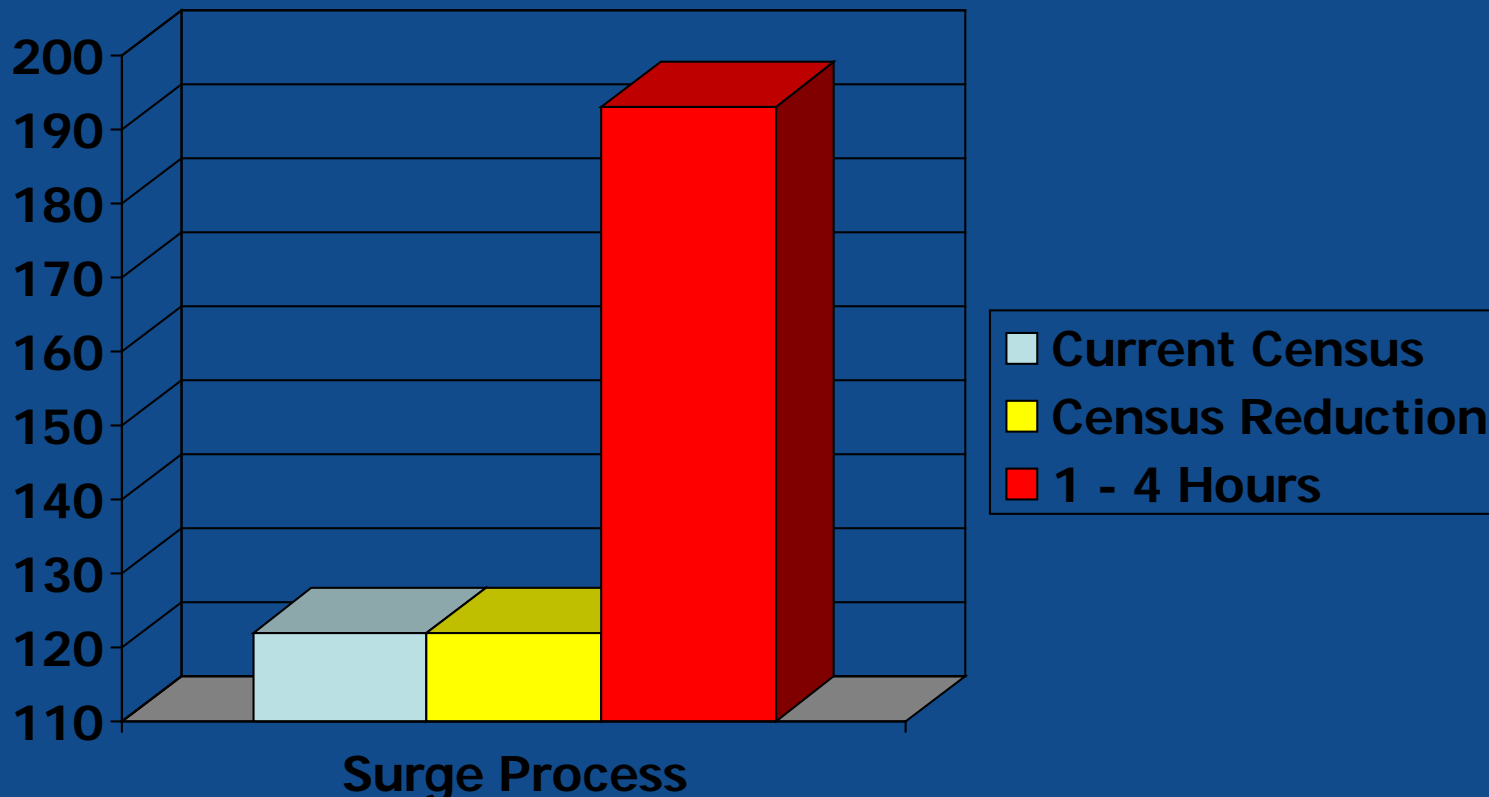
# 100 Bed LTC - Surge Process

- Standard Process (24 hour period)
- Discharges → Additional Beds → Surge to 110% or 110 Residents (rare event to go higher than 110%)



# Catastrophic Surge (Joplin)

- Catastrophic Surge Process – 126 beds
- Census Reduction (no time) → Surge → Equipment & Staff may or may not come (surged to ~193)



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# Categories of Care

# Resident Care Levels

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- Customization for all resident care levels
- Provides the Disaster Struck Facility or the LTC Coordinating Center the type of care that each facility can deliver
- Maintains resident continuity of care





## My Facility - Basic Info

- **Organization** = "Connecticut Hospital and Long Term Care Mutual Aid Plan"
- **Facility** = "West Hartford Health & Rehabilitation Center"

Facility Name	Facility Types	Phone #s	Additional Hosp. Phone #s
<b>Region: 3</b>			
<b>West Hartford Health &amp; Rehabilitation Center</b> 130 Loomis Drive West Hartford, CT 06107  Have Loading Dock: No How supplies are received? <i>Around back of facility via long ramp to patio.                      We have multiple hand-trucks and carts.</i>	Nursing Home	<b>Primary:</b> (860) 521-8700  <b>Primary Fax:</b> (860) 521-7452 <b>Cmd Ctr:</b> (860) 573-6985 <b>Cmd Ctr Fax:</b> <b>Cmd Ctr Location:</b> Administrator's office <b>Failsafe Phone:</b> (860) 573-6985  <b>Other Phone:</b> 860-561-2891 and 860-561-2962 are back-up phone lines when main line is down.	Region: 3  <b>ED Phone:</b> <b>ED Fax:</b> <b>Sattelite Phone:</b> <b>800 MHz:</b>  <b>Hear Tone:</b>

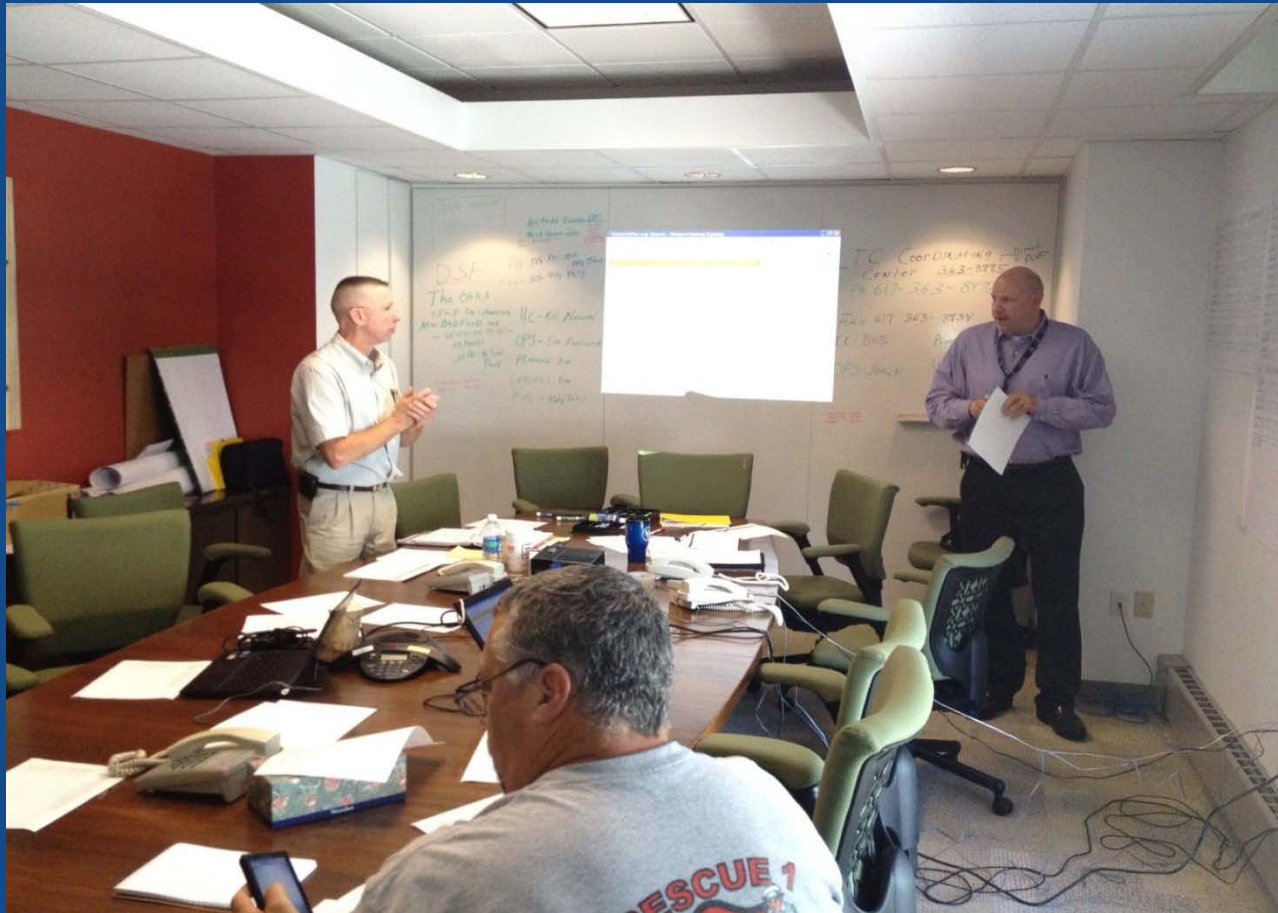
### Generators

Voltage	Amperage	Kilowatt Rating	Fuel Type	Backup Fuel Type	Quick Connection	Rental Cable Run	Area Served	Your Notes
208	1000	300	Diesel		No	30	100% of all facility services	Burn rate is 8-12 gallons/hour with no air conditioning.  No spare parts in stock. Maintenance agreement with Cummins.  Transfer switch size=1200 amps

# Long Term Care Coordinating Center

## *Hebrew Rehabilitation Center, Roslindale*

- \* 12 Responders Required (Primary and Back-ups)
- 3 Operational Periods



# Function of the LTC Coordinating Center

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- Assist and coordinate **resident placement**
- Support resident tracking - “**Close the loop**”
- Assist with **obtaining** staff, supplies and equipment
- Assist with **transportation of** staff, supplies and equipment
- Interaction with local, county and state agencies
- Consistent **media statement**

**ENSURE EVERYONE IS ACCOUNTED FOR**

# QUESTIONS

**Jim Garrow / Scott Aronson**

**Russell Phillips & Associates, LLC**

**California / Connecticut / New York / Ohio / Rhode Island**

**860-793-8600**

**[jgarrow@phillipsllc.com](mailto:jgarrow@phillipsllc.com) / [saronson@phillipsllc.com](mailto:saronson@phillipsllc.com)**

**[www.phillipsllc.com](http://www.phillipsllc.com)**