

# NURSING HOME EVACUATION PLAN

<http://www.gnyha.org>

## PURPOSE:

To provide guidance in the development of an evacuation plan containing detailed information, instructions, and procedures that can be engaged in any emergency situation necessitating either a full or partial evacuation of the nursing home. This plan must incorporate staff roles and responsibilities essential to this process. Staff must be educated in their role(s). Drills and reviews must be conducted to ensure that the plan is workable. The plan must include back up measures for all components.

## 1. Activation Criteria

- Who (title, not name) makes the decision to activate the plan?
- Who (title, not name) is the alternate if this person is not available?
- Define how the plan is activated.
- What are the phases of implementation (staff notification, accessing available resources and equipment, preparation of residents and essential resident supplies)?

## 2. Identification of the Alternate Site(s)

- What alternate/receiving facilities have been identified?
- What written documentation confirms the commitment of these facilities (Memorandum of Understanding, Contract, etc.)?
- What is the process for ensuring these facilities remain available at the time of the evacuation?
- What is the process in place to notify identified facilities that a decision has been made to evacuate residents to their facilities?

## 3. Resources/Evacuation

- What resources/equipment are available to move residents from rooms/floors, which includes elevators not in operation?
- Where is this equipment stored? Is the area clearly marked for staff access during an evacuation?
- By what means can staff access this equipment 24/7?
- What is the protocol for staff training on equipment use?
- What is the inventory protocol in place for this equipment?
- Are residents requiring this equipment identified?
- How are they identified (Interdisciplinary Care Plan)?
- How is this information kept current?

## 4. External Transportation Resources

- What transportation resources have been identified (buses, vans, ambulances, ambuletts)?
- What written documentation confirms the commitment of the transportation resources availability to the facility when needed (Memorandum of Understanding, Contract)?
- By what means are these agreements kept current?
- Are there secondary/alternate transportation resources identified and available if needed?
- Do transportation resources meet resident's needs (supine, wheelchair, ambulatory, life support, etc.)?
- What protocols are in place to ensure recurrent assessment of residents for specific transportation needs?
- By what means are they identified (Interdisciplinary Care Plan)?
- By what means is this information kept current?

## **5. Resident Evacuation Destination**

- Do residents have a pre-determined destination (other nursing home, hospital, home with family)?
- What is the protocol to determine the destination is specific to individual resident care needs?
- Where is this information maintained (Interdisciplinary Care Plan)?
- By what means is this information kept current?

## **6. Tracking Destination/Arrival of Residents**

- What process is in place to track the pre-determined destination of each resident?
- Who (title[s], not names[s]) is responsible for tracking of the resident's arrival at the destination?
- What is the protocol for informing the resident and/or their emergency contact of this pre-determined destination?
- What process is in place to ensure the resident a well-organized return to the original facility at the conclusion of the situation requiring the evacuation?

## **7. Family/Responsible Party Notification**

- What is the procedure for notification of the resident emergency contact of an evacuation?
- What is the protocol to identify those residents who are unable to speak for themselves? What is the process for assigning staff members in this situation?
- Who is the person(s) (title, not name) responsible for this notification?
- What is the process to create the script used for the notification process (where, why, how, when, etc.)?
- Who is the person(s) (title, not name) responsible for composing the script?
- What is the process for tracking completion of family/emergency contact notifications?

## **8. Governmental Agency Notification**

- What is the procedure for notifying the New York State Department of Health Regional Office of an evacuation?
- What other governmental (local) agencies will be notified of an evacuation (NYCDOH, LHD, Office of Emergency Management, Ombudsman, etc.)?
- Who is the person(s) (title, not name) responsible for these notifications?

## **9. Room Evacuation Confirmation**

- What protocol is in place to verify that rooms have been evacuated (orange tags, chalk on door)?
- What is the protocol for staff training and conducting drills on room evacuation?
- Is all facility staff aware of this protocol?
- Is this protocol included in annual and orientation education?
- By what means have the fire department and other facility first responders have been made aware of the protocol?

## **10. Transport of Records and Supplies**

- What is the procedure for transport of Medication Administration Records (MAR's) and medical records?
- By what means will confidentiality be maintained during transport?
- By what means are resident specific specialized treatment supplies identified for transport?
- What is the protocol for transport of resident specific medications (a minimum three day supply) to the receiving facility?
- What is the protocol for transport of resident specific controlled substances (a minimum three day supply) to the receiving facility?
- What procedures are in place for controlled substances to record receipt, full count and signatures of both transferring and receiving personnel?
- By what means will the elements outlined above in Section 10 be kept current?
- Where is this information maintained (Interdisciplinary Care Plan)?