

## **GUIDANCE TO NURSING FACILITIES IN CREATING AND MAINTAINING SURGE CAPACITY/CAPABILITY ASSESSMENTS**

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### Purpose of the Guidance

This document outlines for nursing home leaders resources and tools available in the public domain that provide guidance on how to create and maintain internal processes to assess organizational capacity and capability to participate in emergency preparedness planning. Each of these resources can provide nursing home leaders with valuable insight and information to assist them in their emergency preparedness planning.

***This guidance is not part of a regulation or a requirement and use of the resources and tools highlighted in this guidance is voluntary and does not guarantee compliance with regulations.***

### Background

Since the events of September 11, 2001, and Hurricane Katrina, Americans have experienced the devastation caused by both man-made and natural crises. These events have demonstrated the impact of disasters on the public health infrastructure and the importance of emergency preparedness for all health care providers.

To date, most health care preparedness planning efforts have focused on hospital and first responder preparedness. Nevertheless, past events have taught us that these groups must and will depend on providers across the continuum of care to support their emergency response efforts.

The potential role in preparedness for nursing homes is part of important local, state, and national preparedness discussions. However, there is little understanding of the extent to which nursing homes have planned for and/or been incorporated into regional planning efforts ([Saliba, et al., 2004](#); [Dosa, et al., 2003](#); [Helget, et al., 2002](#)).

### Summary

The resources and documents summarized below provide nursing home leaders and staff with information, insights, and assistance to help them to understand their potential role in local, state, and national response planning and to create, review, and maintain their own response plans.

### ***Providing Mass Medical Care with Scarce Resources: A Community Planning Guide***

This guide was prepared by Health Systems Research, Inc., for the Agency for Healthcare Research and Quality (AHRQ). It provides community, facility/community, institutional, State, and Federal planners with valuable information and insights that will help them in their efforts to plan for and respond to a mass casualty event (MCE).

The guide provides information on the results of an MCE that communities likely would face. It includes key constructs, principles, and structures that can be incorporated into MCE planning, and approaches and strategies to provide the most appropriate standards of care possible under the circumstances. It provides examples of tools and resources to help in the planning process, and examples of ways health systems, communities, or States have approached MCE-related planning issues.

This document is not intended to reflect Health and Human Services policy, but provides State and local planners with options to consider when planning their response to an MCE.

### ***Altered Standards of Care in Mass Casualty Events***

This second AHRQ document prepared by Health Systems Research, Inc., identifies, plans, and prepares individuals for making the necessary adjustments in current health and medical care standards to ensure that the care provided in response to a MCE results in as many lives being saved as possible.

States, health care organizations, and systems have developed preparedness plans for events that may result in mass human casualties. The public assumes that, regardless of the scale of the emergency, health care will be delivered according to established standards of care. However, an act of bioterrorism or other public health or medical emergency involving large numbers of victims, can severely compromise the ability of local or regional health networks to deliver services consistent with established standards of care.

In this document, a panel of experts addresses the need to develop and plan for altered standards of care in the event of mass casualties. It includes a framework and set of principles for the development of alternative strategies for how health and medical care is delivered in order to maximize the number of lives saved.

### ***Emergency Preparedness Atlas: U.S. Nursing Home and Hospital Facilities***

AHRQ has also sponsored the preparation of the *Emergency Preparedness Atlas: U.S. Nursing Home and Hospital Facilities* to support local and regional planning and response efforts in the event of a bioterrorism or other public health emergency.

This tool is intended to stimulate productive discussion about how nursing homes can support medical surge that occurs in response to emergency situations—it is not a review of the quality or adequacy of preparedness efforts in any area.

The *Atlas* provides an abstract of the overall AHRQ-funded project, an overview of its content, and includes a series of case studies illustrating the ways in which nursing homes may accommodate a surge of patients in six States. It includes maps of selected health care facilities for all 50 States and the District of Columbia, and appendices provide technical notes and detailed tabular data supporting the 51 maps. The *Atlas* is available at <http://www.ahrq.gov/prep/nursinghomes/atlas/index.html>

***Nursing Homes in Public Health Emergencies: Special Needs and Potential Roles  
Appendix B - Model Long-term Care Preparedness Needs Assessment***

This needs assessment was created for AHRQ by RTI, from focus groups' discussions about disaster and bioterrorism planning in nursing homes in five states. It is a model for the kind of survey that can be used either by planners surveying long-term care facilities within their jurisdictions or by facilities as an aid to assessing their own emergency preparedness. It may be used best by an organization's team for developing their own preparedness planning.

This needs assessment includes facility characteristics, vaccines, the physical plant and operations, staff education and training through drills, supplies, and logistics. It should be viewed as a resource to augment an organization's own internal assessment for preparedness.

Providers still need to complete all needs assessments as designated and required by DOH.

***National Criteria for Evacuation Decision-making in Nursing Homes***

This national guide for evacuation decision-making in nursing homes was developed through a grant funded by the John A. Hartford Foundation to the Florida Health Care Association Education and Development Foundation. The project's overall goal was to ensure the safety and quality of care of frail elders living in nursing homes during a natural disaster by creating a tool for nursing home decision-making about evacuation during an emergency event.

The decision to evacuate or to shelter-in-place is a part of any facility's comprehensive emergency management plan and will be a major focus when the plan is activated. This document identifies key decision-making markers which may be used in any emergency event for making that decision, with a special focus on tropical cyclones (i.e., hurricanes, tropical storms or tropical depressions).

*Citation: Florida Health Care Education and Development Foundation, 2008, National Criteria for Evacuation Decision-Making in Nursing Homes, developed through a project funded by the John A. Hartford Foundation. For further information, please visit [www.fhca.org](http://www.fhca.org).*