# SEVERE WEATHER – COLD[[1]](#footnote-1) or **HEAT**[[2]](#footnote-2)

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| **MISSION** |
| To safely manage the operations of the nursing home (including providing for the safety of residents, visitors, and staff) during a severe weather emergency such as an ice storm, snowstorm, rain, flooding, or heat emergency, etc. |
| **DIRECTIONS** |
| Read this entire response guide and use as a checklist to ensure tasks are addressed and completed. For each response period, all activated IMT positions should refer to their Job Action Sheet for additional actions. Each IRG is intended to be a starting point and not all inclusive. Customize to your facility. *Note: Section duties and responsibilities remain the responsibility of the Incident Commander unless delegated.* |
| **OBJECTIVES** |
| 🞎 | Account for all residents, visitors, and staff. |
| 🞎 | Maintain resident care management and safety. |
| 🞎 | Minimize impact on nursing home operations. |
| 🞎 | Communicate situation to staff, residents, media, community officials, and state survey agency. |
| 🞎 | Restore normal operations as soon as feasible. |

| **RAPID RESPONSE CHECKLIST - COLD** |
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| 🞎 | Activate facility’s EOP and appoint a Facility Incident Commander (IC) if warranted. |
| 🞎 | Assess residents for signs of distress and/or discomfort. |
| 🞎 | Initiate actions to safely increase resident comfort, e.g., utilize heating pads and electric blankets (be sure to carefully monitor the temperature of residents); offer warm liquids (keeping in mind relevant dietary modifications/restrictions), etc. Contact vendors for additional heating units if appropriate. |
| 🞎 | Do not leave residents unattended near a heat source. |
| 🞎 | If the internal temperature of the facility remains low and potentially jeopardizes the safety and health of residents, consider re-location to a warmer part of the facility or evacuation to another facility. |
| 🞎 | If the considering the decision to evacuate the facility, see **SHELTER-IN-PLACE** or the **EVACUATION IRG**. |
| 🞎 | Notify appropriate state survey agency to report an unusual occurrence and activation of facility’s EOP. |
| 🞎 | *Add other response actions here consistent with the facility EOP.* |

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| **RAPID RESPONSE CHECKLIST – HEAT** |
| 🞎 | Activate facility’s EOP and appoint a Facility Incident Commander (IC) if warranted. |
| 🞎 | Assess residents for signs of distress and/or discomfort. |
| 🞎 | Call 9-1-1 if any resident appears to be suffering from heat-related illness such as heat cramps, heat exhaustion or heat stroke. |
| 🞎 | Consider re-locating residents to a cooler part of the facility. |
| 🞎 | If the outdoor temperature is cooler than the internal facility temperature, consider opening windows and using fans to bring cooler air into the building. If the outdoor temperature is not cooler, keep the windows closed and shades drawn. (Note: it may be necessary to increase security to accommodate open windows, etc.) |
| 🞎 | If the internal temperature of the facility remains high and potentially jeopardizes the safety and health of residents, consider evacuation to another facility. |
| 🞎 | Provide cool washcloths and cooling fans for air circulation.  |
| 🞎 | Encourage residents to drink fluids to maintain hydration. |
| 🞎 | If considering the decision to evacuate the facility, see **SHELTER-IN-PLACE** or the **EVACUATION IRG**. |
| 🞎 | Notify appropriate state survey agency to report an unusual occurrence and activation of facility’s EOP. |
| 🞎 | *Add other response actions here consistent with the facility EOP.**NOTE: Section duties and responsibilities remain the responsibility of the Incident Commander unless delegated.* |

| **Immediate Response (0 - 2 hours)** |
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| **IMT Position** | **Action** | **Initials** |
| **Incident Commander** | Notify nursing home Chief Executive Officer, Board of Directors, state survey agency, and other appropriate internal and external officials of situation status. |  |
| Activate Command Staff and Section Chiefs, as appropriate. |  |
| Establish operational periods, objectives, and regular briefing schedule. Consider the use of the NHICS 200: Incident Action Plan (IAP) Quick Start for initial documentation of the incident. |  |
| Communicate with local EMS, ambulance providers, and alternate transportation resources regarding the situation and possible need to evacuate or relocate residents. |  |
| Communicate with other health care facilities to determine situation status, ability to accept residents if transfer, nursing home abandonment, or evacuation is ordered. |  |
| Monitor and obtain updates on weather conditions, structural integrity, and nursing home security. |  |
| **Liaison/PIO** | Activate the communication plan and respond to media inquiries in coordination with law enforcement and the Incident Commander. |  |
| Communicate with local emergency management and state survey agency regarding nursing home situation status, critical issues, and resource requests. |  |
| Conduct regular media briefings in collaboration with local emergency management, as appropriate.  |  |
| Inform staff, residents, and families of situation status and provide regular updates. |  |
| **Safety Officer** | Evaluate safety of residents, family/guardians, and staff. Recommend protective and corrective actions to minimize the hazard and risk.  |  |
| In coordination with Operations Section Chief, secure the nursing home and implement limited visitation policy.  |  |
| **Operations Section Chief** | Prepare to implement emergency plans and procedures as needed (e.g., loss of power, cooling, water, HVAC, communications) including severe weather staffing procedures. |  |
| Ensure continuation of resident care and essential services. |  |
| Consider partial or complete evacuation of the nursing home, or relocation of residents and services within the nursing home. |  |
| **Operations Section Chief** | Coordinate with the Safety Officer to secure the nursing home and implement limited visitation policy.  |  |
| Designate an area(s) to accommodate resident/staff family members/guardians seeking shelter in severe weather including those who may be electrically dependent or have medical needs. |  |
| Implement tasks listed below if Branches are not activated. |  |
| **Resident Services Branch Director** | Assess residents for risk, and prioritize care and resources, as appropriate. |  |
| Distribute appropriate equipment throughout the nursing home (e.g., portable lights, fans and blankets), as needed. |  |
| Conduct a nursing home census and identify which residents may require transfers. |  |
| **Infrastructure Branch Director** | Assess any damage to facility infrastructure, including:* Status of all utilities
* Ability to sustain operations with current impact on infrastructure and utilities
* Activate utility contingency plans
* Activate Memorandums of Understanding as needed for generator and fuel support, water and sewage services, and medical gas deliveries
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| Complete a NHICS 251 - Facility System Status Report. |  |
| **Planning Section Chief** | Establish operational periods, incident objectives, and the NHICS 200: Incident Action Plan (IAP) Quick Start in collaboration with the Incident Commander. |  |
| Prepare for potential evacuation by researching available evacuation sites. |  |
| Gather internal situation status including supply and equipment status, current staff and nursing home census. |  |
| Initiate the gathering and validation of external situational status (weather, impact to roads, utilities, scope of damage, evacuation routes) and infrastructure status for inclusion in the IAP. |  |
| Maintain and update the situational status boards and other documentation tools for timeliness and accuracy of information received. |  |
| **Logistics Section Chief** | In coordination with the Operations Section’s Infrastructure Branch Director, maintain communications systems and other utilities and activate redundant (back-up) systems, as appropriate. |  |
| Obtain supplies, equipment, medications, food, and water to sustain operations. |  |
| Obtain supplemental staffing, as needed. |  |
| Prepare for transportation of evacuated residents, if activated. |  |
| **All Activated Positions – Refer to Job Action Sheets** |

| **Intermediate Response (2 - 12 hours)** |
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| **IMT Position** | **Action** | **Initials** |
| **Incident Commander** | Continue to update external partners, authorities, and state survey agency regarding situation status. |  |
| Update and revise the Incident Action Plan. |  |
| Monitor nursing home evacuation, if activated. |  |
| Continue to obtain updates on weather conditions, structural integrity, and nursing home security. |  |
| Continue with briefings and situation updates with staff, residents, and families. |  |
| Continue communications with area nursing homes and facilitate resident transfers, if activated. |  |
| **Liaison/PIO** | Assist with notification of residents’ families about situation and evacuation, if activated. |  |
| Continue to communicate with local EOC and state survey agency regarding situation status and critical issues, and request assistance as needed. |  |
| **Safety Officer** | Continue to evaluate nursing home operations for safety and hazards, and take immediate corrective actions. |  |
| In coordination with the Infrastructure Branch Director, regularly perform nursing home damage assessments.  |  |
| Ensure staff food, water and rest periods. |  |
| Monitor, report, follow-up on, and document staff or resident injuries. |  |
| **Safety Officer** | Maintain nursing home security and restricted visitation. |  |
| **Operations Section Chief** | Prepare the staging area for resident transfer/evacuation, if warranted. |  |
| In consultation with the Logistics Section Chief, ensure provision of water and food to residents, visitors, and families. |  |
| Implement tasks listed below if Branches are not activated. |  |
| **Resident Services Branch Director** | Continue evaluation of residents and maintain resident care. |  |
| Assess residents for risk and prioritize care and resources, as appropriate. |  |
| Monitor residents for adverse effects of psychological stress on resident health. |  |
| **Infrastructure Branch Director** | In coordination with the Safety Officer, regularly perform nursing home damage assessments and initiate appropriate repairs. Complete a NHICS 251 - Facility System Status Report |  |
| Ensure nursing home cleanliness (as best as possible). Initiate special cleaning as necessary. |  |
| Continue to monitor the status of the physical plant and ensure the integrity of and/or restoration of utilities and communications, if impacted. |  |
| Ensure the function of emergency generators and alternative power/light resources, if needed. |  |
| **Planning Section Chief** | Continue resident, bed, material, and personnel tracking. |  |
| Continue to gather and validate situation information. |  |
| Continue to gather nursing home status information as well as external community status information and advise the Command Staff as indicated. |  |
| Continue to research available evacuation sites, if applicable. |  |
| Begin a projection of the situational status and impact for a minimum of 96 hours of operations without community support. |  |
| Track staff and equipment; develop projected usage patterns. |  |
| Begin to prepare the demobilization and system recovery plans. |  |
| Plan for repatriation of residents. |  |
| Ensure documentation of actions, decisions, and activities |  |
| **Logistics Section Chief** | Contact vendors to ensure provision of needed supplies, equipment, medications, and water and food to residents, visitors, and families. |  |
| **Logistics Section Chief** | Continue to provide staff for resident care and evacuation. Activate the labor pool to obtain personnel resources as needed. |  |
| Continue to provide transportation services for internal operations and resident evacuation. |  |
| **Finance/ Administration Section Chief** | Track cost expenditures and estimate cost of nursing home damage and lost revenue. |  |
| Initiate screening and tracking of incoming volunteers and/or new personnel. |  |
| Initiate documentation of any injuries or nursing home damage. |  |
| Facilitate the procurement of supplies, equipment, medications, and contracting for nursing home clean up or repair.  |  |
| **All Activated Positions – Refer to Job Action Sheets** |

| **Demobilization/System Recovery** |
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| **IMT Position** | **Action** | **Initials** |
| **Incident Commander** | Determine nursing home status, and declare restoration of normal services and termination of the incident. |  |
| Notify state survey agency of sentinel event. |  |
| Communicate final nursing home status and termination of the incident to local EOC, area nursing homes, officials, and state survey agency. |  |
| **Liaison/PIO** | Conduct final media briefing and assist with updating staff, residents, families/guardians, and others of the termination of the event. |  |
| **Safety Officer** | Ensure nursing home safety and restoration of normal operations. |  |
| Report staff injury and illness for follow up by Finance/ Administration Section Chief. |  |
| Discontinue visitor limitations. |  |
| **Operations Section Chief** | Assist with repatriation of residents transferred.  |  |
| Restore normal resident care operations |  |
| Ensure business continuity of operations and return to normal services. |  |
| Ensure residents, staff, and visitors have access to behavioral health support as needed. |  |
| Implement tasks listed below if Branches are not activated. |  |
| **Resident Services Branch Director** | Repatriate evacuated residents, if applicable. |  |
| Restore normal resident care operations. |  |
| **Infrastructure Branch Director** | Ensure integrity of and/or restoration of utilities and communications. |  |
| Ensure nursing home repairs and clean up. |  |
| **Planning Section Chief** | Conduct debriefings and a hotwash with:* Command Staff and section personnel
* Administrative personnel
* All staff
* All volunteers
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| Write an After Action Report and Corrective Action and Improvement Plan for submission to the Incident Commander, including:* Summary of the incident
* Summary of actions taken
* Actions that went well
* Actions that could be improved
* Recommendations for future response actions
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| Ensure all electronic and paper documents created in event response are collected and archived. |  |
| **Logistics Section Chief** | Inventory the Command Center and facility supplies and replenish as necessary, appropriate, and available. Restock supplies, equipment, medications, food, and water to pre event inventories. |  |
| Deactivate nontraditional areas used for sheltering and feeding and return to normal use. |  |
| Release temporary staff and other personnel to normal positions. |  |
| Submit all section documentation to Planning Section for compilation in After Action Report. |  |
| **Finance/ Administration Section Chief** | Document all costs, including claims and insurance reports, lost revenue, and expanded services, and provide report to Command Staff. |  |
| Work with local, state, and federal emergency management to begin reimbursement procedures for cost expenditures related to the event. |  |
| **Finance/ Administration Section Chief** | Contact the insurance carriers to assist in documentation of structural and infrastructure damage and initiate reimbursement and claims procedures. |  |
| **All Activated Positions – Refer to Job Action Sheets** |

| **Documents and Tools** |
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| **Nursing Home Emergency Operations Plan, including:*** Shelter-in-place procedures
* Evacuation procedures
* Business Continuity Plan
* Emergency power procedures
* Communication plan
* Behavioral health support procedures
* Emergency procurement policy
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| **Forms, including:*** NHICS 200 – Incident Action Plan (IAP) Quick Start
* NHICS 205 – Communications List
* NHICS 214 – Activity Log
* NHICS 21A – Incident Action Plan (IAP) Safety Analysis
* NHICS 251 – Facility System Status Report
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| Job Action Sheets |
| Paper forms for down-time documentation, data entry, etc.  |
| Access to nursing home organization chart |
| Campus floor plans, maps, and evacuation routes |
| Television/radio/internet to monitor news |
| Telephone/cell phone/satellite phone/internet/amateur radio/2-way radio for communication |

1. The determination of what constitutes *excessive cold* should be tailored to the impact of the temperature and its duration on the health and well-being of the facility’s residents. An informed decision should be made by responsible facility administrators. A suggested guideline to consider is a facility temperature of 65 degrees Fahrenheit or lower for a period of four hours. [↑](#footnote-ref-1)
2. The determination of what constitutes *excessive heat* should be tailored to the impact of the temperature and its duration on the health and well-being of the facility’s residents. An informed decision should be made by responsible facility administrators. A suggested guideline to consider is a facility temperature of 85 degrees Fahrenheit or higher for a period of four hours. [↑](#footnote-ref-2)