

# Resident Care During a Disaster

---

- A. Responding to Resident Needs
- B. Medication Management
- C. Powered Assistive Devices
- D. Identifying and Meeting Special Needs



# Responding to Resident Needs During a Disaster

---

In the event that call buttons (if applicable) are inoperable during a power failure or other disaster, direct care staff will perform a check on residents assigned to each staff member every 15 minutes until power is restored.



# Medication Management During a Disaster

---

## LOSS OF POWER

1. An appropriately sized cooler is kept on hand to store medications that require refrigeration during a power outage.
  - a. Refrigerated medications will be placed into zip-top plastic bags that are labeled and the placed on top of the ice in the cooler.
  - b. The cooler will be stored in a secure location.

## TEMPORARY RELOCATION

1. Resident care staff will ensure that resident medications are prepared for relocation if time allows.
2. The following personnel are responsible for ensuring resident medications are relocated: \_\_\_\_\_
3. All medications will be transferred to transportation bins that are kept on hand at all times. The bins will have closable lids and will be appropriately labeled.
4. An appropriately sized cooler is kept on hand to transport medications that require refrigeration.
  - a. Refrigerated medications will be placed into zip-top plastic bags that are labeled and the placed on top of the ice in the cooler.
  - b. After arriving at the temporary relocation site the refrigerated medications will be transferred to a separate secured refrigerator as soon as possible.
5. Sufficient medication supplies are kept on hand, including medication cups, graduated plastic med cups, syringes, etc.
6. The person responsible for ensuring relocation of the medications will supervise them at all times during relocation.
7. Upon arrival at the temporary relocation site, the regular medication management policies and procedures will be followed.



# Powered Assistive Devices

---

Residents who require assistive devices that require power will be immediately assisted to use emergency backups if emergency power generators are not available or not working.

## **OXYGEN CONCENTRATORS**

Residents using an oxygen concentrator will have appropriate backup oxygen tank available for power failures. During a power failure the resident will be assisted to switch to the backup oxygen tank.

## **MOTORIZED SCOOTERS**

Backup wheelchairs, or other assistive device as recommended by the resident's physician, will be available for residents that require a powered scooter for ambulation. During a power failure the resident will be assisted to use the wheelchair, or other assistive device as recommended by his/her physician, as necessary.

## **MOTORIZED BEDS FOR REPOSITIONING**

Residents that use an electric "hospital-style" bed for repositioning purposes will be assisted to reposition as necessary. Some beds have optional mechanical controls that may be used during power failures, otherwise wedges and pillows will be used for positioning, as appropriate to the resident's needs.

## **CPAP MACHINES**

Sufficient backup batteries will be maintained and charged for residents using CPAP machines. The physician will be consulted for recommendations for alternative equipment to be used during long term power failure.



# Identifying and Meeting Special Needs

---

## **SPECIAL NEEDS**

For the purposes of disaster and emergency preparation special needs may include, but are not limited to:

1. Hospice services
2. Home health services
3. Dementia, Alzheimer's disease, or other cognitive impairment
4. Visual impairment
5. Hearing impairment
6. Ambulatory restriction
7. Oxygen administration
8. Incontinence
9. Catheters

## **IDENTIFICATION OF RESIDENTS WITH SPECIAL NEEDS**

1. All residents will be listed on the *Resident Roster*.
2. The *Resident Roster* will be updated as necessary to keep it current (e.g., move-ins, move-outs, etc.).
3. The resident roster identifies the following for each resident:
  - a. Name
  - b. Room number
  - c. Ambulatory status
  - d. Emergency contact information (e.g., family or responsible party)
  - e. Special needs



## **HOSPICE AND HOME HEALTH SERVICES**

The appropriate Safety Supervisor will immediately contact the resident's hospice and/or home health supervisor to coordinate services during the disaster, evacuation, and/or relocation.

## **DEMENTIA, ALZHEIMER'S DISEASE, OR OTHER COGNITIVE IMPAIRMENT**

Residents with cognitive impairments will be directly supervised by appropriate safety monitors throughout the disaster, evacuation, and/or relocation. If the resident's family or responsible party is in the area, they will be asked to assist during evacuations and relocations when possible.

## **VISUAL OR HEARING IMPAIRMENT**

1. Safety Monitors will ensure residents bring vision aides with them during an evacuation or relocation.
2. Safety monitors will ensure that residents have hearing aids in place during an evacuation or relocation.
3. Devices will be labeled with the resident's name when possible, prior to any disaster or emergency.

## **AMBULATORY RESTRICTIONS**

1. Safety Monitors will ensure residents bring assistive devices (cane, walker, wheelchair, etc.) with them during an evacuation or relocation.
2. Devices will be labeled with the resident's name prior to any disaster or emergency.
3. See the *Evacuations* section of this manual for information on assisting nonambulatory residents with evacuations and relocation.



## **OXYGEN ADMINISTRATION**

1. Safety Monitors will ensure residents bring portable oxygen tanks and supplies with them during an evacuation or relocation.
2. Devices will be labeled with the resident's name prior to any disaster or emergency.



