



Surviving the Storm Disasters and Dialysis

Conference Summary

August 3, 2009
Dallas, Texas

*Coordinated by the Kidney Community Emergency Response
Coalition*

www.kcercoalition.com

Introduction

Community partners are organizations in the community with the power to join together to save lives. For end stage renal disease (ESRD), community partners are pivotal to providing information and services to dialysis and transplant patients and staff. In an emergency or disaster, the kidney community requires assistance from transportation providers, utility providers, government agencies, and community services.

On August 3, 2009, the Kidney Community Emergency Response (KCER) Coalition hosted a conference titled, *Surviving the Storm: Disasters and Dialysis*. This meeting encouraged the development of community partnerships through education and information sharing between all stakeholders. Community partnerships promote awareness about the critical needs of individuals with ESRD and the available resources to meet those needs available from the community. *Surviving the Storm* was organized to provide ideas and suggestions in collaborating with a variety of stakeholders to promote disaster preparedness in the kidney community.

Attendees

There were over 75 attendees at the conference. The attendees represented the Centers for Medicaid and Medicare Services (CMS), End Stage Renal Disease Networks, State and county health departments, ESRD providers, hospitals, Federal Bureau of Prisons, Children's Medical Center of Dallas, the National Disaster Medical System (NDMS), and the Dallas Community Emergency Response Team (CERT).

Attendees were engaged by sharing personal experiences and best practices with the group. Many attendees brought attention to unmet needs in the areas of independent dialysis providers, pediatric dialysis, and transplant patients/providers.

Meeting Purpose

Many of the stakeholders attending were not from the-ESRD community and thus not familiar with kidney disease or aware of the unique requirements that ESRD facilities must meet for disaster preparedness. The meeting began with an explanation of ESRD, the ESRD Network Program, KCER Coalition, and the importance of disaster preparedness for ESRD.

Goals of *Surviving the Storm: Disasters and Dialysis* included to:

- Minimize disruption of dialysis and transplant services to ensure that ESRD patients receive their life-sustaining treatments during times of disaster;
- Educate stakeholders to ensure thorough preparedness and efficient response in the kidney community;

- Encourage stakeholders to incorporate the special requirements of the kidney community into their jurisdiction's emergency and disaster plans; and
- Enhance partnerships between emergency management and the ESRD community.

Conditions for Coverage

On April 15, 2008, the Centers for Medicare and Medicaid Services (CMS) updated the Conditions of Coverage, including those related to emergency preparedness and response for dialysis facilities. These regulations are the minimum health and safety rules that all Medicare and Medicaid participating dialysis facilities must meet.

Emergency Preparedness

Each dialysis facility must implement policies and procedures to manage medical and nonmedical emergencies that are likely to threaten the health or safety of the patients, the staff, or the public. These emergencies include, but are not limited to fire, equipment or power failure, care related emergencies, water supply interruption, and natural and man-made disasters likely to occur in a facility's area.

Emergency Preparedness for Staff and Patient Training

The dialysis facility must provide appropriate training and orientation in emergency preparedness to all staff. Staff training must be provided and training effectiveness evaluated at least annually. The training must include the following:

- Ensuring that the staff can demonstrate a knowledge of emergency procedures, including informing patients of:
 1. What to do;
 2. Where to go, including instructions for occasions when the geographic area of a dialysis facility must be evacuated;
 3. Whom to contact if an emergency occurs while the patient is not in the dialysis facility. This contact information must include an alternate emergency phone number for the facility during instances when the dialysis facility is unable to receive phone calls due to an emergency situation, unless the facility has the ability to forward calls to a working number under such emergency conditions; and
 4. How to perform the "quick disconnect/clamp & cut" procedure from the dialysis machine if an emergency occurs.
- Ensuring that at a minimum, patient care staff maintains current CPR certification.
- Ensuring that nursing staff members are properly trained in the use of emergency equipment and emergency drugs.

Emergency Equipment

Emergency equipment includes, but is not limited to oxygen, airway suction, defibrillator (AED), artificial resuscitator, and emergency drugs, must be on the premises at all times and immediately available.

Emergency Plans

The facility must:

- Have a plan to obtain emergency assistance when needed;
- Evaluate at least annually the effectiveness of emergency and disaster plans and update them as necessary; and
- Contact its local disaster management agency at least annually to ensure that such an agency is aware of the dialysis facility's needs in the event of an emergency.

Patient Education

Teaching patients effectively saves lives. It is important to stress the importance of patient education for ESRD and disaster preparedness. Best practices for an ESRD facility's patient education plan include establishing a toll-free number or message hotline for patients and staff during or following an emergency and educating patients about the toll-free number; conducting periodic emergency drills with follow up and evaluation; and keeping current patient phone lists and alternate contact numbers.

It is important to emphasize continuous patient education. Patient education should focus on patient safety aspects, such as:

- Access to emergency shelters registration if needed;
- Emergency meal plans and fluid restrictions; and
- How to obtain addresses and phone numbers of local and statewide dialysis units.

Medical Reserve Corps (MRC)

This presentation emphasized the MRC role and outlined how local volunteers help their communities. The Medical Reserve Corps (MRC) organizes local healthcare workers into volunteer groups. Remember, ***all disasters are local***. The MRC better prepares communities and health industry volunteers to respond to emergencies. In a disaster, the local MRC, based in your local area, will probably be the first responders to the emergency. The mission of the MRC is to engage volunteers to strengthen public health, emergency response and community resiliency.

The KCER Coalition urged local healthcare workers to contact their Medical Reserve Corps to obtain more information about local resources and to educate their MRC about the critical needs of ESRD for emergency preparedness.

Incident Command System (ICS) for Healthcare

The goal of this presentation was to ensure attendees could better understand emergency management organizations and practices and to provide information to assist with Incident Command System (ICS) certification. ICS is a national management and organization system

used by all levels of government to manage domestic emergencies and disasters. Being trained in ICS will help the kidney community align with national response plans, language, and policies regarding how disasters are handled. Attendees were encouraged to access the course online and take the ICS-100.HC final exam in order to obtain the FEMA certificate.

National Weather Service (NWS)

The National Weather Service (NWS) presented tools and resources available for the community to make local decisions. The presentation focused on understanding how severe weather can impact ESRD. The NWS presentation discussed hurricane safety and the dangers of storm surge, wind, tornadoes, and flooding; including what to do to keep safe in weather emergencies and disasters.

- The National Weather Service has the technology and expertise to detect and forecast hurricanes and other severe weather.
- Preparing for severe weather is everyone's responsibility!
- Have a plan and practice it.
- Make sure everyone knows what to do.
- Have multiple ways of getting the word.
- When the threat materializes, act quickly!

Evaluations

Surviving the Storm received favorable feedback from the meeting attendees:

- 93% strongly agreed or agreed that the program objectives were clearly stated
- 95% strongly agreed or agreed that the program objectives were met
- 90% strongly agreed or agreed that the program time was used effectively
- 90% strongly agreed or agreed that the program objectives and content reflected current practice issues
- 98% strongly agreed or agreed that the content presented was accurate
- 93% strongly agreed or agreed that the teaching methods selected were effective
- 83% strongly agreed or agreed that the program met their professional educational needs
- 93% strongly agreed or agreed that the program educational level was appropriate
- 93% strongly agreed or agreed that the program physical/technical environment was conducive to learning
- 90% strongly agreed or agreed that they would recommend this program to other colleagues
- 93% strongly agreed or agreed that they plan to apply the concepts learned at this event

Next Steps

Conference attendees voiced concerns to ensure collaboration to address unmet needs, emerging threats, and gaps in resources. These issues will be addressed through the KCER Strategic Planning Committee to determine the most efficient method to meet these unmet needs:

- Developing a gap analysis with state health departments;
- Coordinating efforts with the National Governor's Association;
- Developing nursing home assessment forms and shelter triage forms related to individuals with ESRD ;
- Promoting the National Weather Service as a resource to assist facilities with planning;
- Investigate facilities' awareness and use of the Medical Reserve Corps;
- Brand KCER as a "CMS project" for greater credibility and a visible link to that authority;
- Explore the option of mobile dialysis;
- Market KCER resources and the lavender color to emergency management agencies, emergency medical services, law enforcement, and fire/rescue;
- Develop tools and resources to assist pediatric patients and providers;
- Develop additional resources for home dialysis patients and providers;
- Develop additional resources for kidney transplant patients and providers; and
- Develop additional resources for smaller, independent dialysis providers.