

Taking Care of Joplin



Inpatient Units Prepare

- **Tornado Warning – Very Calm**
- **“Routine” Unit Preparation**
- **Shift Change – Inconvenient**
- ✓ Determine Which Patients Need O2
- ✓ Move Patients To Hallway
- ✓ Consider/Prepare Isolation Patients
- ✓ Close Blinds/Window Coverings
- ✓ Close Doors
- ✓ Provide Pillows/Blankets

Inpatient Units Prepare

- Intermittent Power Outage
- Brief Medication Pyxis Access Interrupted
- Electronic Documentation/Internet Inoperable
- Significant Water Leakage Several Patient Rooms
- Questionable Gas Leak – Shut Off Valves

Inpatient Units Prepare

- Transfer To Emergency Power Source
- Obtain Flashlights
- Documentation Per Down Time Procedures
- Monitor Patients w/O2 Tanks
- Develop Plan for Relocation of Patients In Flooded Rooms
- Proceed With Change of Shift

Realization of Disaster

- Overhead Pages – “Shaken” Tone
 - “Dr. Astor” – Approx. 1815 – Ext. Disaster
 - “Dr. Red - Fire
 - “All Available Staff/Wheelchairs to ED”
- Night Shift Calling – Roads Blocked
- Loss of Landline Communication
- Transistor Radio Announcements of Tornado
- Attempts to Call Staff – Unsuccessful
- Unable to Communicate With Director

Implementation Disaster Plan

- Staff/Patients – Safety Homes/Loved Ones Unknown
- **COMMUNICATE WITH PATIENTS**
- Evaluate Current Staffing Available/Needed
- Identify Less Acute Patients Potential Discharge/Transfers
- Identify Patients Who Can Be Combined
- Identify Number of Available Beds

Implementation Disaster Plan

- Obtain Hand-held Radios
- Prepare to Receive ICU Transfers
- Prepare to Receive Admissions/Transfers
- **REMAIN CALM – Provide Normalcy – Constant Rounding on Patients**
- Proceed with Change of Shift
- Retain Staffing Number to Meet Increased Census – Off-going Staff to Staging Area

Initial Barriers – 2 to 4 Hours

- Emotional State – Staff and Patients
- Available Staff To Provide Care
- Flooding – Multiple Patient Rooms
- Extended Time Frame – All Clear
- ✓ Patients In Hall – Meals/Refrigeration
- ✓ O2 Tanks Depleting
- Inundated with Family/Visitors
- ✓ Many Injured
- ✓ Troubling News Shared with Patients

Initial Barriers – 2 to 4 Hours

- Operating Auxiliary Power
 - ✓ 1 Operating Elevator
 - ✓ Limited/No Lighting Bathrooms, Dressing Rooms, Temporary Care Areas
- Decreased Water Pressure
 - ✓ Providing Hemodialysis – Compromised
 - ✓ Flush Stools – Compromised
 - ✓ Pressure for Sterilization of Instruments – Compromised

Initial Barriers – 2 to 4 Hours

- Breech Water System – “Boil” Order
 - ✓ No Ice
 - ✓ Bottled Water
- Patient Care Challenges
 - ✓ Volume – (Patients and Staffing) –
Ventilating by Hand – No Patient Info
Hundreds of Volunteers Begin Arriving
 - ✓ Alternate Holding Areas Not Equipped w/Air
OCA Utilized as Staging/Holding Area for
PACU to Increase Capacity in RR

Patient Care Challenges

- Patient Care Challenges
 - ✓ Critical Patients Triage to ICU
 - ✓ Transfer Patients/Admit Patients to Floors with No Orders
 - ✓ Nursing Time – Hundreds of Procedures
 - ✓ Thousands of Supplies – Diminished
IC Working with MHA for Supplies
 - ✓ Emotional and Physical Trauma –
Displaced Families
 - ✓ Cleansing Patients Beyond Site of Injury

Patient Care Challenges

- Patient Care Challenges
 - ✓ Tetanus Booster
 - ✓ Portable Radiology – Splinting Supplies
 - ✓ Discharged Patients – No Homes
 - ✓ Arranging Follow-Up Care –
 - Displaced Physician's – Homes/ Offices
 - ✓ Discharge Prescription Needs
 - ✓ Ambulatory Aids/Home O2

Short Term Recovery

- Continue Working with MHA to Meet Staffing Demands
- Debriefings/Continued Counseling to Support Staff's Emotional/Mental Health Needs
- Within 12-36 Hours All FHS Employees Contacted – Texting/Facebook
- Disaster Hotline for Employees Established
- Within 24 Hours – Distribution Center for FHS Employees Established to Meet Staff's Immediate Needs

Lessons Learned

- **Increase Quantity Radios**
- **Increase Quantity of Emergency Outlets**
- **Staff Assignments as Near Specialty as Possible**
- **Electronic-Manual Documentation With Ease**
- **Assess Utilization of Disaster Supply Carts**
- **Assess Disposable Bag Usage – BSC**
- **Evaluate Emergency Med Pyxis Access**

Lessons Learned

- Cameras – Place on Backup Power
- Enhance Security at Entrances
- Improve Tracking System of Patients
- Evaluate Lighting in Critical Areas
- Consider/Plan Relief for Staff
- Provide Food/Sleeping Quarters For Staff

Lessons Learned

- Piping/Hoses Needed to Support Water Transport for Dialysis Patients
- Radiology/Lab Reports – Difficult to Match to Appropriate John Doe Patients
- Radiology Needs More Equipment That Operates on Generator Capabilities

Hours Immediately Following The Tornado Freeman Health System...

- Treated More Than 500 patients at Freeman West
- Treated 39 at Freeman Neosho
- Performed 22 surgeries in 12 hours
- Received 60* Patient Transfers from St. John's
- Transferred 64 Patients to Surrounding Hospitals

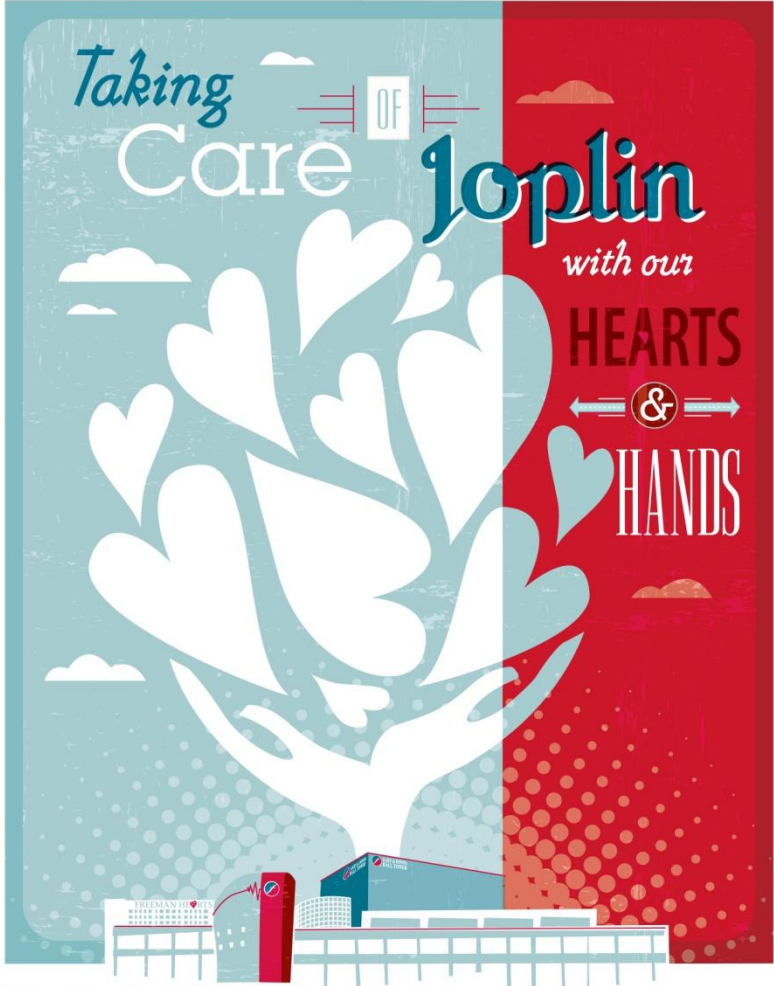
**Known patient numbers*

4 Days Later ...

- All Freeman Entities Fully Operational
- More than 1,000 Treated at Freeman
- 124 Transferred to Surrounding Hospitals
- Employee Disaster Relief Store Established for Freeman Employees and Families

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Freeman Health System