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Addressing Gaps in Nursing Home Emergency Preparedness

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BACKGROUND

Previous studies have identified significant gaps in nursing home emergency preparedness. Few of these studies have specifically surveyed nursing homes about activities that would be helpful in improving preparedness.

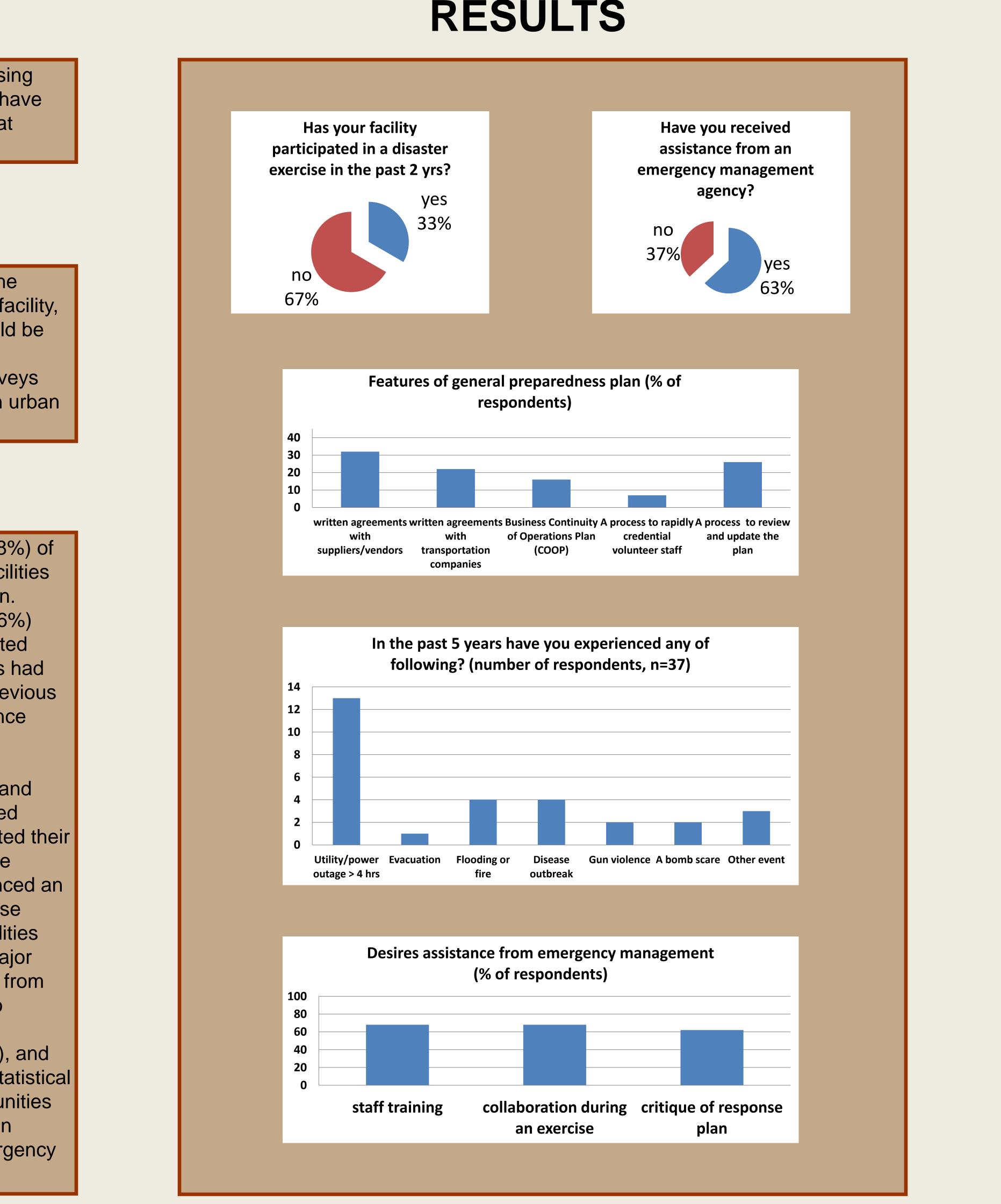
METHODS

In 2012, we mailed a survey to 134 nursing homes in the Texas Panhandle and New Mexico inquiring about the facility, facility preparedness, and types of assistance that would be helpful in improving preparedness for their facility. We performed standard statistical analysis on returned surveys and compared facilities in rural communities to those in urban communities.

RESULTS

37/134 (28%) of facilities returned the survey. 21/36 (58%) of surveys were from facilities in rural communities. All facilities had a written all-hazards emergency preparedness plan. 34/36 (94%) included an evacuation plan and 32/37 (86%) included a shelter in place plan. 23/36 (64%) had updated their plan in the past year. Only 12/36 (33%) of facilities had participated in a community disaster exercise in the previous 2 years. More than 50% of plans lacked specific guidance about mortuary services, information about building construction, written agreements with transportation companies, a process to rapidly credential volunteers, and prepared educational material. Overall, facilities reported intermediate confidence that their response plan reflected their facility's ability to respond effectively to a disaster. In the previous 5 years, 16/37 (43%) of facilities had experienced an emergency e.g. prolonged power outage, severe disease outbreak, or gun violence. Though 23/37 (62%) of facilities considered emergency management agencies to be major partners, 13/35 (37%) reported no previous assistance from these agencies. Facilities desired the following items to improve their facility's emergency preparedness: staff training (68%), collaboration during an exercise (68%), and critique of their response plan (62 %). There were no statistical differences between facilities in urban and rural communities with regard to the perceived confidence in the plan, plan deficiencies, or desire for assistance in improving emergency preparedness of their facility.

Addressing Gaps in Nursing Home Emergency Preparedness



CONCLUSIONS

LIMITATIONS

- 1. Low response rate may result in ascertainment bias.
- respondents.
- subject to recall bias
- provided one survey.

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1. More than half of surveyed nursing homes identified specific activities with local emergency management that could improve nursing home emergency preparedness including: (a) staff training, (b) collaboration during an exercise, and (c) critique of their response plan. There was no difference between rural and urban nursing homes with regard to emergency preparedness, and identified specific activities that could improve nursing home emergency preparedness.

2. Type of staff member completing the survey was not consistent and thus knowledge of facility and response plans may have varied among

Study was based on respondents' knowledge and memory and is

Large facilities (comprised of multiple types of licensed facilities) only

