

**HOME CARE EMERGENCY RESPONSE:
HURRICANE SANDY LESSONS LEARNED AND
ACTIONS TAKEN**

BY ROGER L. NOYES

Every day, home care staff work tirelessly to ensure the safety of vulnerable citizens at home — a mission that is truly put to test in times of crisis, such as natural disasters, when chronically ill, medically frail, elderly or disabled individuals are most acutely at risk.

As Hurricane Sandy battered the New York City Metropolitan area last fall, we at the Home Care Association of New York State (HCA) heard some remarkable stories from home care organizations and their staff who responded heroically to one of the biggest hurricanes to hit a densely populated region, causing \$50 billion in damage (second only to the \$108 billion toll of Hurricane Katrina in 2005).

Communities on the coast were decimated; power outages turned high-rise apartment buildings into dark and frigid towers where many people were forced to shelter-in-place; evacuation orders displaced thousands of others from their homes; flood-waters engulfed and paralyzed New York's public transportation networks; bridges were log-jammed by traffic surges; and fuel supplies dwindled.

Through it all, the region's home care community proved its resilience, overcoming so many enormous challenges to maintain care-continuity and serve as a lifeline for patients who needed help more than ever.

STORIES OF HEROISM

Some organizations, like Long Beach Medical Center's home care agency on Long Island, sustained major physical wreckage to their facilities. So, too, did their staff, many of whom had to flee storm-damaged homes and flooded vehicles. Several of them even came to work in rented or borrowed cars, eager to assist patients despite coping with their own trauma.

When the mandatory evacuation order went into effect, Long Beach nurses travelled door-to-door to locate patients in shelters and at alternate addresses, climbing up cold and darkened stairways to make sure their patients were accounted for — through untold wreckage, downed lines and fallen trees, mountains of rubble and sand, standing water, and non-functioning traffic lights.

Their true spirit of camaraderie and selfless dedication recently earned the Long Beach home care team HCA's *Caring Award*, presented to a staff person or agency "exhibiting the compassion, skills and service that sets their contribution apart or whose actions on a particular day or over a period of time exemplify caring in home care."

We also heard stories of individual heroism, like Brooklyn-based VIP Certified Health Services Nurse Sergey Nazarenko, who helped evacuate patients from a flooded assisted-living center, and VIP Nurse Igor Fridman, who climbed 20 flights of stairs in the dark to deliver lifesaving insulin treatments to a patient at home on Coney Island.

But Superstorm Sandy wasn't the only recent tropical storm to wreak havoc this far north.

Just one year prior, Hurricane Irene scarred and flooded the landscape of upstate New York, making roads so impassable that caregivers like Steve Schlamowitz, an LPN at Visiting Nurse Service (VNS) of Schenectady and Saratoga Counties, put his skills to use as a volunteer firefighter manning a pontoon boat to assist in evacuation efforts on flooded roadways.

Perhaps it was the fresh memory of Hurricane Irene in 2011 that inspired two of Mr. Schlamowitz's colleagues — Nurses Kim Godfrey and Kathy Bradley, also of the VNS — to head downstate a year later when Hurricane Sandy struck, offering their services as volunteers. The two nurses assisted at an emergency shelter on Long Island, providing both a skilled hand and much-needed comfort to those who had lost so much in the storm, including a patient with a diabetic ulcer wound that needed attention and a married couple in their 90s, Jean and Harold, who had been together for 72 years and now found themselves without a home to return to.

A VITAL ASSET DURING EMERGENCIES

Whether it is a winter disaster like the ice storm of 1998 which pummeled New York's North Country, Hurricanes Irene and Sandy, or the devastating tornado that ripped through Oklahoma just weeks ago, home care staff are incredible assets in the emergency response effort because their work is so deeply embedded in the community; they know the terrain as well, or better, than anyone — especially when it comes to assisting the most vulnerable citizens.

For the thousands of us who find our own vulnerabilities exposed during major disasters, there are many more frail-elderly, chronically ill, and disabled Americans who cope with vulnerabilities every single day, and who are quietly supported by home care staff diligently providing for their safety, well-being, and medical needs. This often-unsung work is one reason why it is so important for the media, the public, and policy-makers to hear about home care's response to major disasters

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like Hurricane Sandy: the work of home care personnel to help patients at the worst of times is a direct reflection of the work they do to support patients all of the time.

On so many levels, the intimate, day-to-day connection between patients and their home care aides, therapists, nurses, and social workers makes these front-line caregivers a valuable asset before, during, and after a crisis. These personnel know which patients have life-limiting disabilities that require transportation assistance, or which patients are technology-dependent and need immediate triage before the power is knocked out; they know which family members to call to track down patients who may have temporarily relocated ahead of the storm; and they routinely assess the safety of the patient's living environment, taking precautionary steps to ensure that the patient has basic necessities and supports.

Perhaps most importantly, home care personnel anticipate problems in the home and they act quickly to resolve them, whether it's a medical issue demanding immediate attention, a loose throw rug that poses a risk of falls, the need for a medication-dispenser to ensure that prescriptions are taken on the right schedule, or a dietary change to help restore energy and weight gain in a frail-elderly patient.

Knowing these inherent strengths of home care and the need to provide structure to them when it comes to emergency response, New York State has, over time, developed guidelines and regulations to ensure that there are no gaps in a home care organization's communications, logistics, or readiness systems when an event, like Hurricane Sandy, does occur and demands assistance from the provider. While these regulations may be unique to New York State, they nevertheless provide a template for best practices that are useful for home care agencies in other regions of the country too.

EMERGENCY PREPAREDNESS IN NEW YORK STATE

At the most basic level of regulation, home care providers in New York State must maintain an emergency preparedness plan outlining in detail the systems and protocols that an organization has in place to: ensure the safety of staff and patients; communicate with staff, patients, and state emergency management officials; and maintain continuity of services to patients during and after the emergency event.

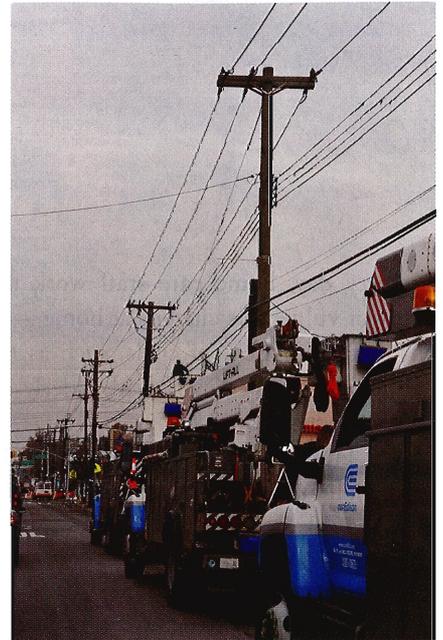
More specifically, the emergency plan must take measures to classify the priority level of response and risk for various patient populations. This includes an up-to-date roster of patients who

are coded according to the severity of their health and assistive needs so that home care agencies and emergency responders can access these patients on a triage basis, focusing attention on those patients needing the most attention first in an emergency. Level 1 patients require uninterrupted services and are considered to be the least stable (i.e. patients requiring life-sustaining equipment or medication); Level 2 patients are more stable and may be able to have services postponed with telephone contact; and Level 3 patients are the most stable and already have access to informal resources to help them.

NEW YORK'S STATE ASSOCIATION ROLE

Our state association plays a very active role in this regulatory and policymaking process, working closely with government agencies to communicate emergency preparedness requirements to home care providers and make sure that these policies respond to the needs of providers operating in a time of crisis.

With support from a New York State Department of Health grant, HCA maintains a home care emergency preparedness website at www.homecareprepare.org with resource links, planning tools, news updates, and other



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information. One of the centerpiece PDF documents on this site is our comprehensive *Home Care Emergency Preparedness Handbook*, a guide to assist providers in developing or updating their emergency plan. The handbook spells out in detail the New York State regulatory requirements. It also offers best-practice guidelines, risk-assessment tools, and a variety of appendices to assist any provider before, during, and after an emergency event.

We have also been working closely with home care providers in the field — including our partners at the Home Based Care Alliance (HBCA), an affiliation of downstate home care providers working to promote emergency preparedness issues — on regulatory relief measures that incorporate many of the important lessons learned from Hurricane Sandy and other similar events.

In addition to the regulatory tools in place here in New York State, hopefully some of the work we have done as an association during and after Hurricane Sandy, in particular, will be instructive for other states experiencing similar needs during a time of disaster.

RELIEF FOR PROVIDERS

When the storm struck in late October of last year, our association’s core role involved an array of outreach and communications efforts: monitoring the impact of the storm on providers and patients; answering technical questions; helping to facilitate provider requests for assistance from emergency management officials; working with the state Department of Health and other emergency management officials to circulate information, updates, and reporting requirements; and maintaining a line of communication with our partners at the Home Based Care Alliance and other affected state associations,



including the Home Care Association of New Jersey.

As in past events, providers were stretched to the limit and their business operations were so severely disrupted that they urgently needed relief in many areas, especially relief from certain regulations or restrictions that either needed to take a back seat during the disaster or that had significantly hampered the provider response effort.

Our discussions with state officials resulted in New York State Governor Andrew Cuomo signing two important executive orders, retroactive to the date of the storm, which provided regulatory relief for home care. One of the orders allowed home care agencies to temporarily provide services outside of their geographic area, offering much-needed flexibility in staffing to Hurricane-struck regions. The second executive order provided relief in the required time frames for providers to: make initial patient visits, conduct in-home supervision of aides, secure medical orders for services, obtain reauthorizations for services, and train personal care workers.

These were among many regulations that New York’s home care provider community identified as needing flexibility at a time when operations faced the stress of other urgent demands, such as locating displaced patients, navigating transportation challenges, fulfilling state-mandated reporting and surveillance requirements, obtaining supplies from federal emergency management teams, and a range of other administrative tasks unique to the emergency event.

Our work with partner state associations was also vital. New Jersey home care agencies were dealing with all of the same challenges facing home care agencies in New York. Working arm-in-arm with the Home Care Association of New Jersey, we reached out to the U.S. Centers for Medicare and Medicaid Services (CMS) which agreed to waive certain regulations in the hurricane-affected areas of both states. Those waivers gave latitude in the time frame, frequency, and depth of the OASIS, as well as the frequency of nurse supervision related to home health aides.

Perhaps two of the biggest obstacles encountered by home care providers in both states during Hurricane Sandy were not regulatory but logistical: namely, gasoline shortages and transportation restrictions.

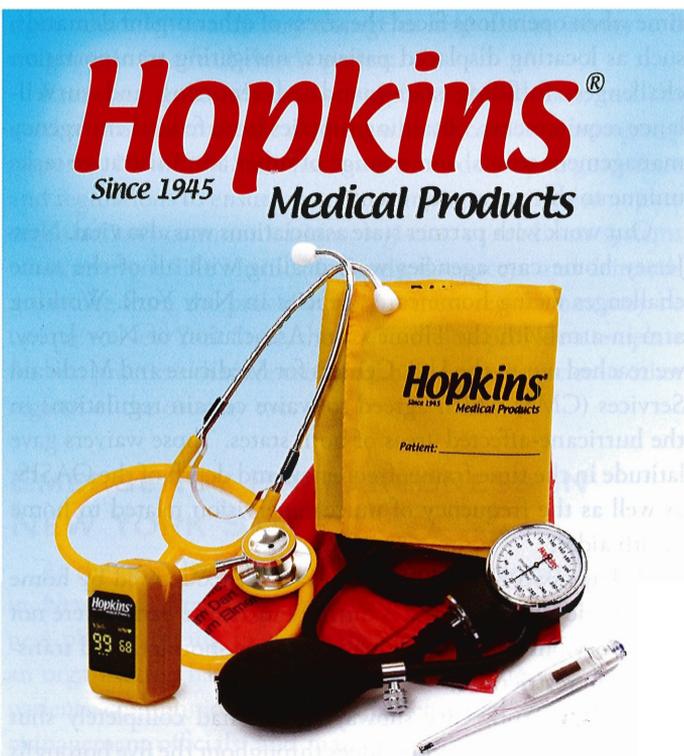
The New York City subway system had completely shut down for several days and bridges throughout the five boroughs were swollen with overflow traffic, leading government officials to require at least three passengers in all vehicles crossing bridges into Manhattan. This restriction, in particular, created a major logistical problem for home care staff members who

lived in the city's outer boroughs and needed to reach patients in Manhattan but couldn't feasibly share a vehicle.

HCA worked to address this problem by seeking priority access for home care staff during the travel restriction — an exception that we are now working to advance more permanently in state law. At the time of this writing, New York's State Legislature is considering a bill supported by HCA and the Home Based Care Alliance which would extend to home care staff the current "essential-personnel" exceptions that now apply to emergency responders, allowing vehicular access for home care when curfews and travel restrictions are imposed during declared emergencies.

The current "essential-personnel" exception authority does not accommodate home health and hospice personnel and their vehicles. This extension to home care would enhance safety for patients and help alleviate already overstretched emergency response resources during emergencies.

We are also working with state health officials on an initiative to provide a standard framework for assessing, categorizing, determining the transportation needs of, and, ultimately,

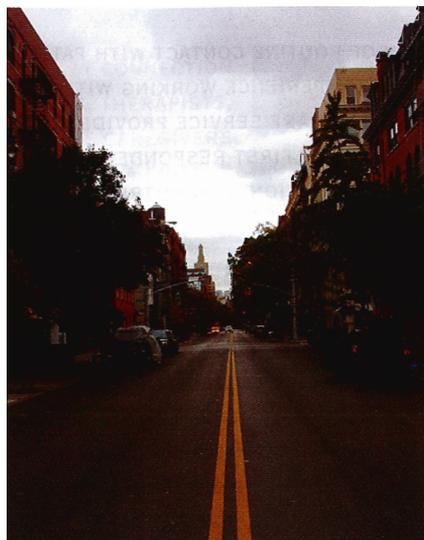


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transporting patients in evacuations prior to emergency situations.

These are just some of the ways that state associations can support the provider community during times of crisis and

help them prepare for future calamities, whether it's a natural disaster, an infectious-disease outbreak, a man-made disaster, or accidents that cause widespread exposure or dangerous conditions.

Clearly the combination of routine contact with patients, preventive health skills, adept problem-solving, and experience working with our most vulnerable citizens makes front-line home health care service providers especially well positioned, equipped, and prepared to assist first responders and emergency management officials in surveillance, evacuation, and outreach during large-scale disasters.

Most important of all is what it means to patients. As VNS of Schenectady and Saratoga Counties Nurse Kim Godfrey recalled to local media about her experiences at the shelter on Long Island, there was one hurricane victim who "every time we walked by his cot, he would say 'You guys are angels, thank you so much for coming all this way to help us.'"

"One hundred times a night he would tell us that," she added.

To learn more about Ms. Godfrey's experience and others assisting in the response efforts, please see the news clips on HCA's National Home Care Month website at www.nation-alhomecaremonth.com. Please also be sure to check out our emergency preparedness website for more information and resources at www.homecareprepare.org.



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