

PHN Lunch & Learn Leadership Series

Preparing Your Team to Serve in Disaster Shelters August 7, 2019

Phyllis Mangum Rocco, MPH, BSN, RN

Chief Public Health Nurse and Branch Head

Division of Public Health, Local Technical Assistance
and Training Branch & Public Health Nursing and
Professional Development Unit



Welcome to the PHN Lunch & Learn Leadership Series: *(Insert and underline the title here) !*

The webinar will begin @ 12 noon.

All questions should be typed into the “Chat box”.

There is no sound at this time! There is no call in.

Survey & CNE link information will be provided at the end.

Chat Box

The CHAT Box is in the lower right corner of your screen. Type your question in the small box and when finished, click on the cloud or word bubble icon to submit your question. It will then appear in the larger box. Thank you!

APU Statement and Disclosures

The Public Health Nursing and Professional Development Unit, North Carolina Division of Public Health, is approved as a provider of continuing nursing education by the North Carolina Nurses Association, an accredited approver by the American Nurses Credentialing Center's Commission on Accreditation.

There is no Conflict of Interest with the planner or presenter/s for this activity.

Learner Outcomes:

- Participants will understand how and when to request RNs for surge capacity needs
- Participants will learn about the new sign-up process for surge capacity staffing
- Participants will be able to identify roles for non-RNs or ancillary staff to assist in shelters
- Participants will understand how to utilize PHNPDU guidance re: naloxone use in shelters
- Participants will understand how to utilize PHNPDU guidance re: NRT use in shelters

Brief Overview of NC Disaster Response

The Governor and Selected Departments

Department of Public Safety

- Law Enforcement
- Homeland Security
- Adult Correction
- National Guard
- Juvenile Justice
- Emergency Management(EM)
 - Local County Emergency Managers

Department of Health and Human Services

- Division of Public Health/ESF 8
 - DPH/Epi Section/PHP&R/PHCC
 - Office of PHN
 - OEEE
 - Environmental Health Section
 - State Lab
 - Local Public Health –RNs and EHS
- Division of Health Services Regulation
 - Office of Emergency Medical Services(OEMS)/ESF 8
 - Local County Directors of EMS
- Division of Social Services/ESF 6
 - Local DSS
- Office of Rural Health
- Division of Mental Health, Developmental Disabilities, and Substance Abuse Services/ESF 8

Disaster Shelters in NC

- General Population Disaster Shelters- County operated
- Mega General Population Shelters-operated by NC EM
- State Medical Support Shelters-operated by NC OEMS
- Non-government supported shelters- Faith based orgs, community groups

General Population Shelters

- Local county government decides when to open
- The State of NC recognizes the American Red Cross shelter guidelines as the standard for shelter operations.
- DSS is assigned in most county's All Hazards plan as "Shelter Manager" / ESF 6(Mass Care)
- LHD DON/designee responsible for organizing nursing services
- In most counties, the Health Dept. is responsible for supplying RNs to staff shelters
- Job description developed in 2018
- Will be reviewed with each RN prior to being deployed
- Request for assets (more nurses) need to be requested by Shelter Manager via the local Emergency Manager (EM)
- Mobile Shower & laundry stations, food prep can all be requested by Shelter Manager
- Each DON standing up a shelter/s will receive daily check in calls by a DPH Nurse Consultant

State Run Large/Mega General Population Shelters

- Only opened when county sheltering is at capacity
- Organized and stood up by NC Emergency Management (NCEM)
- Current Planned locations: Winston Salem & Durham
- Staffed by OEMS Strike Team and PHNs and ancillary staff

State Medical Support Shelters

- Operated and controlled by NC Office of Emergency Management Services
- Staffed by Emergency Medical staff and selected health care professionals
- NC OEMS recruits for staffing
- Shelters are generally located outside the worst “ impact zone”

Trigger for Requesting RN surge capacity

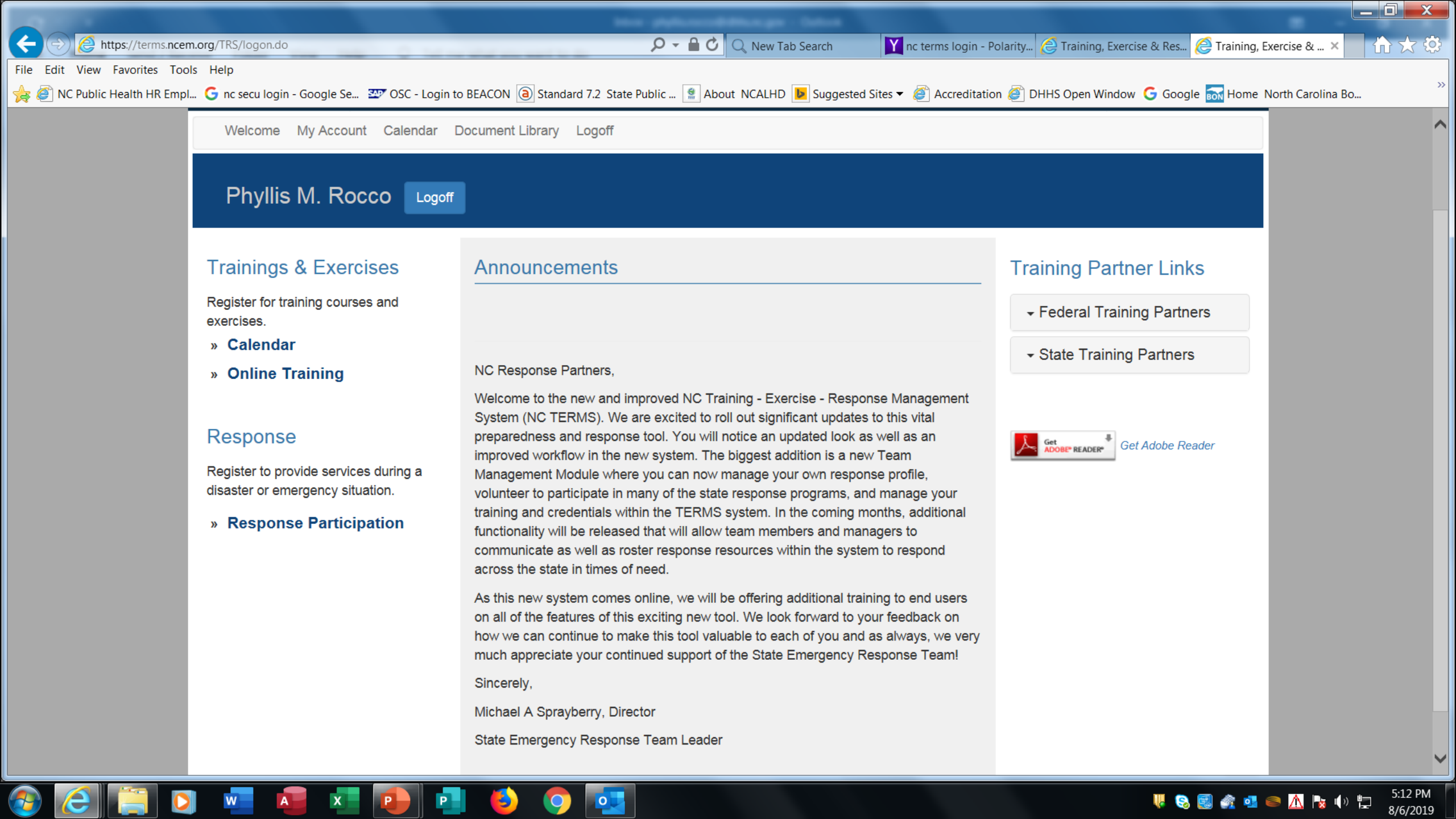
- Opening of Local Emergency Operations Center (EOC) will trigger activation of county response plan
- Local EM should notify DSS and Health Director of plans to open a shelter
- DON notified by Health Director to develop RN sheltering schedule
- Counties identified in the “direct impact zone” may request surge capacity RNs as soon as the State EOC opens if you know you will need resources
- Don't wait until all staff is exhausted

How to Request Surge Capacity RNs

- All request must go through WEBEOC
- See attached sample WEBEOC request template
- Be very specific
- If running multiple shelters- request staffing per shelter
- Imperative that teams coming from out of state know in advance so to bring enough transportation to divide team members into smaller teams
- Request form ask info re:
 - Lodging & meals
 - Shift cycles

NC Training, Exercise, Response Management System(NCTERMS)

- Secure database
- Connected to:
 - NC Board of Nursing
 - FEMA
- Web-based platform for enrolling, notifying and tracking required credential of all staff/volunteers(replaced NCSEERVE)
- All local PHNs desiring to be deployed to a Shelter 1st must create a profile in NCTERMS



User profile bar for **Phyllis M. Rocco** with a [Logoff](#) button.

Trainings & Exercises

Register for training courses and exercises.

- » [Calendar](#)
- » [Online Training](#)

Response

Register to provide services during a disaster or emergency situation.

- » [Response Participation](#)

Announcements

NC Response Partners,

Welcome to the new and improved NC Training - Exercise - Response Management System (NC TERMS). We are excited to roll out significant updates to this vital preparedness and response tool. You will notice an updated look as well as an improved workflow in the new system. The biggest addition is a new Team Management Module where you can now manage your own response profile, volunteer to participate in many of the state response programs, and manage your training and credentials within the TERMS system. In the coming months, additional functionality will be released that will allow team members and managers to communicate as well as roster response resources within the system to respond across the state in times of need.

As this new system comes online, we will be offering additional training to end users on all of the features of this exciting new tool. We look forward to your feedback on how we can continue to make this tool valuable to each of you and as always, we very much appreciate your continued support of the State Emergency Response Team!

Sincerely,

Michael A Sprayberry, Director

State Emergency Response Team Leader

Training Partner Links

- ▼ [Federal Training Partners](#)
- ▼ [State Training Partners](#)



[Get Adobe Reader](#)

Bottom of Page

Response Profile: Phyllis M. Rocco

* Required Information Missing

Team Participation

* Badge

* Home Address

Contact Info

* Deployment Preferences

* Emergency Contact

Driver's License/ID

Languages

* Medical

Skills

* Occupation

DEA Registration

Licenses/Certifications

Trainings

Team Participation

Credentials for Team Participation

What response team positions do you feel you are credentialed to fill?

The credentials you have on file are listed below. You may select and **Request a Credential** be added to your profile.

[Request a Credential](#)

Request for Team Membership

To request membership on a response team, click the button to **Join a Team**. Select one or more teams and **Request Membership**.

You can check the status of your requests at any time. The **Membership Requests & Invitations** panel on this page lists requests made by you and invitations to you for team membership.

Request Team Membership [Join a Team](#)

Deployment Process for Responding RNs

EMAC RNs

- NC EM sends out a request nation wide
- States respond/PHCC determines where to send Team based on request entered into WEBEOC
- Nurses arrive in Raleigh/staging site
- Receive face to face orientation to county and NC Disaster Sheltering system from PHNPDU
- DPH Nurse Consultant provides daily check-in calls to each PHN during deployment

NC Local Health Dept. RNs

- Respond via NCTERMS to availability
- PHCC sends deployment mission number with assigned county
- PHNPDU provides virtual 1:1 orientation to each PHN being deployed
- DPH Nurse Consultant provides daily check-in calls to each PHN during deployment
- 5 day deployments
- Individual nurses will be paired with another nurse for deployment

New Roles for DPH Nurse Consultants

- Provide orientation to all nurses deployed to general population shelters
- Provide daily check-in calls to each nurse deployed
- Provide daily check-in calls to each local DON standing up shelters
- State Maternal Health Nurse available by cell phone to local shelter nurses with maternal health questions re: clients in shelters
- All DPH nurse consultants report concerns to Chief Nurse/designee for response or mitigation at PHCC level
- Chief Nurse/designee will work at the PHCC during 1st 2 weeks of response and as needed
- Any DPH Nurse Consultant that desires to be deployed to a shelter will may still do so & may select home county

Roles for Ancillary Staff in Sheltering

- Assisting residents to toilet facilities
- Assist with feeding elderly clients-opening up MREs or containers that provide challenges
- Provide emotional support to children (games, coloring, reading) and adults(help with phone calls)
- LPNs-may assist in shelters, but **may not** be the only nurse on duty during a shift.
 - Are not allowed to recommend OTC medications
 - Are not allowed to provide direct patient care without medical orders

Naloxone Use in Shelters

- Work with DSS Shelter Manager to include naloxone in the list of medications needed for shelter operations
- Arrange for Pharmacy Dispensing to Shelter Manager in advance
- PHNs provide naloxone training for all shelter staff
- If included in Shelter Operations plan, FEMA will reimburse for purchase of naloxone-list it as a supply
- Standing orders not required for administration of naloxone, even if a nurse administers it, if provided in a community setting
- If LHD takes their clinic “ Emergency Bag” then only a nurse can administer the naloxone from the bag and a SO is needed.

NRT use in Shelters

- Work with DSS Shelter Manager to include NRT in the list of medications needed for shelter operations
- Shelter Manager to purchase in advance of opening shelter
- NRT is an OTC medication-however
 - PHNs need to be familiar with recommended use & dosing as described in the sample NRT standing order for clinic dispensing
 - Standing orders not required to recommend or provide NRT as it is an OTC. Client selects product based on their self –assessment of nicotine dependency
- If included in Shelter Operations plan, FEMA will reimburse for purchase of NRT-list it as a supply

FEMA Reimbursement for Shelter Nurses

- EMAC Nurses- NC State government reimburses responding States- FEMA reimburses NC
- Deployed Local Health Dept. RNs- home county(if non-declared disaster county) reimburses RNs per county pay policy-submits to NC EM for reimbursement from FEMA
- Responding RNs (nurses employed by LHD and identified as shelter nursing staff in county's All Hazard plan) -LHD submits time records to county EM/ submits to FEMA. Nurses are reimbursed based on county pay plan. Advocate that nurses be paid for time served over 40 hrs. vs. Comp Time.
- LEA hired School Nurses- identified in county All Hazards plan as shelter nurses/establish MOA between LHD and LEA for nursing leadership/LEA reassigns duties to shelter during disasters when schools closed/ submits time sheets to county EM for FEMA /need to specify in pay policy that during reassignments nurses are paid out for hours worked vs. comp time.