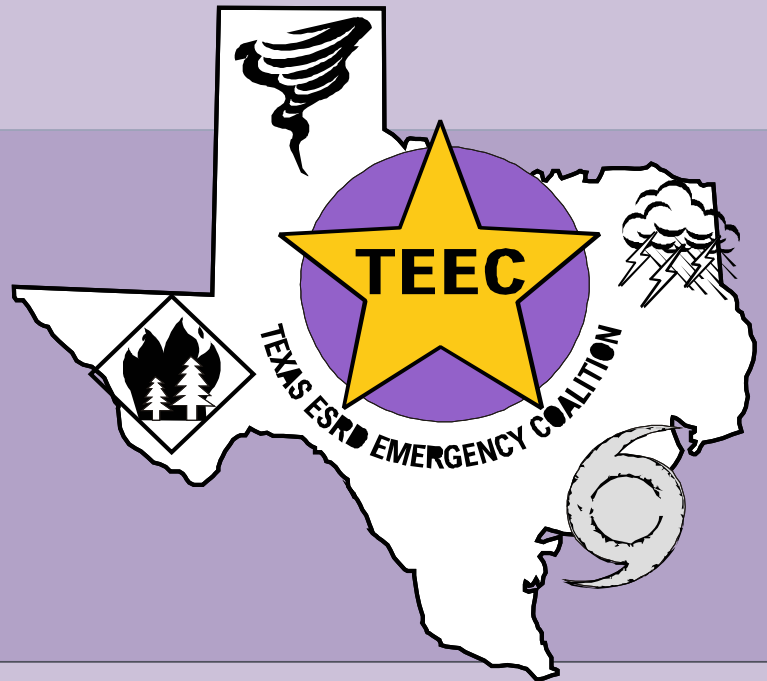


# Texas Emergency ESRD Coalition

## Annual Newsletter



## 2008 Review - 2009 Goals

- +** EMSystem Overview
- +** Hurricane Preparedness
- +** Command Center Review
- +** Nurse Week Focus Article
- +** 2009 Plans
- +** Ensuring your clinics meet CMS Rules

## **EMSystems**

Top 5 points that every dialysis unit should be aware of or want to know with regards to EMSysystems and how it is utilized in the ESRD population.

**1. Importance of maintaining accurate information** - All ESRD licensed dialysis units are required to report to the ESRD Network office an update via emsystems monthly. This date corresponds with the PAR update and is due on the 8th of every month. The facility should report any census changes and any modality changes. Any updated information about isolation patients and/or supply or staffing problems. Any information updated is better than no information at all. The information must be accurate and on time in order for it to be affective.

**2. Updates** - Facilities are not only requested to update the system monthly they are also requested and required to update the system during an emergency even that may or may not affect that particular clinic. Many times during an emergency a facility will need to update the system due to a evacuation concern or staffing problem somewhere else in the state. The manager of every dialysis unit must ensure that a designated individual or two are completing these updates and are staying on top of any alerts that are sent out to the facilities. Remember that you may be asked to update the system every 8 minutes. This is due to some situation that is causing problems and the monitoring of the EMSysystems that frequently is required. Please continue to update the system during this type of urgent need. If you have no updates from any previous update please still change something on your clinic record, even if this means changing a number to the exact number that was already there and saving it again. This records a change in the tracking system and doesn't place your facility on a list where it should not belong.

**3. Usage during an emergency or disaster** - EMSysystems is used not only by TEEC and the Network office during a disaster it is also utilized by the State of Texas as a whole. The Acute hospitals are on EMSysystems as well. The State appointed Emergency Command Center can always tell exactly what the population of the ESRD units have at any given time in the state. They use the system more and more each day and will continue to utilize the system for non-emergency data gathering places as time goes on. Any individual in the State

System Office can take a quick glance at your census, isolation load and validate your participation in the Emergency Preparedness of your local or region area. Remember this is a possible new rule in the Texas proposed rules. Lets make it easy for everyone and help our neighbors succeed by reminding them to update the system when needed as well.

**4. Notification of EMSysystem Issues or Concerns-** TEEC and EMSysystem wants the experience of using the system to be easy comfortable and optimal in every situation. Who to call? You should call EMSysystem directly if you should have any problems with the system mechanically. You should call Geli Brown at the Network Office if you should have password problems or need help with navigating through the system. TEEC will hold a training program a couple of times each year on how to utilize the system. Stay tuned for dates to be announced.,

**5. Noticeable changes** - You will notice that EmSystems continues to update and mold the look of the system to be more of a friendly and user friendly system. A couple of new features that have been made include mapping the facility out on Google maps with just a click of a button. is extremely helpful during an evacuation process and the patients begin to call the TEEC command center and the command center individuals are then trying to find a unit close to the patients location. This feature is utilized during the command center "active" procedures. The facilities the ability to enter more data or data that is more prudent. The information that is requested from the TEEC Command center is always vital information that is needed real time and cannot be data that is old or from recent months. TEEC understands that updating the system can be a headache when you are busy but TEEC promises to respect your time and will only request updates when they are needed and will not over utilize this mechanism.



[www.emsystems.com](http://www.emsystems.com)

Keeping your EMSysystem  
**UPDATED** -- Others may need  
vital information to save lives.  
Be prepared, Update When needed  
and as often as you see fit.

## Hurricane Ike Tests ESRD Emergency Plans

By Wendy L. Bonifazi, RN, CLS, APR

Monday December 8, 2008



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Texas renal disease providers are on the forefront of emergency planning for special needs patients and their new, innovative system passed its first real-life test.

The survival of thousands of Texan End-Stage Renal Disease patients depends on lengthy dialysis treatments every two or three days at dialysis facilities. Those facilities require power, fresh water, waste-water disposal, sanitary environments and access for patients and staff — all of which were cut off during Hurricane Ike.

In the wake of Hurricanes Katrina and Rita, the state's dialysis community formed the Texas ESRD Emergency Coalition, or TEEC, to maintain continuity of care during disasters. Although Hurricane Gustav was almost a mock drill in impact, Ike was the real thing: by wiping out facilities in Galveston and the coast and shutting down Houston services, the storm and its aftermath had the potential to shut down dialysis patients' kidneys — and lives.

"It's not the hurricane that will kill them, it's the days after without electricity, water, medication, appropriate food and dialysis," says TEEC chairman Harvey Sanders, RN, ROD, regional operations director for Davita, Inc., in Dallas.

Since special needs shelters don't provide dialysis and may lack transport to services, TEEC volunteers stepped in to relocate coastal and other evacuees to areas near facilities with adequate service capacity, or available "seats." In Houston, the post-hurricane problems that impacted residents hit dialysis centers even harder.

"Almost 100% of Houston dialysis centers were affected by loss of power, broken windows or flooding," says Sanders. Reopening isn't easy. Although bleach is effective for minor water damage, centers affected by greater flooding require complete professional cleaning, including walls. Since the water wasn't contaminated in storm-affected areas, Houston facilities could use reverse osmosis to purify water they used for treatment, providing they could transport staff and their own supplies of power, water and protection.

"No security is provided by the state, county or local government, so dialysis companies had to hire guards to protect their generators, fuel, water and transport," says Saunders. "Traffic was a horrible issue because it blocked staff and patients. Some patients didn't go to their usual providers because it was easier to reach others that were closer to home."

Dialysis facilities can't simply add extra beds or work around the clock, they require specialized equipment and specialized staff. While treatment length can sometimes be shortened during emergencies (down to about two hours from three or more) and facilities can run 20 hours a day, they require four hours to shut down for servicing.

"The state doesn't dictate, direct or assist [facilities that] opens first or last, whether hospitals or independent centers," says Sanders. "TEEC fully understands that independent units don't have the resources of major providers, so we assist them."

That assistance and collaboration started well before the storm touched land.

### **First Calls**

Three days before Ike hit, the TEEC steering committee decided via conference call to activate their statewide ESRD Command Center in Dallas and asked local members to staff it. Due to

"The county command center allocated phone and computer lines, so we had only so many places at the table, but our volunteers almost always exceeded the numbers allowed," says Sanders. "All dialysis providers had someone at the command center every day, and every organization sent updated lists of available seats." And collaboration wasn't because they were competing for clients, marketshare or brownie points, he says. "All providers truly wanted to help and facilitate patient care."

A major component of the TEEC plan was to implement and publicize a toll-free number for patients and providers during disasters. "We did a very good job promoting it," says Sanders in something of an understatement.

The TEEC disaster line was deluged with calls from patients, hospitals and emergency organizations, peaking at 4,000 to 5,000 per day before the storm and continued coming in three days after the storm.

Round the clock, eight or nine volunteers worked to coordinate and direct their care. They identified the patients in each area who needed evacuation, matched them with facilities that had the most available seats, then reported the information to the state health command center in Austin to coordinate evacuation.

One goal was to relocate patients and staff to the same areas. That way, displaced staff who were willing to work could augment existing staffing, while providing familiarity and continuity for care for disaster-stressed patients in unfamiliar surroundings. The result exceeded expectations.

"We had patients and staff teammates living together in shelters," says CJ Fleniken, RN, CNN, Davita, Inc. group administrator for facilities in Galveston, the coast and Houston. "We've never been through anything like this before."

#### A Failure to Communicate

The command center and call line worked well, but problems arose elsewhere. Along with power, the storm knocked out cell phones, land-line phones and computer servers.

Volunteers at the command center also facilitated the transfer of medical information from patients' regular dialysis center to their disaster provider.

As a precautionary measure, providers extended their hours and called in unscheduled patients for shorter treatments to shore up their health status prior to physical and emotional stress, and to "tide them over" temporarily if dialysis treatments were delayed.

Wendy L. Bonifazi, RN, CLS, APR, is a senior staff writer for NurseWeek.

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### Important Items to Remember

- ◆ Update your EM System Monthly
- ◆ Have 2 individuals in as operators of the system
- ◆ Update as needed during emergency notifications
- ◆ TEEC Website or ESRD Network 14 for Emergency Preparedness Needs
- ◆ Anyone is invited to participate in TEEC
- ◆ Meetings are held at least quarterly
- ◆ All participation is Voluntary
- ◆ You or your Dialysis Facility should have a written plan for Emergency Situations
- ◆ Notify your local officials that you exist - if your a dialysis unit manager
- ◆ Post your Emergency numbers where all staff can get access



**ATTENTION**

## *Where to Go for all of your ESRD Emergency Updates*

The TEEC Website continuously displays updates from the command center during a emergency situation.

The example below shows the Hurricane Gustav Website screen and the information that was and is displayed on the site. You will also find links to other emergency helpful sites. Think of it as your gateway to resources during, before and after an emergency. If you or your facility need help in creating Policy and Procedures related to Emergency Preparedness, visit the site, you can download a fill in the blank Policy and Procedure Manuel and make it facility specific. It doesn't get any easier than that.

EMSystem, TEEC the Texas Emergency ESRD Coalition



Texas Emergency ESRD Coalition

- Who We Are
- Tools & Resources
- EMSystem**
- Contact
- Other Resources



### Gustav Updates

- 09/02/2008 12:06 pm  
Texas Emergency officials have given the order to allow Texans to return home from evacuated areas; however Medical Special Needs and LA patients will be delayed. [more...](#)
- 09/01/2008 10:45 am  
Hurricane Gustav continues on its projected path. The outer rain bands have made land fall and point of concern East Texas. Rain amounts up to 14 inches could fall on this part of the state. It is to continue to monitor your EMSsystems regularly and when a update request is made.  
  
The state command center utilizes this data on a regular basis to make informed decisions as it needs patients.  
  
Facilities are doing a great job thus far in taking those patients that have been displaced. Please use your resources to ensure placement of patients. The TEEC command center is Live at the Command Center. The number to the command center is 866-407-3773.
- 08/31/2008 5:16 pm  
Sunday Ops Call

  - Update State of Texas Command Center Call
  - Texas has assisted with special needs evacuation of 10,000 from New Orleans
  - 250 Are headed to Austin     Dialysis is unknown at this time for this group.
  - Beaumont, Port Arthur, Hardin County, Orange County, Chambers County have all been evacuated North.
  - Storm has moved to the West
  - Category 3 hurricane
  - Winds expand 220 miles from center of storm
  - Expect tropical force winds around 6 to 9 p.m. on Monday
  - Area of concern for the state is the East Texas area. Please see map attached. Due to Severe Rainfall that could be catastrophic on Wednesday and Thursday.
- 08/31/2008 8:45 am  
[Staffing Waivers](#)
- 08/30/2008 6:47 pm  
[TEEC Steering Call update](#)
- 08/29/2008 12:21 pm  
AM Conference Call:

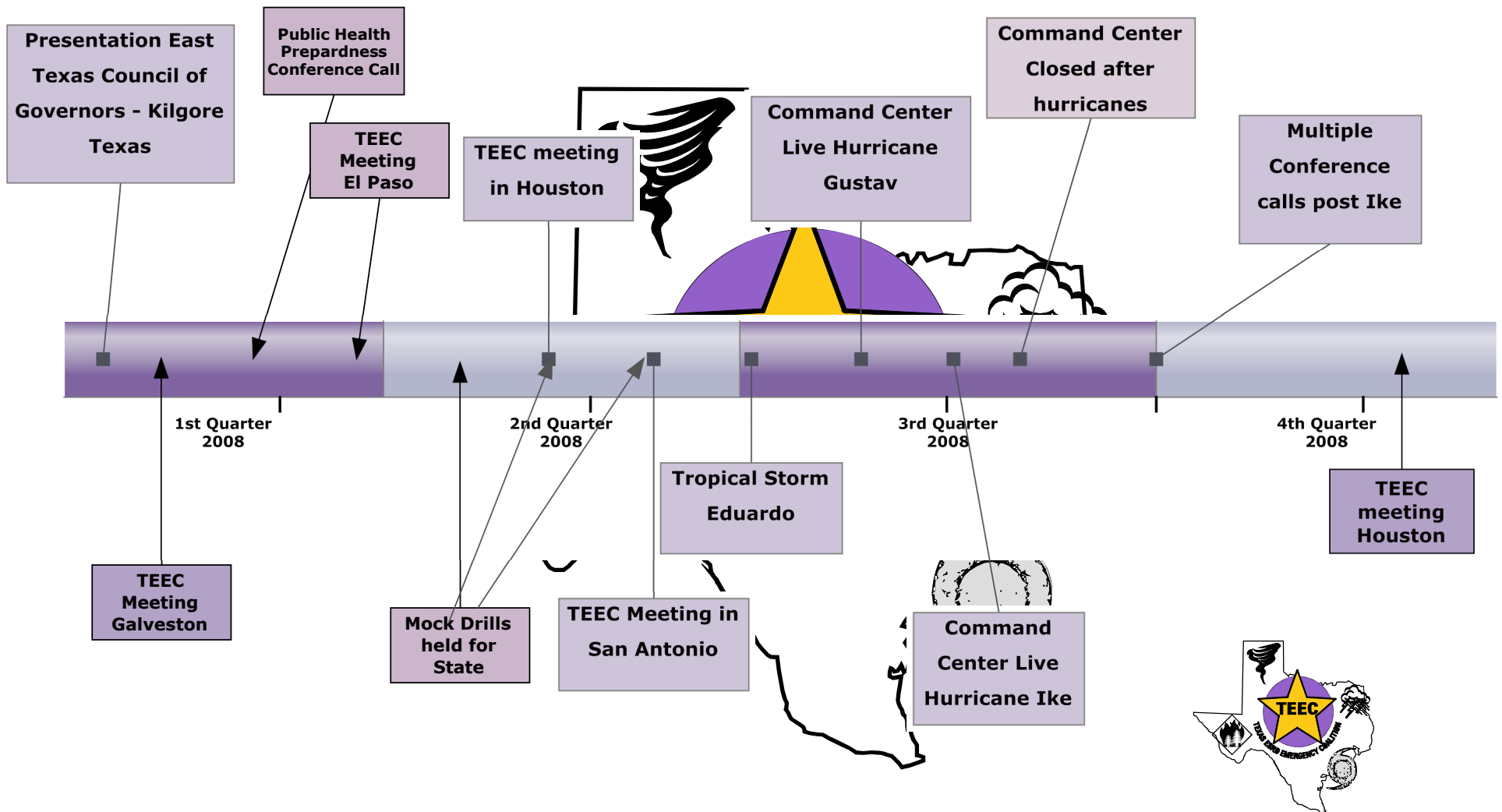
  - State of Texas expecting Landfall between Corpus Christie and Mobile, AB
  - South East Texas is preparing for evacuations
  - Land Fall is expected approx. around 2a.m. on Monday
  - Worry is regarding the storms ability to stall and dump large amounts of rain
  - Golden Triangle will be hit with rains or direct path of storm
  - Volunteer evacuations are occurring in Beaumont
  - State has started moving buses/ Air buses/ planes to Texas City which is the HUB
  - Golden Triangle is evacuating to the Tyler area. A special needs shelter is up and running there.
  - Network #14 stance regarding patient records. TB and Chest X-ray have become a problem for LA patients. Medical Director can give guidance for facilities that need to take patients that do not have this documentation. The state has not released anything official relaxing the regulations.



**SCREEN SHOT TEEC WEBSITE  
DURING HURRICANE GUSTAV**

http://www.texasemergencyesrd.org/ems-system/gustav.htm (1 of 2) [12/29/2008 5:14:15 PM]

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**\*\*Not all hours volunteered by the Steering Committee or participants of TEEC have been showed above. The items that encompassed the largest percentage of time are shown.**

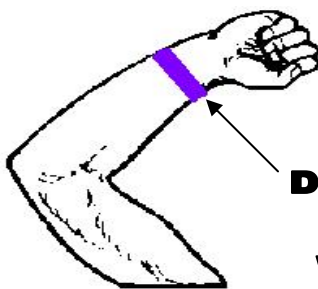
## Don't Forget to Educate the Patients:

Patients need information to be reinforced. We recommend that facilities set aside time to educate their patients at least annually. TEEC produced a tool to assist in this effort called "Are You R.E.A.D.Y.?" This document may be found on the TEEC website at [www.texasemergenciesrd.org](http://www.texasemergenciesrd.org) It is available in English and Spanish and reviews everything a patient will need when evacuating during an emergency situation.



## Get Banded...

Make sure patients do not leave their wristbands at home. The information contained on the wristband will allow vital information to be accessed by the facility. The unique identifier number listed on the wristband allows any Network across the country to identify the patient. Facilities should ensure they have enough wristbands for all their patients and request the unique identifier numbers for their patients before the beginning of storm season. For ordering information, go to the TEEC website and click on the wristband icon.



**Don't Leave  
Home  
Without It**

## 211 Transportation Assistance Registry...

211 Texas is a call center that maintains a patient assistance data base. This data base is sent to local authorities during an emergency to provide necessary assistance to individuals that cannot self-evacuate. Please assist your patients with enrollment in this program, forms will be sent out beginning in April for 2009 enrollment.



*The mission of the Texas ESRD Emergency Coalition is to coordinate Planning, Preparedness, Response and Recovery to Emergency Events affecting the Texas ESRD community.*

[www.texasemergencyesrd.org](http://www.texasemergencyesrd.org)

**866-407-ESRD (3773)**

### **Important Numbers and Information:**

Our facility is in RAC \_\_\_\_\_

Our local EOC contact is \_\_\_\_\_

And the phone number is \_\_\_\_\_

Corporate Facility Patient hotline number \_\_\_\_\_

Corporate Facility Staff hotline number \_\_\_\_\_

(if applicable)

Primary Facility Emergency Contact \_\_\_\_\_

Off- site phone number \_\_\_\_\_

Secondary Facility Emergency Contact \_\_\_\_\_

Off-site phone number \_\_\_\_\_