

## SCENARIO HANDOUT – REAL EVENT

### **December 2008 Winter Storm - A major weather event cripples the state**

#### **On December 11, 2008, a major winter storm hit Massachusetts, bringing with it significant sleet and ice**

- More than 1.1 million people in the Northeast without power
- Major roadways and secondary roads impassible due to downed tree limbs and power lines
- Communication systems severely impacted, hampering communication with staff, volunteers, and the public.

#### **Thousands of individuals flee cold, dark homes for shelters and hospitals, creating a significant strain on resources**

- 112 local and Red Cross shelters support over 5,100 residents statewide with a one-day peak of 1,886
- Many elderly and those dependent on oxygen or electrically operated medical equipment seek refuge at local hospitals

#### **Shelter operations extend into the next week, increasing the demand for external resources**

- Significant need for medical personnel to support individuals with chronic diseases or those needing assistance with activities of daily living
- Local MRC volunteers require relief after the first 24-48 hours
- ESF-6 and ESF-8 desks fulfill requests for additional MRC and Red Cross volunteers by calling upon volunteers located out of the most severely impacted regions
- Ambulances and EMTs positioned at shelters on stand-by or as shelter clinical staff
- Activation of the Region 2 Medical Coordinating Center considered, but not implemented due to staffing issues

#### **Many shelters, hospitals, long-term care facilities, and a regional CMED on generator power.**

- Some facing difficulties with fuel resupply
- Long term care facilities considering evacuation if fuel requests cannot be fulfilled
- Community health centers without power forced to cancel patient appointments, keep staff at home, and temporarily close

#### **Situation complicated by significant communications challenges**

- Unclear situational awareness about nearby hospitals, their status, and their ability to provide support
- Lack of clarity about which pharmacies were open to patients being discharged with prescriptions or individuals at home needing refills.
- Ongoing need for emergency public information and warning about food-borne illness protection, carbon monoxide, and cold weather precautions.

## SCENARIO HANDOUT – HOW AN HMCC MAY ASSIST

### **A Future December Winter Storm - A major weather event cripples the state**

*It's 10AM on December 10<sup>th</sup>. The National Weather Service is predicting a major winter storm. In accordance with regional response plan protocols, the HMCC MACC convenes a pre-impact conference call with all coalition organizations.*

#### **As a result of the planning call, and thanks to existing agreements:**

- Hospitals, long-term care facilities, and MACC work out a way to share transportation resources and ensure appropriate staffing levels for all facilities
- A member of the VNA contacts patients to ensure they have back-up tanks and to remind them to bring their equipment with them if they evacuate.
- Shelters agree to record residents' oxygen vendors during registration so that vendors can continue to make "home" deliveries to patients at the shelter.
- When the local community health center closes due to lack of power, its staff are reassigned to provide some medical and interpretation support at a nearby shelter struggling to support its temporary residents.

#### **With all facilities reporting status into the MACC:**

- A single, coordinated request for fuel can be sent to the SEOC for more efficient refueling and less competition.
- Regular situation reports serve as a resource to de-conflict information and improve the ability to health departments and their MRC units to assess and coordinate shelter resources from within and outside the region.

#### **The MACC coordinates effective communications and shares best practices through daily HMCC conference calls**

- A local health department shares information about a Reverse 911 message sent to their community about food-borne illness, allowing other HMCC members to use that message as a template, creating consistent messaging throughout the region and eliminating duplication of efforts.
- Although power outages are visible through a WebEOC board visible on the MEMA and DPH systems, two boards of health and three long-term care facilities in a particularly hard-hit area are without internet access. They've been using satellite phones to communicate their own needs, but the daily conference calls provide them with a centralized, concise way to understand the status and response activities of neighboring health and medical entities.

#### **The learning and collaboration continue after the incident**

- As the incident response wraps up, the HMCC convenes partners within the region and leads development of an after action report as well as an improvement plan for the partners in the region.
- As part of the recovery efforts, the HMCC ensures that health and medical partners are aware of reimbursement eligibility and, when needed, facilitates connections with local and state emergency management agencies to submit for reimbursement.
- Later, per a recommendation in the storm after action report, a multi-disciplinary workgroup is formed with HMCC assistance to determine a health and medical staff transportation plan for the region utilizing transportation assets from various organizations.