

# Eastern Oregon Infection Prevention & Control (IPC) Community of Care

May 21, 2025



## Emergency Preparedness

# Meet your OHA Team!

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**Pam Bruhn**  
IP  
Regions  
6, 7, and 9



**Katie Cox**  
Epi  
Regions  
6 and 9



**Dan Daniluk**  
Epi  
Region 7



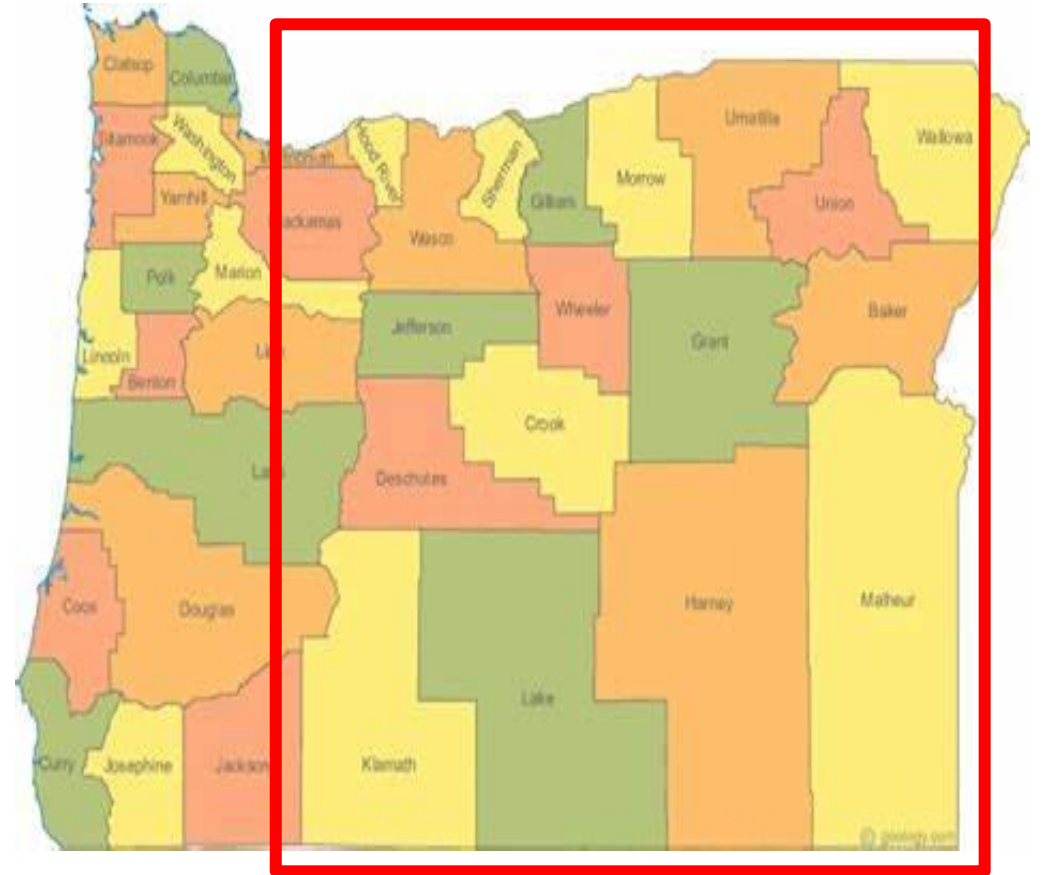
**Elizabeth Johnson**  
MDRO IP Eastern  
Oregon

# Purpose

Our time is intended to provide a space for infection preventionists and local public health personnel in Regions 6, 7 and 9 to come together to share ideas and stories and to learn about topic in infection prevention.

Our goal is to build community among a group of practitioners who are commonly isolated as the only one in their setting.

This time is **not** intended to provide specific recommendations for a facility. This space will provide a connection with the OHA or LPHA infection preventionists and epidemiologists who can provide that direct guidance.



# Objectives

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- Participants will learn about types of disasters
- Group discussion to assess how ready facilities are for a disaster
- Resource sharing for how to be better prepared

*We will not be building your preparedness plans today*

*You will do that with your team at your facility*

# Expectations (OR DHS Community Based Care)

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411-054-0093

## Emergency and Disaster Planning

*An emergency preparedness plan is a written procedure that identifies a facility's response to an emergency or disaster for the purpose of minimizing loss of life, mitigating trauma, and to the extent possible, maintaining services for residents, and preventing or reducing property loss.*

# Nationwide Long-Term Care (CMS)

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Emergency preparedness. The LTC facility must comply with all applicable Federal, State and local emergency preparedness requirements. The LTC facility must establish and maintain an emergency preparedness program that meets the requirements of this section. The emergency preparedness program must include, but not be limited to, the following elements:

Emergency Plan

Emergency and Standby power system

Policies and Procedures

Integrated healthcare systems





















Communications

Training and Testing

<https://www.cms.gov/medicare/health-safety-standards/quality-safety-oversight-emergency-preparedness/emergency-preparedness-rule>

# 2017 Oregon Public Health Hazard Vulnerability Assessment Summary

**Table 2. Top 10 hazards posing the largest risk to public health infrastructure, by region.** (1 is the most probable.)

	Western Oregon	Central/Eastern Oregon
1	 Earthquake — Cascadia (3–5 minutes)	 Winter storm
2	 Public health emergency	 Wildfire (with urban interface)
3	 Flood — riverine	 Flood — riverine
4	 Winter storm	 Public health emergency
5	 Wildfire (with urban interface)	 Drought
6	 Earthquake — crustal (1 minute)	 Windstorm
7	 Landslide/debris flow	 Hazmat release — transportation
8	 Windstorm	 Landslide/debris flow
9	 Hazmat release — transportation	 Earthquake — crustal (1 minute)
10	 Hazmat release — fixed facility	 Hazmat release — fixed facility

# Internal vs. External Disaster

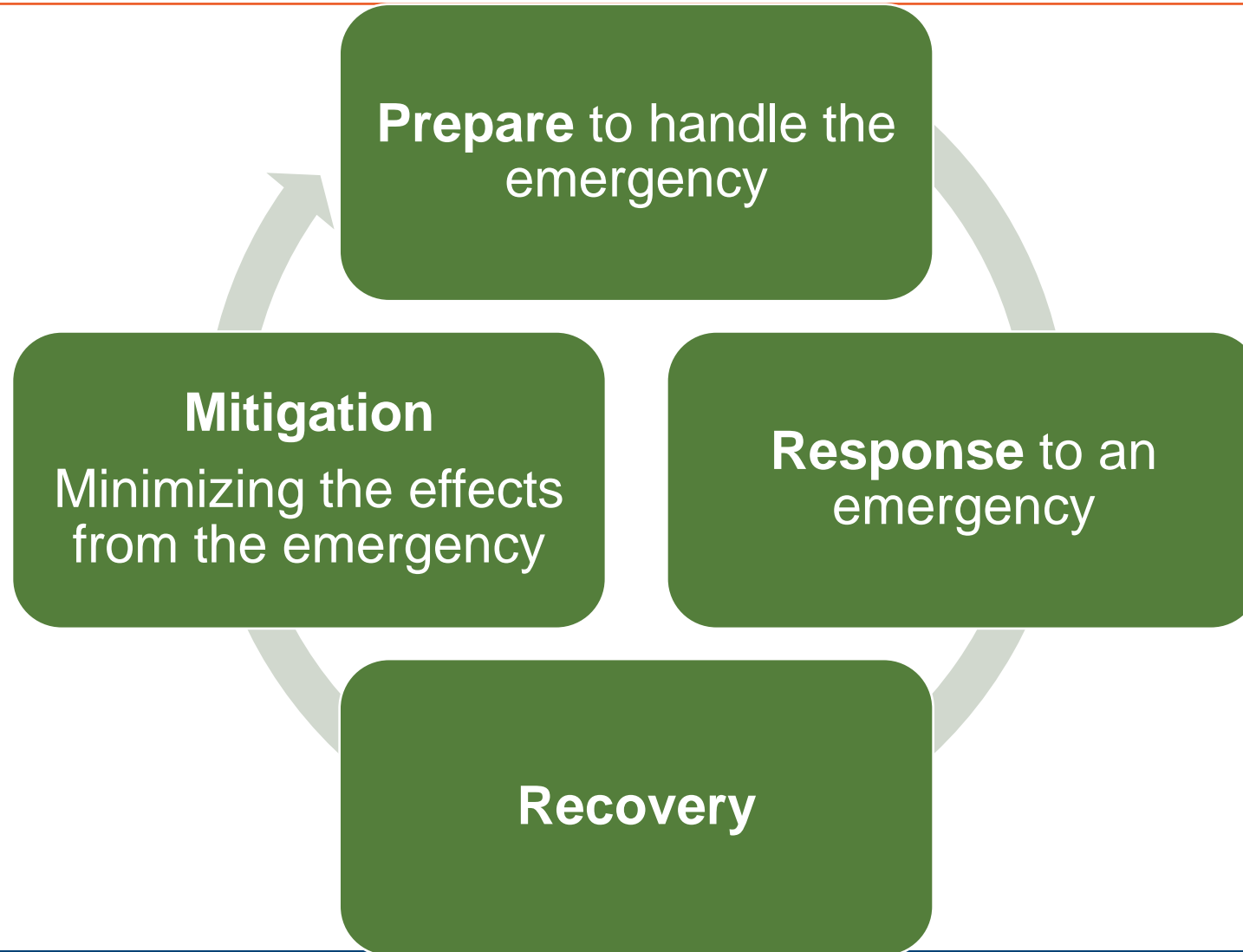
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- Happens inside the facility and disrupts daily operations
  - Flood
  - Fire
  - Outbreak of infectious disease
  - Loss of necessary resources
    - Electricity
    - HVAC
    - Kitchen equipment
- Something happening outside the facility impacting operations
  - Forest fire with urban interface
  - Flooding
  - Weather events
  - Increases in community rates of infectious disease



# Phases to Consider

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# Question for Discussion

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Name any emergency that you might need to be prepared for at your facility

What kind of emergency have you dealt with in the past? How did it go?



# Team



- Who needs to be included in these planning activities and what role do they play?
- Who decides when to activate an emergency plan and when?
- Who has authority for procurement of resources?
- Are there agreements in place for sharing of resources?
- What does the end of an emergency look like?

# What are your facility evacuation plans

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Who decides when to go?

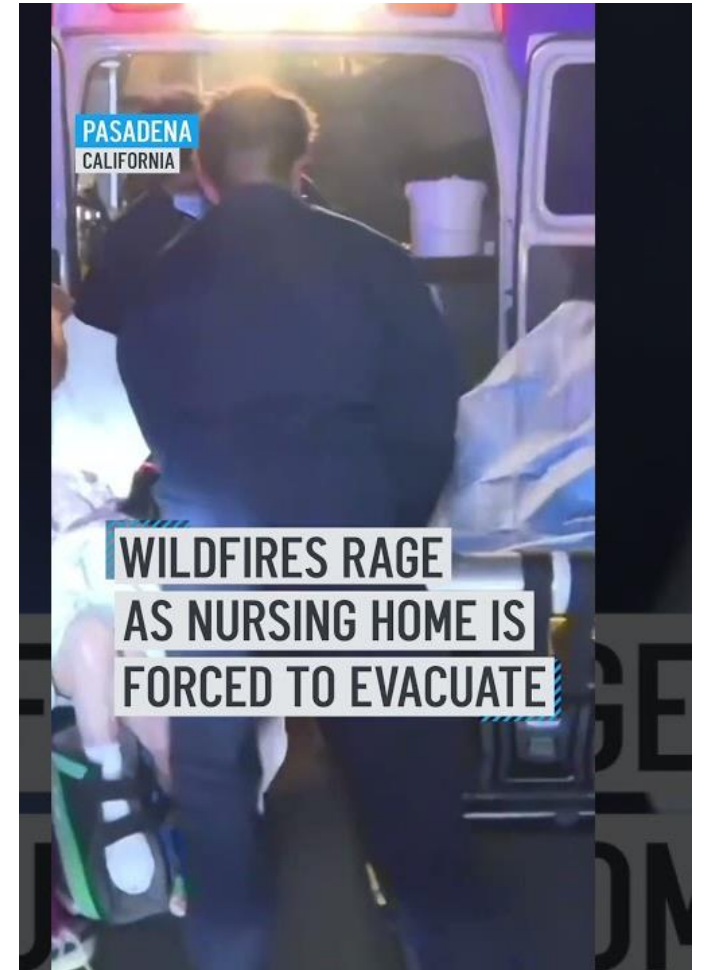
Where will you go?

How will you transport your residents?

Will staff go with your residents?

What assistance will you need to help you evacuate?

How will you track your residents?



# Health Services

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- Medical Records
- Resident Medications
- Healthcare supplies
  - Mobility devices
  - Other equipment such as c-pap, oxygen, or insulin machines
- **Isolation precautions & PPE**

# Nutrition Services

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- Safe water supply
- Adequate food supply
  - Special diet considerations
  - Utensils needed for special populations

# Supportive Services

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- Administrative
- Activities
- Maintenance
- Families? (resident pets)



# Communications

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Who is informing others?

Who needs to be informed?

When do they need to be informed?

What information do they need?

How will you inform them?

This may vary by type of emergency and your best system of communications and what is available. Practice, practice, practice.....





# Training

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- What do you need to train on?
- What kind of gaps have you identified in training?
- Who is involved in training?
- How often to you provide education?
- Do you have resources to assist with training?



# Resources

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- CMS Rule
- CMS Emergency Preparedness Checklist
- CMS Long Term Care Requirements
- CA association of health facilities disaster preparedness program
  - Safe evacuation tabletop exercise for long term care facilities
- Emergency Preparedness Handbook for Oregon Area Agencies on Aging 2024
- National Center for Assisted Living: Emergency Preparedness Guide
- HHS Provider and Supplier Specific Resources



OREGON  
**HEALTH**  
AUTHORITY

**Questions?**

# Next Meeting

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**Wednesday June 18, 2025**

**1:15 pm – 2:00 pm**

**Session Topic:**

**Case Studies with  
Transmission Based Precautions**

**Presenters:**

**Pamela S. Bruhn, RN, BSN, MAN, ANP**

**Katie Cox, MPH, MS**

**Elizabeth J. Johnson BSN, RN, CIC** (she/her)  
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## PUBLIC HEALTH DIVISION

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Thank you!! 😊