

Presented By:



# Preparing for a Behavioral Health Hospital Evacuation

Considerations, Challenges, and Best Practice

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## Learning Objectives



Describe the distinctive characteristics of behavioral health hospitals and the implications for emergency preparedness and response.



Gain insights into the diverse needs and vulnerabilities of patients receiving mental health treatment and the importance of tailoring evacuation plans to address these specific requirements.



Be introduced to a comprehensive framework for preparing for a behavioral health hospital evacuation.



## **Learning Objectives**



We want you to think differently,



and to deliberately identify and mitigate risks



associated with Behavioral Health evacuations.



## **Empirical Findings**

We all have thoughts, experiences, and war-stories but what does the literature teach us about Behavioral Health evacuations?

- Frank & Trinidad, 2007 Support to victims of Hurricane Katrina.
- Griffies, 2009 Reestablishing program structure for the LSU/Oschner psychiatric residency following Hurricane Katrina.
- McClain et al., 2007 Evacuation of 6 veterans following Hurricane Rita.

Previous to Hurricane Katrina...not a lot specific to psychiatric facilities, most assess fire related events.



## **Empirical Findings**

Post Hurricane Katrina... still not a lot, but...



Thomas & Lackey, 2008 – Evacuation of a psychiatric hospital during Hurricane Katrina.



Waitz et al., 2024 – Disaster Preparation and Effects on Inpatient Psychiatric Care (Chapter 6 in Handbook of Evidence-Based Inpatient Mental Health Programs for Children and Adolescents).



Nouri et al., 2022 – Phoenix on Fire: A Phenomenological Study of a Psychiatric Hospital Fire in Iran.



Terui et al., 2021 – Determinants of the evacuation destination for psychiatric inpatients following the Fukushima nuclear disaster.



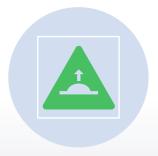
## Differences: Behavioral Health vs. Acute Care



Acute patients are in the hospital by choice. Behavioral Health patients often aren't, so they will leave if they can.



Acute patients can be cohorted. Behavioral Health patients may need to be separated.



Behavioral Health patients' conditions are often exacerbated by stimulus. Evacuating would be a significant stimulus in various ways.



One major difference is that you must distinguish between disaster preparation for the system and disaster preparedness for treating an individual patient or patients (Waitz et al., 2024).



#### What Do We Need to Know?



Patient Condition



Destination



Staffing requirements



Patient documentation



Patient
equipment,
supplies, and
pharmaceuticals



## **Patient Condition**

Anxiety

Bipolar



Depressive

Dissociative



Neurocognitive

Personality



Schiziphrenia

Trauma and Stressor Related



#### **Patient Condition**

#### Typically, patients are cohorted by type of illness and/or age

- Geropsychiatric
- General Adult
- Mood Disorders
- Adolescent
- Transitional Age Youth

Each patient should be assessed prior to movement

Consider pre-medication

Beware makeshift weapons and ligature risks



# A Word About Ligature Risks





#### **Patient Destination**



Where is it and how far?



What type of transportation will be required?



Will the trip require food and rest stops?



How long will the patient need to stay?



## Staffing Requirements

Staff to Patient ratio?

What about high-risk patients? (1:1)

What if you need to restrain a patient?

Staff needed for movement vs. while in transport?

#### What mix of staff?

- RN
- Mental Health Worker or Milieu Counselor
- Security

What if you need to use untrained staff?



#### **Patient Documentation**



Medical records



Patient identification



Organizational forms (e.g., staffing sheets, flowsheets, etc.)



## Patient Equipment, Supplies, & Pharmaceuticals



Personal belongings



Medical supplies & equipment (syringes, CPAP, etc.)



Medications:

Refrigerated vs. non-refrigerated

Sufficient doses



# What do you need to do, now?



**RISK ASSESSMENT** 



EMERGENCY PLAN(S)



**TRAINING** 



EXERCISING AND EVALUATE



## What do you need to do, now?





You need to be able to demonstrate that you have asked the appropriate questions, and reasonably mitigated risks.

You need to be able to demonstrate that you have thought differently and that you have acted deliberately to identify and mitigate risks.



## **Evacuation Checklist**

<b>Evacuation Element</b>	Primary Considerations
Patient Condition	<ul> <li>Triage (Most Ready to Least Ready)</li> <li>Ability to cohort</li> <li>Need to separate</li> </ul>
Destination	<ul> <li>How far?</li> <li>How long will it take?</li> <li>How will you transport?</li> <li>Psychiatric vs. non-psychiatric plant?</li> </ul>
Staffing Requirements	<ul> <li>Orientation of non-psychiatric staff</li> <li>Requirements for 1:1 staffing</li> <li>Sufficient staffing during transportation (e.g., bathroom breaks)</li> </ul>
Patient Documentation	<ul> <li>Required notifications</li> <li>Notification to payors</li> <li>Medical Records</li> </ul>
Patient Equipment, Supplies, and Pharmaceuticals	<ul><li>Personal belongings (patients and staff)</li><li>Medical supplies and equipment</li></ul>

# **Questions and Discussion**



#### References

Nouri, M., Ostadtaghizadeh, A., Fallah-Aliabadi, S., Pashaei-Asl, Y., AlJasem, M., & Aghdash, S. A. (2022). Phoenix on fire: A phenomenological study of a psychiatric hospital fire in Iran. *Annals of burns and fire disasters*, *35*(3), 243.

Terui, T., Kunii, Y., Hoshino, H., Kakamu, T., Hidaka, T., Fukushima, T., ... & Yabe, H. (2021). Determinants of the evacuation destination for psychiatric hospital inpatients following the Fukushima nuclear disaster. *International Journal of Disaster Risk Reduction*, 66, 102600.

Thomas, Joan & Lackey, Nancy. (2008). How to Evacuate a Psychiatric Hospital. Journal of Psychosocial Nursing and Mental Health Services - J PSYCHOSOC NURS MENT HEALTH. 46. 35-40. 10.3928/02793695-20080101-13.

Waitz, C., Westheimer, J. L., Leffler, J. M., & Patriquin, M. A. (2024). Disaster preparation and effects on inpatient psychiatric care. *Handbook of evidence-based inpatient mental health programs for children and adolescents*, 103-117.



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