

Emergency Preparedness requires a Communications Plan

Skilled Nursing and Post-Acute Care Centers, Assisted Living Communities, and
Centers for Individuals with Intellectual or Developmental Disabilities





EMERGENCY PREPAREDNESS TODAY

Emergency Preparedness requires a Communications Plan

Because the parts of an Emergency Preparedness plan are interrelated, having a comprehensive plan is essential. Yet one problematic area of emergency planning, especially in health care settings (skilled and post-acute care centers, assisted living communities, and ID/DD centers), is the Communications plan. Transparent and accurate communications with stakeholders, especially the media, during *and after* a crisis contributes to a successful resolution of the problem, including a positive evaluation by stakeholders and the public.

The Communications plan – consisting of policies, procedures, and an incident command structure -- is the primary tool management has to ensure employees follow protocols during an emergency in contacting stakeholders, the media, and others. The Media Outreach plan is an essential part of the Communications plan (see below).

To help set management on the right path to developing a communications plan, the following six-point outline can be a guide in the process of creating or modifying emergency preparedness communications procedures. Using these six steps will help management gauge when emergency preparedness is on solid footing.

Communications Plan: Scope and Severity

During an emergency (or “incident”), the Communications plan should govern all communications within an organization and with external stakeholders, *including the media*. However, the plan needs flexibility; an organization’s management may only need a portion of the incident command structure, depending on the scope and severity of the emergency, such as an elopement versus a natural disaster (hurricane, wildfires etc.). Irrespective of the emergency’s intensity, the organization’s emergency response team stays in a communications mode, appropriate to the situation, for the duration of the incident, as well as after, to ensure transparency throughout the process.

1. Form a Team

An early step in emergency preparedness is to designate an Emergency Communications Team (ECT), or person, as part of a broader Incident Management Team. Typically the ECT will consist of the organization’s leadership; with the Administrator or Executive Director, or CEO in the lead and designated “Commander.” But any staff can fill any position on the ECT. (For more on a typical chain of command see information on the *Nursing Home Incident Command Structure*.) The first goal of the ECT is to evaluate the scope and severity of the event, gather accurate information about it, and report back to the Commander and other ECT members.

In an emergency there may be limited or conflicting information about the event or its impact. “Facts” matter and may change several times as new information is available. Thus, the ECT



team needs training and practice in evaluating and communicating accurate details about the emergency.

Planning and practicing for typical scenarios and a variety of magnitudes of events is a keystone to a successful outcome in an actual emergency. When an emergency strikes, the organization's staff responders and spokesperson should know instinctively what to do and how to report "up the chain of command."

2. Plan Ahead

With the ECT in place, the incident Commander and spokesperson should quickly begin to develop communications, like a press statement or interview notes, that accurately address anticipated (or specific) questions from stakeholder groups, including the news media. In planning for emergencies, an important role for the ECT is to develop templates of materials to make outreach more efficient in the early stages of a crisis.

In an actual emergency, the ECT should have pre-existing template materials, modified to suit the situation at hand and tailored to various stakeholders (groups *and* individuals). The ECT needs to coordinate distribution of consistent messages across all stakeholder groups. This works well when a specific person is designated the official spokesperson. He or she will work with the Commander to finalize internal and external comments related to the emergency to ensure accuracy and consistency of all messages. (See more under Media Outreach.)

To kick start the ECT in working on the Communications plan, here are a few initial projects members can do:

- Check records of resident relocation and staff contacts for accuracy
- Prepare a memo to update staff on the emergency preparedness plan
- Practice how to handle media inquiries, including social media
- Practice how to handle inquiries from families (who may be in a panic)
- Brainstorm possible scenarios/responses

3. Know the Stakeholders

As tempting as it may be, management should not rely exclusively on one way to communicate (e.g. telephone) their statements and messages. There should always be options in a plan for using alternate communications channels -- like text, wired telephone, cell phone, Internet, etc.

A key task of the ECT is to develop a priority list of stakeholders to contact in various scenarios, depending on the severity or scope of the event (e.g. elopement, hurricane).

- First responders (911, EMS, fire, police)
- Utility companies (power, water, gas)
- Residents and families



- Employees, volunteers, and families
- News media (print, broadcast, internet)
- Regulators (local/state/federal), elected officials, etc.
- Corporate management (up the chain of command)
- Neighbors living near the facility
- State health care associations and others

4. Know How to Contact Stakeholders

Have the ECT compile contact information for each stakeholder group and individuals; try to acquire multiple ways to contact them. The ECT should establish a policy schedule to update all lists. Other factors include:

- Keep duplicates in digital and hard copy form
- Copies of lists should be available at *alternate* evacuation sites along with other emergency resources
- Secure lists to protect confidential information and make it available only to authorized users

5. Communication Channels

One person should have final approval of all official statements. Ideally, that person is the Commander, working with the spokesperson. Following are typical channels to disseminate a statement or other communications to stakeholders:

- Press conference with press statement
- Interview with the media
- Telephone
 - Emergency hotline
 - Phone chain
 - Live interview
- Email
- In-facility briefing
- Social media (Facebook/Twitter/YouTube)
- Web site

6. Honor Confidentiality

Brief the ECT on HIPAA compliance and employment law to ensure confidentiality of covered information. Remind staff not to speculate or discuss an event, especially with media.

Conclusion

In an emergency, the need to react appropriately is immediate, followed by the need to communicate about it. An organization must know its stakeholders and how to communicate with them in advance of ever needing to actually do it. It is critical that organization leadership is prepared, and staff is empowered, to deal with a situation when it happens. There's never any time to lose when trying to preserve life and property. Staff training is a necessity.

Lack of preparedness in an emergency has many markers, including:

- Emergency responses are slow and most likely inadequate
- Residents, patients and staff are unnecessarily harmed or stressed out
- Stakeholders, including families, are uninformed and probably agitated
- Local media outlets are out of the loop
- The crisis lingers long beyond the time required to bring it to a conclusion

For an organization identified as being unprepared, public opinion will drop and damage its good name (brand). To the public, poor performance in an emergency is a serious breach of an organization's commitment to caring for people.

Preparing diligently for emergencies is serious business. It can save lives and property, enhances a community's goodwill, and may even save your career.

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The Media Plan

The key ingredient for dealing effectively with an emergency is through preparing, or updating, a Media plan as part of a Communications plan. There is not time to "figure it out" when an emergency strikes; it is critical to respond quickly and deal with the situation transparently and provide information and answers in a coherent, consistent way. As a rule of thumb, an organization's leadership should release a statement in an hour or so of being contacted by the media about an emergency.

Developing the Media Plan

A media plan should include policies on how, when and who is designated to talk with the media (see section on "spokesperson"), the surrounding community, residents, families, and the staff. Everyone on staff should be aware of who the authorized spokesperson is and how and when to contact him or her. Disseminate the overall communications plan to all employees.

To develop a media plan, start with these basic steps:

1. To prepare, an organization needs to pre-draft emergency statements that incorporate relevant language or concepts from the organization's mission statement (i.e. "importance of resident safety"); identify who to quote as part of this process. Just leave space to fill



- in specific details related to the emergency. Use these statements for any type or level of emergency or activity that generates media interest.
2. Make a comprehensive list of the radio, television, newspapers (weeklies and shoppers too!), senior publications and websites covering the profession in the area. Add the names and titles of key contacts and include web addresses, intranet sites, or other mass notification systems such as group e-mail lists, text messages, and social media as a way to distribute statements and updates.
 3. Prepare several media “kits.” The kit should be in a folder containing a brief history of the organization and general information about the company. In an emergency, there won’t be time for anyone to prepare media materials from scratch.

Identify Spokesperson

The organization should identify at least two staff members to be a primary and substitute spokesperson. Ideally, spokespersons should be staff members who are, or can become, familiar with the organization’s operations, policies, procedures, and history.

Seriously consider that the executive director/administrator may not always be the best primary spokesperson. A top leader needs to manage a difficult environment and may not be available to properly handle the media or arrange interviews.

If a staff person is already involved with the media (e.g. community events), he, or she, may be best suited to fill the spokesperson’s role. After identifying and training spokespeople, post their contact information, such as office and cell phone numbers and e-mail addresses, in a place where staff can easily access it.

Task the spokesperson with gathering information about an emergency and to answer basic questions from the media and others regarding what is going on. To do this properly, and expeditiously, the spokesperson should:

- Have access to senior management to understand the situation and its ramifications
- Know basic statistics about the organization, and larger parent company, such as the number of residents, census data (number of beds, units, etc.), the number of employees, and a general outline of the company and its mission statement.
- Release information or clarifying points of fact; arrange for the release of a statement, or arrange interviews or tapings by the media.

If there is not a designated spokesperson, perceptions of the emergency may become a media circus; a crisis unto itself. If the organization fails to cooperate, such as stating “no comment” to questions about the emergency, assume that reporters will attempt to interview anyone, even residents, who may be willing to talk about of the situation without regard to accuracy.



In summary, the time to formulate an emergency communications plan is not when an emergency occurs; there just is not time to formulate an emergency preparedness plan. So prep the ECT in advance; compile and update media lists frequently; have several media kits prepared in advance; and make sure staff knows the correct procedures to follow.

A Word about Today's Media

When writing a media plan be sure to include the internet and social media.

Consider the organization's web page ("home page") as a first step in the communications process. In an emergency, the media and the public will flock to a web site for news and basic information about the organization. So, make sure the mission statement is readily available, along with a brief history and current facts (total beds, staff, etc.) about the organization. Basically, be transparent about the organization.

Be sure the designated spokesperson regularly uses and updates all social media accounts, such as Facebook. It's important to post information to social networks several times a week to keep followers engaged in the organization's web site.

The Bottom Line

The bottom line is that with an Emergency Preparedness plan, along with a strong Communications and Media plan, any organization can deal with an emergency, preserve life and property, and possibly enhance its reputation in the public's mind.

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