



Health Center Preparedness and Response Forum



***Session 2: December 14, 2023
Natural Disasters***



Housekeeping

- All participants are muted and videos are off
- Use the Q&A or chat box to ask a question during the session
- We will be using Mentimeter to gauge health center preparedness and response readiness for natural disasters and concerns
- This webinar is being recorded and materials will be emailed to all registrants within 7 days of this session
- We would love to hear your feedback – please fill out our brief evaluation at the end of the session!

National Training and Technical Assistance Partners (NTTAPs)



Learn More: [Browse NTTAPs by Topic](#)

Today's Facilitators



Gladys Carrillo, LCSW (she/her)
Director of Program Services
National Center for Farmworker Health



Cara Skillingstead, CCHP (she/her)
Associate Director, Health Care Transformation
Association of Asian Pacific Community Health Centers

Today's Agenda

- Welcome and Introductions
 - Context
 - Types of Natural Disasters
 - Disproportionate Impacts on Health Center Populations
 - Priority Population Case Studies
 - Audience Engagement
 - Flood Preparedness in Louisiana
 - Jamie Barney, Open Health Care Clinic
 - Resources
 - Evaluation & Close
-

Natural Disasters

Natural Disasters are sudden or unexpected events that result in serious damage or death.¹ They come in many forms including:

- Earthquakes
- Landslides/Mudslides
- Tornadoes
- Volcanoes
- Hurricanes
- Floods
- Tsunamis
- Winter storms
- Wildfires
- Extreme Heat

National Level Threat of Natural Disasters

Natural disasters are increasing in frequency and severity.¹

- More deadly weather patterns.^{2,3}
- Little to no warning for catastrophic events.
- More marginalized communities impacted.⁴
- Less time for health centers to prepare and respond to diverse patient needs.⁵



Relief workers stand in a circle in front of collapsed building in discussion. Photo courtesy of RAEng_Publications.

Disproportionate Impact on Health Center Populations

- Increase in widespread global displacement of communities of color.¹
- Increase in number of climate refugees countries migrating to U.S.¹
- Limited substandard housing options for undocumented immigrants and immigrants with Limited English Proficiency.^{2,3}
- Reveal gaps and effects of systemic racism and structural poverty in health center populations.⁴

Impacts on Migrant and Seasonal Agricultural Workers (MSAW)

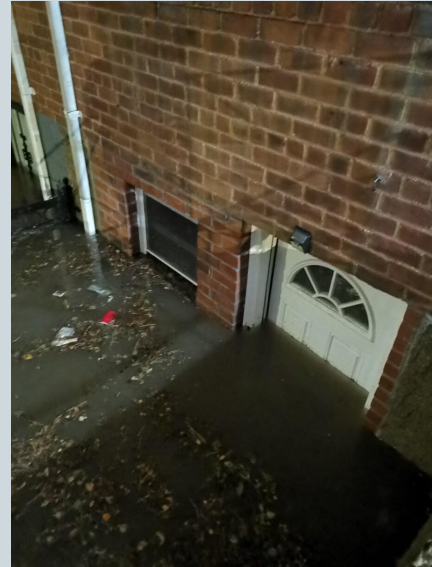
- Lost wages or loss of employment.
- Displacement/change in migratory patterns.
- Increased vulnerability to climate-related illnesses.
- More hazardous working conditions
- Increase in environmental and occupational safety risks
- More vulnerable due to substandard, rural housing conditions.



*Agricultural Workers at COVID-19 vaccination clinic.
Photo courtesy of NCFH.*

Impacts on Asian Americans (AA)

- “AAPI” erases the unique and diverse needs and experiences.¹
- Consider intersectionality.
- Historical trauma of colonization, exploitation, and displacement.



*Water with debris approaches top of window and door.
Photo courtesy of Ernesto Moreno Aguirre*

Flooding in New York City caused by Hurricane Ida largely impacted immigrant and communities of color. The majority of deaths were AA immigrants who lived in basement apartments.²

Impacts on Native Hawaiian/Pacific Islanders (NH/PI)

- NH/PI experience devastating impacts rising sea levels.^{1,2}
- Storm surges, extreme tides, cause coastal erosion, and ecosystem devastation.³
- Dispossession of land, rights, and cultural identity.



*Child and dog walk on tidal flats at a Marshall Island Atoll.
Photo courtesy of Asian Development Bank via Flickr*

Climate change and nuclear testing have displaced many Marshallese. Northwest Arkansas is a large resettlement area, which frequently experiences tornadoes.^{4,5,6}

Impact on Older Adults

- More likely than any other age group to be a casualty of a weather emergency.¹
- Lack of access to power can result in a medical crisis.²
- Social isolation can delay emergency information or preparedness planning.³

NCECE Resource: [Building Connections to Improve Weather Emergency Preparedness for Socially Isolated Older Adults](#)



Rescuers help an elder woman escape home during flooding. Photo courtesy of CNN.

About half of the deaths during or in the aftermath of Hurricane Katrina (2005) and Hurricane Sandy (2012) were individuals over age 65.^{4,5}

Impacts on Unhoused Populations

- Hurricanes lead to widespread flooding and displacement.¹
- Multiply marginalized unhoused populations experience worst outcomes.²
- Forced evacuations require trauma informed lens.³

NHCHC Resource: [Disaster Planning for People Experiencing Homelessness](#)



*Hurricane Irma over the Atlantic Ocean from above.
Photo courtesy of NASA Goddard Flight Center.*

Hurricanes cause widespread and catastrophic damage.¹ Those who are often first and worst harmed by these disasters are unhoused populations.²

Impacts on Residents of Public and Assisted Housing

- Many public housing units lack features necessary to adapt to climate change.¹
- Many residents are elders, have disabilities, and/or access and mobility issues.²
- In coastal states, 25,000 units are at risk of flooding due to sea-level rise.³
- Protection for public housing residents should include preventative measures and communication.⁴



Flooding of public housing units, Photo courtesy JJFarquitectos.

Key Considerations



- Preparedness for Response = Preparedness for Recovery
- Culturally responsive resources and services
- In-language materials in multiple formats
- Partnerships with community-based organizations to foster trust and relationships
- Collaboration with trusted leaders and messengers before emergencies occur

Today's Speaker



Jamie Barney, DSW, LCSW-BACS (she/her)
Vice President of Behavioral Health Services
Open Health Care Clinic
Jamie.Barney@ohcc.org

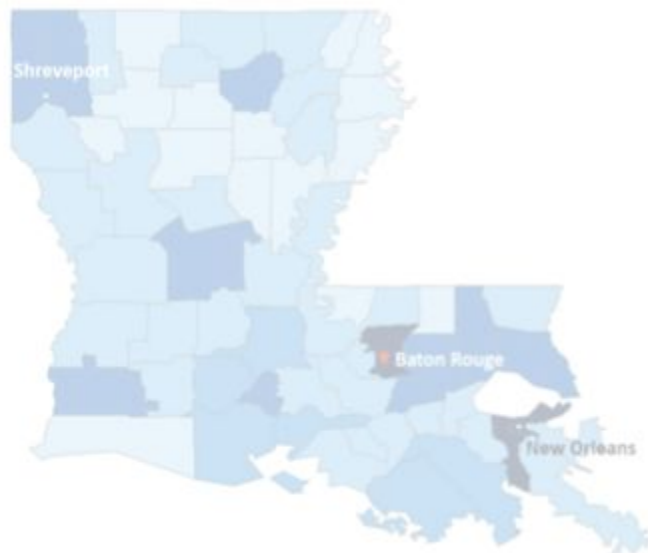


OPEN
HEALTH
CARE CLINIC

**Best Practices in
Addressing Natural Disasters:
Flood and Hurricanes**

HIV/AIDS Alliance for Region Two (HAART), Inc dba Open Health Care Clinic (OHCC)

- Established in 1995
- Housing programs 2001
- Full service medical clinic 2007
- FQHC Status in 2015



Whole Care for the Whole Community

Our Services

PRIMARY CARE

PEDIATRICS

WOMEN'S HEALTH

ENDOCRINOLOGY

PODIATRY



SEXUAL HEALTH

PHARMACY

DENTAL

BEHAVIORAL
HEALTH

SOCIAL SERVICES



Chronic conditions i.e. PLWH

Persons experiencing homelessness

Persons with mental health disorders

Persons with no/low income

Spanish speaking

Vulnerable Subpopulations

Emergency Operations Plan

Demographics: Address, Layout, Services with maps and floor plans at each location

Command and Control: Organizational Chart with Delegation of Authority, Orders of Succession, & Command Center

Policies and Procedures: Facility Lockdown, Shelter in Place, Evacuation, Suspension and Services, Documentation

Internal Communication: Staff

External Communication: 911; Property Owner; Parish, State, Local Emergency Management Persons; Other Facilities that can provide required services/nearby hospitals for emergency services

Communication with Clients and Visitors On-Site

Training and Testing

Contact Information for Vendors of Medical Equipment/Supplies, Electronic Health Record, Pharmacy, Lab Services, and Dental Equipment/Supplies

Codes:
Fire, Bomb, Active Shooter, Infant/Child Abduction, Medical Emergencies, Severe Weather, Violence

Code Gray: Severe Weather



Activation

Code Gray is activated when a situation arises that is related to eminent severe weather conditions that have the potential to cause physical harm and/or destruction of property.

Watch

If National or State Weather Service issues a severe Tornado, Flood, or Hurricane WATCH, all staff will be notified electronically via email or text.

Warning

If a severe Tornado, Flood, or Hurricane WARNING is issued, staff notified electronically.

Notification

Notify all patients and staff if any services are suspended and the availability of services. Notify applicable agencies of any evacuations, services suspensions, or surges.

August 2016: A 52-year-old woman was the head of household in a family of five. She resided with her daughter, two minor grandchildren, and her minor son. The household income consisted of her social security disability and her daughter's employment. She was diagnosed with HIV, bipolar disorder, and schizophrenia. She was receiving medical care and RW case management at OHCC; and mental health care with a community partner. She resided in OHCC's HOPWA funded project-based housing – a 3-bedroom home.

She had a stroke and was hospitalized for 3 weeks. While hospitalized, there was four days of rain resulting in a flood. Her home was initially inaccessible, but when she did regain access most items were ruined with 2.5 feet of water in the home.



Case Study



"GREAT FLOOD OF 2016"

"no-name storm"

"1 in 1,000-year flood"

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Immediately upon return to work following the floods.

RW Case managers: locating clients and identifying needs.

Behavioral Health Counselor (1.0 FTE Counselor at agency that started in July 2016): focused on supporting (established and new) patients and staff while orienting.

Housing: identifying which clients were displaced and assessing damage to OHCC's properties.

Medical: locating patients, identifying appropriate pharmacy for displaced patients, medical visits as needed.

Meanwhile...

Significant number of staff displaced, hosting family and friends who were displaced, and had damage to their homes.

My first day at OHCC (08/16/2016)!

Louisiana flooding: One family, 13 homes destroyed



By [Christina Zdanowicz](#), CNN

🕒 2 minute read · Updated 12:40 AM EDT, Thu August 18, 2016

Upon release from the hospital, she and her family moved in with her mother. They stayed with her mother for approximately two

Simultaneously feeling blessed and guilty, she's doing what she can for those who have lost so much.

"People were told they don't need flood insurance and now they're without a home," she said. "We're trying to figure out where our family is going to stay. We only have seven homes in the family that don't have damage."

Case Study

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Baton Rouge area renters frustrated by 'ridiculous' prices, tight rental market after flood

Renters continue to struggle finding affordable rental units in Baton Rouge area after flood

BY TERRY L. JONES | tjones@theadvocate.com Feb 12, 2017 4 min to read

Ryan White

“Our current client load is 417 with a decrease in referrals during the month of August. Within one week of the August 2016 floods, we were able to contact most of our clients. 50 of our clients were displaced immediately following the floods and 15 remain displaced. Clients without medications were able to receive them within 48 hours. While we were able to provide for most of their immediate needs, additional needs included formula for babies, sanitary supplies for women, and rehousing.

Housing

Approximately 8 housing clients were displaced by the flood, 4 remain displaced or unaccounted for. We are in communication with OCD and HUD on means to fund the full extent of repairs and to reallocate dollars to tenant-based housing to assist additional households.

September 15, 2016 Department Operations Updates

Patient continued to access mental health services with a community partner. RW, Housing Case Manager, and medical provider provided regular follow-up while the patient was displaced. Also ensured the household had access to medical and mental health services.



**JUST ANOTHER DAY IN
OUR SUPERHEROES
BATTLE TO PROVIDE
WHOLE CARE FOR THE
WHOLE COMMUNITY!**

Case Study

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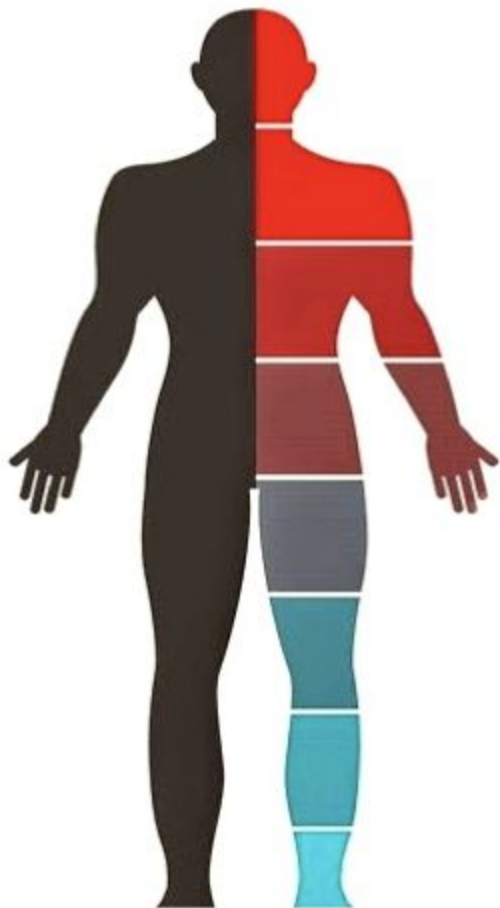
“The water came so fast, you didn’t really have time to think. All you wanted to do was get out, get out, get the kids and get out, and that’s what we did,” Washington said. “After the flood, I couldn’t concentrate. I just couldn’t do anything. My mind was trying to comprehend what was all going on.”

Depressive disorders and post-traumatic stress disorder, which are afflicting Louisianians in the wake of the Great Flood, can be common after a disaster. Women are more likely to develop depression and anxiety and men are more likely to turn to drugs and alcohol, said Carol North, a psychiatry professor at the University of Texas Southwestern Medical Center.

Survey data by Louisiana Spirit, a state agency that uses federal emergency money to help victims recover following presidentially declared disasters, shows thousands are suffering from sleeping and eating problems, shakiness, and despair. A quarter of survivors surveyed told agency staff they’re having trouble making decisions. One in five said they feel irritable and angry. Police figures show domestic violence has increased. So, too, has drinking.

Behavioral Health

The effects of stress on the body



Mood issues including anger, depression, irritability. Lack of energy, concentration problems, sleeping issues, headaches. Mental issues including anxiety disorders and panic attacks.



Increased blood pressure, increased heart rate, higher cholesterol and risk of heart attack



In the immune system, there is reduced ability to fight and recover from illness



Stomach cramps, reflux, and nausea



Loss of libido, lower sperm production for men, and increased period pain for women



Aches and pains in the joint and muscles

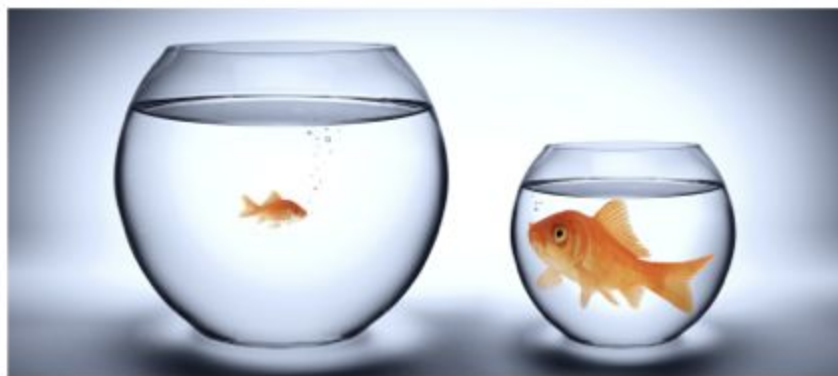


Lower bone density

RESOURCES

One size DOES NOT fit all

- Self-Help
- Individual Counseling
- Support Groups
- Consumer Advisory Boards
- Primary Care Provider
- Psychiatry
- Emergency/Crisis Intervention
 - SUICIDE PREVENTION LIFELINE
1-800-273-TALK (8255)
 - 911
 - Nearest Emergency Department



Trauma Informed Care Models seek to:



Realize

Realize the widespread impact of trauma and understand paths for recovery.

Recognize

Recognize the signs and symptoms of trauma in patients, families, and staff.

Integrate

Integrate knowledge about trauma into policies, procedures, and practices.

Avoid

Actively avoid re-traumatization.

Patient and housing case manager were able to identify safe housing for the family.

Agency was able to reallocate PBRA funds to TBRA.

Patient was transitioned to TBRA and a 3-bedroom apartment was secured for the family with HOPWA funds.

HOPWA funds were used to renovate the home. Renovations were completed a year later – September 2017.

Another family moved into the home within a week of completed renovations.



Prepare/Communicate/Respond

**Emergency
Management
Team**

Technology

Response Time

**Remain Updated &
Follow Guidance**

**Education to
Clients &
Community**

**Staff
Communication**

**Support Staff's
Mental Well-being**

**Continuous
Service Provision:
Virtual Service &
Skeleton Crew**

**Awareness of
Additional
Resources**

Questions?



Session Resources

- [U.S. Department of Health and Human Services Climate Health Outlook](#)
- [Obtaining FEMA Funding for Damaged or Destroyed Facilities](#)
- [Americares Emergency Preparedness and Response Resources for Health Centers: Ready | Respond | Recovery](#)
- [Americares Extreme Weather Tool Kits for Hurricanes, Tornadoes, Floods | Extreme Heat | Wildfires](#)
- [Building Resilience Against Climate Effects \(BRACE\) Framework, CDC](#)
- [Community Health Access to Resilient Green Energy \(CHARGE\) Partnership, NACHC](#)
- [HUD Community Resilience Toolkit](#)

Session Resources

- NRHA [Rural Emergency Preparedness and Response](#)
- FEMA [Disasters & Assistance](#)
- CDC [Disaster Resources](#)
- CDC [Crisis & Emergency Risk Communication \(CERC\) Tools and Templates](#)
- Ready [Disasters and Emergencies](#)
- NCFH [Emergency Preparedness Tools](#)
- [Migrant and Seasonal Farm Worker Emergency Preparedness Planning Guide](#)
- MCN Resources: [Emergency Preparedness for Chronic Disease Patients in Puerto Rico: Continuity of Care as a Tool to Protect Health and Emergency Management Webinar](#)

Health Center Preparedness and Response Forum

A Four-Part
Webinar Series

October 12, 2023: Infectious
and Vector-Borne Diseases

December 14, 2023: Natural
Disasters

February 8, 2024: Extreme
Heat and Wildfires

April 11, 2024: Workforce
and Community Supports

All sessions will be held from 1:00PM - 2:00PM ET

[Register Now](#)

Health Center Preparedness and Response Forum: Session Materials



This four-part series, created by HRSA National Training and Technical Assistance Partners (NTTAPs), will promote promising practices and offer strategies for addressing challenges related to both emergency planning and recovery. This webinar series will focus on preparing for and responding to a wide variety of emergencies, including infectious diseases, natural disasters, extreme heat, and workforce and community supports.

Audience: Health centers serving priority populations, such as agricultural workers, individuals experiencing homelessness, residents of public housing, and other underserved groups including older adults, and Asian American, Pacific Islander, and Native Hawaiian patients.

Upcoming Dates:

- December 14, 2023: Natural Disasters
- February 8, 2024: Extreme Heat and Wildfires
- April 11, 2024: Workforce and Community Supports

Register now: <https://bit.ly/3r20D0V>

[View the Resources](#)

EVALUATION

Please take the time to complete the Forum evaluation via Zoom, and help us improve this activity for future sessions.



Thank you!



*Next Session on Extreme Heat
and Wildfires: February 8, 2024*

