

LTC2Prepare EP 301 June 22-23, 2021

This activity was created to address the professional practice gaps listed below:

• Identifying the aspects of the Final Rule and application of the rule to the Emergency Preparedness Programs in LTC facilities.

1. Please respond regarding how much you agree or disagree that the gaps listed above were addressed.

	Disagre	ee	Agree	
Participating in this educational activity changed your KNOWLEDGE in the professional practice gaps listed above. [31-3.77]	(0)	(0)	(7) 22.58%	(24) 77.42%
Participating in this educational activity changed your COMPETENCE in the professional practice gaps listed above. [31-3.71]	(0)	(0)	(9) 29.03%	(22) 70.97%
Do you feel participating in this educational activity will change your PERFORMANCE in the professional practice gaps listed above? [32-3.69]	(0)	(1) 3.13%	(8) 25.00%	(23) 71.88%

2. Please elaborate on your previous answers. (15)

The presenters gave action plans, showed examples (catastrophic events presenter). Very helpful! Have spoken with Chad several times throughout the pandemic - he has been a wonderful resource.

This was a lot of review information

Was helpful to hear about earthquakes, transportation issues, also enjoyed infection control and catastrophic event info.

I appreciated the increased understanding of catastrophic events, stress management during trying times (even printed out the cat compassion fatigue slide for my staff support), family council support, earthquake preparedness and evacuation planning. It built upon some of my previous knowledge and understanding. Utilization of the map for counties and facilities within that was significantly helpful.

Very well thought out conference.

Loved being able to attend via you tube.

I am new to my position of QA and have a lot to learn about emergency preparedness. I feel that I learned a great deal about how to organize and understand EPP.

Provides updated information on Emergency Preparedness

With the hands-on plus the resources provided, I have the ability to update our plan with confidence.

Very good educational information

I gained greater knowledge in some areas and came away with some new tools in my toolbox in regards to emergency preparedness and procedures

Gave vital information for current updates,

This was my first preparedness meeting. My knowledge was limited in all aspects. It was very good.

not applicable

Learned some new things

3. Please evaluate the effectiveness of the following speakers in improving your knowledge, competence and/or performance. (Poor = 1, Excellent = 4)

	Poor	Fair	Good	Excellent
Betty Shiels, PhD, LCSW [32-3.72]	(0)	(0)	(9) 28.13%	(23) 71.88%
Brian Blake, BS [31-3.68]	(0)	(0)	(10) 32.26%	(21) 67.74%
Kate Long, BA [29-3.72]	(0)	(0)	(8) 27.59%	(21) 72.41%
John Bucher, ACIP [32-3.75]	(0)	(0)	(8) 25.00%	(24) 75.00%
Glen Granholm, BS [31-3.65]	(1) 3.23	% (0)	(8) 25.81%	(22) 70.97%
Kelli Robinson, LMFT [32-3.69]	(0)	(0)	(10) 31.25%	(22) 68.75%
Chad Eldridge, RN, BSN [32-3.66]	(0)	(1) 3.13%	(9) 28.13%	(22) 68.75%
Jennifer Connell, MBA, LNHA [31-3.74]	(0)	(0)	(8) 25.81%	(23) 74.19%
Sherry Culp [32-3.69]	(0)	(0)	(10) 31.25%	(22) 68.75%
Diana S. Jester, MSSW [32-3.75]	(0)	(0)	(8) 25.00%	(24) 75.00%

4. Please elaborate on your previous answers. (19)

no comment

Most speakers were easy to listen too. Had a little trouble staying engaged with Sherry and Brian but content was good

Overall good presentation with increased understanding of online learning needs. Some presentations were not correct and presented some frustration. Two presenters needed to be more engaging and relatable to long term care facilities

Speakers were very knowledgeable and entertaining.

All presenters were great! Loved all topics.

All of the speakers were great. They were very informative and knowledgeable.

Every speaker was very knowledgeable.

All were great speakers and I appreciated their communication and information.

All held my attention and were obviously well-versed in the subject matter.

Good speakers

Speakers were knowledgeable and competent to assist to make changes in our ERP for Earthquakes! Thanks so Much! You rocked it!

I felt all the presenters were very knowledgeable in their fields

All speakers were easy to understand.

Not Applicable

na

Enjoyed all speakers

5. Please identify a change that you will implement into practice as a result of attending this educational activity (new protocols, different medications, etc.) (26)

Will do more one-on-one rounding with employees with specific attention to mental health/stress issues. Will check site shown by John Bucher while updating HVA and share with other leaders.Possibly try to initiate a family council again - have had difficulty gaining interest in families

review/updat EP plan

We will work on more facility agreements now that we have a better list. Also implementing more evactation ideas ie "go bags"

Earthquake preparedness and drill, compassion fatigue support, evacuation preparedness plan

Preparedness for earthquakes.

New protocol would be ensuring centers are ready for disasters, not just covid but earthquakes ready

Earthquake drill, Hazzard Hunt

Ideas for table top exercises.

Reviewing and ensuring our Emergency Operations Binder is updated from information.

Will implement a Hazard "Walk-about" at least monthly and discuss in staff meetings and daily huddles. Implement "to-go" bags for the long-term care patients Utilize the website John Bucher showed to help identify our facilities hazards Review and revise communication plan - especially in terms of families and outside entities

Involving staff in more opportunities to learn more.

Revisit, and revise current ERP, modifications to the HVA, etc.

family council-tried before COVID, will discuss with IDT about re-starting

Infection control practice will have some different aspects to it.

ER plan for an earthquake

new audits

education of staff

Re educate staff and add to orientation process

Review current protocols and change as needed.

Not Applicable, done per QAPI Policy Updates

NOT APPLICABLE DONE PER QAPI COMMITTEE AS A WHOLE

New protocol on transfers

6. How certain are you that you will implement this change?

(31)

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Certain ^{(8-)}_{25.81\%}
Very Certain ^{(20-)}_{64.52\%}
Maybe ^{(3-)}_{9.68\%}
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7. What topics do you want to hear more about, and what issues(s) in your practice will they address? (15)

Advise for active shooter events especially devices that could block fire doors. resources for staffing problems in nursing, dietary, housekeeping. Staff retention. resources for nursing shortage in the state.

Covid surplus prevention

Communicable Diseases

Earthquakes especially since we fall on the line.

How to conduct a table top exercise

Possible future pandemics; communication improvements between state, local and federal response teams during ANY disaster planning

COVID and disaster preparedness

Tornado planning, evacuation planning

other disaster prep

COVID

N/A

8. Were the patient recommendations based on acceptable practices in medicine?

(29)

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Yes _{96.55\%)}^{(28-}
No _{3.45\%)}^{(1-}
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9. If you answered No on the question above, please explain which recommendation(s) were not based on acceptable practices in medicine? (3)

They addressed how it was unreasonable to meet all the evacuation needs other than keeping the resident safe and tracked in care.

na

N/A

10. Do you think the presentation was without commercial bias?

(32)

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Yes _{96.88\%)}^{(31-}
No _{3.13\%)}^{(1-}
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11. If you answered No on the above question, please list the topics that were biased? (1)

na

12. Please provide any additional comments you may have about this educational activity. (8)

Very timely. Held my interest. Provided usable, step-by-step actions to take in several areas.

There was a lot of focus on what happened the past 15 months on day one. we all lived through this. Let's move forward.

Thank you for offering this conference and CEUS.

na

A great opportunity to learn more about disaster preparedness and looking forward to the next one.

None

Good education

I learned a lot!

As one of the participants of this educational activity, we want to encourage you to implement those ideas that were appropriate to your healthcare environment.

This evaluation is confidential and no individual will be identified by this office (Continuing Medical Education and Professional Development). It will only be used for quality improvement.

We look forward to seeing you at future University of Louisville events. Thank you very much.