

# Behavioral Intervention and Lessons Learned in the Aftermath of Hurricanes Katrina and Rita

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Statistics

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**Disaster Preparedness**  
**2005**

# Pre- Katrina Disaster Preparedness:

**DHH Disaster  
Task Force**

**Staff Call Out Registry**

**OMH CMHC Staff  
Assist at Sp NS**

**4,000 DHH Employees Trained in 2004**

- **Special Needs Shelter**
- **Disaster Mental Health Training**
- **Hospital Evacuation Readiness**

**350 OMH and OAD Employees Trained in May 2005**

**All Hazards Response Planning**

**Crisis Counseling Intervention With Special  
Populations**

**Disaster Mental Health Intervention in Incidents  
Involving Mass Casualties**

# Pre-Katrina Disaster Preparedness July-August 2005

Disaster Response Drills  
Including Practice Evacuations  
of OMH Hospitals

- Disaster Response Plans For :
- Each OMH Hospital and Region
  - Hurricane Pam Exercise week of Katrina
  - Planning for SpNS, SARBOS, and TMOSA

# Pre-Incident Activities: Hurricane Katrina August 25-28, 2005

OEP Command Center  
DHH Operations

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graph TD; A[OEP Command Center DHH Operations] --> B[Evacuation of Southeast Louisiana State Hospital, New Orleans Adolescent Hospital to Eastern Louisiana Mental Health System]; A --> C[Open Special Needs Shelter (SNS) Operations in New Orleans, Baton Rouge, Terrebonne Parish, Lafayette, Lake Charles, Alexandria, and Monroe];
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Evacuation of

- Southeast Louisiana State Hospital
- New Orleans Adolescent Hospital to Eastern Louisiana Mental Health System

Open Special Needs Shelter (SNS) Operations

New Orleans  
Baton Rouge  
Terrebonne Parish  
Lafayette  
Lake Charles  
Alexandria  
Monroe

# OMH Incident Response:

OEP Command  
Center

OPH Command  
Center

SARBO  
New Orleans

TMOSA Sites  
•New Orleans  
•Baton Rouge

Emergency Response Sites  
OPH Command Center  
TMOSA  
SARBO  
NOPD Sites  
OEP – Tent Cities for Police  
Units  
Baton Rouge Sites

Special Needs Shelters  
New Orleans  
Baton Rouge  
Houma/Terrebonne  
Lafayette  
Lake Charles  
Alexandria  
Monroe

Evacuation of Charity  
Hospital in New  
Orleans  
Acute Unit to Central  
Louisiana State  
Hospital

# OMH Incident Response: August 29, 2005 to November 2006

Behavioral Health  
Command Center

7 Mobile  
Crisis  
Teams

SAMHSA  
Emergency  
Response Grant

Family Call  
Center

Hospitals Evacuated  
through April 2006

SpNS and General Shelters  
operate through early 2006

Initial Crisis  
Counseling  
Grant

SAMHSA/Westover  
Clinical Teams through  
6/30/06

# Post Katrina/Rita Realities 2006

# Evacuation Planning

- People will not plan their personal evacuation before the threat of a storm.
- Making a family/personal evacuation plan is not easily accomplished
- People are worn out
- People need structure and leadership

# Sheltering Staff

- Staff need reassurance and relief while on the deployment.
- Job structure is important.
- Maintain a buddy system.
- Value and respect for each other is essential.
- Staff need to be recognized for their efforts.
- Shift change debriefings and on-site stress managers.
- Need to know who is in charge.

# Sheltering Evacuees

- Psychological first-aid is needed by everyone.
- Basic needs must be assessed and met.
- Need sufficient staffing to recognize behavioral problems before they become overwhelming.
- Pre-planned protocols for managing behavioral issues.

# Lessons Learned and Intervention Strategies Post Incident

- Design a general template of a systematic plan to provide disaster mental health services that can be tailored to area needs & resources.
- Three levels of intervention
  - Assess Mental Health Needs
  - Education & Training
    - Gatekeepers
    - Mental Health Providers
  - Integrate Crisis Counselor Teams with community resources

# Training & Education

- General public: information dissemination
- Gatekeepers
  - Effects of Trauma on Adults, First Responders, Children/Adolescents and parents
  - “Red flags” that warrant referral
- Professional Crisis Counselor Team Members/ Local Mental Health Providers
  - Trauma, Crisis, Loss and Grief
  - Train the Trainer
- Crisis Counselor Teams
  - (professional and paraprofessional)

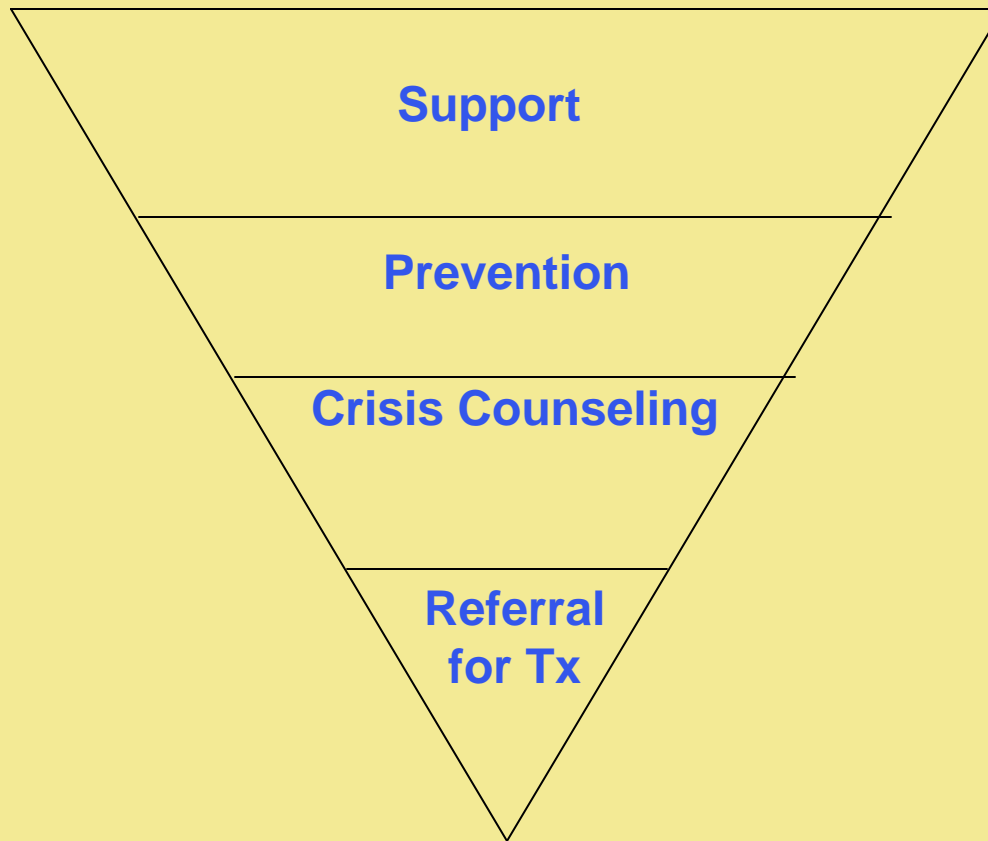
# Ascertain Needs

- Overall #s who are impacted
  - Degree of Loss/Impact of Trauma
- Who would benefit?
  - Acuity/Level of Need
- How will they be identified
  - Behavior based? Self Report? Observations?  
Parents? Faculty? Staff?

# Assessing Needs

- What tools to use?
  - NCTSN, NCPTSD
- Who will give out/ask questions?
- Who will compile data from assessments?
- Can the process of assessing MH needs be combined with other case management needs assessments?

# Level of Service Needed



# Integration

- Available community resources (in flux)
  - What's available? Missing? Central Source?
- Disaster Mental Health Needs
  - Amount of need at different acuity levels
- Crisis Counseling Teams
  - Meeting the gap between what's available and what's needed (anticipating treatment needs)

# **OMH Emergency Preparedness Post Katrina/Rita**

- **1. Each hospital/region/district has a designated Emergency Preparedness coordinator.**
- **2. OMH has established a state level Emergency preparedness work unit under the Director of Disaster Mental Health Operations to implement preparedness initiatives.**
- **3. OMH holds bi-weekly (were weekly during the major part of hurricane season) meetings with the regional managers, CEOs and the emergency preparedness coordinators.**

# **OMH Emergency Preparedness Post Katrina/Rita**

- **4. OMH now has a state wide disaster preparedness and response plan consisting of regional plans and hospital plans.**
  - These plans designate functions to be performed at Special Needs Shelters by OMH in conjunction with OPH, OAD and OCDD.
  - Protocols for accessing psychiatric crisis services during a disaster have been identified for each region.
  - Staff have been identified who will function as crisis counselors and as general assistance staff 24 hrs a day for a period of five days.
  - It is our intention to place this information on an easily accessible section within the OMH web site.

# **OMH Emergency Preparedness Post Katrina/Rita**

- **5. Currently we are developing local clinic level plans for all hazard preparedness and response. This will include the provision that all staff have personal emergency response plans and have an established procedure for contacting supervisors following a storm if they must evacuate.**
  - It is also our intention to assist all consumers who are OMH clients with their own emergency preparedness plans, which will be reviewed and updated at six month intervals just as treatment plans are currently reviewed.
- **6. OMH and the regional housing coordinators have been working with assisted living programs OMH funds to assure each of these sites has an emergency response and evacuation plan.**
  - As emergency preparedness matures into a routine program within OMH we will initiate a wide array of preparedness drills for provider agencies and our consumers.

# **OMH Emergency Preparedness Post Katrina/Rita**

- **7. During the current hurricane season we have:**
  - **Conducted a mock evacuation drill for NOAH and SELH evacuating to ELMHS,**
  - **a "shelter-in-place" drill for NOAH, SELH, ELMHS, and CLSH in response to a category 2 or less hurricane or a hazardous materials incident.**
  - **Our biggest challenge is managing the evacuation of employee families to ELMHS but we are actively working on that issue.**
  - **We currently have planned an evacuation drill for the evacuation of acute psych units at WO Moss, UMC, and Chabert to CLSH with their staff. This will occur within the next two weeks.**

# OMH Emergency Preparedness Post Katrina/Rita

- **8. OMH is also working with DHH and the Louisiana Hospital Association to plan for the evacuation of all psych patients from public and private facilities.**
  - There has been some very creative thinking which will probably result in some utilization of private bed space/staff as part of the response and sheltering effort. These discussions are underway and will hopefully result in a strategy prior to the 2007 hurricane season.
- **9. OMH is also participating with OPH in preparation for a bird flu pandemic.**
  - We are designing the exercise and will test it out in December in Region 5.
- **10. OMH is a full participant with DHH:**
  - on all emergency response planning and evacuation efforts,
  - workforce readiness,
  - advise DHH on issues regarding mental health,
  - and the specific needs of persons with mental illness.

# **OMH Emergency Preparedness Post Katrina/Rita**

- **11. OMH has worked with DHH in establishing a separate Behavioral Health desk to handle all behavioral health issues at the regional and statewide levels. This will allow for the rapid identification of issues/needs and the mechanisms for securing the necessary resources for our response.**
- **99% of OMH community staff have completed all four of the required training courses in the National Incident Management System.**
- **12. OMH has established an emergency response pharmacy plan for securing OMH medical supplies during a disaster.**
  - **We have also resolved most of the issues regarding access to psych medications at special needs shelters.**

# Behavioral Health Incident Management: Communication Pathway 2006 Hurricane Season

