



ShakeOut Earthquake Drills: Earthquake Planning During COVID Frequently Asked Questions (FAQ)

General Questions

➤ **When does the ShakeOut Earthquake drill take place?**

The international ShakeOut drill is on the third Thursday of every October. This year it falls on October 15th, 2020.

➤ **How do we participate in the Great ShakeOut Earthquake Drill?**

To participate in the Great ShakeOut Earthquake Drill, please register your company [here](#). You can choose any day of the year to do your earthquake drill or you can do your drill on October 15, 2020. To learn more about participation click [here](#).

➤ **Are ShakeOut materials available in other languages? Are there training resources available for the deaf community?**

Yes. ShakeOut's website is available in Spanish. Not all of the materials are available in other languages, but some are available in Spanish. ShakeOut offers "Drop, Cover, Hold On" graphics in Spanish. ShakeOut is currently working on adding materials available in different languages.

ShakeOut and Earthquake Country Alliance have not created materials specifically for the deaf community but are in the process of making their website fully accessible. ShakeOut is in the process of adding subtitles to all of their videos.

➤ **When planning for emergencies and disasters, how many risks do you need to have a plan for? Is it okay to prioritize the top 3?**

It depends on the risks based on the geography of your location and organization. Ex, we are located in Sacramento. Sacramento has one of the highest flood risks in the nation. We would not focus our efforts on a Volcano Response Plan or Volcano Ash Response Plan unlike if we lived in Hawaii or Alaska. Use this [Kaiser Hazard Vulnerability Analysis Tool](#) to see what risks your location faces. We recommend writing plans for at least the top three faced by your organization but encourage you to write plans for any emergency/disaster that your organization scores highly for on the Kaiser HVA Tool. Consider writing response plans for: Hurricane, Tornado, Severe Thunderstorm, Blizzard, Tidal Wave, Drought, Wildfire, Landslide, Information Systems Failure, Hazmat Exposure, Supply Shortage, Structural Damage, Mass Casualty Incident (trauma), Bomb Threat, etc.

- **We use small stickers to mark our badges every day to show we have gone through COVID screening. Are there stickers that we can purchase for the day we do our drill?**

Yes! [Shakeoutshop.org](https://www.shakeoutshop.org) has participation stickers, t shirts, and other materials available for purchase online.

- **Do you have any guidelines on how remote staff members can participate in shakeout?**

Staff can participate remotely in the ShakeOut earthquake drill virtually by tabletop exercise. Have your remote staff members DROP, COVER, and HOLD ON. After the drill is complete, host a discussion about not only their workplace, but their home environment. Is there anything your staff can do to make their workspace or home safer? Click [here](#) to learn more.

- **Is there an earthquake warning system?**

Yes. There is an Earthquake Early Warning System that is based on the west coast and expected to be live within the next year or so. It detects oncoming earthquakes and gives you seconds/minutes notice depending on the severity of the earthquake to take action. It will come through as a message on your phone and will be able to be integrated into PA systems.

Questions about After-Action-Reports

- **Do we need to create an After-Action-Report for each of our facilities or can we complete one for the whole organization?**

An After-Action-Report is needed to fulfill your exercise requirement by CMS. You may complete one per each drill, but we encourage you to complete one per drill per facility. Different facilities face different challenges and risks so it is important to determine what is needed for each facility in the event of an emergency or disaster. By including each facility your staff will be more prepared and you can find any operational issues or gaps in your planning.

- **Is there a special way you recommend going over the Communications Plan with other medical facilities when completing the After-Action-Report?**

The Communications Plan is about documenting all internal and external contacts, redundant communications devices and internal communications strategies. It is recommended that you take as many opportunities that you can to test your communication staff and patient notification systems, redundant communication equipment, etc. during drills and exercises. Writing the after action report will allow it to count towards your exercise requirement.

- **Do you offer a simple document or tool that healthcare providers can use to document our drills and complete and After-Action-Report?**

CMS does not require providers to use a specific form or process however, there are industry best practices. We use our [CMS Emergency Preparedness Compliance Toolkit](#) to document our clients drills and After-Action-Reports. The Toolkit is a template that follows the [four CMS Emergency Preparedness Compliance requirements](#). Included in the Toolkit are templates for an Emergency Operations Plan, Communications Plan, Policies and Procedures, and Training and

Exercise Program. Plus, bonus best practice documents: Incident Command System, Response Plans (Flood, Active Shooter, Workplace Violence, etc.), and up to date on all new CMS Requirements. There are templates online. Please reach out to us if you have any questions about our CMS Compliance Toolkit.

Questions about Healthcare

- **Does our whole facility need to participate in the shakeout, or could it be our safety committee for it to count for CMS exercise requirement?**

Ideally you want your entire facility to participate in an earthquake drill, document it, and write an After-Action-Report. It is a good time to figure out what the operational issues might be. Depending on your provider type you may need to participate in a community based full-scale exercise or may only be required to do a table-top exercise. The more that your organization participates in an exercise or a drill, the more prepared you are.

- **How should you instruct a family member to be safe in their car while waiting for the patient?**

Do not get out of the car. Watch a video [here](#) about what to do if you are driving or in your car during an earthquake.

- **What do Home Health/Hospice Agencies do for earthquakes while at patients' homes or out in the field?**

The emergency plan documents that are most helpful in guiding staff during an earthquake include: Communications Plan (informs staff about redundant communications devices i.e. 2-way radios, satellite phones), Earthquake Response Plans (which give staff specific steps during an earthquake). Typically, you would create a plan for your staff, patient, and their family during intake. Locate possible safety issues and consider what are the mitigation strategies for things like tripping hazards (rugs, uneven flooring, etc.) or dangerous items (bookcases not being bolted to the wall). Incorporate locating dangerous environments/objects during an earthquake in a patient's home during your normal screening as well as redundant communications.

- **What should Dental patients and Dental healthcare staff do during an earthquake?**

Secure the clinic space, mitigating items that might become loose or fall during an earthquake (i.e. bolting bookcases) and evacuate to a safe area when able.

- **Where can I find the new Infectious Disease Response Plan requirement? Do you have an example or template?**

This is a new requirement by CMS as of March 2019 and should guide staff during a time of an influx of an infectious disease such as with the recent COVID 19 global pandemic. Our [CMS Emergency Preparedness Compliance Toolkit](#) provides a template for the Infectious Disease Response Plan. Unfortunately, we do not sell this item separately. For more information about the Emergency Preparedness Rule-Appendix Z click [here](#) or to purchase our CMS Emergency Preparedness Compliance Toolkit click [here](#).

➤ **How can a remote Earthquake exercise be considered a full-scale exercise per CMS Guidelines?**

If everyone is remote, have your staff everyone DROP, COVER, and HOLD ON in their homes/workspace, you document that with photos, videos, etc. It is counted as an exercise because you will have staff report their experience and create an After-Action-Report based on this.

➤ **How do we help patients when patient is currently connected in a hemodialysis machine?**

Plan ahead for an earthquake in your Dialysis facility. Prepare the station to make sure there is nothing that can fall on the patient and everything is secured. Provide training to patients to inform them of what to do in the event of an emergency/disaster.

➤ **What can we do if patient is having open surgery during earthquake?**

Do what you can to protect the head, neck, and open surgical area. Do not throw your body on top of the patient. As a healthcare provider you need to make sure your staff are safe so that they may take care of others who may have been injured. Once the Earthquake Early Warning System is fully functional, this could allow operating rooms to remove tools or secure the area before the earthquake hits.

➤ **How would a bed-bound person adapt to drop, cover, hold on?**

The general recommendation for a person who is bed-bound during an earthquake is to not get up and get out of bed. Research shows from past earthquakes that people who do try to get out of bed can face other hazards like stepping on glass because they are likely not wearing shoes. Generally, things are falling or flying around, and you want to stay in bed and cover your head and neck with a pillow. We acknowledge that there are some people who are not able to cover their head with a pillow. It comes down to how you prepare the environment that they are in to minimize things that would be falling on them in the first place. Make sure to secure furniture and electronics to the walls or bolt them down. If someone cannot protect themselves, make sure their environment is not going to hurt them as much as you can. Generally, it is not recommended to cover someone with your body. You want the healthcare person to protect themselves so they are able to help people who were injured during the earthquake.