

Mid-South Emergency Planning Coalition

2022 Winter Weather Event

After-Action Report/Improvement Plan

The After-Action Report/Improvement Plan (AAR/IP) aligns exercise objectives with preparedness doctrine to include the National Preparedness Goal and related frameworks and guidance. Specific to this report, the exercise objectives align with the Administration for Strategic Preparedness and Response's (ASPR) National Guidance for Healthcare Preparedness and the Hospital Preparedness Program Measures. Exercise information required for preparedness reporting and trend analysis is included; users are encouraged to add additional sections as needed to support their own organizational needs.

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EVENT OVERVIEW

Event Name	2022 Winter Weather Event
Exercise Dates	December 22, 2022 – December 29, 2022
Scope	<p>This is an evaluation of a real-world event affecting multiple locations within the jurisdiction of the Mid-South Emergency Planning Coalition (MSEPC) Region. The dates chosen should give an in-depth review of response activities that were occurring during the winter weather event that affected the region starting on December 22, 2022, and lasting for well over a week.</p>
Mission Area(s)	Response
Core Capabilities, Objectives, and Activities	<p>Hospital Preparedness Program (HPP)</p> <p><i>Capability 1: Foundation for Health Care and Medical Readiness</i></p> <p>Objective 2: Identify Risk and Needs</p> <p><u>Activity 2:</u> Assess Regional Health Care Resources</p> <p><u>Activity 4:</u> Assess Community Planning for Children, Pregnant Women, Seniors, Individuals with Access and Functional Needs, Including People with Disabilities, and Others with Unique Needs</p> <p>Objective 4: Train and Prepare the Health Care and Medical Workforce</p> <p><u>Activity 1:</u> Promote Role-Appropriate National Incident Management System Implementation</p> <p><u>Activity 3:</u> Plan and Conduct Coordinated Exercises with Health Care Coalition Members and Other Response Organizations</p> <p><u>Activity 5:</u> Evaluate Exercises and Responses to Emergencies</p> <p><i>Capability 2: Health Care and Medical Coordination</i></p> <p>Objective 2: Utilize Information Sharing Platforms</p> <p><u>Activity 1:</u> Develop Information Sharing Procedures</p> <p><u>Activity 3:</u> Utilize Communications Systems and Platforms</p> <p>Objective 3: Coordinate Response Strategy, Resources, and Communications</p> <p><u>Activity 1:</u> Identify and Coordinate Resource Needs during an Emergency</p>

	<p><u>Activity 3:</u> Communicate with Health Care Providers, Non-Clinical Staff, Patients, and Visitors during an Emergency</p> <p>Capability 3: Continuity of Health Care Service Delivery</p> <p>Objective 3: Maintain Access to Non-Personnel Resources during an Emergency</p> <p><u>Activity 1:</u> Assess Supply Chain Integrity</p> <p>Objective 5: Protect Responders’ Safety and Health</p> <p><u>Activity 1:</u> Distribute Resources Required to Protect the Health Care Workforce</p> <p><u>Activity 2:</u> Train and Exercise to Promote Responders’ Safety and Health</p>
Exercise Objectives	<ol style="list-style-type: none"> 1. Incident Command: Evaluate the facilities’ ability to effectively activate and maintain incident command/emergency plans in a timely and effective manner. 2. Resources: Demonstrate the facilities' ability to manage the response by appropriately procuring and/or utilizing resources necessary to maintain employee and patient/client safety. 3. External Partners: Ensure patient and employee safety by effectively maintaining relationships and communication with external partners including local, state, and federal government and regulatory agencies; vendors and supply chain partners; and other support agencies.
Threat or Hazard	Winter Weather
Sponsor	Mid-South Emergency Planning Coalition
Participating Organizations	Participating organizations include MSEPC member facilities, local emergency management officials, first responder agencies, and public health. A complete list of participating agencies who submitted responses for this document is included in Appendix B.
Points of Contact	<p>Heather Fortner, Executive Director HFortner@midsouthepc.org</p> <p>Regan Wills, Vulnerable Populations Coordinator RWills@midsouthepc.org</p>

ANALYSIS OF HEALTHCARE PREPAREDNESS CAPABILITIES

Aligning exercise objectives and healthcare preparedness capabilities allows for a more consistent approach to exercise evaluation to support preparedness reporting and trend analysis. Table 1 includes the exercise objectives, aligned core capabilities, and performance ratings for each core capability as observed during the exercise and determined by the evaluation team. The following sections provide an overview of the performance related to each exercise objective and associated core capability, highlighting strengths and areas for improvement.

Objective	Healthcare Preparedness Capability	Performed without Challenges (P)	Performed with Some Challenges (S)	Performed with Major Challenges (M)	Unable to be Performed (U)
Evaluate the facilities' ability to effectively activate and maintain incident command/emergency plans in a timely and effective manner.	Capability 1 Capability 2	P			
Demonstrate the facilities' ability to manage the winter weather response by appropriately procuring resources necessary to maintain employee and patient safety	Capability 1 Capability 2 Capability 3		S		
Ensure patient and employee safety by effectively maintaining relationships and communication with external partners including local, state, and federal government and regulatory agencies; vendors and supply chain partners; and other support agencies.	Capability 1 Capability 2 Capability 3		S		

Ratings Definitions:

- Performed without Challenges (P): The targets and critical tasks associated with the healthcare preparedness capability were completed in a manner that achieved the objective(s) and did not negatively impact the performance of other activities. Performance of this activity did not contribute to additional health and/or safety risks for the public or for emergency workers, and it was conducted in accordance with applicable plans, policies, procedures, regulations, and laws.
- Performed with Some Challenges (S): The targets and critical tasks associated with the healthcare preparedness capability were completed in a manner that achieved the objective(s) and did not negatively impact the performance of other activities. Performance of this activity did not contribute to additional health and/or safety risks for the public or for emergency workers, and it was conducted in accordance with applicable plans, policies, procedures, regulations, and laws. However, opportunities to enhance effectiveness and/or efficiency were identified.
- Performed with Major Challenges (M): The targets and critical tasks associated with the healthcare preparedness capability were completed in a manner that achieved the objective(s), but some or all of the following were observed: demonstrated performance had a negative impact on the performance of other activities; contributed to additional health and/or safety risks for the public or for emergency workers; and/or was not conducted in accordance with applicable plans, policies, procedures, regulations, and laws.
- Unable to be Performed (U): The targets and critical tasks associated with the healthcare preparedness capability were not performed in a manner that achieved the objective(s).

Table 1. Analysis of Healthcare Preparedness Capability Performance

EXECUTIVE SUMMARY

In December 2022, Memphis experienced freezing temperature resulting in low water pressure and a boil water advisory. Healthcare facilities across the city lost their ability to offer basic hygiene options and provide lifesaving procedures like dialysis. Water loss also affected hospitals' ability to maintain boilers and chillers to continue to operate buildings and internal equipment.

Although vendor delivery contracts such as water and linens were mostly available, several facilities had trouble finding immediate access due to the Christmas holidays. As a result, facilities requested deliveries of water, 2500 gallons at a time, to hold in their tanks and allow their booster pumps to supply water to the facility.

Using local Coalition partners including EMS, emergency management, hospitals, and public health, the Mid-South region secured appropriate resources for our facilities.

Water deliveries to local dialysis centers were coordinated through MSEPC and provided by Memphis Fire tankers, and eventually through mutual aid tankers in town from across the state. Because of the low water pressure within the City of Memphis, all water was provided by local municipalities.

MSEPC continued to work with impacted facilities and services delivery agencies throughout the response to ensure all needs were met. MSEPC utilized local resources, leveraged state resources, maintained local communication, and followed local procedures within the Emergency Operations Center to grow our Coalition's response capabilities.

The Mid-South Emergency Planning Coalition developed a series of questions from three basic categories: Incident Command, Resources, and External Partners. There were 35 participating entities. The individual responses to these questions should provide insight into the triumphs and struggles of each responding entity.

ACUTE CARE HOSPITALS

Baptist Women's and Children's

INCIDENT COMMAND

Did you need to activate your facility's incident command or emergency plan? **No**

How was your facility affected by weather and other events between 12/22/22 and 12/27/22?
Low water pressure

How was information disseminated throughout the organization to keep staff informed of the situation? **The Administration Team communicated to staff and key Directors and Managers via email and text. The Facility Director was heavily involved in facilitating the process to ensure that we have enough potable water on hand for patients and staff.**

How was information disseminated or otherwise communicated to your patients/clients to keep them informed? **The Administrative Team keep everyone informed throughout the entire process including the nursing staff that was taking care of our patients.**

Does your organization have a plan to specifically address potable and non-potable water? **Yes**

How did you use the plan to specifically address potable and non-potable water? **We followed our Water Plan and made sure we had 96 hours of sustainable potable water on hand. The water was distributed throughout the hospital by our facilities team.**

How will you use this event to develop a potable/non-potable water plan for your organization? **We have an existing Water Plan in place for our facility.**

Strengths: **We were ready and responded quickly to the event as it unfolded.**

Areas of Improvement: **Our Administration Team is working on a process to ensure that all employees are included in the Everbridge System to receive alerts and information in real time.**

RESOURCES

Did your organization have issues with resource procurement? **No**

How much potable water did your organization have on hand prior to 12/22/22 and in what form? **We had 96 hours on hand.**

Was your facility affected by the boil water advisory? **Yes**

What did your organization do to adhere to the boil water advisory? **Our Facility followed our Water Plan and distributed potable water throughout the facility by responding quickly to the needs of our patients and staff.**

Did your organization make any resource requests to an outside agency (MLGW, Shelby County EOC, Memphis OEM, MSEPC, etc)? **Yes**

Which agencies received your requests? **MLGW**

Strengths:

1. We identified that we must be more proactive during weather events as soon as possible.

Areas of Improvement:

1. Our facility identified that having more than 96 hours of potable water would be helpful in case the weather event last longer than what's anticipated.
2. The linen trucks didn't deliver any linen to the hospital therefore, we reserved our linen during that weather event.

EXTERNAL PARTNERS

How did your organization utilize external partners? **Our Facility Director stayed in constant communication with MLG&W to ensure we had the latest weather update possible.**

In what ways, if any, did you feel supported by local, state, or federal partners (both governmental and non-governmental)? **Our Facility never escalated up to that level of involvement to the local, state, or federal partners.**

Did your organization interact directly with the Mid-South Emergency Planning Coalition? **Yes**

Please describe your experience with the MSEPC. **The continuous updating on the HRTS System is helpful during weather events of this type.**

Strengths: **MLG&W was very helpful by updating everyone on the status of the water boil event situation.**

Areas of Improvement: **None**

Baptist Memorial Rehabilitation Hospital

INCIDENT COMMAND

Did you need to activate your facility's incident command or emergency plan? **No**

How was your facility affected by weather and other events between 12/22/22 and 12/27/22?
Loss of power and water leaks

How was information disseminated throughout the organization to keep staff informed of the situation? **Facility lost power and had a pipe break in the ductwork.**

How was information disseminated or otherwise communicated to your patients/clients to keep them informed? **Patients were informed of what was going on as well as a portion of the hallway being shut down.**

Does your organization have a plan to specifically address potable and non-potable water? **Yes**

How did you use the plan to specifically address potable and non-potable water? **We did not need to use potable water at the time.**

Strengths:

1. **Everyone worked together.**
2. **No one panicked.**

Areas of Improvement: **Maintenance was unable to locate the water line shut off for the HVAC.**

RESOURCES

Did your organization have issues with resource procurement? **No**

How much potable water did your organization have on hand prior to 12/22/22 and in what form? **30 cases of bottled water**

Was your facility affected by the boil water advisory? **No**

Did your organization make any resource requests to an outside agency (MLGW, Shelby County EOC, Memphis OEM, MSEPC, etc)? **No**

Strengths: **Everyone knew what to do, even with the power out, everyone was still able to complete their job without issues.**

Areas of Improvement: Facility was shown how to shut off water to the VAV boxes in case another pipe breaks.

EXTERNAL PARTNERS

How did your organization utilize external partners? Trane HVAC was called to shut off the broken water pipe.

Did your organization interact directly with the Mid-South Emergency Planning Coalition? No

Strengths: Trane did show up to fix the issue at hand and get other issues resolved.

Areas of Improvement: The vendor needs to be more punctual and timelier with emergencies.

Encompass Health Central

INCIDENT COMMAND

Did you need to activate your facility's incident command or emergency plan? **Yes**

When did you activate incident command or emergency plan? **12/24/22**

Which components of incident command were activated? **Incident Command, Safety, Financial**

How was your facility affected by weather and other events between 12/22/22 and 12/27/22?
Low water pressure, No trash services

How was information disseminated throughout the organization to keep staff informed of the situation? **We utilized email, phone, and person to person. Notices were also posted.**

How was information disseminated or otherwise communicated to your patients/clients to keep them informed? **Phone and person to person. Notices were also posted.**

Does your organization have a plan to specifically address potable and non-potable water? **Yes**
How did you use the plan to specifically address potable and non-potable water? **We had had bottled water and ice coolers with drinking water. We did have very minimal water pressure on the ground floor. We filled 5-gallon buckets and hauled them to toileting areas to use for flushing.**

How will you use this event to develop a potable/non-potable water plan for your organization?
Already in place

Strengths:

1. **Back up water supplies already in place.**
2. **Process to haul water already in place.**
3. **Staff available to distribute water until event concluded.**
4. **Did not allow the event to ruin Christmas!**

Areas of Improvement: **Train / educate additional staff in the event the Sr. Team is not available.**

RESOURCES

Did your organization have issues with resource procurement? **No**

How much potable water did your organization have on hand prior to 12/22/22 and in what form? **36 1-gallon jugs; 20 cases of 24 pack 16oz bottled water; 13 5-gallon bottles of Crystal drinking water.**

Was your facility affected by the boil water advisory? **Yes**

What did your organization do to adhere to the boil water advisory? [Provided all drinking water from bottled sources.](#)

Did your organization make any resource requests to an outside agency (MLGW, Shelby County EOC, Memphis OEM, MSEPC, etc)? [No](#)

Strengths: [We were ready to go!](#)

Areas of Improvement: [None currently](#)

EXTERANL PARTNERS

How did your organization utilize external partners? [Notified Home Office. No other organizations were needed.](#)

In what ways, if any, did you feel supported by local, state, or federal partners (both governmental and non-governmental)? [We were notified of coming event.](#)

In what ways, if any, did you feel unsupported by local, state, or federal partners (both governmental and non-governmental)? [We were not notified of water trucks coming to facilities. We have dialysis in our facility. We were able to decide but that could have helped us even with planning transfers had we known that was going to be utilized.](#)

Did your organization interact directly with the Mid-South Emergency Planning Coalition? [No](#)

Strengths: [Event communication.](#)

Areas of Improvement: [Plan of Action communication](#)

ADDITIONAL COMMENTS: [Overall, we were ready for the event and made plans ahead of time to accommodate for the potential water pressure loss. Knowing the plan of action could have been helpful from MSEPC but we were not in a serious emergency. We managed with no serious complications or damages.](#)

Le Bonheur Children's

INCIDENT COMMAND

Did you need to activate your facility's incident command or emergency plan? [Yes](#)

When did you activate incident command or emergency plan? [12/26/23](#)

Which components of incident command were activated? [Incident Command, Planning, Operations, Logistics](#)

How was your facility affected by weather and other events between 12/22/22 and 12/27/22? [Low water pressure](#)

How was information disseminated throughout the organization to keep staff informed of the situation? [Information to associates was disseminated via the Le Bonheur security app. Clinical Communications and needs were discussed during Daily Safety Briefings and the 3 Incident Command calls.](#)

How was information disseminated or otherwise communicated to your patients/clients to keep them informed? [Get Well added pop-up messages that were shown on the patient room monitors, which kept family informed.](#)

Does your organization have a plan to specifically address potable and non-potable water? [Yes](#)
How did you use the plan to specifically address potable and non-potable water? [Le Bonheur has an onsite potable water reserve that was accessed and moved to the Central Supply area.](#)

How will you use this event to develop a potable/non-potable water plan for your organization? [There is a plan in place. One thing that was done is a group was created in our mass notification system, so in the event of another event, we can quickly notify leadership of the issue. Also, we are going to look at storing sterile water either on-site or at the DDC warehouse.](#)

Strengths: [IC was set up quickly and efficiently. Communications was well among the team, as well as associates and patients.](#)

Areas of Improvement: [Some leaders were not effectively notified when the boil water advisory went into place. Some staff was not aware of the activities that were in place to support the issue at hand. Needs of the outpatient clinics, dialysis, and FedEx house into response plan.](#)

RESOURCES

Did your organization have issues with resource procurement? [No](#)

How much potable water did your organization have on hand prior to 12/22/22 and in what form? 26,208 bottles-DDC 599 5-gallon jugs-DDC

Was your facility affected by the boil water advisory? Yes

What did your organization do to adhere to the boil water advisory? The facility shut off use of ice machines and coffee pots. Portable Hand Wash stations were dispersed throughout the facility in case of need.

Did your organization make any resource requests to an outside agency (MLGW, Shelby County EOC, Memphis OEM, MSEPC, etc)? Yes

Which agencies received your requests? MLGW

Strengths: Good communication with MLGW. Outside vendor Xylem responded quickly to assist with water pressure.

Areas of Improvement: Confusion and unawareness about assets onsite. Transportation had to be provided to arrange pick-up and delivery of hand wash stations from the DDC. Sterile water needs to be stored at the DDC for future events, as it was a challenge of receiving deliveries due to weather/road conditions.

EXTERNAL PARTNERS

No applicable responses were submitted for this section.

ADDITIONAL COMMENTS: Overall the event went well. We worked with Corporate EM for certain resources and Xylem to assist with water pressure. Communication with both was adequate and timely. As with every event, we always learn something for the next event.

Methodist Germantown

INCIDENT COMMAND

Did you need to activate your facility's incident command or emergency plan? No

How was your facility affected by weather and other events between 12/22/22 and 12/27/22?
Physical damage to facility

How was information disseminated throughout the organization to keep staff informed of the situation? Amy Stanley (Director of Facilities and EM Liaison) notified leadership and Corporate EM via emails. She out at least one update daily, sometimes two.

How was information disseminated or otherwise communicated to your patients/clients to keep them informed? Information was disseminated to patients and families via verbal communication from staff or if the families called the hospital, it was via phone call.

RESOURCES

Did your organization have issues with resource procurement? No

How much potable water did your organization have on hand prior to 12/22/22 and in what form? 26,208 bottles-DDC, 599 5-gallon jugs-DDC

Was your facility affected by the boil water advisory? No

Did your organization make any resource requests to an outside agency (MLGW, Shelby County EOC, Memphis OEM, MSEPC, etc)? Yes

Which agencies received your requests? MLGW, Johnson Controls, River City Sprinkler

Strengths: JCI assisted with a mechanic on site for night shift (3 nights). Communication with MLGW was good.

Areas of Improvement: MLGW could not provide ETA's. River City Sprinkler could not provide adequate ETA's on fixing items.

EXTERNAL PARTNERS

No applicable responses were submitted for this section.

ADDITIONAL COMMENTS: Germantown experienced many other issues than water pressure issues. Germantown experienced power outages, frozen lines, coil leaks, popped sprinkler heads, pop off valves on the steam lines opening and dumping steam on a smoke detector, as well as filters that needed to be changed.

Methodist North

INCIDENT COMMAND

Did you need to activate your facility's incident command or emergency plan? **No**

How was your facility affected by weather and other events between 12/22/22 and 12/27/22?
Low water pressure, physical damage to facility

How was information disseminated throughout the organization to keep staff informed of the situation? **Information was provided to staff via verbal means or email.**

How was information disseminated or otherwise communicated to your patients/clients to keep them informed? **Patients inside the facility were communicated with verbally from staff. Information for visitors was provided if they called to check on their loved ones. Visitors were communicated with verbally inside the facility as well.**

Does your organization have a plan to specifically address potable and non-potable water? **Yes**

How did you use the plan to specifically address potable and non-potable water? **We store bottled water and water for hand wash stations at our DDC Warehouse on the Methodist South campus. We delivered 4 pallets of water to Methodist North throughout the event.**

How will you use this event to develop a potable/non-potable water plan for your organization? **One thing we learned during this event is that we need to keep sterile water at the DDC if we have another event like this due to lack of deliveries being made.**

RESOURCES

Did your organization have issues with resource procurement? **No**

How much potable water did your organization have on hand prior to 12/22/22 and in what form? **26,208 bottles/ 599 5-gallon jugs of water**

Was your facility affected by the boil water advisory? **Yes**

What did your organization do to adhere to the boil water advisory? **The facilities team shut off all ice makers, coffee pots and toilets were flushed with buckets of stored water.**

Did your organization make any resource requests to an outside agency (MLGW, Shelby County EOC, Memphis OEM, MSEPC, etc)? **No**

EXTERNAL PARTNERS

How did your organization utilize external partners? Local partners were readily available if needed.

In what ways, if any, did you feel supported by local, state, or federal partners (both governmental and non-governmental)? Local partners were willing to assist if needed. State was on alert as well for the event.

Did your organization interact directly with the Mid-South Emergency Planning Coalition? No

ADDITIONAL COMMENTS: Methodist North did not need any external resources. They needed bottled water, which was able to be supplied from the warehouse.

Methodist South

INCIDENT COMMAND

Did you need to activate your facility's incident command or emergency plan? **No**

How was your facility affected by weather and other events between 12/22/22 and 12/27/22?
Low water pressure, physical damage to facility

How was information disseminated throughout the organization to keep staff informed of the situation? **Information was provided to staff via verbal means or email.**

How was information disseminated or otherwise communicated to your patients/clients to keep them informed? **Information was verbalized from staff via phone or in person**

Does your organization have a plan to specifically address potable and non-potable water? **Yes**

How did you use the plan to specifically address potable and non-potable water? **Did not have to utilize plan**

RESOURCES

Did your organization have issues with resource procurement? **No**

How much potable water did your organization have on hand prior to 12/22/22 and in what form? **26,208 bottles/ 599 5-gallon jugs of water**

Was your facility affected by the boil water advisory? **Yes**

What did your organization do to adhere to the boil water advisory? **The facilities team shut off all ice makers, coffee pots and toilets were flushed with buckets of stored water.**

Did your organization make any resource requests to an outside agency (MLGW, Shelby County EOC, Memphis OEM, MSEPC, etc)? **Yes, MLGW**

Strengths: **Communication was good**

Areas of Improvement: **immediately told hospitals to call Shelby County EMA for any water needs**

EXTERNAL PARTNERS

No applicable responses were submitted for this section.

ADDITIONAL COMMENTS: Methodist North did not need any external resources. They needed bottled water, which was able to be supplied from the warehouse.

Methodist University

INCIDENT COMMAND

Did you need to activate your facility's incident command or emergency plan? **No**

How was your facility affected by weather and other events between 12/22/22 and 12/27/22?
Low water pressure, damage to facility

How was information disseminated throughout the organization to keep staff informed of the situation? **Information was disseminated via email, verbal, phone call or communications.**

How was information disseminated or otherwise communicated to your patients/clients to keep them informed? **Information was disseminated to patients/visitors verbally from the patient, healthcare worker or if family called, then it would be over the phone.**

Does your organization have a plan to specifically address potable and non-potable water? **Yes**

How did you use the plan to specifically address potable and non-potable water? **Our plan includes water being distributed from the DDC Warehouse at Methodist South**

How will you use this event to develop a potable/non-potable water plan for your organization? **We learned that beside potable/non-potable water, we need to keep sterile water on hand. Due to deliveries not being made, the facilities needed sterile water for certain procedures.**

RESOURCES

Did your organization have issues with resource procurement? **No**

How much potable water did your organization have on hand prior to 12/22/22 and in what form? **26,208 bottles/ 599 5-gallon jugs of water**

Was your facility affected by the boil water advisory? **Yes**

What did your organization do to adhere to the boil water advisory? **University did adhere to the boil water advisory. Ice machines were turned off, toilets were not flushed for a period. Bedside commodes were used in place of using the toilets, so toilets were not flushed. Coffee pots were not able to be used as well.**

Did your organization make any resource requests to an outside agency (MLGW, Shelby County EOC, Memphis OEM, MSEPC, etc)? **Yes**

Which agencies received your requests? **MSEPC, MLGW, Shelby County EMA**

Strengths:

1. We communicated with Heather Fortner requesting a tanker to assist with the water pressure issues.
2. MFD assisted with bringing a pumper to the hospital to assist with the pressure.

Areas of Improvement: MLGW communicating to call Shelby County EMA for assistance. This caused a bit of confusion.

EXTERNAL PARTNERS

How did your organization utilize external partners? We utilized the external partners through communication with our partners.

Did your organization interact directly with the Mid-South Emergency Planning Coalition? Yes
Please describe your experience with the MSEPC. Our experience with MSEPC was excellent.
We received great communication and assistance from Heather with obtaining a tanker from MFD.

Strengths: Our external partners did an excellent job of keeping us informed and checking on us.

Areas of Improvement: None currently

ADDITIONAL COMMENTS: Overall, the response to the event well. We have a great relationship with MSEPC and Memphis OEM, which aids into a successful event. This was not our first winter weather event, so we used past experiences to aid in our response.

Regional One Health

INCIDENT COMMAND

Did you need to activate your facility's incident command or emergency plan? **Yes**

When did you activate incident command or emergency plan? **12/22/22**

How was your facility affected by weather and other events between 12/22/22 and 12/27/22?
Low water pressure, closed facilities, Canceled procedures/services.

How was information disseminated throughout the organization to keep staff informed of the situation? **Information was disseminated through email and internal messaging systems.**

How was information disseminated or otherwise communicated to your patients/clients to keep them informed? **Word of mouth through nursing.**

Does your organization have a plan to specifically address potable and non-potable water? **Yes**

How did you use the plan to specifically address potable and non-potable water? **Our plan states we will reach out to current vendors when extreme winter weather is expected to see how much bottles water they can supply. Those orders were made, according to the plan. We realized during this event there is no written water distribution plan so that is a current project. Non-potable water (tankers) was requested through the coalition, which also follows the plan.**

How will you use this event to develop a potable/non-potable water plan for your organization? **This event made us think through how each department handles the purchasing and distribution of potable water. Each department involved has been sent an email requesting a bullet point breakdown of what their specific department does for distribution and purchasing. Once those replies are all received, one document will be completed so everyone can see what is expected of them and everyone else when this happens again.**

RESOURCES

Did your organization have issues with resource procurement? **No**

How much potable water did your organization have on hand prior to 12/22/22 and in what form? **One pallet of bottled water**

Was your facility affected by the boil water advisory? **Yes**

What did your organization do to adhere to the boil water advisory? **We provided bottled water for drinking and medications to staff and patients.**

Did your organization make any resource requests to an outside agency (MLGW, Shelby County EOC, Memphis OEM, MSEPC, etc)? **Yes**

Which Agencies received your requests? MSEPC

Strengths: Even though we did not officially activate incident command, all players were involved with emails and phone calls to purchase and distribute bottled water. Facilities and Safety were also involved with the requests for non-potable water because of the water pressure issues.

Areas of Improvement: We probably should have officially activated incident command. It would have been helpful with communication to staff.

EXTERNAL PARTNERS

How did your organization utilize external partners? We used MSEPC for non-potable water requests. We used vendors for purchasing bottled water.

In what ways, if any, did you feel supported by local, state, or federal partners (both governmental and non-governmental)? The Memphis Office of Emergency Management is always helpful. The state and federal partners were not needed for this event.

Did your organization interact directly with the Mid-South Emergency Planning Coalition? Yes

Please describe your experience with the MSEPC. We interact with MSEPC at least weekly, if not more often. For this event, we requested a tanker for the water pressure issues. We did not need bottled water this time as we were able to procure it ourselves.

St. Francis Bartlett

INCIDENT COMMAND

Did you need to activate your facility's incident command or emergency plan? **No**

How was your facility affected by weather and other events between 12/22/2022 and 12/27/2022? **Physical damage to facility**

How was information disseminated throughout the organization to keep staff informed of the situation? **Everbridge updates and email**

How was information disseminated or otherwise communicated to your patients/clients to keep them informed? **Direct phone calls and email if applicable**

Strengths

1. **Presence**
2. **Leadership**
3. **Communication**

Areas of Improvement

1. **Supplies on hand accessibility.**
2. **Contractor/vendor communication.**

RESOURCES

Did your organization have issues with resources procurement? **No**

How much potable water did your organization have on hand prior to 12/22/2022? And in what form? **3000 cases**

Strengths: **Availability**

Areas of Improvement: **Linen needs**

EXTERNAL PARTNERS

In what ways, if any, did you feel supported by local, state, or federal partners (both governmental and non-governmental)? **Communication with HCC and RHCC**

Did your organization interact with the Mid-South Emergency Planning Coalition? **Yes**

Please describe your experience with the MSEPC. **I sit on the Executive Board and our organization has a great relationship with the MSEPC leadership.**

St. Francis Memphis

INCIDENT COMMAND

Did you need to activate your facility's incident command or emergency plan? **Yes**

When did you activate incident command or emergency plan? **12/24/22**

Which components of incident command were activated? **Administrative, plant operations, ER, EVS, FNS**

How was your facility affected by weather and other events between 12/22/22 and 12/27/22?
Low water pressure

How was information disseminated throughout the organization to keep staff informed of the situation? **Email, Everbridge, overhead paging**

How was information disseminated or otherwise communicated to your patients/clients to keep them informed? **Minimal impact to patient care**

Does your organization have a plan to specifically address potable and non-potable water? **Yes**

How did you use the plan to specifically address potable and non-potable water? **Potable water was managed through bottles and FNS, non-potable through Memphis Fire and 3 tanker trucks.**

How will you use this event to develop a potable/non-potable water plan for your organization?
We will adjust our water on hand and ensure we have a quickly executable plan to bring in resources when required.

Strengths: **Communication and execution**

Areas of Improvement: **Resources on hand - holiday weekend**

RESOURCES

Did your organization have issues with resource procurement? **No**

How much potable water did your organization have on hand prior to 12/22/22 and in what form? **4 pallets**

Was your facility affected by the boil water advisory? **Yes**

What did your organization do to adhere to the boil water advisory? **Communicated not to use ice/water machines, distributed bottled water to all areas of the facility.**

Did your organization make any resource requests to an outside agency (MLGW, Shelby County EOC, Memphis OEM, MSEPC, etc)? **Yes**

Which agencies received your requests? MSEPC, Sun Coast Tankers

Strengths: Able to quickly procure potable and non-potable resources

Areas of Improvement: Go-live execution of water tie ins.

EXTERNAL PARTNERS

How did your organization utilize external partners? Utilized the coalition for potable water and other vendors to assist with maintaining building pressure.

In what ways, if any, did you feel supported by local, state, or federal partners (both governmental and non-governmental)? Coalition was responsive, as was Memphis fire.

In what ways, if any, did you feel unsupported by local, state, or federal partners (both governmental and non-governmental)? State should have had contingency plan to bring non-private tankers into city for assistance.

Did your organization interact directly with the Mid-South Emergency Planning Coalition? Yes

Please describe your experience with the MSEPC. Great

Strengths: Had quick responses from required vendors

Areas of Improvement: Go-live execution of tie-ins.

Memphis VA Medical Center

INCIDENT COMMAND

Did you need to activate your facility's incident command or emergency plan? **Yes**

When did you activate incident command or emergency plan? **12/24/2022**

Which components of incident command were activated? **None/ EOP Activated**

How was your facility affected by weather and other events between 12/22/22 and 12/27/22?

- **Low Water Pressure**
- **Canceled procedures/services.**
- **Boil water advisory**

How was information disseminated throughout the organization to keep staff informed of the situation? **Information was sent/shared via email notification, facility bulletin, and the VA Emergency Alerting and Accountability System (EAAS); as well as updates sent during morning report each day at 0815. Information was broken down into two types, general and stakeholder. All general info was sent facility wide and made assessable to all staff and contractors; stakeholder info was only distributed among key services that was severely impacted by the water issue, as well as stakeholders reasonable for water monitoring and coordination.**

How was information disseminated or otherwise communicated to your patients/clients to keep them informed? **Information was communicated to patients both verbally and in writing. Those individual responsible care providers continued to reiterate to patients about the water being unsafe to drink and/or be used for hygiene. Signs was posted in all patient's rooms above sinks and above all water fountains on the floors indicating the water is unsafe and is not to be used.**

Does your organization have a plan to specifically address potable and non-potable water? **Yes**

How did you use the plan to specifically address potable and non-potable water? **The plan was used to ensure all inpatient and critical care areas remain uninterrupted; as well as used to aid in the decision making of which services/procedures would be closed, cancelled, and/or postponed. This plan also provided oversight and direction on how water was dispersed.**

How will you use this event to develop a potable/non-potable water plan for your organization? **This event is/will be used in several ways to aid us in becoming better prepared in the future. Once such way is by adding to the data collection of establishing timelines and triggers such as event month, time of year, and areas impacted. This data collection also includes the identification of pre-event info to be used to create a 72-48-24hr preparation plan. Another way is by providing reinforcement the need for an onsite water storage. The idea has been in talks for several years and this event will be used to validate the need for such a resource.**

Strengths:

1. **Facility's capability and response procedures to satisfy water requirements as soon as the issue was identified.**

2. Water conservation procedures

Areas of Improvement:

1. Process of contingency water resources during emergency response indicated in the EOP.
2. Process for distribution of potable water in an emergency – facility should create a more formal process that would ensure the how much is distributed and how often, to aid in ensuring supply doesn't deplete too quickly.

RESOURCES

Did your organization have issues with resource procurement? No

How much potable water did your organization have on hand prior to 12/22/22 and in what form? 0 prior to 12/22/2022, after (2058G)

Was your facility affected by the boil water advisory? Yes

What did your organization do to adhere to the boil water advisory? We immediately began placing signs above all water fountains, sinks, and ice machines that read “do not use” and “not safe for drinking” and “not for human consumption”. Then water was cut off to identified locations throughout the facility. Bottles of water was obtained from outside venders to ensure that the facility had an adequate amount of potable water to ensure that inpatient and critical areas were uninterrupted.

Did your organization make any resource requests to an outside agency (MLGW, Shelby County EOC, Memphis OEM, MSEPC, etc)? No

Strengths: How the facility was the ability to provide alternative means of water needed for consumption and essential care activities. The facility was able to procure 2058 gallons of bottled (in assorted sizes) water within a span of three (3) hours; 401 gallons was able to arrive within one hour, and the remaining arrived shortly after. This allowed the facility to continue without interruption to patient care until stakeholders could implement the facility emergency response plan.

Areas of Improvement: Need for an onsite resource to serve as an initial potable water source, capable of sustainment of 72-96hrs. This would ensure the capability to sustain inpatient and critical care areas are uninterrupted; as well as provide a safeguard till additional resources are able to be procured and/or obtained.

EXTERNAL PARTNERS

How did your organization utilize external partners? While we did not seek assistance from local/state resources, we did however, utilize several external resources to procure sources of potable water. My facility contacted five (5) local venders to coordinate the delivery of potable water to the facility; these venders included prairie Farms, Green Life Water, Home Depot, Restaurant Depot, and other local food and grocery locations.

In what ways, if any, did you feel supported by local, state, or federal partners (both governmental and non-governmental)? We felt supported by knowing that should our facility need to reach out to local, state, or federal partners for assistance, that the support and resources would be available if requested and/or needed.

In what ways, if any, did you feel unsupported by local, state, or federal partners (both governmental and non-governmental)? While we do not feel unsupported, being a federal entity, we are restricted on what and how we can request and/or obtain local/state resources and support.

Did your organization interact directly with the Mid-South Emergency Planning Coalition? No

Strengths: Swiftiness of the local vendors; given the timing of the event, it was noted that it could pose an issue with reaching out and contacting a vendor.

Areas of Improvement: None at this time, as we are a federal entity; and restricted on what and how we can request and/or obtain local/state resources and support.

PSYCHIATRIC HOSPITALS

Delta Specialty Hospital

INCIDENT COMMAND

Did you need to activate your facility's incident command or emergency plan? **No**

How was your facility affected by weather and other events between 12/22/22 and 12/27/22?
Low water pressure, boiled water advisory

How was information disseminated throughout the organization to keep staff informed of the situation? **When we received the information via e-mail from our MLGW rep, we communicated throughout the hospital what steps were needed to address the low water pressure and the boiled water advisory.**

How was information disseminated or otherwise communicated to your patients/clients to keep them informed? **It was communicated to the Nursing managers for the different mental health units.**

Does your organization have a plan to specifically address potable and non-potable water? **Yes**
How did you use the plan to specifically address potable and non-potable water? **We had an inventory of potable water on hand. Per the advisory only bathing was used with non-potable water. Drinking and tooth brushing activities were used with potable water.**

How will you use this event to develop a potable/non-potable water plan for your organization?
We re-stock our potable water after every event.

RESOURCES

Did your organization have issues with resource procurement? **No**

How much potable water did your organization have on hand prior to 12/22/22 and in what form? **300 gallons, in large and small bottle form.**

Was your facility affected by the boil water advisory? **Yes**

What did your organization do to adhere to the boil water advisory? **Ice machines were turned off, emptied, and sanitized. Potable water was used for drinking and tooth brushing.**

Did your organization make any resource requests to an outside agency (MLGW, Shelby County EOC, Memphis OEM, MSEPC, etc)? **No**

Strengths:

1. **Communication.**

2. Potable water inventory.

Areas of Improvement:

1. Need for quicker communication from our MLGW rep to our Plant ops team during potential water issues.

DIALYSIS CENTERS

DaVita Galleria Home Training

INCIDENT COMMAND

Did you need to activate your facility's incident command or emergency plan? **No**

How was your facility affected by weather and other events between 12/22/22 and 12/27/22?
Closed facilities.

How was information disseminated throughout the organization to keep staff informed of the situation? **Left message on clinic voice mail. All teammate called and spoke to or left messages. signs put on clinic doors noting clinic closed due to weather.**

How was information disseminated or otherwise communicated to your patients/clients to keep them informed? **Same as for teams- all patients called. Answering service message change. Signs on doors and the DaVita Care connect app updated. Made sure to tell patient to call before coming to clinic, make sure they have Continuous Ambulatory Peritoneal Dialysis supplies and how to do disaster diet if no dialysis and potassium and fluid restrictions.**

Does your organization have a plan to specifically address potable and non-potable water? **Yes**

How did you use the plan to specifically address potable and non-potable water? **Call our disaster team to set up potable water.**

How will you use this event to develop a potable/non-potable water plan for your organization? **Already set up and will use this disaster to remind patients to have plenty of bagged dialysate at home to use for 1-2 weeks and how to clean exit site with boiled or distilled water.**

Strengths: Patients have all required backup supplies due to frequent disaster training. Newer patients will need more frequent training and retraining.

Areas of Improvement: Review fluid balance more often in case patients run out of a certain type of bags needed.

RESOURCES

Did your organization have issues with resource procurement? **No**

How much potable water did your organization have on hand prior to 12/22/22 and in what form? **None**

Was your facility affected by the boil water advisory? **No**

Did your organization make any resource requests to an outside agency (MLGW, Shelby County EOC, Memphis OEM, MSEPC, etc)? **No**

Strengths: Patient able to dialyze at home and many have all the backup bagged water they need for treatments, or their area was not affected.

Areas of Improvement: Review how to contact MLG&W by patients to see if they are in the affected area.

EXTERNAL PARTNERS

How did your organization utilize external partners? We did not need to use external partners.

Strengths: Would interact with business that supply dialysate which some are local, and we would be under their issues with any disaster.

Areas of Improvement: More review on use of proper water for cooking and cleaning

ADDITIONAL COMMENTS: Home patients are in a better situation with most disasters for a few days to a week due to their home supply and training.

Fresenius Kidney Care Memphis Midtown

INCIDENT COMMAND

Did you need to activate your facility's incident command or emergency plan? [Yes](#)

When did you activate incident command or emergency plan? [12/25/22](#)

Which components of incident command were activated? [Water tanker trucks](#)

How was your facility affected by weather and other events between 12/22/22 and 12/27/22? [No water pressure](#)

How was information disseminated throughout the organization to keep staff informed of the situation? [Since it was Christmas day, we sent our biomed teams out in to the field to check the status of facilities. Upon completion of this review for Memphis Midtown, the biomed notified our Area Technical Operations Manager via phone who then notified me, the Director of Operations. I notified Heather Fortner with MidSouth Emergency Planning Coalition so that we could discuss plans for water tanker truck refills as well at large 3000 water tanks needed in other facilities.](#)

How was information disseminated or otherwise communicated to your patients/clients to keep them informed? [In this specific clinic, we were able to get water available in the clinic while the clinic was closed therefore not impacting their ability to be treated.](#)

Does your organization have a plan to specifically address potable and non-potable water? [Yes](#)

How did you use the plan to specifically address potable and non-potable water? [Water tanker was brought in to this location with a second tanker truck that would refill at night as needed. Also, we obtained bottled water from our sister clinics in Jackson, MS and distributed it to patients and staff as needed.](#)

How will you use this event to develop a potable/non-potable water plan for your organization? [This plan worked very well. Having bottled water readily available locally would have made this a faster response.](#)

Strengths: [Quickly were able to get water to the facility and work with our local officials for assistance in refills as needed. Avoided closing this clinic and were able to run patients as needed.](#)

Areas of Improvement: [Needed drinking water faster than readily available.](#)

RESOURCES

Did your organization have issues with resource procurement? [Yes. We were quickly able to get water tankers and large 3000 gallon water tanks however getting those refilled is a challenge. luckily, we have partnered with our local coalition who has been able to help us periodically until we can get additional resources.](#)

How much potable water did your organization have on hand prior to 12/22/22 and in what form? [a case or two of bottled water per facility](#)

Was your facility affected by the boil water advisory? [Yes](#)

What did your organization do to adhere to the boil water advisory? [We provided bottled water to our staff and patients and then used a tanker truck to get fresh water that was refilled from another community not impacted. In addition, in a dialysis clinic, we purify our water prior to use with dialysis process.](#)

Did your organization make any resource requests to an outside agency (MLGW, Shelby County EOC, Memphis OEM, MSEPC, etc)? [Yes](#)

Which agencies received your requests? [MSEPC](#)

Strengths: [noted above. Very helpful in helping us to get water to refill tanks, etc](#)

Areas of Improvement: [None](#)

EXTERNAL PARTNERS

How did your organization utilize external partners? [called Heather Fortner and she was able to guide me from there and assist with needed resources.](#)

In what ways, if any, did you feel supported by local, state, or federal partners (both governmental and non-governmental)? [Felt VERY supported by MSEPC. Unfortunately, we have been through this a couple of times and learned from our previous experience making this one much smoother for all.](#)

Did your organization interact directly with the Mid-South Emergency Planning Coalition? [No](#)

Please describe your experience with the MSEPC. [FANTASTIC! Heather is wonderful and very responsive!!! Doesn't get any better than the teamwork that we have developed with MSEPC! So very thankful for her help!](#)

Strengths: [Timeliness of getting the job done](#)

Areas of Improvement: [None](#)

Fresenius Kidney Care Mt. Moriah

INCIDENT COMMAND

Did you need to activate your facility's incident command or emergency plan? **No**

How was your facility affected by weather and other events between 12/22/22 and 12/27/22?
Canceled procedures/services

How was information disseminated throughout the organization to keep staff informed of the situation? **Cell phone**

How was information disseminated or otherwise communicated to your patients/clients to keep them informed? **Called patients**

Does your organization have a plan to specifically address potable and non-potable water? **Yes**

How did you use the plan to specifically address potable and non-potable water? **Not needed**

Strengths: **Group came together to organize the day**

Areas of Improvement: **Staff to pre-plan for event (staying in hotel near facility)**

RESOURCES

Did your organization have issues with resource procurement? **No**

How much potable water did your organization have on hand prior to 12/22/22 and in what form? **None**

Was your facility affected by the boil water advisory? **Yes**

Did your organization make any resource requests to an outside agency (MLGW, Shelby County EOC, Memphis OEM, MSEPC, etc)? **No**

Strengths: **We had bottles of water in facility to give staff and patients if needed**

Areas of Improvement: **We did not have enough water for everyone.**

EXTERNAL PARTNERS

No applicable responses were submitted for this section.

Fresenius Kidney Care Whitehaven

INCIDENT COMMAND

Did you need to activate your facility's incident command or emergency plan? **Yes**

When did you activate incident command or emergency plan? **12/26/22**

Which components of incident command were activated? **Notified Director of Operations and awaited Biomed and other departments to get water holders to facility and water delivered to clinic for treatments along with notifying patients and staff of delay of start.**

How was your facility affected by weather and other events between 12/22/22 and 12/27/22?
Low water pressure

How was information disseminated throughout the organization to keep staff informed of the situation? **Clinic manager notified team members by phone calls and text. DO and Biomed notified management of plans for water to be delivered to the clinic, biomed and management were in the facility. Biomed was with outside contractors to make a way for the hoses to be connected from the outside tank to get in the building. CM was making calls and answering phone lines to notify patients and transportation of new treatment times.**

How was information disseminated or otherwise communicated to your patients/clients to keep them informed? **CM and secretary called patients individually of pertinent information regarding the late start and offer treatments.**

Does your organization have a plan to specifically address potable and non-potable water? **Yes**

How did you use the plan to specifically address potable and non-potable water? **MFD delivered water to the holding tanks and Water buffalos were in route for the following day to deliver water.**

How will you use this event to develop a potable/non-potable water plan for your organization? **We had already purchased the holding tanks from a previous water issue. It was just a matter of getting the tanks delivered and then getting the building ready for the hoses to go through the doors to allow for water flow.**

Incident Command Strengths and Areas of Improvement

Strengths:

1. Communication was on point each step of the way.
2. RVP brought cases of water to the clinic so that patients could take prescribed medication doses.
3. Director of operations and Biomed were available for any questions and or concerns.
4. The team came to work around 2pm, we were able to deliver 19 treatments that day and rescheduled the others the following day. Only 2 patients went to the ED for treatment.

Areas of Improvement:

1. Transportation refused to bring patients that were stretcher bound at such a late time. We were able to reschedule some of these treatments the following day.
2. Wish we had a centralized text message or voicemail to deliver messages to the patients at one time like they do in the school system when there are immediate changes.

RESOURCES

Did your organization have issues with resource procurement? **No**

How much potable water did your organization have on hand prior to 12/22/22 and in what form? **5 cases of water**

Was your facility affected by the boil water advisory? **Yes**

What did your organization do to adhere to the boil water advisory? **We used bottled water until the boil was lifted.**

Did your organization make any resource requests to an outside agency (MLGW, Shelby County EOC, Memphis OEM, MSEPC, etc)? **Yes**

Which agencies received your requests? **MSEPC**

Strengths: **Due to most of the entire city requiring assistance, there was limited availability by the group.**

Areas of Improvement: **None**

EXTERNAL PARTNERS

How did your organization utilize external partners? **A to Z came to drill holes into the doors for the hoses to deliver water to the facility**

Did your organization interact directly with the Mid-South Emergency Planning Coalition? **No**

Strengths: **Timeliness of getting the job done**

Areas of Improvement: **None**

SKILLED NURSING/ASSISTED LIVING FACILITIES

Kirby Pines Manor and Fireside Villa

INCIDENT COMMAND

Did you need to activate your facility's incident command or emergency plan? *Yes*

When did you activate incident command or emergency plan? *12/23/22*

Which components of incident command were activated? *Food supply and sheltering in place protocol.*

How was your facility affected by weather and other events between 12/22/22 and 12/27/22? *Low water pressure, canceled procedures/services, and physical damage to facility.*

How was information disseminated throughout the organization to keep staff informed of the situation? *Text messages were sent out to staff and family members. Staff was given permission to use their personal cell phones to communicate with, and we also used walkie talkie to communicate internally.*

How was information disseminated or otherwise communicated to your patients/clients to keep them informed? *Both residents and family members were communicated with via text messaging, in person and per cell phones.*

Does your organization have a plan to specifically address potable and non-potable water? *Yes*

How did you use the plan to specifically address potable and non-potable water? *After we did our research, we had more resources than we had initially thought about. Going forward if the occasion should occur again, we have documented the additional resources.*

How will you use this event to develop a potable/non-potable water plan for your organization? *After analyzing the event, the Director of Maintenance will work on updating our potable/non-potable plan. We also have increased our par level of bottled water and disposable wipes.*

Strengths:

- 1. We have a swimming pool on site.*
- 2. We have two lakes on site and a fountain that we could obtain a water source from.*
- 3. We had available sleeping space for staff that needed to spend the night.*
- 4. Food was provided to the staff at no charge. We had a supply of extra blankets available for usage.*
- 5. We had areas that due to the power being out the area was cold; however, we had space to move the residents to that was heated.*
- 6. We were also able to provide transportation for staff that could not drive to work.*

Areas of Improvement:

- 1. Increase communication to families regarding daily progress.*
- 2. Locate additional storage in the facility to store the increase in water supply.*

RESOURCES

Did your organization have issues with resource procurement? **No**

How much potable water did your organization have on hand prior to 12/22/22 and in what form? **Enough for 3-day supply**

Was your facility affected by the boil water advisory? **Yes**

What did your organization do to adhere to the boil water advisory? **Purchased additional single and gallons container of water and purchased many adult wipes to assist in bathing.**

Did your organization make any resource requests to an outside agency (MLGW, Shelby County EOC, Memphis OEM, MSEPC, etc)? **No**

Strengths: **The representative assigned to our facility from MLGW contacted the facility frequently with updated and that was helpful. We had local churches willing to bring bottled water to the facility.**

Areas of Improvement: **We need to have additional par levels available. Since we are a CCRC we had a need in independent living, assisted living and the nursing home.**

EXTERNAL PARTNERS

How did your organization utilize external partners? **We communicated on an ongoing basis with MLG and Water. One of our food vendors delivered extra water to us. We contacted other long term care facilities in case we had to move any of our residents.**

In what ways, if any, did you feel unsupported by local, state, or federal partners (both governmental and non-governmental)? **Locally we did feel supported. Not much support from the state or federal partners.**

Did your organization interact directly with the Mid-South Emergency Planning Coalition? **No**

Strengths:

1. **The representative from MLG and Water Division gave frequent updates and suggestions for some of our needs.**

Areas of Improvement:

1. **Better communication between the various facilities supporting the elderly population to identify available resources.**
2. **We need to know what resources are available to us from the state and federal level during an emergency with contact names and numbers.**
3. **A list of potential resources available if your staff is unable to report to work due to the weather situation.**

ADDITIONAL COMMENTS: I think it would be useful if we would have an educational session on emergency preparedness on what resources are available from the state and federal level to the healthcare.

Trezevant Episcopal Home

INCIDENT COMMAND

Did you need to activate your facility's incident command or emergency plan? [Yes](#)

When did you activate incident command or emergency plan? [12/22/22](#)

Which components of incident command were activated? [Incident Commander, Staging Manager, Dining Team](#)

How was your facility affected by weather and other events between 12/22/22 and 12/27/22? [Low water pressure, staff shortages, change in menus due to boil water, bed baths instead of showers, shift to disposable trays for dining.](#)

How was information disseminated throughout the organization to keep staff informed of the situation? [email to all staff, posted at the time clock, and daily rounds and huddles?](#)

How was information disseminated or otherwise communicated to your patients/clients to keep them informed? [email to all residents and families, manager on duty to inform residents of updates?](#)

Does your organization have a plan to specifically address potable and non-potable water? [Yes](#)

How did you use the plan to specifically address potable and non-potable water? [We have potable water stored; non potable water was obtained from the retention pond for flushing of toilets.](#)

How will you use this event to develop a potable/non-potable water plan for your organization? [Evaluate the use of stored water and is there a more efficient way than relying on gallons of water that are stored but difficult to keep current and storage is difficult.](#)

Strengths:

- [1. Staff slept at Trezevant to ensure adequate and appropriate staff were available to meet resident needs.](#)
- [2. Staff implemented the plan without hesitation.](#)
- [3. Extra blankets were made available, and all units were equipped with flashlights and battery-operated lanterns with a battery life of 260 hours.](#)

Areas of Improvement:

- [1. Security needs to identify key person as primary contact during off hours.](#)
- [2. Locate air mattresses and sleeping supplies in each building so they are more convenient to locate.](#)
- [3. Inventory the emergency kits to ensure supplies such as flashlights and batteries are available.](#)

RESOURCES

Did your organization have issues with resource procurement? **No**

How much potable water did your organization have on hand prior to 12/22/22 and in what form? **500 gallons in 1 gallon plastic bottles**

Was your facility affected by the boil water advisory? **Yes**

What did your organization do to adhere to the boil water advisory? **Distributed bottled drinking water, boiled water for use in cooking and bathing, boiled water and put into ice cube trays to freeze for ice.**

Did your organization make any resource requests to an outside agency (MLGW, Shelby County EOC, Memphis OEM, MSEPC, etc)? **No**

Strengths: **Plenty of bottled water for the residents and staff**

Areas of Improvement: **Better system of storing bottled water so we don't have to have so many 1-gallon jugs.**

EXTERNAL PARTNERS

How did your organization utilize external partners? **Contacted food vendor (US Foods) to supply additional bottled water.**

In what ways, if any, did you feel unsupported by local, state, or federal partners (both governmental and non-governmental)? **The organization has 3 locations in which power comes into the campus. When part of the building has power and part doesn't MLGW cannot understand why they show we have power, but we do not.**

Did your organization interact directly with the Mid-South Emergency Planning Coalition? **No**

HOME HEALTH/HOSPICE

Baptist Reynolds Hospice House

INCIDENT COMMAND

Did you need to activate your facility's incident command or emergency plan? **Yes**

When did you activate incident command or emergency plan? **12/22/23**

Which components of incident command were activated? **Winter weather**

How was your facility affected by weather and other events between 12/22/22 and 12/27/22? **Not affected**

How was information disseminated throughout the organization to keep staff informed of the situation? **Staff call tree.**

How was information disseminated or otherwise communicated to your patients/clients to keep them informed? **All patients are in facility. Information disseminated throughout daily care.**

Does your organization have a plan to specifically address potable and non-potable water? **Yes**

How will you use this event to develop a potable/non-potable water plan for your organization? **Plan already in place.**

Strengths:

1. **Staff notified via call tree.**
2. **Some staff stayed in empty rooms to allow for enough clinical personnel if other staff not able to arrive on time.**
3. **Meals for one day cooked ahead to warmed so that all patients would have meals.**

Areas of Improvement: **Not all new staff were aware of call tree procedures. Re-education needed.**

RESOURCES

Did your organization have issues with resource procurement? **No**

How much potable water did your organization have on hand prior to 12/22/22 and in what form? **72 1-gallon jugs**

Was your facility affected by the boil water advisory? **No**

Did your organization make any resource requests to an outside agency (MLGW, Shelby County EOC, Memphis OEM, MSEPC, etc)? **No**

EXTERNAL PARTNERS

No applicable responses were submitted for this section.

Baptist Trinity Hospice Home

INCIDENT COMMAND

Did you need to activate your facility's incident command or emergency plan? **Yes**

When did you activate incident command or emergency plan? **12/22/22**

Which components of incident command were activated? **Call tree, vendor verification of supplies, ambulance service prepared.**

How was your facility affected by weather and other events between 12/22/22 and 12/27/22? **Closed facilities, canceled procedures/services.**

How was information disseminated throughout the organization to keep staff informed of the situation? **Through the call tree**

How was information disseminated or otherwise communicated to your patients/clients to keep them informed? **Each nurse and aide called the patients that were scheduled and visited via phone call. The nurses also called their high priority patients and checked in with them. The MSW called the ambulance services to check their availability, checked with the hospice house, and checked with DME companies.**

Does your organization have a plan to specifically address potable and non-potable water? **No**

How will you use this event to develop a potable/non-potable water plan for your organization? **It is not necessary to develop a plan due to our facility being a home program and not an in-facility organization.**

Strengths: Call tree was up to date, and everyone responded quickly. All concerns were addressed by administration and handled without having to send anyone to the hospital for care. We had one nurse available to make visits despite weather conditions.

Areas of Improvement: We need to save a list of high priority patients on administration's laptops and not just at the office in a binder to allow quicker access to the patients that need assistance.

RESOURCES

Did your organization have issues with resource procurement? **No**

How much potable water did your organization have on hand prior to 12/22/22 and in what form? **None**

Was your facility affected by the boil water advisory? **No**

Did your organization make any resource requests to an outside agency (MLGW, Shelby County EOC, Memphis OEM, MSEPC, etc)? Yes, DME for portable oxygen.

Strengths:

1. All DME companies had available equipment readily available.
2. All ambulance services were on standby and had units available if needed.

Areas of Improvement: Verify ahead of time that all high priority patients have extra oxygen tanks available.

EXTERNAL PARTNERS

How did your organization utilize external partners? We did not need to utilize any external partners. We did verify that our DME companies had available resources.

In what ways, if any, did you feel supported by local, state, or federal partners (both governmental and non-governmental)?

In what ways, if any, did you feel unsupported by local, state, or federal partners (both governmental and non-governmental)?

Did your organization interact directly with the Mid-South Emergency Planning Coalition? No

Strengths: DME companies were prepared and had extra equipment on hand.

Areas of Improvement: DME companies did not have drivers available to provide equipment if needed.

Meritan, Inc

INCIDENT COMMAND

Did you need to activate your facility's incident command or emergency plan? **Yes**

When did you activate incident command or emergency plan? **12/21/22**

Which components of incident command were activated? **All staff notification for preparedness, remote office work with water issues, checking on patients/staff.**

How was your facility affected by weather and other events between 12/22/22 and 12/27/22? **Low water pressure, Closed facilities.**

How was information disseminated throughout the organization to keep staff informed of the situation? **Via all user's email list as well as direct phone call/activation of call tree**

How was information disseminated or otherwise communicated to your patients/clients to keep them informed? **Direct phone calls**

Does your organization have a plan to specifically address potable and non-potable water? **Yes**

How did you use the plan to specifically address potable and non-potable water? **We have an emergency water supply located in the facility/office. Notified staff of availability of water if needed. Closed facility/office due to water issues related to water pressure/toilets.**

How will you use this event to develop a potable/non-potable water plan for your organization? **Maintain current emergency water supply.**

Strengths: **Communication via email and phone**

Areas of Improvement: **Ensure call trees are updated.**

RESOURCES

Did your organization have issues with resource procurement? **No**

How much potable water did your organization have on hand prior to 12/22/22 and in what form? **Uncertain- multiple cases**

Was your facility affected by the boil water advisory? **Yes**

What did your organization do to adhere to the boil water advisory? **N/A- offices closed for most of this time, do not use water in direct services from office, staff had access to bottled water if they were in the office.**

Did your organization make any resource requests to an outside agency (MLGW, Shelby County EOC, Memphis OEM, MSEPC, etc)? **No**

Strengths: **Easily accessible bottled water**

Areas of Improvement: Communication regarding who is on vacation vs should be in the office-useful tool in our HR system but some did not know where to find it.

EXTERNAL PARTNERS

No applicable responses were submitted for this section.

AMBULATORY SURGERY CENTERS

Campbell Clinic Surgery Center Germantown

INCIDENT COMMAND

Did you need to activate your facility's incident command or emergency plan? **No**

How was your facility affected by weather and other events between 12/22/22 and 12/27/22? **No issues noted.**

How was information disseminated throughout the organization to keep staff informed of the situation? **Although we were off for the Christmas holidays, I keep in contact with our maintenance person to make sure that we had no water supply issues or power outages. We were able to resume normal operations on the next working day.**

How was information disseminated or otherwise communicated to your patients/clients to keep them informed? **None needed.**

Does your organization have a plan to specifically address potable and non-potable water? **Yes**

How did you use the plan to specifically address potable and non-potable water? **We do not need to secure any water during this event. We did have several cases of bottled water on site.**

How will you use this event to develop a potable/non-potable water plan for your organization? **Not sure. As we are a no emergent facility, we would stop surgery until water is available. Our bottled water could be donated to our employee's that are affected by the event if needed.**

Strengths: **Good communications between maintenance and MLG&W to keep the center updated regarding possible issues.**

Areas of Improvement: **As this has occurred two years in a row, we possibly need to look at getting a source of potable water in the event of an extended outage that would require our facility to be used as an emergency facility.**

RESOURCES

Did your organization have issues with resource procurement? **No**

How much potable water did your organization have on hand prior to 12/22/22 and in what form? **10-15 cases of bottled water**

Was your facility affected by the boil water advisory? **No**

Did your organization make any resource requests to an outside agency (MLGW, Shelby County EOC, Memphis OEM, MSEPC, etc)? **No**

Strengths: **Good communication structure**

Areas of Improvement: **Larger source of potable water**

EXTERNAL PARTNERS

How did your organization utilize external partners? **We did not have to do this.**

In what ways, if any, did you feel supported by local, state, or federal partners (both governmental and non-governmental)? *I feel that we would have had good support if it had been needed.*

Did your organization interact directly with the Mid-South Emergency Planning Coalition? *No*

Memphis Surgery Center

INCIDENT COMMAND

Did you need to activate your facility's incident command or emergency plan? **No**

How was your facility affected by weather and other events between 12/22/22 and 12/27/22?
Closed facility, canceled procedures/services.

How was information disseminated throughout the organization to keep staff informed of the situation? **Administrator notified the 2 immediate supervisors they notified staff of closing x1 day due to no water. Which was December 27th, 2022.**

How was information disseminated or otherwise communicated to your patients/clients to keep them informed? **The patients were called directly by administrator and OR supervisor, that were affected on that day with surgeries cancelled.**

Does your organization have a plan to specifically address potable and non-potable water? **Yes**

How did you use the plan to specifically address potable and non-potable water? **We steamed water to sterilize and provided water for drinking. We did have to have running water for waste disposal.**

How will you use this event to develop a potable/non-potable water plan for your organization?
We will review this situation to see if we need to change our plan.

Strengths: **Administrator quickly came in and assesses situation at the surgery center.**

Areas of Improvement: **There was no room for improvement we had to close with no running water.**

RESOURCES

Did your organization have issues with resource procurement? **No**

How much potable water did your organization have on hand prior to 12/22/22 and in what form? **4 cases bottled.**

Was your facility affected by the boil water advisory? **Yes**

What did your organization do to adhere to the boil water advisory? **We used bottled water for drinking and sterilized water for other uses.**

Did your organization make any resource requests to an outside agency (MLGW, Shelby County EOC, Memphis OEM, MSEPC, etc)? **No**

Strengths: **We were able to get resources on our own without issue.**

Areas of Improvement: **We need to stock up on more water for more days. Due to shortage not lasting longer we did not have an issue.**

EXTERNAL PARTNERS

How did your organization utilize external partners? We had to make the decision to close due to no water. Our procedures were non-emergency. They helped in notification process.

In what ways, if any, did you feel supported by local, state, or federal partners (both governmental and non-governmental)? I feel we would have gotten support we just did not have request any.

Did your organization interact directly with the Mid-South Emergency Planning Coalition? No

Saint Francis Surgery Center

INCIDENT COMMAND

Did you need to activate your facility's incident command or emergency plan? **Yes**

When did you activate incident command or emergency plan? **12/26/22**

Which components of incident command were activated? **We were closed but admin came in to check building and found that we were without water pressure. Notified Tenet Command Center. Notified necessary personnel. Surveyed facility for damage report. Initiated triage process to determine schedule for next day. Recalled OR Manager for assistance.**

How was your facility affected by weather and other events between 12/22/22 and 12/27/22?
Low water pressure, closed facility, canceled procedures/services.

How was information disseminated throughout the organization to keep staff informed of the situation? **In house announcement and phone tree.**

How was information disseminated or otherwise communicated to your patients/clients to keep them informed? **Via phone calls**

Does your organization have a plan to specifically address potable and non-potable water? **Yes**

How did you use the plan to specifically address potable and non-potable water? **Discussed option of tanker truck with disaster team. Hospital engineering supplied cases of bottled water.**

How will you use this event to develop a potable/non-potable water plan for your organization?
Need to determine with disaster team if tanker truck can connect to existing plumbing and cost associated with such.

Strengths:

- 1. Coming into access building when closed to prepare for following day.**
- 2. Communication with leadership, patients, staff, and medical providers.**

Areas of Improvement: **Need to know if tanker truck support is an option for us in the future.**

RESOURCES

Did your organization have issues with resource procurement? **Yes. Water from hospital delayed. Unknown if tanker truck is an option.**

How much potable water did your organization have on hand prior to 12/22/22 and in what form? **2 cases bottled water.**

Was your facility affected by the boil water advisory? **Yes**

What did your organization do to adhere to the boil water advisory? **Discontinued use of washers and sterilizers. Used sterile items on shelf. Requested water from hospital.**

Did your organization make any resource requests to an outside agency (MLGW, Shelby County EOC, Memphis OEM, MSEPC, etc)? No

Strengths:

1. Organized sterile instruments and borrowed from other facility to avoid closure for 48 hours.
2. Communication with staff, patients, medical staff.

Areas of Improvement: Keep additional water on hand.

Emergency Management and Public Health

Memphis Office of Emergency Management

INCIDENT COMMAND

Was your EOC and/or Incident Command structure activated? [Yes](#)

If so, when and for how long? [Friday, December 23 – Tuesday, December 26](#)

If so, what portions (ESFs, ESCs, named positions) were activated? [1,3, 5, 6, 8](#)

How was information disseminated from your agency to your internal staff, external partners, and the general public during the event? [Daily meetings, emails, phone calls, text messages, social media posts](#)

Overall strengths related to Incident Command. [Good communications through most ESFs, Direction from city leadership](#)

Overall areas of improvement related to Incident Command. [Better initial communication from a couple of internal partners. Communication from external partners was not received without asking.](#)

RESOURCES

How were resource requests received by your agency? [Email and phone call](#)

How were resource requests process by your agency? [Local resources utilized for potable and non-potable water, initial water pressure support for healthcare facilities. Sate resources requested for water tankers for healthcare facilities.](#)

Did you have any difficulties fulfilling/processing resource requests? [SCEM-HS stated they did not have drinking water available upon request. However, they were distributing water the following day and did not notify us of availability. Once requested, they stated that they could not deliver to the area of need.](#)

Overall strengths related to Resources (both receiving requests and fulfilling requests). [CoM provided resources as available through reassignments. Good relationship with MSEPC](#)

Overall areas of improvement related to Resources (both receiving requests and fulfilling requests). [Communication and assistance from the county EMA](#)

EXTERNAL PARTNERS

How did your agency utilize external partners? [CoM partners responded to requests for service. MLGW communication was intermittent and did not provide much information. Met with hospitals to discuss needs and resources available and resources were coordinated through MSEPC.](#)

Did your agency have direct interaction with the MSEPC? **Yes**

If so, please describe your experience, including any specific strengths or areas of improvement. **MSEPC communication and coordination was excellent. Communication from SCEM-HS and MLGW must improve.**

Overall areas of improvement related to External Partners. **Communication**

Shelby County Emergency Management and Homeland Security

INCIDENT COMMAND

Was your EOC and/or Incident Command structure activated? [Yes, our EOC was activated, and staff were monitoring.](#)

If so, when and for how long? [Dec 22-29](#)

If so, what portions (ESFs, ESCs, named positions) were activated? [ESF 7 - Logistics](#)

How was information disseminated from your agency to your internal staff, external partners, and the general public during the event? [Emails, Press Releases, social media, and phone.](#)

Overall strengths related to Incident Command. [Information flowed easily from staff to our partners, and assistance was provided as requested](#)

Overall areas of improvement related to Incident Command. [Contacts for partners need to be updated.](#)

RESOURCES

How were resource requests received by your agency? [Phone and email](#)

How were resource requests processed by your agency? [Resources in stock were immediately deployed. Requests for additional support/resources were sent to the State as needed. Supplies were brought to our warehouse and deployed from there.](#)

Did you have any difficulties fulfilling/processing resource requests? [Water supplies were a little harder to fulfill than before.](#)

Overall strengths related to Resources (both receiving requests and fulfilling requests). [Private Partnerships assisted in fulfilling water needs.](#)

Overall areas of improvement related to Resources (both receiving requests and fulfilling requests). [Partners and stakeholders should review their strategies regarding their water supply and response in water emergencies.](#)

EXTERNAL PARTNERS

How did your agency utilize external partners? [We contacted the State for assistance. Also, had private partnerships that assisted with water donations.](#)

Did your agency have direct interaction with the MSEPC? [Yes](#)

If so, please describe your experience, including any specific strengths or areas of improvement. Information regarding damages was reported back to EOC quickly.

Overall strengths related to External Partners. Responded as needed.

Overall areas of improvement related to External Partners. More private partnerships need to be formed for future emergencies.

Shelby County Health Department

INCIDENT COMMAND

Was your EOC and/or Incident Command structure activated? [SCHD HDOC was not activated, but PHEPP staffed ESF- 8 at OEM and EM-HS](#)

If so, when and for how long? [12/26/2022 13:00 – 18:00](#)

If so, what portions (ESFs, ESCs, named positions) were activated? [ESF-8](#)

How was information disseminated from your agency to your internal staff, external partners, and the general public during the event? [Information was forwarded to the Director and Deputy Director of the Health Department.](#)

Overall strengths related to Incident Command. [Activation improved coordination to request, and response related to the water crisis.](#)

Overall areas of improvement related to Incident Command. [ESF materials need to be updated.](#)

RESOURCES

How were resource requests received by your agency? [One.](#)

How were resource requests process by your agency? [Forwarded to EM-HS on to TEMA.](#)

Did you have any difficulties fulfilling/processing resource requests? [No TEMA ask for clarification on what exactly was being requested.](#)

Overall strengths related to Resources (both receiving requests and fulfilling requests). [Request flowed properly after activation of OEM and EM-HS.](#)

Overall areas of improvement related to Resources (both receiving requests and fulfilling requests). [Flow needs to come from OEM to EM-HS when both OEC's are activated.](#)

EXTERNAL PARTNERS

How did your agency utilize external partners? [Partnered with City of Memphis to get messaging out about non-potable water distribution for safety of the citizens.](#)

Did your agency have direct interaction with the MSEPC? [Yes, at OEM and EM-HS.](#)

If so, please describe your experience, including any specific strengths or areas of improvement. [Executive Director of MSEPC on location at OEM assisted directly with facility request.](#)

Overall strengths related to External Partners. Everyone willing to help in the areas that they could.

Overall areas of improvement related to External Partners. It was a holiday and has been a long time since a live activation has taken place, so some participants were not familiar with the operating procedures.

FINDINGS FOR POTENTIAL ACTION BY THE HEALTHCARE COALITION

Throughout the preceding evaluations, we found several issues common to most of the participating facilities. Since these items represent trends across the entire region, MSEPC considers addressing the issues in a more strategic approach to improving capabilities for all member healthcare organizations.

Overall Strengths and Improvement Opportunities

Although the entire Mid-South was impacted in some way by this winter weather event, not every healthcare facility within our region saw a disruption or potential disruption in service. While some could close completely and reschedule patients, other facilities like dialysis and hospitals were unable to refer their patients somewhere else to receive their life saving services. Throughout this weather event, the MSEPC would test its functionality as a resource coordinator and provider for our member organizations.

Facilities from across the region were grateful to discover that their staff was quick and calm to respond, showcased strong teamwork and organization while providing high-quality care to all patients, and communicated well internally and collaborated with external partners to establish the response plan. The use of local, regional, and state partners provided access to water for our facilities, which helped ensure they could maintain adequate water pressure.

Incident Command

Some form of Incident Command was established and maintained throughout the event at all responding facilities. Requests for information, updates, and resources were timely and sufficient. The flow of information from the facility incident command to the MSEPC was successful. Liaison Officers, where identified, successfully worked with external partners to process resources requests.

Facilities reported that their staff and personnel had an exceptional understanding of the severe weather plan. Safety briefings with staff were held routinely in-person and virtually through web-based platforms. Facilities utilized Email and other internal notification systems to keep the team informed throughout the event.

Although the resource requests process was successful once a request was known, internal facility processes related to information sharing regarding available resources, required paperwork, and potential vendors could be improved. Better communication between front-line workers and the incident command would create more accurate and timely resource requests.

Resources

Due to the nature of this event, nearly all comments related to resources were shared within the context of Incident Command as well. Timely and complete responses to requests; more comprehensive vendor lists; and clearer internal processes to identify available resources were repeated as both strengths and areas of improvement.

Although it is recommended, and typically helpful, to identify vendors that are from out of region or state to avoid duplication of resources/requests from multiple organizations requesting the same resources from the same vendor, the weather conditions of this event made some out-of-state vendors nearly impossible to use. Services were either unavailable or delayed, which created the need for requests to be filled locally. A local supply of various items (e.g., potable/non-potable water, linens) should be considered to support staff in patient care.

MSEPC is continuing to work to build a reliable vendor list that members, and non-members, can utilize when established supplier relationships are not available.

External Partners

MSEPC pushed out communication as it became available, utilizing email distribution lists to keep members informed. MSEPC leadership was available via text, phone, and email and effectively managed the Coalition based response. External partners, referring to both MSEPC member and non-member organizations, worked well together to respond to unique resource requests.

Overall, the response to this weather event was successful due to the previously established relationships among active MSEPC members and the nearly identical weather event in early 2021. As our partnerships continue to grow, we can further strengthen our success by learning more about all members agencies and the different resources and services they can offer. MSEPC updates a member directory annually but will begin to include services and resources as well to better inform our full membership.

APPENDIX A: ACRONYMS

Acronym	Term
AAR	After Action Report
ASPR	Administration for Strategic Preparedness and Response
CCRC	Continuing Care Retirement Community
CM	Clinic Manager
CoM	City of Memphis
DDC	Disaster Distribution Center
DME	Durable Medical Equipment
DO	Director of Operations
ED	Emergency Department
EM	Emergency Management
EMA	Emergency Medical Assistance
EM-HS	Emergency Management Homeland Security
EOC	Emergency Operations Center
EOP	Emergency Operations Plan
ESF	Emergency Support Function
ETA	Estimated Time of Arrival
EVS	Environmental Services
FNS	Food and Nutrition Services
HCC	Health Care Coordinator
HDOC	Health Department Operations Center
HSEEP	Homeland Security Exercise and Evaluation Program
HPP	Hospital Preparedness Program
HR	Human Resources
HVAC	Heating, Ventilation, and Air Conditioning
IC	Incident Command
IP	Improvement Plan
JCI	Joint Commission International
MFD	Memphis Fire Department
MLGW	Memphis Lights, Gas, and Water
MSEPC	Mid-South Emergency Planning Coalition
MSW	Medical Social Worker
OEM	Office of Emergency Management
OR	Operating Room
RHCC	Regional Hospital Coordinating Center
RVP	Regional Vice President
SCEM- HS	Shelby County Emergency Management and Homeland Security Office
SCHD	Shelby County Health Department
TEMA	Tennessee Emergency Management
VA	Veteran's Affairs
VAV	Variable Air Volume

APPENDIX B: PARTICIPANTS

Participating Organizations
Healthcare Coalitions
Mid-South Emergency Planning Coalition
Public Health
Shelby County Health Department
Emergency Management
City of Memphis Office of Emergency Management
Shelby County Emergency Management and Homeland Security Agency
Acute Care Hospitals
Baptist Memorial Hospital for Women and Children
Baptist Memorial Rehabilitation Hospital
Encompass Central Rehabilitation Hospital
Le Bonheur Children’s Hospital
Methodist Germantown Hospital
Methodist North Hospital
Methodist South Hospital
Methodist University Hospital
Regional One Health
Saint Francis Hospital Bartlett
Saint Francis Hospital Memphis
Veterans Affairs Hospital Memphis
Ambulatory Surgery Centers
Campbell Clinic Wolf River
Gastro One Atoka
Memphis Surgery Center
Saint Francis Surgery Center
Dialysis Centers
Davita Galleria Home Training
Fresenius Medical Midtown
Fresenius Medical Mt. Moriah
Fresenius Medical Care Whitehaven
Hospice and Home Health Agencies
Baptist Reynolds Hospice House
Baptist Trinity Hospice
Meritan, Inc.
Long Term Care Facilities

Kirby Pines Manor and Fireside Villa
Trezevant Manor
Psychiatric Facilities
Delta Specialty Behavioral Health Hospital

APPENDIX C: IMPROVEMENT PLAN

This IP has been developed specifically for the Mid-South Emergency Planning Coalition as result of the real-world winter weather response documented from evaluations provided for the timeframe of December 22-29, 2022.

MSEPC accepts responsibility for assuring that the improvement plan issues identified will be integrated into an exercise in the next budget period.

Issue/Area for Improvement	Corrective Action	Capability Element ¹	Start Date	Completion Date
Incident Command				
Increase availability to ICS courses throughout MSEPC membership.	MSEPC will establish a training schedule to include introductory and refresher courses to review basics of HICS and offer more in-depth overviews of specific aspects of HICS.	Training	FY23	On-going. Offered quarterly.
Resources				
Lack of extensive vendor directories to support supply chain issues	MSEPC to continue to work with vendors and other resource providers to establish a directory of potential vendors utilized by healthcare facilities.	Organization, Equipment	FY23	On-going. Updated with new vendors as information received.
Lack of various local supplies limiting some patient care	Facilities are encouraged to increase cache of supply.	Organization, Equipment	FY23	On-going. Update with new vendors as information received.
External Partners				
Facilities expressed interest and necessity in knowing more about fellow member facility contacts and services.	MSEPC to collect information and develop directory to include all member facility contacts and services provided. Distribution list to be posted online.	Organization	FY23	On-going. Updated with new facility information as it is received

¹Capability Elements are: Planning, Organization, Equipment, Training, or Exercise.