

**09/14/22 Montesano Health and Rehabilitation Center**  
**Fire & Evacuation response**  
**Panel Presentation – Chat questions and answers**

- From Elena Madrid:

Jennifer Summers at the WHCA office began to call our associate business members regarding availability of food and oxygen response.

- From Tori Bernier, Summit Pacific Medical Center:

For Summit, Mariah called me on my cellular. I called the hospital enroute to the hospital. We accepted 3 patients but expected 5. We implemented our external triage and remained on the virtual call for some time throughout the night.

- From Elya Baltazar, NWHRN District Manager & NWD Coordinator:

A virtual EOC was established to connect various response agencies, several of which responded remotely to support the Incident Command, EOC and patient transportation processes. There were 77 displaced patients requiring various levels of care, all were successfully transferred to appropriate facilities and/or discharged home where appropriate.

- From Jennifer PCHS:

For facilities who took patients, were those established bed transfer relationships before this emergency?

- From Elya Baltazar, NWHRN District Manager & NWD Coordinator:

To my knowledge, Jennifer, these were not pre-established relationships but the efforts of Elena and Laura reaching out to local facilities and those locations being willing to take on patients in a rapidly developing situation. Huge amount of collaborative work.

- From Elena Madrid:

Jennifer, no. The facilities were contacted by LeadingAge WA and WHCA directly and they responded.

- From Elya Baltazar, NWHRN District Manager & NWD Coordinator:

It truly was amazing! These moments we see the very best of our response partners as they bolster each other up in the worst of times

- From Laura Hofmann, LeadingAge Washington:

Some of the buildings that accepted residents were part of the NewGen corporation, which owns Montesano. When I called Grays Harbor and Pacific, their administrators were already on their way to the building with their DNSs to help

- From Adam Filbey:

A few of the facilities - we had transferred pts to them before so there was a relationship for this process in the past. Most of them, no, this was the first time that we had moved pts to the other facilities.

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- From jeffbambrick:

Regarding request for Strike Teams: Were these Fire units, or a mix of Fire/Private?
- From Loren Bast - Bainbridge Prepares/MRC:

Curious as to how many individuals required supplemental oxygen and how you handled that. (I know oxygen was mentioned as a needed resource at the beginning of the call.)
- From StuartO@merrillgardens.com:

Was someone assigned to be on point to communicate with patients' families?
- From Mina:

Did facilities make a decision for the full evacuation or fire department? thanks
- From Erwin Steinlein Regional NewGen HCC:

The evacuation was decided at center level.
- From Chris LaDue, Providence Swedish-Central:

Danica Little at UW developed a great tool for evacuation transport needs!
- From Greg Willett South King Fire:

How many transport units total were utilized and how many facilities received patients?
- From Hal Ungerleider:

Did the county EOC consider bringing in a regional Incident Management Team to support operations?
- From RFAY:

Which agency managed patient tracking? The affected facility? Fire Transport team?
- From Chris Patti:

Greg, I believe we used roughly 30 transport units, 4 transit / school buses and some facility buses.
- From Adam Filbey:

Lincare local in Aberdeen was called and they brought in units for us. this is Bobbie Cheville the DOR from MHR at the time
- From Hal Ungerleider:

Danica Little - littleda@uw.edu or you can email me @ [halu@uw.edu](mailto:halu@uw.edu).

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- From Rick Leo:

We had strike teams from Grays, Lewis, Pacific, Pierce, Thurston and Kitsap counties. Most sent 5 units. So 25-30 transport units, and 4-6 buses.

- From Hal Ungerleider:

what is the furthest away a patient was sent?

- From russell lefaucheur:

Many pts are in wheelchairs. How did you deal with transport for them?

- From David Codier:

How did medical information get moved to the receiving facilities?

- From Chris LaDue, Providence Swedish-Central:

I have attached for Swedish. Danica may have updated since she graciously shared with us.

- From Rick Leo :

Puyallup, Tacoma, Aberdeen, Olympia, Shelton

- From Adam Filbey

Hoquiam too

- From Erwin Steinlein Regional NewGen HCC:

The majority of Skilled Nursing are not in WATrac

- From Hal Ungerleider

Will NWHRN be working with the DMCC within our region to help support evacuation needs like this. If a hospital needed to evacuate we would be counting on LTAC and Rehab centers to support us.

- From Adam Filbey:

direct calls the next day to a couple facilities as well.

- From Chris Patti:

@ Russell.. If they were wheelchair bound, we took their wheel chair with them and they either went on a gurney or were loaded onto a bus or van by EMT crews.

- From Adam Filbey :

yes, PCC, the other faciites could get access

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- From mina :

WE are in WATrac. but in seattle. but received no notification needing help.

- From Anne Chastain-Clallam County Emergency Management

Were those patients transferred to out of the area facilities all eventually brought back into the area or are there some who remain at the facility they were transferred to?

- From Hal Ungerleider:

The document Chris put in the chat is the most current one, UW Medicine uses. Happy to share other evacuation tools with you. [halu@uw.edu](mailto:halu@uw.edu)

- From Elena Madrid:

It was all about relationships and communication. A lot of these relationships were strengthened and forged during the pandemic. LeadingAge and WHCA work closely together and that partnership is very beneficial.

- From Bobbie Cheville :

other local facilities sent food, thickener, local community members sent in blankets, people to come sit with the residents while they were waiting for transport, great coordination locally

- From Mariah Pede-NWHRN:

by 0115 the next morning all 77 were reconciled and gym was empty. That was a wrap!

- From Laura Hofmann, LeadingAge Washington:

I agree with Elena-the partnerships we have developed during COVID were key that evening.

- From Chris LaDue, Providence Swedish-Central:

We have found huge value in using virtual command in conjunction with onsite. It has helped by having subject matter experts weigh in when they can't be onsite.