



Policy Brief

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EVACUATING OR SHELTERING IN PLACE DURING A DISASTER: THE ROLE OF LEADERSHIP IN ASSISTED LIVING

Keywords: disaster preparedness, assisted living (AL), resident safety, long-term care (LTC)

Purpose of the Study: To better understand the factors that AL leadership consider when making evacuation/shelter-in-place decisions during disasters.

Key Findings:

- ✓ Leadership considered three primary factors when making evacuation/shelter-in-place decisions: 1) evacuation orders, 2) resident safety, and 3) the physical environment.
- ✓ Leadership made confident decisions when they understood the disaster threat as much as possible and felt knowledgeable about their residents' needs and community resources.

Major Policy/Practice Implication: Assisted living leadership may benefit from more support and training to help them make confident evacuation/shelter-in-place decisions during disasters. This may minimize unnecessary evacuations that could compound risk of hospitalization and death for some AL residents with physical impairments and/or dementia.

IMPORTANT BACKGROUND INFORMATION

There is limited research on disaster evacuations among assisted living (AL) communities, especially regarding the factors that AL leadership consider when making evacuation decisions. Related research indicates that evacuation compounds the risk of trauma, hospitalization, and death among NH residents, particularly residents with functional impairments and/or dementia. Data from 2016 also demonstrates that over half of AL residents nationwide need assistance with walking, a functional impairment that could be particularly challenging during an evacuation. While evacuations are necessary in many circumstances, prior research indicates there may be instances when sheltering-in-place is a more appropriate response for some AL communities.

STUDY METHODS

The qualitative data for this study were collected from 2018 to 2020 as part of a larger study on disaster planning among long-term care (LTC) communities affected by Hurricane Irma in Florida. Researchers conducted interviews and focus groups with administrative staff from 70 AL communities. They used a maximum variation method of sampling, in which they selected staff from AL communities with diverse community characteristics such as size, evacuation status, and region within Florida. Four researchers used coding methods to review the transcripts, identify themes, and modify the themes as necessary. For the purpose of this study, they analyzed sections of transcripts that had been given codes related to evacuation/shelter-in-place decisions.

Table 1. Sample Characteristics of AL Communities (N = 70)

Characteristic	No. (%) of Communities		Total No. (%)
	Small (< 25 beds) (n = 32)	Large (≥ 25 beds) (n = 38)	
Evacuated	13 (40.6)	15 (39.5)	28 (40.0)
For profit	32 (100)	28 (73.7)	60 (85.7)
Total Beds (M/SD)	9.4 (4.4)	112.6 (56.6)	64.4 (66.4)
Chain membership	13 (40.6)	22 (57.9)	35 (50.0)
Building Type			
Freestanding	31 (96.9)	16 (42.1)	47 (67.1)
AL/SNF	0 (0)	9 (24.3)	9 (13.0)
IL/AL	0 (0)	2 (5.4)	2 (2.9)
IL/AL/SNF	1 (3.1)	11 (29.7)	12 (17.4)
Memory care	5 (15.6)	12 (31.6)	17 (24.3)
Accepts Medicaid	14 (43.8)	20 (52.6)	34 (48.6)

Note. AL = assisted living; SNF = skill nursing facility; IL = independent living.

KEY FINDINGS

Assisted living leadership considered three primary factors when making evacuation/shelter-in-place decisions:

- ✓ **Evacuation orders:** Most participants (71%) stated their decisions were based on evacuation orders. For example, *“...the emergency operations center makes the call and we need to get out.”*
- ✓ **Resident safety:** Most participants also indicated resident safety was an important decision-making factor, but concepts of safety varied. Some chose to evacuate because *“God forbid, if something happens [to my residents]. I would be guilty.”* Others chose to shelter-in-place due to *“...the traumatic stress for residents, especially the volatile residents. They would be safe and secure in the building.”*

- ✓ **Physical environment:** Most participants considered the safety of their buildings when making decisions (e.g., existing leaks, trees that may fall on the building). Also, 71% of participants who sheltered-in-place mentioned the strong safety features of their environments, such as hurricane impact windows, trimmed trees on the property, and generators to supply needed power.

PRACTICE AND POLICY IMPLICATIONS

For policy makers: Most state guidelines provide evacuation information. Consider bolstering resources on sheltering-in-place, and implement training to support AL leadership in making appropriate evacuation/sheltering-in-place decisions.

For service providers: Leadership felt more confident in their decisions when they were prepared. Consider preparedness that includes assessing and bolstering the physical environment, understanding residents' needs, and assessing the community's self-sufficiency post-disaster. Collaborate with local emergency services.

For researchers: Investigate how evacuation and sheltering-in-place correlate with specific outcomes among AL residents (e.g., hospitalization and death post-evacuation).

ORIGINAL ARTICLE

Peterson, L.J., June, J., Dobbs, D., Dosa, D., Hyer, K. (2020). Evacuating or Sheltering in Place During a Disaster: The Role of Leadership in Assisted Living. *Seniors Housing & Care Journal*, 28(1), 27-38.

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