



SEVERE FLOODING IN NEVADA

Why was the HHS emPOWER Program needed?

In the winter of 2017, Nevada experienced unprecedented amounts of rain and snowfall, leading to the threat of severe flooding and subsequent emergencies across the state. The Nevada Division of Public and Behavioral Health (DPBH) requested the emPOWER Emergency Response Outreach Individual Dataset four different times from January to June to enhance situational awareness, prepare for emergencies, and support response and recovery activities with their emergency partners.

How were the HHS emPOWER Program Tools used?

Preparedness:

- Nevada DPBH and the Nevada Aging and Disability Services Division used emPOWER datasets to prepare their at-risk population for potential severe flooding events.
- Nevada DPBH worked with the state Divisions of Forestry and Emergency Management, the Nevada National Guard, and health authorities in Carson City and Washoe, Elko, and Churchill counties to map data for populations living in or near flood zones for evacuation plans.
- Carson City Health and Human Services (CCHHS) used the emPOWER de-identified dataset to evaluate the durable medical equipment (DME) needs of the at-risk population, and the emPOWER individual dataset to identify and contact DME suppliers to mitigate gaps in DME resources in the event of flooding and evacuations.

Outreach: Nevada DPBH (also a local public health authority for 11 counties), passed emPOWER individual datasets to local health departments to enable life-saving outreach:

- In April 2017, CCHHS and Medical Reserve Corps volunteers provided door to door outreach to over 300 homes in flood zones.
- In March 2017, Washoe County provided outreach to citizens in avalanche-prone areas to ensure they had appropriate resources if transportation routes became unpassable.
- In June 2017, a Tribe Emergency Manager used emPOWER datasets to perform outreach activities to tribal populations due to multiple wildfires.

Partners



- Nevada Aging and Disability Services Division
- Nevada Division of Emergency Management
- Nevada Division of Forestry
- Nevada National Guard
- CCHHS
- Washoe County Health District (WCHD)
- Washoe County GIS
- Churchill County
- Elko County
- Tribe Emergency Manager
- Medical Reserve Corps
- First Responders
- DME/Oxygen Suppliers

What was the impact of the HHS emPOWER Program?

The emPOWER data facilitated several unique collaborations between Nevada's state and local health departments and community partners to **coordinate planning and map evacuation routes** in remote areas, **identify and address DME resource gaps**, and **conduct life-saving outreach** to hundreds of at-risk Medicare beneficiaries. The datasets have also helped public health authorities prepare for future emergencies:

- CCHHS is establishing umbrella contracts with DME companies, and they are reviewing their county emergency operations plan to determine how their response timing and mitigation efforts can be improved.
- WCHD and Washoe County GIS developed an effective way to process and operationalize emPOWER data within 30 minutes. The counties geocoded and mapped over 10K addresses so local health authorities can identify individuals residing within the area of interest where emergency response is anticipated.

Lessons Learned:

- Develop a relationship with GIS partners and develop systems to enable rapid mapping of the data during the event.
- Use a dummy individual dataset to develop a data retrieval, cleaning, and analysis process, such as geocoding locations, tailored to your community to enable streamlined and efficient use of emPOWER data.

Quick Facts

Date: January to June 2017

Location: Nevada



Tool(s) used:

- emPOWER Emergency Planning De-identified Dataset
- emPOWER Emergency Response Outreach Individual Dataset

Stage(s) of the Emergency Management Cycle:

- Preparedness
- Response
- Recovery

"Nevada now has the capability to correctly identify, contact, and better anticipate the immediate needs of our at-risk populations in an emergency as a direct result of the HHS emPOWER Program."

– Malinda Southard, Nevada Division of Public and Behavioral Health