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The ABCs of an Emergency Management Program

Disaster Planning for California Hospitals
The only statewide conference developed by and for California hospitals
Objectives

- Describe the components of an Emergency Management Program (EMP)
- Utilization of tool to evaluate facilities’ Emergency Management Program/ Emergency Operations Plan (EOP) for completeness
- Strategies for preparing for a regulatory agency survey

Disclaimers

- There is no one standard format for an Emergency Management Program
- It is not the intent of this session to state that your program must look like examples presented
- Your program should reflect Hazard Vulnerability Analysis (HVA) findings and regulatory agency needs
Emergency Management Program

Emergency Management Program:

A. Program description
B. Mitigation
C. Preparedness
D. Emergency Operations Plan
   1. Response
   2. Recovery

Program Description

A. Policy and purpose
B. Approval signatures
   • CEO and Chief of Medical Staff
C. Scope and applicability
Program Description (cont.)

D. Planning assumptions
E. Authority and responsibility
   • Safety Committee/program organization chart
   • Program responsibilities
F. Program evaluation
   • Goals and objectives
   • Annual review of program and plan

Mitigation

Actions considered long before an emergency occurs and includes any activity aimed at reducing the probability of damage from a disaster.

A. Mitigation program overview
B. Background and community description/demographics
Mitigation (cont.)

C. Hazard Vulnerability Analysis (HVA)
   • Top 3-5 vulnerabilities clearly identified
   • Integration with community-wide HVAs
   • Annual review of HVA

D. Summary of mitigation activities to address the top 3-5 risks

Preparedness

Actions taken to save lives before and during a natural disaster. It ensures people are ready for a disaster and respond to it effectively.

A. Preparedness program overview
B. Adoption of National Incident Management System (NIMS) health care objectives
C. Adoption of an Incident Command System, such as HICS
Preparedness (cont.)

D. Integration of hospital plans with community-wide plans
E. Minutes from meetings attended
F. Memoranda of Understanding (MOUs) and other agreements
G. Training programs (new employee orientation, NIMS, HICS, Decon and annual training records)

H. Documentation of drills/exercises
   • Summaries
   • Incident Action Plans (IAPs)
   • Evaluation (After Action Reports)
   • Improvement plans (Corrective Action Plans)
Preparedness (cont.)

I. Business continuity/Continuity of Operations Plan (COOP)
   - Identify essential functions, systems, skill sets and response assignments
   - **Electronic medical record downtime**
   - Back-up plans for essential functions and systems

(The hospital COOP does not have to be incorporated into the EMP, but should be referenced)

Response:
Emergency Operations Plan

Occurs after the onset of a disaster.

A. Response program overview
B. Initiation and termination of the EOP
C. Activation of the Hospital Command Center (HCC)
D. HICS reference materials
E. Hospital emergency codes
F. Specific response plans including top 3-5 HVA vulnerabilities (can be incorporated into EOP)
Response (cont.)

G. Hospital surge/expansion plans
H. Describe plans/agreements to deploy clinical resources outside the hospital
I. 96-hour capability (can be incorporated into the six critical areas sections)

Response (cont.)

J. Communications systems
K. Emergency communications strategies
L. Management of resources and assets
M. Management of safety and security
N. Management of workforce roles and responsibilities
O. Management of utilities
P. Management of clinical and support activities
Recovery

The purpose of recovery activities is to return all systems and services back to normal.

A. Initiation of recovery activities
B. Return to normal operations
C. Event evaluation
   • Multidisciplinary incident debriefing
   • Evaluation of response plans (After Action Reports)
   • Improvement plans/EOP update (Corrective Action Plans)

Annexes

• Response annexes
• Functional annexes
Utilization of the CHA Checklist

- How to use the checklist
- Example of a table of contents based on checklist
- Crosswalk of CMS, Joint Commission and location on the California Hospital Association EMP Checklist

Joint Commission Survey

- Routine to conduct the emergency preparedness portion of a survey as:
  - Part of EOC
  - Tabletop
    - Regional, corporate partners
- Every survey is different
- Every surveyor is different
- Talk to corporate partners
- Keep answers simple, don’t expand
CMS Survey

Extras: IAP Quick Start
After Action Report (cont.)

Resources and Assets: (Joint Commission EM.02.02.03 & HSEEP Medical Surge
1. [ ] Met [ ] Not Met: Goal: Resources and Assets inventory is current or updated
   Explanation: [brief explanation of how it was met or why not]

Safety and Security: (Joint Commission EM.02.02.05 & HSEEP Medical Surge)
1. [ ] Met [ ] Not Met: Goal: Adequate security personnel were available during the incident
   Explanation: [brief explanation of how it was met or why not]

Staff Responsibilities: (Joint Commission EM.02.02.07 & HSEEP Medical Surge)
1. [ ] Met [ ] Not Met: Goal: Staff responded to pre-assigned positions
   Explanation: [brief explanation of how it was met or why not]

Utility Management: (Joint Commission EM.02.02.09 & HSEEP Medical Surge)
3. [ ] Met [ ] Not Met: Goal: Management of Loss of Power was adequate
   Explanation: [brief explanation of how it was met or why not]

Patient and Clinical Support Activities: (Joint Commission EM.02.02.11 & HSEEP Medical Surge)
1. [ ] Met [ ] Not Met: Goal: Assessing for discharge and/or transfer
   Explanation: [brief explanation of how it was met or why not]

Hospital Command Center Management: (Joint Commission EM.01.01.01 & HSEEP Emergency Operations Center Management)
1. [ ] Met [ ] Not Met: Goal: Activation of the Hospital Incident Command System
   Explanation: [brief explanation of how it was met or why not]

After Action Report (cont.)

General Drill / Exercise Conduct: (Joint Commission EM.01.01.03)
1. [ ] Met [ ] Not Met: Goal: Safety was monitored and provided for during the exercise
   Explanation: [brief explanation of how it was met or why not]
2. [ ] Met [ ] Not Met: Goal: Highlight of exercise priorities and expectations were clear
   Explanation: [brief explanation of how it was met or why not]
3. [ ] Met [ ] Not Met: Goal:Clarification of exercise priorities and expectations were communicated to appropriate personnel
   Explanation: [brief explanation of how it was met or why not]
4. [ ] Met [ ] Not Met: Goal: Exercise conduct was announced to the public
   Explanation: [brief explanation of how it was met or why not]
5. [ ] Met [ ] Not Met: Goal: Concerned consequences were managed during the exercise
   Explanation: [brief explanation of how it was met or why not]
6. [ ] Met [ ] Not Met: Goal: Concerned consequences were reviewed after the exercise for future generation
   Explanation: [brief explanation of how it was met or why not]
7. [ ] Met [ ] Not Met: Goal: Other
   Explanation: [brief explanation of how it was met or why not]

III. Event Synopsis
This can be the Master Sequence of Events list (MSELS) for an exercise, or a summary of an actual event.

IV. After Action Meeting and Critique
Method of After Action Analysis:
   [ ] Debriefing [ ] Written departmental critiques [ ] Observer evaluation
   [ ] Other

Date/Time of Debriefing:
   Attendance =

V. Conclusions / Summary of Response:
   [brief summary –
   Participants demonstrated capabilities
   Lessons learned for improvements and major recommendations
   A summary of what steps should be taken to ensure that the concluding events will help to further refine plans, procedures, training for this type of incident]

See Corrective Action Plan
### Extras:
#### Example Corrective Action Plan

**Exercise / Event Objective Tracking - COMMUNICATIONS**

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**Exercise / Event Objective Tracking - RESOURCES AND ASSETS**

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### Wrap-Up

- Experiences
Thank you!

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