Facilities

During a critical service interruption event or emergency the Incident Commander appoints a Logistics Section Chief.

Facilities supports the core infrastructure required for the delivery of safe patient care. During an event, facilities is responsible for the following:

* Determine which departments have been affected.
* Inquire regarding status (Mission Critical First - ICU, Lab, Surgery, Imaging (MRI/CT), and other Mission Critical Departments)
* Assign staff throughout the hospital based on criticality, and make needed repairs.
* Coordinate with BioMed and vendors: check the structural integrity of booms holding all mounted medical equipment.
* Assess the integrity of the facilities, equipment & report back.
* Determine what locations and equipment is damaged beyond repair and will need to be replaced.
* Determine what specialized equipment needs to be inspected and recertified by vendors prior to use.
* Assessment of utility disruptions and implementation of backups as needed.

Under the direction of the Logistics Section Chief, rationing may occur when the emergency event suggests that access to supplies, linen, food or any other commodity the Hospital relies upon, may be cut off or limited. This includes all bulk deliveries of energy supplies or direct services such as water, natural gas, and electricity.

The Hospital is equipped with additional supplies of food, water, contract service deliveries, linen, food, formula, feeding supplements and office supplies. Medical/surgical supplies for the Hospital's average daily census are also on hand for \_\_\_ hours. The highest items at risk for shortage in the event of an influx of patients, along with a disruption in deliveries, are med/surg supplies and linen.

Upon the initiation of emergency response activities, any department experiencing existing inventory issues will immediately inform the Hospital Command Center or their area's Unit Leader/Officer.

When it is deemed necessary to evaluate inventory and implement rationing, one or more of the following actions may be taken under the direction of the Logistics Section Chief

* Departmental staff round on each area and department within the Hospital and collect all available items stocked by their areas. This will include checking patient rooms for additional linen, checking kitchens for excess paper goods, checking for extra supplies over the floors par levels, returning all scrubs to linen services, etc. This will take place in all buildings on campus. Items in rooms of infectious patients will remain but be inventoried.
* Generate a master of list of items with quantities
* All scrubs will be signed out through linen services. It will be determined as to how often an employee may sign out a new set (i.e.; once every 24 hours for non-contaminated scrubs)
* Linen changes may be adjusted
* The frequency of IV restarts without infiltration may be changed.
* OR cases may limit opening of equipment until immediately ready.
* Staff may be asked to use any personal cups for drinks even in the cafeteria.
* Meal choices may be limited and all patients' diets checked before each meal to prevent waste.
* Pharmacy may collect additional stock on the floors. Discharged patients' unused medications may be picked up in a timely fashion to place them back in inventory.
* Strict control on the use of electricity may be enforced.
* All outside Internet connections may be suspended.
* Use of water may be restricted.
* Med/Surg supplies may be limited requiring such changes as dressing change schedules adjusted.
* Ancillary Services (Lab and Imaging) may develop critical testing lists only to ration supplies.

Decisions on patient care will be made in conjunction with Medical Care Director and other Hospital Command Center staff as necessary.

2In situations where delivery is limited due to a work actions (such as delivery drivers not crossing strike lines), the hospital will make arrangements for off-site transfer of goods.

The Hospital will also use Mutual Aid Agreements to minimize rationing needs.

## LOSS OF SERVICES

## Loss of Power

***Outlets served by the emergency generator are identified by red outlets.***

* Open curtains and drapes to take advantage of natural or off-site lighting, as applicable.
* Turn off “unnecessary” electrical equipment to reduce load on generator.
* Turn off any equipment that may have been running when the power went out.
* Ensure operation and availability of flashlights and batteries.
* Ensure Pyxis machines are connected to outlets served by the emergency generator, or move necessary medications into a refrigerator already served by the generator.
* Remove ice from ice machines and place into freezers that are not supplied by the emergency generator.
* Establish activities to compensate for loss of normal room lighting, television, etc. for patients, as practical.
* Contact Plant Operations for extension cords that will reach emergency outlets to enable beds to be raised/lowered if hand cranks are not available.
* Monitor stairwell alarms for patient safety. The system may not be powered by emergency power.

## Loss of HVAC

* Use fans, if available.
* Keep blinds, curtains, drapes, etc. closed in areas of building that receive direct sunlight.
* Open doors and windows, if possible, to take advantage of available breezes.
* Avoid activities that require physical exertion.
* Turn off lights as well as other heat-producing appliances whenever possible.
* Provide plenty of liquids for patients and staff.
* Monitor vital signs of patients and staff.
* Keep patients out of direct sunlight.

## **Loss of Water**

Impacts

* Loss of HVAC systems that rely on water for heating, cooling, and ventilation.
* Loss of access to water for use in disinfection, sterilization, and water-based patient treatments.
* Loss of fire suppression capabilities (e.g. no water for sprinkler systems and hydrants).
* Loss of drinking water and sanitation services.
* Potential loss of access to other hospitals and healthcare facilities on the same affected water system.
* Inability to provide an effective hazmat- decontamination response.
* Potential lack of water for field medical triage centers during an emergency response.

Actions

* Determine ability to obtain bottled water from outside sources.
* Use waterless hand cleaner where possible.
* Direct staff to use emergency water conservation measures.
* Place trash bags in toilets/commodes for human waste collection.
* Assess how long you can shelter in place before evacuation measures need to be taken.