Emergency Management and

Business Continuity Plan

Med-Surg

# <insert logo here>

Emergency Management and

Business Continuity Requirements

**Med-Surg is a mission critical department requiring the continuity or immediate recovery of services and processes.**

If mission critical services are interrupted, once it is confirmed that essential infrastructure and resources are available at the primary or alternate location, actions to resume services (and relocate if necessary). Preparations to initiate these actions should be taken at the earliest time possible.

# Mission Critical Processes and Applications

**RECOVERY TIME [0-2 hours]**

|  |  |  |
| --- | --- | --- |
| **PROCESS** | **APPLICATION** | **DOWNTIME POLICY** |
| Admissions |  |  |
| Transfer to another facility |  |  |
| Discharging Patients |  |  |
| On-going Patient Care |  |  |
| Medication administration |  |  |

**RECOVERY TIME [Insert hours]**

|  |  |  |
| --- | --- | --- |
| **PROCESS** | **APPLICATION** | **DOWNTIME POLICY** |
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# Continuity Procedures

## Following an event that impacts your department and/or your operations, consider the following:

* Round on patients
* Facilitate physician’s orders
* Identify critical operation points, functions or skills necessary for continuity of operations (e.g., management staff; specific levels of expertise, training or experience; recording or documentation requirements; health and safety concerns)
* Assess need to close department and/or relocate services
* Update Hospital Command Center (HCC) regarding department status, including resource needs, closure requirements and staffing shortages
* Plan for service reduction based on need, critical nature of service and recovery times in plan
* Communicate with incident command, all interdependent departments and other affected services regarding status and strategies for continuity/recovery
* Provide written notification to employees regarding status and strategies for continuity/recovery for the duration of the event and compensation provisions, if feasible
* Document the duration of the event
* Track, record and report all expenses during and related to the event:
	+ Loss of revenue (i.e.: income the hospital will not receive due to interruption of care)
	+ Physical losses (i.e.: damage done to space and equipment)
	+ Fixed costs (i.e.: non-variable costs paid whether department is operating or not)
	+ Operating costs (i.e.: variable costs that may increase due to the event)
* Track, record and report all on-duty time for personnel who are working during the event.
	+ Establish and maintain documentation of all payroll activities
	+ Ensure records are accurate and complete.
	+ Keep time sheets on all staff (exempt or not)
	+ Provide instructions to all employees to ensure time sheets and travel expense claims are completed properly
	+ Ensure that time records, travel expense claims, and other related information are prepared and submitted to payroll
* Retain all invoices to ensure all costs are captured and attributable to the event
* Establish and maintain documentation of all purchasing activities
* Track costs for use of equipment purchased and leased during the event

# Personnel Procedures

Employee Checklist

* Report to your department
* Bring/Wear ID Badge at all times
* Receive assignment from Department/Unit Manager
* Report to Labor Pool at the direction of Department/Unit Manager
* Prepare to stay/sleep at the Medical Center and bring the following: Bottled Water
* Toiletries
* Flashlight
* Personal Medications
* Change of Clothing

## Following an event that impacts your department and/or your personnel, consider the following:

* Evaluate immediate and ongoing staff needs based on existing and predicted levels of human resources available
* Activate your call list
* Notify Employees: communicate event impact, estimated duration and location/time/frequency of updates
* Determine staff availability
* Notify human resources, managers, union representatives and other key personnel as to status and plan implementation
* Coordinate alternative staff resource options with human resources. If needed:
	+ Identify similar core competencies that exist
	+ Request staffing needs update from the labor pool to sustain essential functions
	+ Secure contract staff or borrow from another facility
	+ Cross train staff with similar competencies by educators
* Develop and implement contingency staffing schedules and Implement alternative staff resource options that may supplement staffing needs (i.e., runners)
* Use sign in and time reporting sheet to account for all staff and hours during incident

ALTERNATE WORK OPTIONS

* Identify alternate work options available through “telecommuting” or other off-site possibilities as determined in departmental BCPs
* Assess flexible leave options that would allow employees to address family needs while continuing to support the employing organization through a flexible work plan
* Collaborate with EIS for remote access for staff performing mission critical processes

HEALTH AND SAFETY

* Evaluate potential health and safety issues with Environmental Health and Safety that might arise through diversion of staff to new job roles

FAMILY CARE PLAN

It should be assumed during a disaster that all employees might be needed. If staff must perform role at the medical center and requires care for dependents during the response, confirm with the Hospital Command Center that the Family Care Plan has been activated.

* Work with Environmental Services to set up space for over night arrangements
* Communicate with food services needs to accommodate staff staying overnight and working extra shifts

# Interdependencies

To perform mission critical processes, the department depends on the following internal and external services.

|  |  |  |
| --- | --- | --- |
| **INTERDEPENDENCY** | **SERVICE/PROCESS** | **ACTIONS IF SERVICE IS UNAVAILABLE** |
| Pharmacy | Stocking of Pyxis and provision of emergency medication orders | * Put Pyxis on override and have pharmacist dispense medications
* Assess availability of specific medications (e.g. Adavan for seizure – increase par levels if needed)
 |
| Laboratory Services | Testing of specimens/blood tests | * Perform point of care testing
* Send to other facility or exterior contractor
 |
| Diagnostic Imaging | Receiving of diagnostic images (X-ray, CT, MRI) | * Bring mobile units to patient care unit. CT will not be conducted until available [or in ED if available]
 |
| Bed Control | Assigning Patients | * Create a bed control board and use manual procedures.
 |
| Respiratory Services | Treatment/Procedures | * Use contractor services for respiratory therapists.
 |
| Cardiology | Tests/Procedures |  |
| Surgical Services | Surgical Procedures |  |
| Patient Access | Registration of Patients |  |
| EVS (House Keeping) | Trash Removal, cleaning | * Collect trash less frequently but at least once daily. Depending on census & staffing, nurses may be able to pick up some slack.
 |
| Linens | Linens |  |
| Distribution | Supplies | * Will go into conservation mode, reusing supplies as appropriate w/o compromising safety. Some supplies must be changed per current standards (IV lines).
 |
| Blood Bank | Transfusions and cross matching, order blood and blood products. | * Call in order and have runner bring blood.
 |

# Mission Critical Equipment and Supplies

During activations, the department manager/designee will assess the availability of Equipment and Supplies and report the status to the Hospital Command Center (HCC) as requested. During this process the following steps will be taken:

* Inventory and document status of equipment and supplies
* Check condition of storage or onsite stockpiles to determine the level of damage, if applicable
* Create a resupply list
* Assess how long department can operate with available equipment and supplies
* Request assistance from HCC for Mutual Aid Agreement, if needed

Additional notes:

| **MISSION CRITICAL EQUIPMENT AND SUPPLIES**  |
| --- |
| **EQUIPMENT/SUPPLY ITEM** | **QUANTITY/PAR LEVEL** | **POST INCIDENT INVENTORY** | **GAP/AMTNEEDED** | **ACTIONS IF ITEM IS UNAVAILABLE** |
| Ambu Bags |  |  |  | * [Insert actions when item is unavailable]
 |
| Bedding - Sheets / Blankets |  |  |  |  |
| Beds |  |  |  |  |
| Computers on wheels |  |  |  |  |
| Crash Cart Cardiac Monitors with defibrillator capabilities |  |  |  |  |

| **MISSION CRITICAL EQUIPMENT AND SUPPLIES** |
| --- |
| **EQUIPMENT/SUPPLY ITEM** | **QUANTITY/PAR LEVEL** | **POST INCIDENT INVENTORY** | **GAP/AMTNEEDED** | **ACTIONS IF ITEM IS UNAVAILABLE** |
| Gowns |  |  |  |  |
| Ice Machine |  |  |  |  |
| IV fluids, Lactated Ringers |  |  |  |  |
| IV fluids, D10 |  |  |  |  |
| Med Refrigerator |  |  |  |  |
| Nasal Cannulas |  |  |  |  |
| Normal Saline, 3 mm vials |  |  |  |  |
| O2 E canisters |  |  |  |  |
| Pharmaceutical Waste Container |  |  |  |  |
| Portable, battery-powered monitors |  |  |  |  |
| PPE |  |  |  |  |
| Sharps Container |  |  |  |  |
| Water, sterile for oral use |  |  |  |  |
| Waterless Hand Sanitizer |  |  |  |  |
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# Vendors/Resources Call List

| COMPANY/DEPARTMENT | POINT OF CONTACT | PHONE NUMBER | EMERGENCY CONTRACT IN PLACE Y/N? |
| --- | --- | --- | --- |
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# Mission Critical Vital Records

| **RECORD NAME** | **LOCATION** | **ALTERNATE BACK UP SOURCE** | **RECORD TYPE** **PAPER/ELECTRONIC** |
| --- | --- | --- | --- |
| 12 Hour Flow Sheet |  |  |  |
| Admission Arrival Questions |  |  |  |
| Admission Physician Order |  |  |  |
| Admission Assessment Form |  |  |  |
| Downtime Forms |  |  |  |
| Employee Files |  |  |  |
| Patient Records |  |  |  |
| Waiver, Transfer, Process Forms  |  |  |  |
|  |  |  |  |

# Staff Call List

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **FIRST****NAME** | **LAST****NAME** | **JOB** **TITLE** | **SHIFT** | **EXTENSION** | **PAGER** | **HOME** | **CELL** | **ETA [mins]** |
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Evacuation and Relocation Procedures

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| **Horizontal Evacuation Location** |  |
| **Vertical Evacuation Location** |  |
| **Assembly for full building evacuation**  |  |
| **Nearest Elevator** |  |
| **Nearest Stairwell** |  |

# Evacuation Locations

# Evacuation Procedures

* Identify and write on the census report:
	+ Who can be discharged
	+ Who is oxygen dependent
	+ Need for continuous IV pump usage
	+ Identify patients who can be heplocked 4-6 hours
	+ Mode of transportation (short-term, emergent movement off of unit)
	+ Ambulatory/Non-Ambulatory
	+ Patient precautions (ID, falls, etc)
	+ Critical medications
	+ Need for critical monitoring
	+ Need for physician/nurse accompaniment
* Communicate patient transport needs to command center
* Determine discharge areas and inform those picking up patient(s) of the location and circumstances of the event
* Discharge low-acuity patients

# Relocation Procedures

**To continue services, mission critical processes can be relocated \_\_\_\_\_\_\_.**

* Determine which patients will need staff to accompany them during the relocation
* Designate staff at facility to meet patients upon arrival
* Locate and make ready critical supplies: assign staff to gather extra equipment and have it ready as needed
* Print census and face sheets, if possible
* Direct staff to prepare patients for movement to alternate location
* Any supplies or equipment needed for specialized treatment will be packaged and evacuated with the patient (bedside and special medications)
* Patient medications to accompany patient, if possible:
	+ Must be dosage-specific for each patient.
	+ Must be identified with patient name and medical record number
* Notify the state of need to move patients and gain authorization for movement of controlled substances with patient
* Controlled substance will not go with the patient unless a nurse or physician accompanies the patient
* Collect hard copy patient records
* Load patients in appropriate vehicles with designated staff
* Communicate patient is in route
* Transport equipment/supplies/medications and records
* Secure medications with designated staff at alternate site
* Inventory medications at alternate site with pharmacy
* See Medical Center Evacuation Plan for additional procedures

# Recovery Procedures

**Prior to recovery and resumption of services at the primary site, it is essential to determine the status of the facility and equipment. Once it is confirmed that essential infrastructure and supplies are available, efforts to recover at the primary patient care area can be initiated.**

* Identify missing or damaged medical equipment such as point of care testing machines, ventilators, portable monitors, smart pumps, blood gas machine, ventilators, bronchoscopes, echocardiogram machines, ultrasound machines, cardiac tear testing machines, etc.
* Alert supply chain team about equipment that was sent with patients when they were evacuated.
* Assist Biomed team to return and reconfigure medical equipment that was moved or disconnected during the relocation Work with Biomed teams and vendors to ensure that any specialized medical equipment and systems are functioning correctly.
* Work with IT and Communications to identify missing or damaged computers or communications equipment.
* Work with Facilities team to ensure that all gas and suction lines are working correctly.