

PURPOSE: To define the role of each hospital and the Emergency Medical Services Agency in hospital evacuation(s) and to provide guidelines for requesting and mobilizing resources during disasters that result in partial or complete hospital evacuation(s).

AUTHORITY: Joint Commission on Accreditation of Healthcare Organizations, Environment of Care, Emergency Management Standards

DEFINITIONS:

Partial Evacuation: Patients are transferred within the hospital. This can be done as a **horizontal evacuation**, which involves moving patients horizontally to one side of a set of fire barrier doors or as a **vertical evacuation**, which involves moving patients to a safe area on another floor.

Full Evacuation: Patients are transferred from the facility to an outside area, another hospital or other alternative facility.

PRINCIPLES:

1. Evacuation of a hospital may be necessary following an emergency such as a facility fire or damage from a natural disaster, such as an earthquake.
2. The decision to evacuate a hospital will be based on the ability of the hospital to meet the medical needs of the patients. Immediate threats to life, such as internal fires or unstable structures will require emergent evacuation. Prolonged utilities disruptions may also result in the need to evacuate a hospital.

POLICY:

- I. Specific Responsibilities of a Hospital Requiring Evacuation
 - A. Implement emergency management plan that addresses evacuation.
 - B. Provide education to staff regarding their role and the process that will be used to evacuate the facility.
 - C. Relocate patients to area out of "danger".
 - D. If patients need to be transferred to another facility for on-going medical care, available beds should be identified by the following procedures:

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SUPERSEDES: 6-1-08

APPROVED:


Director, EMS Agency


Medical Director, EMS Agency

1. Coordinate with other hospitals in same hospital system (Kaiser, Catholic Healthcare West, etc.).
 2. Coordinate with Disaster Resource Center/umbrella hospital organizations.
 3. If the above resources are unavailable or inadequate request assistance from the County Department of Health Services Emergency Medical Services (EMS) Agency.
 - a. Contact the Medical Alert Center (MAC) or Department Operations Center (DOC) at 866-940-4401-Press 1.
 - b. Provide the number of patients by type of bed (critical care, medical/surgical, pediatrics, etc.) that require evacuation.
- E. Obtain transportation resources to effect the transportation of the evacuated patients. Available transportation resources should be identified by the following procedures:
1. Evacuating hospital will contact their contracted ambulance provider to assist in the transportation of evacuated patients.
 2. If additional resources are needed request assistance from the County through the EMS Agency.
- F. Transferred patients should have their medical records and medications sent with them.
- G. Maintain a log of transferred patients that includes the following information:
1. Name of patient
 2. Facility transferred to
 3. Type of service (i.e. medical/surgical, ICU, etc.)
 4. Equipment sent with patient (i.e. IV pump, ventilator, wheelchair, etc.)
 5. Mode of transportation
- II. Specific Responsibilities of the EMS Agency
- A. Coordinate the overall Medical and Health resources in the County.
1. Poll all hospitals to determine their ability to take transfers or their need to evacuate their facility.
 2. Notify Public Health of pending hospital evacuation(s) at (213) 989-7140.

3. Notify jurisdictional fire department and law enforcement agency to coordinate and ensure evacuation routes minimize any risks associated with the evacuation.
- B. Provide transportation resources
1. Deploy local ambulance resources, if additional resources needed activate local Ambulance Strike Teams (AST) or consider alternate transportation (i.e. buses).
 2. If the above is inadequate, request transportation resources from Region I and/or the State.
- C. Provide the individual hospital being evacuated with the following information:
1. Patient destination information including the number of patients by type to each facility.
 2. Transportation resources being dispatched and the estimated time of arrival.