Responding As One

Incorporating Clinics into Your Network Command Center Through CMS Regulations

Calvin Fakkema CHSP, CHEP
CHOC Children’s Hospital
Manager, Safety & Security
Safety Officer

David Bernstein CBCP, CEM, CHEP, CHPCP
BSI Group
Emergency Management Practice Area Lead
Senior Consultant
• Agenda
• Background
• Emergency Operations Plans
• Exercise
  – Communicating needs
  – Coordinating planning
  – Additional exercises (TTX with clinically relevant scenario)
Growth of CHOC Children’s Hospital

<table>
<thead>
<tr>
<th></th>
<th>2013</th>
<th>2014</th>
<th>2015</th>
<th>2016</th>
<th>2017</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total patient days</td>
<td>58,087</td>
<td>56,996</td>
<td>60,610</td>
<td>56,021</td>
<td>61,704</td>
</tr>
<tr>
<td>Total inpatient discharges</td>
<td>11,469</td>
<td>11,247</td>
<td>11,682</td>
<td>11,999</td>
<td>12,891</td>
</tr>
<tr>
<td>Average length of stay</td>
<td>5.1</td>
<td>5.1</td>
<td>5.2</td>
<td>5.5</td>
<td>4.8</td>
</tr>
<tr>
<td>Day Health Unit/Infusion Center visits</td>
<td>7,346</td>
<td>8,085</td>
<td>8,389</td>
<td>8,534</td>
<td>8,456</td>
</tr>
<tr>
<td>Inpatient surgeries</td>
<td>3,641</td>
<td>3,451</td>
<td>3,719</td>
<td>4,086</td>
<td>4,117</td>
</tr>
<tr>
<td>Emergency Room visits</td>
<td>52,338</td>
<td>56,136</td>
<td>75,336</td>
<td>81,257</td>
<td>87,791</td>
</tr>
<tr>
<td>Admissions via ER</td>
<td>5,581</td>
<td>5,392</td>
<td>6,371</td>
<td>6,778</td>
<td>7,545</td>
</tr>
<tr>
<td>Clinic visits - Primary Care and Specialty</td>
<td>249,115</td>
<td>251,469</td>
<td>255,066</td>
<td>234,781</td>
<td>238,702</td>
</tr>
<tr>
<td>Transports to CHOC</td>
<td>4,248</td>
<td>4,220</td>
<td>4,382</td>
<td>4,443</td>
<td>4,252</td>
</tr>
<tr>
<td>Pediatric capitated lives</td>
<td>122,570</td>
<td>134,796</td>
<td>146,119</td>
<td>153,965</td>
<td>151,818</td>
</tr>
<tr>
<td>Medical staff</td>
<td>611</td>
<td>638</td>
<td>633</td>
<td>648</td>
<td>652</td>
</tr>
<tr>
<td>CHOC full-time equivalent associates</td>
<td>2,220</td>
<td>2,309</td>
<td>2,254</td>
<td>2,408</td>
<td>2,531</td>
</tr>
<tr>
<td>Licensed beds</td>
<td>279</td>
<td>279</td>
<td>279</td>
<td>279</td>
<td>279</td>
</tr>
</tbody>
</table>

Source: Internal Records
Clinics

Status

• Decentralized
• Independent
• Wide scope of services
• Outpatient
Regulatory Updates

- Communications
- Coordination
- Exercises
  - Second Full-Scale or TTX (with clinically relevant scenario)
Regulatory Updates (cont.)

- Alignment with network emergency preparedness program
- Participation in network planning activities
Emergency Preparedness Initiatives
Emergency Operations Plan
Clinic EOPs

- Clinic EOPs
  - Template-based
  - Annex of CHOC EOP

- Ownership
  - Managed by Clinic leadership
  - Aligned with CHOC EOP
  - Second tier bullet style
Clinic EOPs (cont.)

Flipcharts

• Protocol-based
• Hazard specific
• Widely deployed
Exercise
Clinics as Part of HICS

- Incident Commander
  - Safety Officer
  - Public Information Officer
  - Liaison Officer
    - Medical/Technical Specialist
  - Operations Section Chief
    - Lead Person (Clinic Manager)
  - Planning Section Chief
  - Logistics Section Chief
    - Finance/Administration Section Chief
CHOC Clinic Emergency Operations Plan Training and Tabletop Exercise
November 15, 2017
Exercise Objectives

Formal

Operational Communications

• Test viability of communications resource listing in CHOC Clinic Emergency Operations Plan

Informal

Familiarization with new EM Requirements
# CLINIC DISASTER STATUS REPORT

**To:** Incident Commander or Planning Section Chief if position opened  
**From:** Clinic name: __________________ Phone Number: ____________ Date: ____________ Time: ____________  
Charge Nurse / Supervisor: __________________ Manager: __________________ Mgr Onsite? □ YES □ NO  

## CURRENT OPERATIONAL STATUS (Check box that reflects your current status)

- **RED**
  - Not able to function, need immediate assistance, may need to close department. Estimated time necessary to close/evacuate your department: ________  
- **YELLOW**
  - Able to function; will need some assistance but can remain open  
- **GREEN**
  - Able to function with little or no difficulty  

## Patient Movement Matrix

Method of patient movement (in event of transfer, discharge, or evacuation)

<table>
<thead>
<tr>
<th>Transport Option</th>
<th>CAR</th>
<th>BLS</th>
<th>ALS</th>
<th>Specialized</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**CENSUS**

Current # of patients in clinic: ________________
Action

• Contact your clinic and ask them to complete the Clinic Communication Resource Status Form

• Submit completed forms to HCC email: chochcc@choc.org
Exercise Goals

Meet Standards
- Exercise requirement
- Network alignment

Drive Community
- Centralize Clinics in emergency response

HICS
- Train on placement and interaction within HICS
Questions?

Calvin Fakkema CHSP, CHEP
CHOC Children’s Hospital
Manager, Safety & Security
Safety Officer
CFakkema@choc.org

David Bernstein CBCP, CEM, CHEP,
CHPCP
BSI Group
Emergency Management Practice Area Lead
Senior Consultant
David.Bernstein@bsigroup.com