Emergency Management Fundamentals

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Objectives

• Describe the role of an Emergency Management Coordinator
• List the primary responsibilities of an Emergency Management Coordinator
• Describe the components of an Emergency Management Program (EMP)
• Evaluate an Emergency Operations Plan utilizing the CHA EMP Checklist tool
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 the examples presented
• Your program should reflect your Hazard Vulnerability Analysis (HVA) findings and regulatory agency(s) needs
Who are You

Emergency Management/Preparedness Coord:

- How did you get where you are
- What is your background
- How long have you been doing it
Who are You

Your Facility:

- How big
- What is your scope
  - hospital
  - clinics
  - SNF on campus
- Part of a corporation
What was your Training:

• On the job
• Corporate guidance
• Community Peers
Who is on the Committee

- Shared with the Safety (EOC) Committee
- Multi-disciplinary representation
- MD
- Transplant Program
What do you Do

Write Policies / Plans / Procedures:

• Emergency Management Plan
• Emergency Operations Plan
Tool
• CHA Hospital Emergency Mgmt Program Checklist
CHA EMP Checklist

Program Description:
• Policy and Purpose
• Approval Signatures
• Scope and Applicability
• Delegations of Authority
  - Succession Plan (new CMS)
• Program Evaluation
CHA EMP Checklist

Mitigation:

• Mitigation program overview
• Background and community description/demographics
• Hazard Vulnerability Analysis (HVA)
  - Annual review
  - HVA integrated with community
CHA EMP Checklist (cont.)

Preparedness:
• Preparedness program overview
• Adoption of National Incident Management System (NIMS) healthcare objectives
• Adoption of Incident Command System (ICS) (HICS)
• Integration of hospital plans with community plans
• Meeting minutes
• MOUs
Preparedness: cont.

- Training programs
  - annual training (CMS)
  - contracted personnel (CMS)
- Documentation of drills/exercises
- Business Continuity (BCP)/ Continuity of Operations Plan (COOP)
Response:

- Response program overview
- Initiation and termination of the EOP
- Activation of the hospital command center
- HICS reference materials
- Hospital emergency codes
CHA EMP Checklist (cont.)

Response: cont.

- Specific response plans
- Hospital surge/expansion plans
- Plans/agreements to deploy clinical resources
- 96-hour capability
Response: cont.

- Communications systems
  - hardware
- Emergency communications strategies
  - Communication plan
  - Contact list
Response: cont.

- Management of resources and assets
- Management of safety and security
- Management of workforce roles and responsibilities
- Management of utilities
- Management of clinical and support activities
Recovery:

• Initiation of demobilization/recovery activities
• Return to normal operations
• Event documentation / evaluation
Write Resource Material:

• EP flip charts
• Department specific binders
• Intranet information
What do you Do

Educate to the Plan:

• Classes
• In-services
• Flyers
Drills/Exercises:

• Types
• Documentation
• After action plan/corrective action plans
Types of Exercises

- Drills
- Table top
- Functional
- Full scale
Exercise Documentation

- Objectives
- MSEL – Master Sequence of Events List
- Other exercise information/communications
- Incident action plan
- Supporting documentation
Incident Action Plan

Made up of the:

- HICS 200 IAP Cover Sheet
- HICS 201 – Incident Briefing
- HICS 202 – Incident Objectives
- HICS 203 – Organization Assignment List
- HICS 204 – Assignment List
- HICS 215A – IAP Safety Analysis
After Action Plan

Sacramento Region Hospital Template
After Action Report

I. Event Overview

Date of Activity: ☐ Exercise ☐ Actual Incident ☐ Internal Event ☐ External Event

Name of Event:

☐ Exercise ☐ Actual Incident ☐ Internal Event ☐ External Event

Summary of the Event:

Your Facilities involved:

☐ Facility 1 ☐ Full Scale ☐ Functional ☐ Tabletop
☐ Facility 2 ☐ Full Scale ☐ Functional ☐ Tabletop
☐ Facility 3 ☐ Full Scale ☐ Functional ☐ Tabletop
☐ Facility 4 ☐ Full Scale ☐ Functional ☐ Tabletop
☐ Facility 5 ☐ Full Scale ☐ Functional ☐ Tabletop

Other Agencies/Hospitals involved:

☐ HMHC ☐ Kaiser, San Jose ☐ Sutter Med Cty, Sac
☐ County DCH ☐ Kaiser, South ☐ UC Davis Medical Center
☐ Public Health Dept. ☐ Mercy, Yuba City ☐ Rother VA
☐ Fire / EMS ☐ Mercy General ☐ Methodist
☐ Law ☐ Mercy San Jose ☐ Sutter Roseville
☐ Other ☐ Sutter Auburn Faith ☐ Sutter Davis
☐ Funding Source: ☐ Hospital ☐ IFPP/ASPR Grant ☐ Other:

Observer(s):

II. Goals and Objectives

These can be the goals/objectives set prior to an exercise or the ones developed during an actual incident.

Communications:

[Joint Commission ONC.2.02.01 & HIPAA Communications, Intelligence and Sharing]

1. ☐ Met ☐ Not Met Goal: Can use cell phones to reach internal / external partners
Explanation: [Brief explanation of how it was met or not met]

2. ☐ Met ☐ Not Met Goal: Can use VHF radios to reach external partners
Explanation: [Brief explanation of how it was met or not met]

3. ☐ Met ☐ Not Met Goal: Can use 911 system to reach external partners
Explanation: [Brief explanation of how it was met or not met]

4. ☐ Met ☐ Not Met Goal: Able to relay messages via email / fax
Explanation: [Brief explanation of how it was met or not met]

5. ☐ Met ☐ Not Met Goal: Able to receive information via EPMSystem
Explanation: [Brief explanation of how it was met or not met]

6. ☐ Met ☐ Not Met Goal: Can view radio functioning and staff know how to use them
Explanation: [Brief explanation of how it was met or not met]

7. ☐ Met ☐ Not Met Goal: Can send message to internal staff via overhead paging, email, CENM, etc
Explanation: [Brief explanation of how it was met or not met]

8. ☐ Met ☐ Not Met Goal: Able to notify all duty staff of incident ___ % notified
Explanation: [Brief explanation of how it was met or not met]

9. ☐ Met ☐ Not Met Goal: Leadership / Management was notified in a timely manner
Explanation: [Brief explanation of how it was met or not met]

10. ☐ Met ☐ Not Met Goal: Determine if on-duty staff were clear and understood current and updated instructions
Explanation: [Brief explanation of how it was met or not met]

III. Event Synopsis

This can be the Master List of Events List (MSEL) for an exercise, or a summary of an actual event.

IV. After Action Meeting and Critique

Method of After Action Analysis:

☐ Defending ☐ Written departmental critiques ☐ Observer evaluation

☐ Other:

Date/Time of Defending:

Attendance:

V. Conclusions / Summary of Responses

[Brief Narrative –]

- Participants demonstrated capabilities
- Lessons learned for improvement and major recommendations
- A summary of what steps should be taken to ensure that the outcomes result in corrective action plans, procedures, training for this type of incident

See Corrective Action Plan
Abbreviated After Action Report

Sutter Medical Center, Sacramento
Emergency Preparedness
Abbreviated After Action Report

1. Event Overview (what happened):

Date of Activity: ___________________________ Time: ___________________________

☐ Exercise ☐ Actual Incident ☐ Internal Event ☐ External Event

Summary of the Event:

2. Goals and Objectives

Communications: (Joint Commission EM12.02.01 & HESEP Communications, Intelligence and Sharing)
1. ☐ Met ☐ Not Met ☐ N/A Goal: Staff was notified in a timely manner.
   Explanation:
2. ☐ Met ☐ Not Met ☐ N/A Goal: Staff was notified in a timely manner.
   Explanation:
3. ☐ Met ☐ Not Met ☐ N/A Goal: Staff was notified in a timely manner.
   Explanation:
4. ☐ Met ☐ Not Met ☐ N/A Goal: Other - Describe ________________________________
   Explanation:

Resources and Assets: (Joint Commission EM12.02.03 & HESEP Medical Surveilance)
1. ☐ Met ☐ Not Met ☐ N/A Goal: Critical resources were available and utilized appropriately.
   Explanation:
2. ☐ Met ☐ Not Met ☐ N/A Goal: Other - Describe ________________________________
   Explanation:

Safety and Security: (Joint Commission EM12.02.06 & HESEP Medical Surveilance)
1. ☐ Met ☐ Not Met ☐ N/A Goal: Adequate security personnel were available during the incident.
   Explanation:
2. ☐ Met ☐ Not Met ☐ N/A Goal: Other - Describe ________________________________
   Explanation:

Utility Management: (Joint Commission EM12.02.09 & HESEP Medical Surveilance)
1. ☐ Met ☐ Not Met ☐ N/A Goal: Management of Loss of IT or EMR was adequate.
   Explanation:
2. ☐ Met ☐ Not Met ☐ N/A Goal: Management of Loss of IT or EMR was adequate.
   Explanation:
3. ☐ Met ☐ Not Met ☐ N/A Goal: Management of Loss of Water was adequate.
   Explanation:
4. ☐ Met ☐ Not Met ☐ N/A Goal: Management of Loss of Water was adequate.
   Explanation:
5. ☐ Met ☐ Not Met ☐ N/A Goal: Management of Loss of Water was adequate.
   Explanation:
6. ☐ Met ☐ Not Met ☐ N/A Goal: Management of Loss of HVAC was adequate.
   Explanation:
7. ☐ Met ☐ Not Met ☐ N/A Goal: Management of Loss of HVAC was adequate.
   Explanation:
8. ☐ Met ☐ Not Met ☐ N/A Goal: Other - Describe ________________________________
   Explanation:

Patient and Clinical Support Activities: (Joint Commission EM12.01.11 & HESEP Medical Surveilance)
1. ☐ Met ☐ Not Met ☐ N/A Goal: Ability to provide for patient care.
   Explanation:
2. ☐ Met ☐ Not Met ☐ N/A Goal: Other - Describe ________________________________
   Explanation:

Hospital Command Center Management: (Joint Commission EM12.01.01 & HESEP Emergency Operations Center Management)
1. ☐ Met ☐ Not Met ☐ N/A Goal: Activation of the Hospital Incident Command System.
   Explanation:
   Explanation:
3. ☐ Met ☐ Not Met ☐ N/A Goal: Other - Describe ________________________________
   Explanation:

3. ☐ Met ☐ Not Met ☐ N/A Goal: Gather and provide information.
   Explanation:
4. ☐ Met ☐ Not Met ☐ N/A Goal: Identify and address issues.
   Explanation:
5. ☐ Met ☐ Not Met ☐ N/A Goal: Prioritize and provide resources.
   Explanation:
6. ☐ Met ☐ Not Met ☐ N/A Goal: Support and coordinate the response.
   Explanation:
7. ☐ Met ☐ Not Met ☐ N/A Goal: Other - Describe ________________________________
   Explanation:

V. Conclusions / Summary of Response:

What went well:

Areas of improvement needed:

Name of person completing form:
Print: ___________________________
Signature: ________________________

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Event: After Action Report
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## Corrective Action Plan

### Exercise / Event Objective Tracking - COMMUNICATIONS

#### Corrective Action Plan

<table>
<thead>
<tr>
<th>Event Date</th>
<th>Improvement Issue</th>
<th>Action</th>
<th>Responsibility</th>
<th>Status</th>
</tr>
</thead>
<tbody>
<tr>
<td>1/2/11</td>
<td>Objective/Activity: 1. Able to use cell phones to reach internal / external partners</td>
<td>*</td>
<td>*</td>
<td>&gt;</td>
</tr>
<tr>
<td>1/2/11</td>
<td></td>
<td>*</td>
<td>*</td>
<td>&gt;</td>
</tr>
<tr>
<td>2/3/11</td>
<td></td>
<td>*</td>
<td>*</td>
<td>&gt;</td>
</tr>
<tr>
<td>3/4/11</td>
<td></td>
<td>*</td>
<td>*</td>
<td>&gt;</td>
</tr>
<tr>
<td>1/2/11</td>
<td>Objective/Activity: 2. Able to use HAM radio to reach external partners</td>
<td>*</td>
<td>*</td>
<td>&gt;</td>
</tr>
<tr>
<td>1/2/11</td>
<td></td>
<td>*</td>
<td>*</td>
<td>&gt;</td>
</tr>
<tr>
<td>2/3/11</td>
<td></td>
<td>*</td>
<td>*</td>
<td>&gt;</td>
</tr>
<tr>
<td>3/4/11</td>
<td></td>
<td>*</td>
<td>*</td>
<td>&gt;</td>
</tr>
</tbody>
</table>
What do you Do

Incidents:

• Manage the incident
  - Role in the hospital command center
• Documentation
• After action plan/corrective action plan
Command Center:

- Location
- Supplies
- Forms
- Incident response guides
- Communication
Other:

- Reports
- Tracking
- Facility planning/input
Community Collaboration-

• Community planning groups
• Corporate groups
• Health care coalition
• Exercises
• What else do you do?
Questions?

Thank you

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Thank You

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