

University Health Network Policy & Procedure Manual Emergency Preparedness: Emergency Notification & Fan-Out

Policy

During [emergency](#) situations at University Health Network (UHN), the mobilization of staff and additional human resources may be needed to ensure the safety of all staff, physicians, patients, and visitors. A major external [incident](#), such as a mass casualty ([Code Orange](#)), or an internal event, such as a Hospital evacuation ([Code Green](#)), may involve calling off-duty staff back to the hospital to assist with the response. UHN has an [Emergency Notification](#) and Telephone [Fan-Out](#) System in place as a means to notify staff and physicians in the event of an incident or emergency.

Note: “Staff” includes employees, physicians, researchers, learners, volunteers, students and contractors.

All sites, programs, departments, units, clinics, laboratories and research areas (hereafter referred to as “**department(s)**”) at UHN shall maintain a telephone [fan-out list](#) containing up-to-date information for each member of the department’s staff. Each vice-president (VP), chief, division head, director and manager at UHN must have an up-to-date telephone fan-out list of all staff and physicians that report to them.

Designated callers must keep a copy of the fan-out list at home, at work, and on their person.

All departments are required to submit their fan-out list to their respective site Management Office, VP Executive Assistant. Hard copies of department fan-out lists shall be kept in a secure location in each site [Command Centre](#) in the event of a power/computer system failure.

Developing a Telephone Fan-Out List

The fan-out list must include staff names, role/title, home phone number, other emergency contact information (e.g. cell phone, pager number), and usual distance from the hospital. Refer to the [Fan-Out List Template](#) as a suggested format for the list.

Note: Consider listing staff according to proximity to the Hospital.

All VPs, chiefs, division heads, directors and managers must assign a delegate to activate a telephone fan-out in the event of any planned or unplanned absence. The delegate(s) must be identified on the fan-out list.

Note: A maximum of 10 staff should be assigned to each [designated caller](#).

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Fan-out lists must be updated whenever there is a contact change. After a revision, old versions of the list must be destroyed appropriately and securely.

Confidentiality of Telephone Fan-Out Lists

Staff contact information is considered confidential information and therefore telephone fan-out lists, whether in hard copy or electronic format, must be stored securely and only accessed for this expressed purpose. Additional information relating to employee information can be found in [Personal Information Protection](#) policy 2.10.013.

Testing a Fan-Out

Telephone fan-outs must be tested twice per year (at minimum) in order to ensure the department can respond effectively and to ensure that staff are familiar with the fan-out system.

Each department is responsible for orienting their staff to the fan-out system procedure to ensure familiarity and readiness to respond.

Fan-out test results must be kept within the department for the duration of each accreditation period.

Initiating the Emergency Notification System

An [incident commander \(IC\)](#) is appointed. The IC will establish a Command Centre and activate the [Incident Management System \(IMS\)](#). Staff assigned to IMS positions will be notified through the UHN [Emergency Notification System](#). Physician leads may also be activated. Refer to [IMS Organizational Chart](#)

Depending on the resource needs of the Hospital to manage the emergency event, the IC may authorize the initiation of a manual telephone [fan-out](#) (reporting structure activation).

Definitions

Administrator-on-call (AOC): The AOC is the first point of contact for emergency codes that require senior executive authorization to expedite escalation and response (during regular and after-hours). During regular hours, the site AOC will escalate to the vice-president (VP), Clinical/delegate. If the VP, Clinical (or delegate) is not available, the AOC will assume the [incident commander](#) position. During after-hours, weekends, and statutory holidays, the AOC has delegated authority by a UHN VP, Clinical for the operation of their site and off-site locations.

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Administrator-on-site (AOS): The AOS has delegated authority by a UHN VP, Clinical for the operation of their site and off-site locations during after hours, weekends and statutory holidays.

Code Green: An emergency response to an incident that initiates the evacuation of building occupants to an area of safety. The extent of the evacuation will depend on the severity and scope of the situation. Possible triggers for evacuation include fire and smoke, facility or structural damage, potential exposure to hazardous material, terrorism or violent armed person(s). Refer to [Code Green \(Evacuation\)](#).

Code Orange: An emergency response to manage mass casualty incidents, due to an external event which may result in an influx of patients to the hospital that will exceed normal resources. Refer to [Code Orange \(Mass Casualty Incident\)](#).

Command Centre: A designated and equipped room where senior staff gathers to plan the strategy for coping with a major incident. The command centre is set up when a coordinated response is needed to focus resources on the immediate incident.

Designated caller: A staff member appointed by the unit/department manager/delegate who is responsible for calling department staff members on the fan-out list.

Emergency: A situation or an impending situation that constitutes a danger of major proportions that could result in serious harm to persons or substantial damage to property, and that is caused by the forces of nature, a disease or other health risk, an accident or an act whether intentional or otherwise.

Emergency notification system: An automated message delivery and response tracking system that uses multiple communication channels (such as e-mail, landline, mobile phone and SMS text) to connect to individuals within minutes.

Fan-out: A process by which staff who are not on-duty/on-site are contacted, usually by telephone or pager, to determine their availability to report to work in the event of a disaster or emergency situation.

Fan-out list: A confidential electronic/hard copy document that contains department staff names, contact numbers and distance to hospital in minutes. It is used during a fan-out to log details of the staff response.

Incident: An occurrence or event, natural or human-caused that requires an emergency response to protect life, property, or the environment.

Incident commander: Senior staff member in charge of directing and coordinating all activities related to the incident.

Incident Management System (IMS): A recognized North American standard essential for the management of all emergency incidents. IMS identifies key roles needed to perform specified functions during a time of crisis.

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Procedures

Developing a Telephone Fan-Out List

1. Ensure that your designate/alternate has an up-to-date copy of the fan-out list.
2. Ensure the person who calls you/the next higher level in the fan-out has an up-to-date copy of the fan-out list.
3. If you plan to be away from the hospital, delegate your fan-out responsibility and notify the person who calls you/the next higher level in the fan-out of the change.
4. Consider aligning a review of the telephone fan-out list prior to major holidays or summer vacation scheduling.

Testing a Fan-Out

1. Use the telephone fan-out list and [Fan-Out Summary Report](#) tools when conducting a fan-out test.
2. Where applicable, staff on days off should be called first, followed by those who are scheduled for the next shift.
3. Use the following script when testing a fan-out:

“This is [redacted] (state your name) from [redacted] (UHN department). We are currently conducting a test of our fan-out system. No action is required. This is only a test. Should this have been a real event, would you be available to come to the hospital? How long would it take you? Do you have your UHN photo id badge with you?”

Initiating the Emergency Notification System

1. The [incident commander](#) authorizes Switchboard to activate IMS positions through the emergency notification system, and provides the message to be relayed, including but not limited to, the details on the nature of the emergency, location to report to, and necessary actions.
2. Switchboard sends the emergency notification to relevant IMS positions.
 - IMS assigned staff who are notified will report to their site Command Centre.
3. The incident commander assesses the emergency/disaster situation and determines if UHN can respond with the current level of staff on duty.

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Manual Telephone Fan-Out

1. All VPs, chiefs, division heads, directors, and managers will assess on-going staffing requirements for the department.

Note: This is particularly important if 24-hour coverage is required.

2. All VPs, chiefs, division heads, directors, and managers will direct their [designated callers](#) to initiate a manual fan-out to appropriate staff based upon a coverage assessment.

3. When calling staff who are off-duty to return to the hospital:

- Speak directly to UHN staff only.

Note: If you encounter an answering machine or voice mail, hang up and move on to the next staff on your list. **Do not leave voice messages.**

- State that this is a fan-out as a result of .
- Ask if the staff member is able to return to the Hospital.
- **If yes, inform staff to report to their own area of work.** Remind staff that a hospital photo ID badge is required for admission to the hospital.

4. Record results directly on the fan-out list.
5. Instruct designated callers to inform you of the fan-out results as soon as they have finished making their calls.
6. Complete the [Fan-Out Summary Report](#) with the fan-out results.
7. Submit the [Fan-Out Summary Report](#) to the site [Command Centre](#) by fax, e-mail, or runner.

Note: Refer to [UHN Command Centres \(Location and Contact Information\)](#).

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