



## Appendix E

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# Incident Planning Guide: Active Shooter

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## Definition

This Incident Planning Guide is intended to address an incident involving an active shooter, defined as an individual actively engaged in killing or attempting to kill people in a confined and populated area. Hospitals may customize this Incident Planning Guide for their specific requirements.

## Scenario

A 40-year-old man enters your hospital's main lobby, pulls a shotgun from under his jacket and shoots the lobby security officer. He then shoots a visitor who attempts to close the interior doors to the facility. As this occurs, a hospital volunteer in the main lobby calls 911. An employee hears the noise and walks toward the main lobby to investigate. The shooter fires at the approaching employee, but the employee dives for cover and the shooter misses. The shooter continues into the building, while the employee calls the hospital's main switchboard operator and reports that a man has entered the building shooting at staff and visitors. The operator activates the Active Shooter Plan, notifying facility leadership and security, while making an overhead announcement to notify all staff of the incident in the main lobby area. The shooter proceeds through the hospital into patient care areas, shooting at people indiscriminately. Within ten minutes, law enforcement officers arrive and begin their tactical response. A patrol supervisor has set up their command post outside the hospital, where one of your security officers is acting as a liaison to the hospital's Incident Commander. Law enforcement tactical team finds the shooter dead in a patient care area, with a single gunshot wound to the head, then conducts a building-wide sweep to clear any other potential threats. Several wounded people are known to be within your hospital and at least three others are dead. The emergency department is on diversion and at least one patient care area (where the shooter expired) has been evacuated, is designated as a crime scene, and will not be released to return to normal patient care operations for several hours. Law enforcement remains on scene coordinating interviews and collecting evidence. Fire department and emergency medical services are also on scene. The Hospital Command Center (HCC) turns its attention to recovery: reopening the emergency department, rescheduling appointments and procedures, assessing the impact of canceled deliveries, and providing behavioral support to patients, families, and staff. A media briefing is scheduled in one hour.

## **Does your Emergency Management Program address the following issues?**

### **Mitigation**

1.	Does your hospital address the threat and impact of an active shooter incident in the annual Hazard Vulnerability Analysis, including the identification of mitigation strategies and tactics?
2.	Does your hospital participate in pre-incident local response planning with public safety officials (e.g., emergency medical services, fire, and law enforcement), local emergency management officials, other area hospitals, regional healthcare coalition coordinators , and other appropriate public and private organizations, including meetings and conference calls to plan and share status?
3.	Does your hospital have a plan to establish a liaison role with local law enforcement, special weapons and tactics (SWAT) team and the Federal Bureau of Investigation?
4.	Does your hospital have a plan to immediately evacuate patients from nearby areas for protection?
5.	Does your hospital have a way to notify and provide information to staff without causing unnecessary fear?
6.	Does your hospital have a policy to secure the immediate area and the hospital and to restrict entrance or exit of nonessential personnel?
7.	Does your hospital have a staff photo identification badge policy and procedure? Is the policy enforced? Are visiting healthcare providers (residents, students) provided with photo identification?
8.	Does your hospital have a visitor policy that provides visible identification and tracking of all visitors, vendors, and others who may be onsite?
9.	Does your hospital have a mechanism for rapid notification of public relations staff (e.g., Public Information Officer)?
10.	Does your hospital have a media contact policy, including limiting staff speaking to the media without prior approval?
11.	Does your hospital provide regular staff training on managing aggressive behavior?
12.	Does your hospital provide training and reporting procedures that differentiate between an armed suspect, a barricaded suspect, a hostage situation, and an active shooter?
13.	Does your hospital have closed circuit television (CCTV) or video cameras and surveillance recording capabilities (digital or tape) in the hospital and on the campus?

### **Preparedness**

1.	Does your hospital have an Active Shooter Plan that includes:  <input type="checkbox"/> The role of local law enforcement in hospital response? <input type="checkbox"/> The hospital's role in the law enforcement response and its integration with the incident command system external to the organization(e.g., the Incident Command Post)? <input type="checkbox"/> Providing training and education to all staff to respond to an active shooter incident? <input type="checkbox"/> A method to rapidly notify staff and visitors of the event? Is there a standardized code that signifies an active shooter incident, and have staff been trained on the notification?
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	<ul style="list-style-type: none"> <li><input type="checkbox"/> Response to all areas internal to the hospital as well as external areas? Does it include the surrounding neighborhood?</li> <li><input type="checkbox"/> Addressing employees who may have an issue with domestic violence or restraining orders?</li> <li><input type="checkbox"/> Addressing threats against patients, staff, or visitors?</li> <li><input type="checkbox"/> Coordinating communications and information sharing with law enforcement officials?</li> <li><input type="checkbox"/> Sharing information obtained from security systems with law enforcement and, if necessary, prosecutorial officials?</li> </ul>
2.	Does your hospital exercise the Active Shooter Plan yearly and revise it as needed?
3.	Does your hospital train employees in how to handle difficult clients or patients?
4.	Does your hospital have a clear policy and procedure for reporting violence?
5.	Does your hospital have a process for staff or patients to alert the hospital of any restraining orders or other restrictive court orders?
6.	Does your hospital train the appropriate staff in violence prevention and de-escalation?
7.	Does your hospital have an Evacuation Plan with escape procedures and route assignments (e.g., floor plans, safe areas, reunification sites)?
8.	Does your hospital train security personnel in providing guidance to staff and visitors during an active shooter response?
9.	Does your hospital invite local law enforcement and emergency responders to visit or train at your hospital?
10.	<p>Does your hospital have the capability to control access to the hospital, including:</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Ensuring access for first responders?</li> <li><input type="checkbox"/> Keeping an extra set of master keys and access cards available for law enforcement?</li> <li><input type="checkbox"/> Limiting access for additional employees and preventing visitors from entering?</li> <li><input type="checkbox"/> Releasing the magnet-held fire doors without sounding an audible alarm?</li> <li><input type="checkbox"/> Locking doors remotely?</li> </ul>
11.	Does your hospital have adequate security resources? Are those resources armed?
12.	Does your hospital have security technology to assist law enforcement in locating the victims and shooter, and controlling building access?
13.	Does your hospital have a plan to manage visitors and contractors on site?
14.	Does your hospital develop pre-incident emergency messaging strategies based on the identified threat?
15.	Does your hospital clearly identify and mark fire exits and escape routes?
16.	Does your hospital identify and provide safe rooms for staff?
17.	Does your hospital equip patient rooms with locks? Are bathrooms capable of being locked? Can a patient care unit be secured?

18.	Does your hospital tailor training to specific units, patient populations, or job functions?
19.	Does your hospital have a Lockdown Plan (full and zoned lockdown capabilities)? Have all staff been trained in the hospital and campus lockdown procedures and the impact on operations?
20.	Does your hospital have a Shelter-in-Place Plan?
21.	Does your hospital have a process for staff or patients to alert the hospital of any restraining orders or other restrictive court orders?
22.	Does your hospital have emergency call boxes within parking lots, garages, and other remote locations?
23.	Does your hospital have panic or duress alarm buttons installed in high risk areas? Are the alarms routinely tested?
24.	Does your hospital have pre-incident standardized messages for communicating the risks associated with this incident and recommendations to the public and media?
25.	Does your hospital have a process to coordinate the release of risk communications and other public messaging through the incident's Public Information Officer (PIO)?

#### **Immediate and Intermediate Response**

1.	Does your hospital have procedures for evacuation of the immediate hospital areas and to regularly reevaluate the need for further evacuation? Is this evacuation plan coordinated with law enforcement to ensure safety of those evacuated?
2.	Does your hospital have procedures to quickly obtain incident specific details (e.g., witnesses, security cameras, surveillance tapes)?
3.	Does your hospital designate a person to meet with arriving law enforcement and provide access (i.e., keys, access card), maps and detailed floor plans?
4.	Does your hospital have a plan to ensure communications to the incident area?
5.	Does your hospital have an evidence collection policy developed in conjunction with local law enforcement and prosecutorial authorities?
6.	Does your hospital have 24/7 access to risk management and legal counsel?
7.	Does your hospital use social media to disseminate information during and after the event? <input type="checkbox"/> Are all messages approved through the incident's Public Information Officer (PIO) and the Incident Commander prior to release? <input type="checkbox"/> Is information coordinated within the Joint Information Center in cooperation with local, regional, and state emergency management partners?
8.	Does your hospital have a plan to communicate the situation and provide regular updates to patients' family members, as approved by the incident's Public Information Officer (PIO) and the Incident Commander?
9.	Does your hospital have a plan for providing behavioral health support and debriefing services to the incident victims, staff, and visitors?

10.	Does your hospital have a procedure to coordinate media briefings with victims or hostages if approved through the incident's Public Information Officer (PIO) and the Incident Commander?
11.	Does your hospital have a procedure to restore critical care services and reopen to normal operations?
12.	Does your hospital's incident notification procedure include an overhead announcement? Is it in code or in plain language? Does it provide for the incident's detailed location? What language is used?
13.	Does your hospital have procedures that designate who will meet the first responders when they arrive, and where? Do they have communications capability with the first responders?
14.	Does your hospital have procedures that identify how critical phone calls will get through the hospital to Security and the Hospital Command Center (HCC)?
15.	Does your hospital have procedures that address the automatic opening of card access doors to aid in law enforcement response, escaping hostages, and the deactivation of card readers to isolate the threat?

#### **Extended Response and System Recovery**

1.	Does your hospital have dedicated space for long term operations of outside response agencies, including law enforcement?
2.	Does your hospital have the means to relocate services if campus lockdown is extended?
3.	Does your hospital have memoranda of understanding with other hospitals to support clinical operations if campus lockdown is extended?
4.	Does your hospital have a continuing process to capture all costs and expenditures related to operations?
5.	Does your hospital have procedures for evacuation of immediately threatened areas and to regularly reevaluate the need for further evacuation, as the incident evolves?
6.	Does your hospital have a process to reevaluate need for further evacuation on an ongoing basis and implement safe and effective evacuation?
7.	Does your hospital have a mechanism to address hostage support needs (e.g., water, medications, illness, and injury), under the direction of law enforcement?
8.	Does your hospital plan provide for the loved ones of hostages to have a quiet room in a secure area with support services?
9.	Does your hospital have procedures for reporting and documenting staff injuries?
10.	Does your hospital have a policy and procedure to address line-of-duty death?
11.	Does your hospital have a procedure to reunite hostages with their loved ones?
12.	Does your hospital have a procedure to restore normal patient care services and reopen any closed units?

13.	Does your hospital have Hospital Incident Management Team position depth to support extended operations?
14.	Does your hospital have a Business Continuity Plan for long term events?
15.	Does your hospital have procedures to collect and collate incident documentation and formulate an After Action Report and Corrective Action and Improvement Plan?

# Incident Planning Guide: Chemical Incident

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## Definition

This Incident Planning Guide is intended to address chemical incidents and exposures (e.g., chlorine, nerve agent, blister agent, toxic industrial chemicals). Hospitals may customize this Incident Planning Guide for their specific requirements.

## Scenario

At 12:33 PM a 4-engine, mixed cargo freight train enters your city and collides downtown with a truck resulting in several derailed cars. Within a few minutes, first responders and spectators report a large visible cloud rising from the wreckage and people running from the scene with hands over their faces, coughing violently. Local media reports that survivors smell a bleach-like odor. By 12:40 PM, people are showing up at your emergency department presenting with upper airway stridor and pulmonary edema producing clear and blood tinged secretions. Several other patients complain of upper airway symptoms, burning eyes and nose, lung irritation and inflammation, sore throat, difficulty breathing, wheezing, headaches and dizziness, and anxiety. Six are reported dead at the scene. Your hospital begins patient decontamination but two victims die during the process. Your emergency department is at 110% capacity with many patients who smell of chlorine. Emergency department staff are complaining of difficulty breathing because of the fumes. At least 50% of the patients are showing advanced signs of chlorine exposure including burning pain, redness, and blisters on the skin, difficulty breathing, and fluid in the lungs (pulmonary edema). Three more patients expire while being treated following decontamination. At 2:00 PM, emergency medical services responders from the scene report rumors that the ruptured tank car contained 180,000 pounds of liquid chlorine. The two cars behind the chlorine car are also derailed but not ruptured and may also contain dangerous chemicals. Within 4 hours, triage and patient decontamination have been completed and victims have either been treated and admitted or discharged. Your hospital's inpatient units are at 130% capacity. The entrance to the emergency department and the patient decontamination area require cleaning. There is a large collection of contaminated clothing creating a secondary hazard, and two emergency department staff who aided the initial victims are experiencing stridor. Local law enforcement is collaborating with the FBI to conduct an accident investigation and will begin collecting evidence, including patient clothing, as well as interviewing victims. There is a need for behavioral health counseling for patients, staff, and visitors impacted by the incident.

## **Does your Emergency Management Program address the following issues?**

### **Mitigation**

1.	Does your hospital address the threat and impact of a chemical incident in the annual Hazard Vulnerability Analysis, including the identification of mitigation strategies and tactics?
2.	Does your hospital participate in pre-incident local response planning with public safety officials (e.g., emergency medical services, fire, and law enforcement), local emergency management officials, other area hospitals, regional healthcare coalition coordinators , and other appropriate public and private organizations, including meetings and conference calls to plan and share status?
3.	Does your hospital have multiple methods and equipment for transportation of contaminated or decontaminated patients (e.g., chairs, stretchers, backboards, sled type devices, blanket drag, multiple person carry, single person carry)?
4.	Does your hospital have evacuation equipment for bariatric and special needs patients?
5.	Does your hospital define and provide special equipment that may be needed during a chemical incident (e.g., sealing tape, heavy duty plastic, decontamination equipment, appropriate personal protective equipment)?
6.	Does your hospital have immediate access to medication and antidotes?
7.	Does your hospital have a plan to: <input type="checkbox"/> Secure the hospital and prevent contamination of patients, staff, and hospitals? <input type="checkbox"/> Individually control heating, ventilation, and air-conditioning and return air for impacted areas?
8.	Does your hospital use expert information sources (e.g., Poison Control Center, Department of Transportation Emergency Response Guide, Centers for Disease Control and Prevention website, city or county emergency operations plan) when planning for chemical incidents, decontamination, and patient treatment?

### **Preparedness**

1.	Does your hospital have a Chemical Incident Plan?
2.	Does your hospital exercise the Chemical Incident Plan yearly and revise it as needed?
3.	Does your hospital have preparedness strategies to reduce the risk from a chemical incident?
4.	Does your hospital have procedures to notify and engage appropriate internal and external experts, including: <input type="checkbox"/> Security? <input type="checkbox"/> Emergency department? <input type="checkbox"/> Safety? <input type="checkbox"/> Decontamination teams? <input type="checkbox"/> Respiratory? <input type="checkbox"/> Critical care? <input type="checkbox"/> Burn specialists? <input type="checkbox"/> Infection control?

	<input type="checkbox"/> Engineering, facilities, and plant operations? <input type="checkbox"/> Toxicologist or chemical expert?
5.	Does your hospital have a procedure to obtain incident and chemical specific details from local officials immediately after the incident and regularly throughout the response?
6.	<p>Does your hospital have a decontamination team trained to U.S. Occupational Safety and Health Administration operations level following “first receiver” guidance that maintains annual competencies, including using personal protective equipment, donning and doffing procedures, medical surveillance, and respiratory protection program that:</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Monitors the health status of staff that participate in decontamination activities and provide appropriate medical follow-up?</li> <li><input type="checkbox"/> Manages contaminated and non-contaminated personal belongings?</li> </ul>
7.	Does your hospital’s Emergency Operations Plan include an emergency patient registration procedure?
8.	<p>Does your hospital have a procedure to regularly inventory:</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Bed availability and census?</li> <li><input type="checkbox"/> Antidote supplies?</li> <li><input type="checkbox"/> Airway management supplies?</li> <li><input type="checkbox"/> Medications and antidotes including bronchodilators, sedatives, paralytics, and analgesics?</li> </ul>
9.	<p>Does your hospital have a Communications Plan that includes:</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Pre-incident standardized messages for communicating the risks associated with this incident and recommendations to the public and media?</li> <li><input type="checkbox"/> Participation in the Joint Information Center in cooperation with local, county, regional, and state emergency management partners?</li> <li><input type="checkbox"/> Use of social media for communication, including:           <ul style="list-style-type: none"> <li><input type="radio"/> Who can use social media?</li> <li><input type="radio"/> Who approves the use of social media?</li> <li><input type="radio"/> When is the use of social media not appropriate?</li> </ul> </li> <li><input type="checkbox"/> Procedure for notification of internal and external authorities (local, county, region, state)?</li> <li><input type="checkbox"/> A plan to distribute radios, auxiliary phones, and flashlights to appropriate people and areas?</li> <li><input type="checkbox"/> A plan for rapid communication of weather status (watch, warning)?</li> <li><input type="checkbox"/> A plan for rapid communication of situation status to local emergency management and area hospitals?</li> <li><input type="checkbox"/> A process to identify patients and to notify family members?</li> </ul>
10.	Does your hospital identify criteria and procedures to modify the family visitation policy?
11.	Does your hospital have a contingency plan for being a secondary site for chemical agent release?
12.	Does your hospital have a plan to address behavioral health support needs for patients, staff, visitors, and their families?

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## **Immediate and Intermediate Response**

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1.	Does your hospital have a protocol and criteria to determine the safety threat to your hospital from a chemical incident and what safety measures should be taken to protect patients, staff, and visitors?
2.	Does your hospital have a plan to send a representative to the local Emergency Operations Center?
3.	Does your hospital have a plan and procedures to rapidly initiate shelter-in-place, including: <input type="checkbox"/> Immediate shutdown of heating, ventilation, and air-conditioning systems? <input type="checkbox"/> Securing access to the hospital? <input type="checkbox"/> Limiting hospital access to designated secure screening points for staff and visitors entering your hospital? <input type="checkbox"/> Regularly reevaluating shelter-in-place vs. evacuation and coordinating decision making with local officials?
4.	Does your hospital have a Decontamination Plan that can be immediately activated and includes: <input type="checkbox"/> Provisions for gross decontamination of victims until full decontamination can be conducted? <input type="checkbox"/> A triage process to separate contaminated victims from non-contaminated persons presenting for care? <input type="checkbox"/> A procedure to secure the decontamination area? <input type="checkbox"/> A process to monitor that medically qualified and fit-tested personnel are available and assigned to use personal protective equipment and provide patient decontamination? <input type="checkbox"/> A process to specify the level of decontamination required and the ability to adapt to evolving situations? <input type="checkbox"/> A process to expand decontamination operations to provide for a large number of patients (i.e., doffing kits, etc.) including the ability to integrate community decontamination resources when available? <input type="checkbox"/> A process to contain or divert water run-off collection and disposal in conjunction with the Environmental Protection Agency, the local water authority, and procedures to appropriately notify such authorities when decontamination is activated?
5.	Does your hospital have policies and procedures for detecting and monitoring chemical levels in both the hospital and on people? If not, who would be contacted to provide this service, if needed?
6.	Does your hospital have a Communications Plan that addresses: <input type="checkbox"/> How your hospital receives timely and pertinent incident information from field command (e.g., chemical information, decontamination provided, recommendations)? <input type="checkbox"/> A procedure to provide pertinent incident information to the decontamination team, all treatment areas, security and the Hospital Command Center? <input type="checkbox"/> A procedure to notify field command of hospital decontamination location and ingress and egress routes for emergency medical services? <input type="checkbox"/> A procedure to notify the local Emergency Operations Center of operational status? <input type="checkbox"/> A procedure to receive information regarding the operational status of area hospitals? <input type="checkbox"/> A process to establish a media briefing area? <input type="checkbox"/> A procedure to provide scheduled media briefings in conjunction with local emergency management, the local Emergency Operations Center, and the Joint Information Center?

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	<input type="checkbox"/> A plan to work with local emergency management or the local Emergency Operations Center to address risk communication issues for the public? <input type="checkbox"/> A process to identify patients and to notify family members?
7.	Does your hospital consult with pre identified resident experts, such as the Poison Control Center, and the Agency for Toxic Substances and Disease Registry to obtain needed assistance?
8.	Does your hospital have criteria for determining whether shelter-in-place or evacuation of your hospital is required?
9.	Does your hospital have a Fatality Management Plan that addresses: <input type="checkbox"/> Integration with local or state medical examiner or coroner? <input type="checkbox"/> Preservation of evidence and chain of custody? <input type="checkbox"/> Religious and cultural concerns? <input type="checkbox"/> Management of contaminated decedents? <input type="checkbox"/> Family notification procedures? <input type="checkbox"/> Behavioral health support for family and staff? <input type="checkbox"/> Documentation?
10.	Does your hospital's Security Plan include: <input type="checkbox"/> A procedure to secure the hospital to manage the influx of contaminated and non-contaminated patients? <input type="checkbox"/> Working with local law enforcement and public safety officers to preserve and secure evidence, contaminated patient belongings, and specimens? <input type="checkbox"/> A procedure to interface with local, state, and federal law enforcement agencies to interview patients, gather evidence, and investigate the incident? <input type="checkbox"/> Addressing the possibility that the perpetrators are among the injured?
11.	Does your hospital consider the possibility of being a secondary terrorist target and plan for appropriate measures to protect the hospital?
12.	Does your hospital's plan address evidence preservation measures in cooperation with law enforcement and issues regarding transfer of contaminated patient belongings to law enforcement?

### **Extended Response and System Recovery**

	Does your hospital have criteria to prioritize business continuity and recovery activities including:
1.	<input type="checkbox"/> Repair and decontamination of the hospital? <input type="checkbox"/> Reevaluation of your infrastructure's ability to maintain and continue the medical mission? <input type="checkbox"/> Restoration of communication and power systems? <input type="checkbox"/> Communicating, educating, and monitoring of staff? <input type="checkbox"/> Repatriation of evacuated patients? <input type="checkbox"/> Restoration of the hospital and operations to normal?
2.	Does your hospital have a plan to provide behavioral health support and stress management debriefings to patients, staff, and families, including obtaining services from local or regional resources?

	Does your hospital have procedures for:  3. <input type="checkbox"/> Reporting and documenting staff exposures and injuries? <input type="checkbox"/> Addressing biohazardous and contaminated waste disposal? <input type="checkbox"/> Cleaning up the decontamination area and any other contaminated areas for reopening?
4.	Does your hospital have a continuing process to capture all costs and expenditures related to operations?
5.	Does your hospital have a process for submitting costs for disaster reimbursement from insurance carriers, as well as local, state, and Federal Emergency Management Agency disaster relief?
6.	Does your hospital have procedures to debrief patients, staff, and community partners?
7.	Does your hospital have Hospital Incident Management Team position depth to support extended operations?
8.	Does your hospital have a Business Continuity Plan for long term events?
9.	Does your hospital have procedures to collect and collate incident documentation and formulate an After Action Report and Corrective Action and Improvement Plan?

# Incident Planning Guide: Earthquake

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## Definition

This Incident Planning Guide is intended to address issues a hospital should consider in planning for response to an earthquake. Some aspects of this planning may be equally useful and applicable to other incidents that could result in damage to the hospital's structural integrity. Hospitals may customize this Incident Planning Guide for their specific requirements.

## Scenario

A 6.4 magnitude earthquake strikes the region where your hospital is located at 6:05 am. The earthquake shakes the hospital for almost 40 seconds. Throughout the shaking, light fixtures sway, unsecured items fall from shelves and walls, the lights briefly flicker, and staff and patients are frightened. Several staff are injured, including the night shift supervisor. Within minutes, an aftershock is felt, this time lasting only 10 seconds but causing additional panic. The power remains on, but within minutes utility water to the facility fails. Day shift staff are beginning to arrive, and report to the emergency department charge nurse that there is widespread damage to roadways, traffic lights are not functioning, and sirens can be heard across the area. By 7:30 am, the Hospital Command Center has been activated and staffed, damage reports are being received, utility power systems have failed and your hospital is on generator power only. In addition, the complete loss of water continues. Internal communications function but external communications, including emergency medical services, have been lost. The emergency department is inundated with dozens of patients presenting with minor injuries. There is some damage to exterior walls and a complete structural assessment of the hospital is expected tomorrow. More than 100 outpatient appointments, elective surgeries, and elective admissions were canceled and regular supply deliveries were not completed. A media briefing is scheduled for 10:00 am, and social media is reporting that the facility will have to close its doors to new patients until repairs are complete. There is a need for behavioral health counseling for patients, staff, and visitors impacted by the incident.

## **Does your Emergency Management Program address the following issues?**

### **Mitigation**

1.	Does your hospital address the threat and impact of an earthquake in the annual Hazard Vulnerability Analysis, including the identification of mitigation strategies and tactics?
2.	Does your hospital participate in pre-incident local response planning with public safety officials (e.g., emergency medical services, fire, and law enforcement), local emergency management officials, other area hospitals, regional healthcare coalition coordinators , and other appropriate public and private organizations, including meetings and conference calls to plan and share status?
3.	Does your hospital have multiple methods and equipment for transportation of patients (e.g., chairs, stretchers, backboards, sled type devices, blanket drag, multiple person carry, single person carry)?
4.	Does your hospital and all associated buildings undergo evaluations to identify mitigation activities that would prevent or reduce damage when an earthquake occurs?
5.	Does your hospital utilize earthquake shelving or other means to prevent objects from falling during the earthquake? This may include securing of cabinets, bolting large storage carts and shelving, moving objects off of high shelves, etc.
6.	Does your hospital routinely ensure that all entry and exit points in both clinical and nonclinical areas are kept free of obstruction?
7.	Does your hospital identify areas that would be without power when on emergency generators during a power outage? Are clinical staff informed of the risks and have appropriate risk reduction activities for these areas that are identified?
8.	Does your hospital have a cache of basic emergency supplies, including flashlights, batteries, protective gear, food and water, and emergency lighting? Is this cache routinely inspected? Is the cache easily deployable to assigned personnel?
9.	Does your hospital provide personal disaster preparedness education for all staff regarding earthquake and disaster preparedness?

### **Preparedness**

1.	Does your hospital have an Evacuation Plan that includes:  <input type="checkbox"/> Defined criteria and procedures to evacuate all or sections of the hospital based on damage assessments? <input type="checkbox"/> Identified evacuation sites for all clinical and nonclinical services? <input type="checkbox"/> Identified locations for both partial and full hospital evacuation? <input type="checkbox"/> Evacuation routes, tracking tools, necessary supplies and equipment, and a secondary site? <input type="checkbox"/> Tools for the Hospital Command Center to track evacuation progress and obstacles? <input type="checkbox"/> Training for staff on the evacuation policy and procedures, including the use of evacuation assist devices, safety considerations, primary and secondary evacuation routes, and prioritization of patients? <input type="checkbox"/> Identification and training for nonclinical staff to assist in partial and full hospital evacuation? <input type="checkbox"/> Training on evacuation equipment for bariatric and special needs patients?
2.	Does your hospital exercise the Earthquake Plan yearly and revise it as needed?

3.	<p>Does your hospital have supplies, including:</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> First aid supplies?</li> <li><input type="checkbox"/> Work gloves?</li> <li><input type="checkbox"/> Safety goggles and helmets?</li> <li><input type="checkbox"/> "Safesticks" for live wires?</li> </ul>
4.	<p>Does your hospital have a process to assess damage to the structure and infrastructure, including damage to heating, ventilation, air conditioning systems, water and sewer lines, electrical and information systems, fuel sources, communications, medical gases, alarm systems, waste and hazardous materials? Are plans in place for alternative sources and systems if any part of the infrastructure fails?</p>
5.	<p>Does your hospital identify and train staff to perform damage assessment due to an earthquake? Are guidelines and reporting tools available?</p>
6.	<p>Does the Hospital Command Center have tools available to track and consolidate damage assessment reports? Are appropriate personnel trained to identify and prioritize repairs to maintain patient and life safety standards?</p>
7.	<p>Does your hospital have procedures to establish redundant communications with public safety officials and local emergency management in the event of loss of normal communications?</p>
8.	<p>Does your hospital address the loss of any or all utilities in planning? Do contingency plans include water conservation, heat reduction, use of portable generators and spot coolers, and sewage and waste disposal?</p>
9.	<p>Does your hospital have criteria and triggers to cancel elective surgeries, procedures, and all nonessential services?</p>
10.	<p>Does your hospital have a plan for contacting personnel (i.e., staff call back lists) and a backup system if primary systems fail?</p>
11.	<p>Does your hospital rely on an onsite landing zone for receipt of critical patients and materials? Is there a plan and procedure in place to rapidly assess the site following an earthquake?</p>
12.	<p>Does your hospital have a structural or seismic engineer on staff? If not, does your hospital have rapid access to a seismic or structural engineer for post-earthquake assessment and guidance?</p>
13.	<p>Does your hospital assess the need and plan for sheltering staff and families? Does the plan include:</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Provisions for dependent elders, children, and pets?</li> <li><input type="checkbox"/> Location of rest and hygiene facilities for staff, visitors, and families?</li> <li><input type="checkbox"/> Sufficient supplies for hygiene, food and water, sleeping, and recreation?</li> <li><input type="checkbox"/> Food and water for pets?</li> <li><input type="checkbox"/> Policy for pet sheltering that addresses identification, vaccines, medicines, bedding, and litter?</li> <li><input type="checkbox"/> Orientation to the site including safety and security, hours of operations, and feeding options?</li> </ul>
14.	<p>Does your hospital calculate supplies needed for daily operations as well as a surge in occupancy for up to 96 hours of self-sustainment?</p>

15.	Does your hospital identify and train sufficient depth in personnel for staffing the Hospital Incident Management Team positions if there are absences due to staff injury or illness?
16.	Does your hospital identify, document, and test redundant contact information for vendors, suppliers, response partners, and key stakeholders?
17.	Does your hospital have technology (e.g., TV, internet, radio) and policies in place to monitor events?
18.	<p>Does your hospital have a Communications Plan that includes:</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Pre-incident standardized messages for communicating the risks associated with this incident and recommendations to the public and media?</li> <li><input type="checkbox"/> Participation in the Joint Information Center in cooperation with local, regional, and state emergency management partners?</li> <li><input type="checkbox"/> Use of social media for communication, including:           <ul style="list-style-type: none"> <li>○ Who can use social media?</li> <li>○ Who approves the use of social media?</li> <li>○ When is the use of social media not appropriate?</li> </ul> </li> <li><input type="checkbox"/> Procedure for notification of internal and external authorities (local, county, region, state)?</li> <li><input type="checkbox"/> A plan to distribute radios, auxiliary phones, and flashlights to appropriate people and areas?</li> <li><input type="checkbox"/> A plan for rapid communication of weather status (watch, warning)?</li> <li><input type="checkbox"/> A plan for rapid communication of situation status to local emergency management and area hospitals?</li> <li><input type="checkbox"/> A process to identify patients and to notify family members?</li> </ul>

#### **Immediate and Intermediate Response**

1.	Does your hospital have procedures to determine the status of communication systems outside of the hospital in order to communicate with local emergency management, law enforcement, and fire within the city, county, and region?
2.	Does your hospital have a plan to send a representative to the local Emergency Operations Center?
3.	Does your hospital have a plan to establish alternate care sites and relocate services away from damaged areas?
4.	Does your hospital have protocols to assess and treat injuries to patients, staff, and visitors?
5.	Does your hospital have a plan to secure unsafe areas of the hospital, including mechanisms and supplies to restrict entry to those areas?
6.	Does your hospital have a plan to restrict movement in and out of the hospital?
7.	Does your hospital have a plan to communicate hospital and situation status to staff, patients, and visitors?
8.	Does your hospital have a Surge Plan to manage an influx of large numbers of victims or those seeking shelter? Is it coordinated with the local community?
9.	Does your hospital have a process to assess current hospital surge capacity and initiate discharge procedures?

10.	Does your hospital have a policy and procedure to access the status of the community to ensure the safety of discharged patients?
11.	Does your hospital have a procedure for managing discharged patients whose residences are damaged or when roadways are unsafe?
12.	Does your hospital have a process to inventory available supplies, equipment, and personnel for both short and long term operations?
13.	Does your hospital have a plan to track patients and beds? Does the plan include nontraditional areas used to provide patient care?
14.	Does your hospital have a process for obtaining supply and equipment supplementation, including priority contracts or agreements with vendors for automatic delivery?
15.	Does your hospital have procedures for assessment and documentation of hospital damage and system restoration and repair?
16.	Does your hospital have a process for regularly reassessing the status of the hospital, patient care, and staffing and adjusting the Incident Action Plan and operations accordingly?
17.	Does your hospital have a plan to resupply fuel for the generators to maintain power to the hospital? Are there mechanisms or agreements in place to acquire additional generator support if needed?

#### **Extended Response and System Recovery**

1.	Does your hospital have a process for reporting all injuries, system failures, and long-term damage to state licensing and certification authorities as required?
2.	Does your hospital have a policy and procedure to address line of duty death?
3.	Does your hospital have a continuing process to capture all costs and expenditures related to operations?
4.	Does your hospital have a process for submitting costs for disaster reimbursement from insurance carriers, as well as local, state, and Federal Emergency Management Agency disaster relief?
5.	Does your hospital have a policy and procedure in place to recalibrate all medical equipment post event?
6.	Does your hospital have a policy and procedure to return nontraditional areas used in operational support (patient care, rest areas, pet shelters) to pre-incident status?
7.	Does your hospital have Hospital Incident Management Team position depth to support extended operations?
8.	Does your hospital have a Business Continuity Plan for long-term events?
9.	Does your hospital have procedures to collect and collate incident documentation and formulate an After Action Report and Corrective Action and Improvement Plan for submission to the Incident Commander?

# Incident Planning Guide: Evacuation, Shelter-in-Place, & Hospital Abandonment

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## Definition

This Incident Planning Guide is intended to address issues associated with evacuation, shelter-in-place, and hospital abandonment. Hospitals may customize this Incident Planning Guide for their specific requirements.

## Scenario

A construction project at your hospital is underway and includes plans for a temporary complete shutdown of utility power and water. An unplanned water main rupture is created by the construction work before the scheduled shutdown, which results in a massive flood in the basement of your hospital. The hospital's two emergency generators are in the basement, along with the pharmacy, laboratory, most information technology servers, and the main electrical panels. All of these areas are rendered inoperable from the flooding, and are unable to support hospital operations. Two hospital engineers are electrocuted while attempting to turn off the power. The hospital is deemed unsafe for patient care by your leadership and local emergency management. Evacuation is ordered and all available ambulances are being redirected to your hospital. Several hours into the evacuation, the fractured water main is closed and cleanup underway, but is being hampered by the lack of electricity. A number of fuses and circuits were damaged by the water and will need to be replaced before power can resume. Full restoration of all utilities impacted by the event is estimated at approximately 36 hours. Meanwhile, media have descended on the hospital and are demanding information. Many individuals are arriving at the hospital or calling the switchboard, asking where their loved ones have been transferred during the evacuation. Leadership is beginning to discuss patient repatriation, hospital reputation, licensing and certification issues, and associated issues to be managed over the next few days.

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## Does your Emergency Management Program address the following issues?

### Mitigation

1.	Does your hospital address the threat and impact of evacuation, shelter-in-place, and hospital abandonment in the annual Hazard Vulnerability Analysis, including the identification of mitigation strategies and tactics?
2.	Does your hospital participate in pre-incident local response planning with public safety officials (e.g., emergency medical services, fire, and law enforcement), local emergency management officials, other area hospitals, regional healthcare coalition coordinators , and other appropriate public and private organizations, including meetings and conference calls to plan and share status?
3.	Does your hospital have multiple methods and equipment for evacuating patients (e.g., chairs, stretchers, backboards, evacuation assist devices, blanket drag, single person carry, multiple person carry)?
4.	Does your hospital have evacuation equipment for bariatric and special needs patients?
5.	Does your hospital have an evacuation policy for non-patient care areas that includes securing data and the movement of equipment?
6.	Does your hospital provide regular training on evacuation and shelter-in-place?
7.	Does your hospital define and provide special equipment that may be needed during evacuation and shelter-in-place (e.g., flashlights, headlamps, light sticks, sealing tape, etc.)?

### Preparedness

1.	Does your hospital have an Evacuation, Shelter-in-Place, and Hospital Abandonment Plan?
2.	Does your hospital exercise the Evacuation, Shelter-in-Place, and Hospital Abandonment Plan yearly and revise it as needed?
3.	Does your plan include preparedness strategies to reduce the impact of evacuation and shelter-in-place?
4.	Does your hospital participate in community evacuation and shelter-in-place exercises?
5.	Does your hospital identify who has the authority to order hospital evacuation and shelter-in-place?
6.	Does your hospital have a protocol and criteria that defines: <input type="checkbox"/> Shelter-in-place versus evacuation? <input type="checkbox"/> Immediate versus delayed evacuation? <input type="checkbox"/> Vertical versus lateral evacuation? <input type="checkbox"/> Partial versus complete evacuation?

	<p>Does your hospital have a Communications Plan that includes:</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Pre incident standardized messages for communicating the risks associated with this incident and recommendations to the public and media?</li> <li><input type="checkbox"/> Participation in the Joint Information Center in cooperation with local, regional, and state emergency management partners?</li> <li><input type="checkbox"/> Use of social media for communication, including:           <ul style="list-style-type: none"> <li>○ Who can use social media?</li> <li>○ Who approves the use of social media?</li> <li>○ When is use of social media not appropriate?</li> </ul> </li> <li><input type="checkbox"/> Procedure for notification of internal and external authorities (local, county, region, state)?</li> <li><input type="checkbox"/> A plan to distribute radios, auxiliary phones, and flashlights to appropriate people and areas?</li> <li><input type="checkbox"/> A plan for rapid communication of weather status (watch, warning)?</li> <li><input type="checkbox"/> A plan for rapid communication of situation status to local emergency management and area hospitals?</li> <li><input type="checkbox"/> A process to identify patients and to notify family members?</li> </ul>
7.	<p>Does your hospital have staffing plans that include:</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Contingency staff utilization and support plans?</li> <li><input type="checkbox"/> An established list of backup or relief staff that need to be in the hospital before or after the incident to continue patient care, if applicable?</li> <li><input type="checkbox"/> A list of nonessential staff that may be used in alternate roles?</li> <li><input type="checkbox"/> A plan to modify staffing and hours of work?</li> </ul>
8.	<p><b>Immediate and Intermediate Response</b></p>
1.	<p>Does your hospital have criteria and a rapid decision making process to determine the need to activate the Evacuation, Shelter-in-Place, and Hospital Abandonment Plan?</p>
2.	<p>Does your hospital's Evacuation, Shelter-in-Place, and Hospital Abandonment Plan include:</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Procedures for immediate, controlled, and planned evacuation or shelter-in-place of the hospital?</li> <li><input type="checkbox"/> Authority to activate the plan and recover from the event?</li> <li><input type="checkbox"/> Established priorities for patients and the hospital?</li> <li><input type="checkbox"/> Procedures and tracking systems for all patients (ambulatory and non-ambulatory), staff, visitors, and equipment?</li> <li><input type="checkbox"/> Designated evacuation locations, assembly areas, and routing options, including:           <ul style="list-style-type: none"> <li>○ Within the hospital (atrium, auditorium, gym, etc.)?</li> <li>○ External to the hospital (adjacent building, nursing home, other hospitals, schools, etc.)?</li> </ul> </li> <li><input type="checkbox"/> Processes for initiating assembly area and holding area operations, including the provision of adequate staff and equipment?</li> <li><input type="checkbox"/> Process to facilitate the transfer of individual patient information, medications, and valuables with the patient?</li> <li><input type="checkbox"/> Defined personnel roles in the evacuation?</li> <li><input type="checkbox"/> Processes to reassign staff to alternate sites and staging areas, and other hospitals?</li> <li><input type="checkbox"/> Coordination with ambulances, aeromedical services, and other transportation providers, including:           <ul style="list-style-type: none"> <li>○ Additional out of area medical transportation?</li> <li>○ Nonmedical transportation providers (school buses, other types of buses, etc.)?</li> </ul> </li> </ul>

	<input type="checkbox"/> Business Continuity Plans that include use of computerized patient records and billing records from another, adequately secured location?
3.	Does your Evacuation, Shelter-in-Place, and Hospital Abandonment Plan address communications including: <ul style="list-style-type: none"> <li><input type="checkbox"/> Rapid notification of local emergency management, other hospitals, and regional resources of the need for immediate evacuation or shelter-in-place of the hospital and to ascertain their situation status?</li> <li><input type="checkbox"/> Rapid family notification of evacuation and where patients are being relocated?</li> <li><input type="checkbox"/> Regularly providing information and updates to patients, staff, families, and the media?</li> </ul>
4.	Does your hospital have a plan to supplement staffing through call backs or requesting other resources from local emergency management, the local Emergency Operations Center, emergency medical services, fire, law enforcement, and regional medical resources?
5.	Does your hospital have a process for safe shutdown of the hospital, including: <ul style="list-style-type: none"> <li><input type="checkbox"/> Computers, patient monitors, and other electrical equipment shutdown?</li> <li><input type="checkbox"/> Heating, ventilation, and air conditioning?</li> <li><input type="checkbox"/> Power, water, gas, and medical gases?</li> <li><input type="checkbox"/> Methods to protect paper records not being evacuated?</li> <li><input type="checkbox"/> Securing animal research areas?</li> <li><input type="checkbox"/> Maintaining hospital security in all areas during and after closure?</li> </ul>
6.	Does your hospital have policy and procedures that address the securing or movement of hazardous materials if the hospital is evacuated?
7.	Does your hospital have a plan to provide rest and sleep areas, nutrition, and hydration to staff?

#### **Extended Response and System Recovery**

1.	Does your hospital have a process to maintain: <ul style="list-style-type: none"> <li><input type="checkbox"/> Patient tracking?</li> <li><input type="checkbox"/> Response integration with external agencies and hospitals?</li> <li><input type="checkbox"/> Supplies, equipment, and staffing to support an alternate location?</li> </ul>
2.	Does your hospital have a process to: <ul style="list-style-type: none"> <li><input type="checkbox"/> Perform interior and exterior damage assessments?</li> <li><input type="checkbox"/> Salvage equipment remaining onsite?</li> <li><input type="checkbox"/> Secure kitchen and laundry areas?</li> <li><input type="checkbox"/> Secure diagnostic radiology areas, medications, and isotopes?</li> <li><input type="checkbox"/> Maintain heating, ventilation, and air conditioning control, as needed?</li> <li><input type="checkbox"/> Maintain traffic control on campus, as needed?</li> <li><input type="checkbox"/> Ensure adequate space for rest areas and hygiene for staff and family members who may be required to remain in the hospital?</li> <li><input type="checkbox"/> Monitor severity of damage and progress of repairs?</li> <li><input type="checkbox"/> Report damage to the Hospital Command Center and initiate appropriate repairs during and after the incident?</li> <li><input type="checkbox"/> Monitor contractor services (work quality, costs, etc.)?</li> </ul>

	<ul style="list-style-type: none"> <li><input type="checkbox"/> Update inventories of equipment, supplies, and medications?</li> <li><input type="checkbox"/> Determine hospital cleaning needs, including the use of contract service assistance?</li> <li><input type="checkbox"/> Ensure equipment, medications, and supplies are reordered to replace stock supplies?</li> <li><input type="checkbox"/> Ensure all necessary equipment is usable and safety checked, and equipment and supplies are reordered, repaired, and replaced as warranted?</li> <li><input type="checkbox"/> Return borrowed equipment after proper cleaning and replenishment of supplies?</li> <li><input type="checkbox"/> Prioritize service restoration activities?</li> <li><input type="checkbox"/> Restore normal nonessential service operations?</li> </ul>
3.	<p>Does your hospital have criteria for reopening the hospital that consider:</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Differences between partial and complete evacuation?</li> <li><input type="checkbox"/> Certification by local authorities (public health, fire, licensing and accreditation agencies, etc.)?</li> <li><input type="checkbox"/> Regulatory issues?</li> <li><input type="checkbox"/> Psychological considerations of reoccupation?</li> <li><input type="checkbox"/> Corporate influence?</li> <li><input type="checkbox"/> Funding?</li> </ul>
4.	<p>Does your hospital have a process for notifying:</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Local and state Department of Health, licensing, and regulatory agencies?</li> <li><input type="checkbox"/> Staff?</li> <li><input type="checkbox"/> Other hospitals?</li> <li><input type="checkbox"/> Local emergency management, Emergency Operations Center, and emergency medical services?</li> <li><input type="checkbox"/> Media?</li> <li><input type="checkbox"/> Patient families?</li> </ul>
5.	<p>Does your hospital have a mechanism for:</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Support area restoration?</li> <li><input type="checkbox"/> Clinical area restoration?</li> <li><input type="checkbox"/> Outpatient service restoration?</li> <li><input type="checkbox"/> Blood bank service restoration?</li> <li><input type="checkbox"/> Animal lab restoration, when indicated?</li> <li><input type="checkbox"/> Heating, ventilation, air conditioning, and medical gas restoration?</li> <li><input type="checkbox"/> Staffing?</li> <li><input type="checkbox"/> Pharmacy restocking?</li> <li><input type="checkbox"/> Food service restoration?</li> <li><input type="checkbox"/> Linen service restoration?</li> <li><input type="checkbox"/> Return of equipment and supplies from holding sites?</li> </ul>
6.	<p>Does your hospital have procedures for repatriation of patients and staff, including:</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Managing patients dissenting from repatriation?</li> <li><input type="checkbox"/> Patient transportation coordination with sending hospitals?</li> <li><input type="checkbox"/> Medical records management?</li> <li><input type="checkbox"/> Attending physician assignments?</li> <li><input type="checkbox"/> Room assignments?</li> <li><input type="checkbox"/> Patient registration?</li> </ul>

7.	Does your hospital have a continuing process to capture all costs and expenditures related to operations?
8.	Does your hospital have procedures to debrief patients, staff, and community partners?
9.	Does your hospital have Hospital Incident Management Team position depth to support extended operations?
10.	Does your hospital have a Business Continuity Plan for long term events?
11.	Does your hospital have procedures to collect and collate incident documentation and formulate an After Action Report and Corrective Action and Improvement Plan?

# Incident Planning Guide: Explosive Incident

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## Definition

This Incident Planning Guide is intended to address all types of explosive incidents whether they occur at a hospital due to an intentional act (e.g., bomb or bomb threat) or unintentional event (e.g., propane tank or hazardous materials explosion). Hospitals may customize this Incident Planning Guide for their specific requirements.

## Scenario

On Sunday morning, a voicemail message is left on the phone of your hospital Chief of Security. The caller is male and upset about having received a parking citation while visiting his dying mother in the intensive care unit. He says that he knows “how to get even” with the hospital and “you’d better be ready for fireworks.” On Monday morning, a bomb threat is received at your hospital’s security office and evaluated as credible in consultation with local law enforcement. Staff are alerted, building and grounds search procedures are activated in partnership with local law enforcement. Appointments, elective procedures, deliveries, and visiting hours are suspended as a precaution ordered by law enforcement. Shortly thereafter a hospital groundskeeper finds what appears to be a pipe bomb adjacent to the oxygen storage tanks and calls the security office. Law enforcement is notified and they immediately send their Explosive Ordnance Disposal Unit which quickly renders the device safe and your hospital begins to return to normal operations. However, around midday a second threat is received and the Hospital Command Center and search procedure remain activated to determine if any additional devices or suspicious items are on campus. Meanwhile, hospital security has identified several potential suspects based on previous information and have provided these details to law enforcement. No further devices or suspicious items are found. Areas of the hospital, including patient care units that were evacuated to safe zones now return to pre-incident status. Appointments, procedures and deliveries are rescheduled, but there is a backlog due to the incident. There is a need for behavioral health counseling for patients, staff, and visitors impacted by the incident.

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## **Does your Emergency Management Program address the following issues?**

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### **Mitigation**

1.	Does your hospital address the threat and impact of an explosive incident (e.g., bomb, propane explosion, chemical incident, etc.) in the annual Hazard Vulnerability Analysis, including the identification of mitigation strategies and tactics?
2.	Does your hospital participate in pre-incident local response planning with public safety officials (e.g., emergency medical services, fire, and law enforcement), local emergency management officials, other area hospitals, regional healthcare coalition coordinators , and other appropriate public and private organizations, including meetings and conference calls to plan and share status?
3.	Does your hospital address the concepts of “target hardening” through the emergency management committee, safety committee, or Security department? Issues may include: <input type="checkbox"/> Relocation of trashcans, mailboxes, delivery boxes, and other closed collection systems away from entry points <input type="checkbox"/> Use of barriers and other devices to exclude potential vehicle impacts to buildings. <input type="checkbox"/> Installation of metal detectors at entry points <input type="checkbox"/> Posting of signage on the hospital's firearms policy <input type="checkbox"/> Removal of shrubbery, trees, planter boxes, newspaper boxes, and other similar enclosures in proximity of doors and windows
4.	Does your hospital identify all potential entry and exit points of the hospital and contain this information in a single document or file for rapid access?
5.	Does your hospital have panic and automated door intrusion alarms installed in all buildings? Are the alarms routinely tested?
6.	Does your hospital have appropriate high security entry and traffic points fortified with shatterproof glass, secured doors, and cameras?
7.	Does your hospital have and enforce a staff photo identification badge policy and procedure? Are visiting healthcare providers (residents, students) provided with photo identification?
8.	Does your hospital have a visitor policy that provides visible identification and tracking of all visitors, vendors, and others who may be on site?
9.	Does your hospital maintain hazardous materials, including isotopes, in a safe and secure area of the hospital? Is the inventory routinely checked?
10.	Does your hospital maintain potentially explosive and combustible materials (e.g., oxygen, propane, acetylene) in a safe and secure environment? Are the sites routinely observed? Is there a policy or procedure in place if materials are tampered with or missing?
11.	Does your hospital have closed circuit television (CCTV) or video cameras and surveillance recording capabilities (digital or tape) in the hospital and on the campus?
12.	Does your hospital have deployable equipment to restrict access to pedestrian and vehicle traffic?

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## Preparedness

	<p>Does your hospital have an Explosive Incident Plan that includes:</p> <ul style="list-style-type: none"><li><input type="checkbox"/> Initial actions: Recognize, Avoid, Isolate, Notify (RAIN)?</li><li><input type="checkbox"/> Bomb threat call policy and checklist?</li><li><input type="checkbox"/> Reporting policy?</li><li><input type="checkbox"/> Search procedures for personnel?</li><li><input type="checkbox"/> Internal and external notification procedures?</li><li><input type="checkbox"/> Hazardous and explosive materials inventory?</li><li><input type="checkbox"/> Search grids?</li><li><input type="checkbox"/> Hospital and campus floor plans, maps, and evacuation routes?</li><li><input type="checkbox"/> Alternate communications technology?</li><li><input type="checkbox"/> Procedures for immediate, controlled, and planned evacuation or shelter-in-place of the hospital?</li><li><input type="checkbox"/> Restriction of movement?</li><li><input type="checkbox"/> Restriction of pedestrian and vehicle movement on campus?</li><li><input type="checkbox"/> A procedure to evaluate and activate emergency department diversion?</li></ul>
1.	Does your hospital exercise the Explosive Incident Plan yearly and revise it as needed?
2.	Does your hospital provide annual training for staff in the Explosive Incident Plan, including the use and location of bomb threat phone call documentation forms?
3.	Does your hospital train staff on recognition of suspicious packages or items, including initial response safety and notification procedures?
4.	Does your hospital train staff in the recognition of suspicious persons and threatening behavior, to include initial safety and notification procedures?
5.	Does your hospital have policies and procedures to search the campus for suspicious items, including:
6.	<ul style="list-style-type: none"><li><input type="checkbox"/> Identifying, assigning, and training of staff or contractors to conduct and report searches across all areas of your hospital and campus?</li><li><input type="checkbox"/> All common areas, both internal and external?</li><li><input type="checkbox"/> Tracking systems to ensure all areas have been searched?</li><li><input type="checkbox"/> Initial actions to deny entry and notify hospital security or law enforcement?</li></ul>
7.	Does your hospital engage local law enforcement and explosive ordinance disposal (i.e., bomb squad) personnel in development of the Explosive Incident Plan, including: <ul style="list-style-type: none"><li><input type="checkbox"/> Search procedures?</li><li><input type="checkbox"/> Phone call procedures and checklist?</li><li><input type="checkbox"/> Communication procedures, including alternate systems if radios must be turned off?</li><li><input type="checkbox"/> Perimeter considerations?</li><li><input type="checkbox"/> Staging areas?</li><li><input type="checkbox"/> Locations of hazardous materials?</li><li><input type="checkbox"/> Rapid access to surveillance data?</li><li><input type="checkbox"/> Rapid access to deployable equipment to restrict access?</li><li><input type="checkbox"/> Augmentation of hospital security and law enforcement services?</li></ul>

	<p>Does the Explosive Incident Plan include:</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> The role of local law enforcement in hospital response?</li> <li><input type="checkbox"/> Addressing the use of a liaison role to coordinate response and recovery with law enforcement?</li> <li><input type="checkbox"/> Training and education to all staff to respond to an explosive incident?</li> <li><input type="checkbox"/> A method to rapidly notify staff and visitors of the event?</li> <li><input type="checkbox"/> Response to all areas, internal and external, and the surrounding neighborhood?</li> <li><input type="checkbox"/> Addressing employees who may have an issue with domestic violence or restraining orders?</li> <li><input type="checkbox"/> Addressing threats against patients, staff, or visitors?</li> <li><input type="checkbox"/> Coordinating communications and information sharing with law enforcement officials?</li> <li><input type="checkbox"/> Sharing information obtained from security systems with law enforcement and, if necessary, prosecutorial officials?</li> </ul>
8.	
9.	Does your hospital identify a location for an Incident Command Post external to the hospital? Has a staff person been identified and trained to assume the position of Law Enforcement Interface Unit Leader in the Operations Section Security Branch?
10.	Does your hospital have a plan to quickly deploy staff, supplies, equipment, and medications for incident response?
11.	Does your hospital have pre-incident standardized messages for communicating the risks associated with this incident and recommendations to the public and media?

#### **Immediate and Intermediate Response**

1.	<p>Does your hospital's Explosive Incident Plan include:</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> A standardized code to notify all staff of the activation of the Explosive Incident Plan?</li> <li><input type="checkbox"/> Roles and responsibilities identified for all staff when a code is activated?</li> </ul>
2.	Does your hospital train staff in their roles and responsibilities when the code is announced? Has training been provided to visiting staff?
3.	Does your hospital train switchboard operators, administrative support staff, and clerical staff on notification procedures if a bomb threat is received?
4.	Does your hospital have policies, procedures, and documented authorization to initiate internal and external search activities for the hospital?
5.	Does your hospital have a dedicated phone line to receive search results?
6.	Does your hospital maintain contact numbers for all external authorities and is this information available in the Hospital Command Center and at the switchboard?
7.	Does your hospital have procedures to quickly obtain incident specific details (e.g., voicemail messages, witnesses, security cameras, surveillance tapes, and other data) for evidence and intelligence gathering?
8.	<p>Does your hospital have partial and complete evacuation procedures including:</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Identification of relocation sites?</li> <li><input type="checkbox"/> Use of evacuation assistance devices?</li> <li><input type="checkbox"/> Supplies and equipment to support clinical operations in relocated areas?</li> </ul>

	<input type="checkbox"/> Securing of patient data? <input type="checkbox"/> Securing of sensitive data (e.g., research data, billing records, etc.)? <input type="checkbox"/> Triggers for evacuation?
9.	Does your hospital train all staff, clinical and nonclinical, in: <input type="checkbox"/> Partial and complete evacuation? <input type="checkbox"/> Use of evacuation assistance devices? <input type="checkbox"/> Triggers for evacuation?
10.	Does your hospital have an evidence collection policy developed in conjunction with local law enforcement and prosecutorial authorities?
11.	Does your hospital identify safe perimeters if a suspicious device is located onsite, in proximity to explosive and combustible materials or near entry points?
12.	Does your hospital have sufficient staff to enforce perimeter security and safety? Can this staff be rapidly augmented?
13.	Does your hospital maintain contact information for all potential daily vehicle traffic (e.g., vendors, deliveries, transport vans, etc.) in the Hospital Command Center for use if restrictions are placed?
14.	Does your hospital have interoperable communications equipment in place or available for use when external partners respond to the hospital?
15.	Does your hospital have redundant communications systems and policies in place in the event that radio communications are restricted?
16.	Does your hospital use social media to disseminate information during and after the event? <input type="checkbox"/> Are all messages approved through the incident's Public Information Officer (PIO) and the Incident Commander prior to release? <input type="checkbox"/> Is information coordinated within the Joint Information Center in cooperation with local, regional, and state emergency management partners?
17.	Does your hospital have a plan to communicate the situation and provide regular updates to patients' family members, as approved by the incident's Public Information Officer (PIO) and the Incident Commander?

#### **Extended Response and System Recovery**

1.	Does your hospital have policy and technology in place to notify all patients, staff, and stakeholders of the conclusion of the incident?
2.	Does your hospital have dedicated space for long term operations of outside response agencies, including law enforcement?
3.	Does your hospital have the means to relocate services if campus evacuation is extended?
4.	Does your hospital have a plan to return services to evacuated areas?
5.	Does your hospital have a policy and procedure to assess damage post incident and initiate repairs?

6.	Does your hospital have a continuing process to capture all costs and expenditures related to operations?
7.	Does your hospital use social media to monitor its image post incident and respond to inquiries and misinformation?
8.	Does your hospital have a plan to provide behavioral health support and stress management debriefings to patients, staff, and families, including obtaining services of local or regional resources?
9.	Does your hospital have procedures for reporting and documenting staff injuries?
10.	Does your hospital have a policy and procedure to address line-of-duty death?
11.	Does your hospital have Hospital Incident Management Team position depth to support extended operations?
12.	Does your hospital have a Business Continuity Plan for long term events?
13.	Does your hospital have procedures to collect and collate incident documentation and formulate an After Action Report and Corrective Action and Improvement Plan?

# Incident Planning Guide: Hostage or Barricade Incident

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## Definition

This Incident Planning Guide is intended to address issues associated with a hospital hostage situation or barricaded suspect, regardless of the cause: domestic violence; disgruntled patient, employee, or visitor; person with behavioral health issues; random violence; attempted robbery, etc. Hospitals may customize this Incident Planning Guide for their specific requirements.

## Scenario

A hospital staff member has a restraining order against her spouse after he threatened to shoot her. She has reported this to hospital's leadership, human resources, and security. At 9:00 am, her spouse approached her in the clinic within the hospital where she works. He is armed with at least one visible gun. He directs other staff members to close the doors to the clinic and move chairs and tables to block the fire doors. A scheduling clerk at the registration desk is able to push the panic alarm before the patients and staff are moved into a conference room. Four hours pass, local law enforcement personnel have arrived and are working with hospital security and administration to resolve the situation. The hospital campus remains in lockdown. Elective surgeries, clinic appointments, and routine deliveries for the day have been canceled. Visiting hours are suspended. Media are onsite and the Public Information Officer, in collaboration with the law enforcement spokesperson, has kept them up-to-date on the negotiations. The law enforcement negotiator reports the suspect is near surrendering and the hospital should begin to plan for medical evaluation of released staff, patients, and family members. There will be comprehensive law enforcement interviews of everyone involved and intense media attempts to talk to both staff and patients that were held hostage. Plans are needed for the resumption of normal operations, rescheduling cancelled appointments, and resuming supply deliveries. There is a need for behavioral health counseling for patients, staff, and visitors affected by the incident. The hospital will also need to restore public trust.

## **Does your Emergency Management Program address the following issues?**

### **Mitigation**

1.	Does your hospital address the threat and impact of a hostage or barricade incident in the annual Hazard Vulnerability Analysis, including the identification of mitigation strategies and tactics?
2.	Does your hospital participate in pre-incident local response planning with public safety officials (e.g., emergency medical services, fire, and law enforcement), local emergency management officials, other area hospitals, regional healthcare coalition coordinators , and other appropriate public and private organizations, including meetings and conference calls to plan and share status?
3.	Does your hospital have security systems and procedures in place to respond to a hostage or barricade incident?
4.	Does your hospital have security systems to provide a rapid notification to onsite security? If there is no onsite security, is there a method to rapidly notify local law enforcement?
5.	Does your hospital identify all potential entry and exit points of the hospital and contain this information in a single document or file for rapid access?
6.	Does your hospital have panic or duress alarm buttons installed in high risk areas? Are the alarms routinely tested?
7.	Does your hospital have security systems and procedures in place to prevent an armed person from entering the hospital or campus? Is there signage within the buildings or on campus that notifies people entering the hospital that weapons are not allowed?
8.	Does your hospital have a staff photo identification badge policy and procedure? Is that policy enforced? Are visiting healthcare providers (e.g., residents, students) provided with photo identification?
9.	Does your hospital have a visitor policy that provides visible identification and tracking of all visitors, vendors, and others who may be onsite?
10.	Does your hospital provide training and reporting procedures that differentiate between an armed suspect, a barricaded suspect, a hostage situation, and an active shooter?
11.	Does your hospital include issues related to domestic violence and workplace violence in employee training?
12.	Does your hospital address issues of disruptive or violent behavior in patients, staff, and visitors during employee training?
13.	Does your hospital have closed circuit television (CCTV) or video cameras and surveillance recording capabilities (digital or tape) in the hospital and on the campus?

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## Preparedness

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1.	<p>Does your hospital have a Hostage or Barricade Incident Plan that includes:</p> <ul style="list-style-type: none"><li><input type="checkbox"/> The role of local law enforcement in hospital response?</li><li><input type="checkbox"/> Addressing the use of a liaison role to coordinate response and recovery with law enforcement?</li><li><input type="checkbox"/> Providing training and education to all staff to respond a hostage or barricade incident?</li><li><input type="checkbox"/> A method to rapidly notify staff and visitors of the incident? Is there a standardized code that signifies a hostage or barricade incident? Has staff been trained on the notification?</li><li><input type="checkbox"/> Response to all internal and external areas, and the surrounding neighborhood?</li><li><input type="checkbox"/> Addressing employees who may have an issue with domestic violence or restraining orders?</li><li><input type="checkbox"/> Addressing threats against patients, staff, or visitors?</li><li><input type="checkbox"/> Coordinating communications and information sharing with law enforcement officials?</li><li><input type="checkbox"/> Sharing information obtained from security systems with law enforcement and, if necessary, prosecutorial officials?</li></ul>
2.	<p>Does your hospital exercise the Hostage or Barricade Incident Plan yearly and revise it as needed?</p> <p>Does your hospital's Hostage or Barricade Incident Plan include:</p> <ul style="list-style-type: none"><li><input type="checkbox"/> Procedures for immediate, controlled, or planned shelter-in-place or evacuation of the hospital?</li><li><input type="checkbox"/> Authority to activate the plan and recover from the incident?</li><li><input type="checkbox"/> Established priorities for patients and the hospital?</li><li><input type="checkbox"/> Procedures and tracking systems for all patients (ambulatory and non-ambulatory), visitors, staff, and equipment?</li><li><input type="checkbox"/> Designated evacuation locations, assembly areas, and routing options, including<ul style="list-style-type: none"><li><input type="checkbox"/> Within the hospital (atrium, auditorium, gym, etc.)?</li><li><input type="checkbox"/> External to the hospital (adjacent building, nursing home, other hospitals, schools, etc.)?</li></ul></li><li><input type="checkbox"/> Process for initiating assembly area and holding area operations, including provision of adequate staff and equipment?</li><li><input type="checkbox"/> Process to facilitate transfer of individual patient information, medications, and valuables with the patient?</li><li><input type="checkbox"/> Defined personnel roles in evacuation?</li><li><input type="checkbox"/> Processes to reassign staff to alternate sites and staging areas, and other hospitals?</li><li><input type="checkbox"/> Coordination with ambulances, aeromedical services, and other transportation providers, including:<ul style="list-style-type: none"><li><input type="checkbox"/> Additional out of area medical transportation?</li><li><input type="checkbox"/> Nonmedical transportation providers (school buses, other types of buses, etc.)?</li></ul></li><li><input type="checkbox"/> Business Continuity Plans that include use of computerized patient and billing records from another, adequately secured, location?</li></ul>
4.	Does your hospital have multiple methods and equipment for evacuating patients (e.g., chairs, stretchers, backboards, evacuation assist devices, blanket drag, single person carry, multiple person carry)?
5.	Does your hospital have evacuation equipment for bariatric and special needs patients?
6.	Does your hospital have an evidence collection policy developed in conjunction with local law enforcement and prosecutorial authorities?

7.	Does your hospital have incident standardized messages for communicating risks and recommendations to the public and the media?
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### **Immediate and Intermediate Response**

1.	Does your hospital have a process to confirm that a hostage or barricade incident has occurred?
2.	Does your hospital identify and document who has the authority to activate the Hostage or Barricade Incident Plan?
3.	Does your hospital have a Lockdown Plan (full and zoned lockdown capabilities)?
4.	Does your hospital provide training for all staff on lockdown procedures and the impact on operations?
5.	Does your hospital have a mechanism to address hostage support needs (e.g., water, medications, illness, and injury), under the direction of law enforcement?
6.	Does your hospital have procedures that address the automatic opening of card access doors to aid in law enforcement response, escaping hostages, and the deactivation of card readers to isolate the threat?
7.	<p>Does your hospital have a dedicated staging area for law enforcement on arrival?</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Is the staging area documented in the Hostage or Barricade Incident Plan?</li> <li><input type="checkbox"/> Is there a dedicated staff person to liaise with law enforcement?</li> <li><input type="checkbox"/> Is there a staff person with responsibility to gather patient and employee information and provide intelligence to law enforcement?</li> </ul>
8.	Does your hospital have 24/7 access to risk management and legal counsel?
9.	<p>Does your hospital use social media to disseminate information during and after the incident?</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Who has approval over messages to be released?</li> <li><input type="checkbox"/> Is information coordinated within the Joint Information Center?</li> </ul>
10.	<p>Does your Hostage or Barricade Incident Plan address communications, including:</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Rapid notification of local emergency management, other hospitals, and regional medical resources of potential:           <ul style="list-style-type: none"> <li>○ Need for assistance with hostage or barricade incident,</li> <li>○ Need for possible immediate shelter-in-place or evacuation of the hospital</li> <li>○ Need to ascertain their situation status?</li> </ul> </li> <li><input type="checkbox"/> Rapid family notification of possible evacuation and where family member is being relocated?</li> <li><input type="checkbox"/> Regularly providing information and updates to patients, families, staff, and media?</li> <li><input type="checkbox"/> Coordination with the Joint Information Center in cooperation with local, regional, and state emergency management partners?</li> <li><input type="checkbox"/> A method to notify all staff and visitors? Does messaging reach all areas of the hospital?</li> <li><input type="checkbox"/> Training of multiple people given the authority to activate notifications and messaging?</li> <li><input type="checkbox"/> A process to identify patients and to notify family members?</li> </ul>

## **Extended Response and System Recovery**

1.	Does your hospital have dedicated space for long term operations of outside response agencies, including law enforcement?
2.	Does your hospital have a process to maintain: <input type="checkbox"/> Patient tracking? <input type="checkbox"/> Response integration with external agencies and hospitals? <input type="checkbox"/> Supplies, equipment, and staffing to support an alternate location?
3.	Does your hospital have the means to relocate services if campus lockdown is extended?
4.	Does your hospital have memoranda of understanding with other hospitals to support clinical operations if campus lockdown is extended?
5.	Does your hospital have procedures for repatriation of patients and staff, including: <input type="checkbox"/> Managing patients dissenting from repatriation? <input type="checkbox"/> Patient transportation coordination with sending hospital? <input type="checkbox"/> Medical records management? <input type="checkbox"/> Attending physician assignments? <input type="checkbox"/> Room assignments? <input type="checkbox"/> Patient registration?
6.	Does your hospital have criteria for reopening the hospital that consider: <input type="checkbox"/> Differences between partial and complete evacuation? <input type="checkbox"/> Certification by local authorities (public health, fire, licensing and accreditation agencies, etc.)? <input type="checkbox"/> Regulatory issues? <input type="checkbox"/> Psychological considerations of reoccupation? <input type="checkbox"/> Corporate influence? <input type="checkbox"/> Funding?
7.	Does your hospital have a process for notifying: <input type="checkbox"/> Local and state Department of Health, licensing, and regulatory agencies? <input type="checkbox"/> Staff? <input type="checkbox"/> Other hospitals? <input type="checkbox"/> Local emergency management, Emergency Operations Center, and emergency medical services? <input type="checkbox"/> Media? <input type="checkbox"/> Patient families?
8.	Does your hospital have a plan for providing behavioral health support and debriefing services to the incident victims, patients, staff, visitors and community partners?
9.	Does your hospital have procedures for reporting and documenting staff injuries?
10.	Does your hospital have a policy and procedure to address line-of-duty death?
11.	Does your hospital have a policy that oversees and coordinates reunification of the impacted patients and employees and their families? Does it address law enforcement considerations?

12.	Does your hospital plan provide for the loved ones of hostages to have a quiet room in a secure area with support services?
13.	Does your hospital have a procedure to reunite hostages with their loved ones?
14.	Does your hospital have procedures to document all costs incurred in the incident response and recovery?
15.	Does your hospital have Hospital Incident Management Team position depth to support extended operations?
16.	Does your hospital have a Business Continuity Plan for long term events?
17.	Does your hospital have procedures to collect and collate incident documentation and formulate an After Action Report and Corrective Action and Improvement Plan?

# Incident Planning Guide: Infectious Disease

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## Definition

This Incident Planning Guide is intended to address issues associated with infectious disease outbreaks. Infectious disease incidents can come from many sources and with little warning, as was seen with Severe Acute Respiratory Syndrome (SARS), H1N1, zoonotic virus, etc. Hospitals may customize this Incident Planning Guide for their specific requirements.

## Scenario

An outbreak of unusually severe respiratory illness has occurred in Asia. The Centers for Disease Control and Prevention (CDC) has identified this as a novel virus, a subtype never before isolated from humans. Large numbers of human cases are being reported in Hong Kong, Singapore, South Korea, Japan, and now the United States. Young children and pregnant women are most severely affected, and several deaths have been reported. Health departments have increased surveillance reporting and coordinated with news agencies to issue alerts advising anyone experiencing flu-like symptoms to immediately contact their healthcare providers. Your hospital, and other community hospitals, clinics, and pharmacies, are experiencing a surge in patients presenting to be tested and demanding medications, many showing flu-like symptoms. Conflicting guidance from various sources is confusing both the public and healthcare workers regarding appropriate personal protective equipment and which medications are, or are not, effective in prevention and treatment. Local news reports cite confirmed cases of the novel virus in young children and public school systems are beginning to close. Your hospital's emergency department is at 130% of normal capacity, all inpatient beds are in use, and two patients with respiratory illness are on mechanical ventilation. One death has occurred that appears to be outbreak related. Hospital staff members are concerned about exposure and transmitting the virus to their families, and so are demanding personal protective equipment of various types. Increasing levels of staff shortages threaten to affect hospital operations. Alternate staffing plans, visitation, and daily operational plans are being considered, as is behavioral health counseling for patients, staff, and visitors.

## **Does your Emergency Management Program address the following issues?**

### **Mitigation**

1.	Does your hospital address the threat and impact of an infectious disease event in the annual Hazard Vulnerability Analysis, including the identification of mitigation strategies and tactics?
2.	Does your hospital participate in pre-incident local response planning with public safety officials (e.g., emergency medical services, fire, and law enforcement), local emergency management officials, other area hospitals, regional healthcare coalition coordinators , and other appropriate public and private organizations, including meetings and conference calls to plan and share status?
3.	Does your hospital provide information and education to staff on infection control precautions, personal protective equipment, exposure prophylaxis, and dependent care options?
4.	Does your hospital have a plan to limit access to the hospital to prevent exposure of patients, staff, and facilities?
5.	Does your hospital use expert information sources (e.g., Infectious Disease Society, in house infectious disease clinician, Centers for Disease Control and Prevention website, city or county emergency operations plan) when planning for infectious disease incidents, evaluation, and treatment?

### **Preparedness**

1.	Does your hospital have an Infectious Disease Plan?
2.	Does your hospital exercise the Infectious Disease Plan yearly and revise as needed?
3.	Does your hospital have procedures to notify appropriate internal and external experts, including security, emergency department, laboratory, safety, respiratory, critical care, infection control, engineering, and facilities?
4.	Does your hospital have a procedure to obtain incident specific details from local emergency medical services immediately after notification of a pending incident and regularly throughout the response?
5.	Does your hospital have a plan to expand patient care capabilities in the face of a rapid surge of infectious patients that includes: <input type="checkbox"/> Rapid identification, triage, and isolation practices in the emergency department and clinics? <input type="checkbox"/> Expanding isolation capability (cohorting, portable HEPA filtration, etc.)? <input type="checkbox"/> Canceling elective surgeries and outpatient appointments? <input type="checkbox"/> Establishment of alternative treatment sites? <input type="checkbox"/> Integration with other local hospitals, clinics, public health, and emergency management?
6.	Does your hospital have a plan to manage dispensing antiviral medications to staff (Mass Prophylaxis Plan) and for administering vaccines when available?
7.	Does your hospital have a plan to monitor the health status of staff who participate in triage and treatment activities and to provide appropriate medical follow-up?
8.	Does your hospital have a policy to send sick staff home and to ensure that sick staff stay home?

9.	Does your hospital have an emergency patient registration plan? Does this plan include a searchable method to identify those patients presenting with infectious disease complaints?
10.	Does your hospital have policies and procedures to track emergency department, outpatient activity, and inpatient census data for trends, and to report information to the appropriate partners?
11.	Does your hospital have a procedure to limit hospital access to a small number of monitored entrances so that patients and visitors entering the hospital can be screened for illness (e.g., screening questions, temperature checks)?
12.	Does your hospital have a plan for ensuring safe transportation routes and infection control procedures (e.g., patients wearing masks) when transferring patients through the hospital (i.e., from the emergency department to inpatient units)?
13.	Does your hospital have a plan to provide alternate care provisions (e.g., point-of-care testing, portable x-rays, limited diagnostic services)?
14.	Does your hospital have a procedure to regularly inventory bed availability and census?
15.	Does your hospital have a process in place to determine appropriate amounts of personal protective equipment and hand hygiene supplies required for incident response? Is there a process in place to procure additional supplies?
16.	Does your hospital have a procedure to regularly inventory antiviral and medication supplies, personal protective equipment, and other required supplies?
17.	Does your hospital have a policy to determine appropriate numbers of essential personnel that would be prioritized for receiving prophylaxis, vaccine, and personal protective equipment to protect those staff most at risk and to ensure the continuation of essential services (e.g., medical staff, nursing, environmental services, facilities, nutrition and food services, administrative, and ancillary clinical staff including respiratory therapy, radiology technicians, medical records, information technology, and laboratory)?
18.	Does your hospital have a plan to: <ul style="list-style-type: none"> <li><input type="checkbox"/> Safely package, identify, and transfer laboratory specimens to external testing sites, including local, state, and federal labs?</li> <li><input type="checkbox"/> Increase the capability to perform specific screening tests for designated pathogens?</li> <li><input type="checkbox"/> Relay laboratory results to internal clinical sites and external partners?</li> </ul>
19.	Does your hospital have a procedure to provide scheduled family briefings and to establish a family assistance center?
20.	Does your hospital identify criteria and procedures to modify the patient visitation policy?
21.	Does your hospital have a Communications Plan that includes: <ul style="list-style-type: none"> <li><input type="checkbox"/> Participation in the Joint Information Center in cooperation with local, emergency medical services?</li> <li><input type="checkbox"/> Use of social media for communication, including: <ul style="list-style-type: none"> <li>o Who can use social media?</li> <li>o Who approves the use of social media?</li> </ul> </li> </ul>

	<ul style="list-style-type: none"> <li>○ When is use of social media not appropriate?</li> </ul> <p><input type="checkbox"/> Procedures for notification of internal and external authorities (local, county, region, state)?</p> <p><input type="checkbox"/> A plan to distribute radios, auxiliary phones, and flashlights to appropriate people and areas?</p> <p><input type="checkbox"/> A plan for rapid communication of weather status (watch or warning)?</p> <p><input type="checkbox"/> A plan for rapid communication of situation status to local emergency medical services and area hospitals?</p>
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22.	Does your hospital have a plan to address behavioral health support needs for staff, patients, and their families?
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### Immediate and Intermediate Response

1.	Does your hospital have a policy to monitor the health status and absenteeism of staff during the incident?
2.	Does your hospital have a plan to track emergency department, inpatient, and clinic census and symptoms?
3.	Does your hospital have triggers to implement the Infectious Disease Plan?
4.	<p>Does your hospital have a Fatality Management Plan that addresses:</p> <p><input type="checkbox"/> Integration with local or state medical examiner or coroner?</p> <p><input type="checkbox"/> Preservation of evidence and chain of custody?</p> <p><input type="checkbox"/> Religious and cultural concerns?</p> <p><input type="checkbox"/> Management of contaminated decedents?</p> <p><input type="checkbox"/> Family notification procedures?</p> <p><input type="checkbox"/> Behavioral health support for family and staff?</p> <p><input type="checkbox"/> Documentation?</p>
5.	Does your hospital have a triage process to separate potentially infectious persons from noninfectious persons presenting for care?
6.	Does your hospital monitor safe and consistent use of personal protective equipment?
7.	Does your hospital have a plan to maintain hospital security?
8.	Does your hospital have a process to ensure medically qualified and fit-tested personnel are available and assigned to use personal protective equipment, and to provide patient care?
9.	Does your hospital have a process to address how your hospital receives timely and pertinent incident information from local emergency medical services, Centers for Disease Control and Prevention, etc.?
10.	Does your hospital have a procedure to provide pertinent incident information to the treatment team, all treatment areas, security, and the Hospital Command Center?
11.	Does your hospital have a procedure to notify dispatching agencies of the triage location and ingress and egress routes for emergency medical services providers?
12.	Does your hospital have a procedure to receive information about the status of area hospitals?
13.	Does your hospital have a procedure to consult with resident experts for assessment and treatment guidelines?

14.	<p>Does your hospital have a media plan that includes:</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> A process to establish a media briefing area?</li> <li><input type="checkbox"/> A procedure to provide scheduled media briefings in conjunction with the local emergency medical services or the Joint Information Center?</li> <li><input type="checkbox"/> Working with the local emergency medical services to address risk communications to the public?</li> </ul>
15.	<p>Does your hospital have a process to provide accurate and continuous incident documentation, computerized or manual, including:</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Patient care?</li> <li><input type="checkbox"/> Incident management (Incident Action Plan, Hospital Incident Command System forms, etc.)?</li> <li><input type="checkbox"/> Incident related expenses?</li> </ul>
<b>Extended Response and System Recovery</b>	
1.	Does your hospital have criteria to prioritize business continuity and recovery activities including repair and disinfection of the hospital?
2.	Does your hospital have criteria to restore hospital operations to normal?
3.	Does your hospital have a plan to provide behavioral health support and stress management debriefings to patients, staff, and families, including obtaining services from local or regional resources?
4.	Does your hospital have procedures for reporting and documenting staff exposures and injuries?
5.	<p>Does your hospital have a plan to adjust staff schedules to meet the needs of the response including:</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Reassigning staff who have recovered from flu or other infectious diseases to care for infected patients?</li> <li><input type="checkbox"/> Reassigning staff at high risk for complications of infectious disease (e.g., pregnant women, immunocompromised persons) to low risk duties (e.g., no infectious patient care or administrative duties only)?</li> </ul>
6.	<p>Does your hospital have inventory procedures for:</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Current on site supplies of medications, equipment, and supplies?</li> <li><input type="checkbox"/> Receiving medications, equipment, and supplies from outside resources (federal, state, regional, or local stockpiles, vendors, other hospitals) and returning those medications or supplies upon termination of the incident?</li> </ul>
7.	Does your hospital have a continuous process to capture all costs and expenditures related to the incident?
8.	Does your hospital have Hospital Incident Management Team position depth to support extended operations?
9.	Does your hospital have procedures to collect and collate incident documentation and formulate an After Action Report, Corrective Action and Improvement Plan?

# Incident Planning Guide: Information Technology (IT) Failure

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## Definition

This Incident Planning Guide is intended to address information technology (IT) incidents including, but not limited to, server security breach, server virus infection, communications failure, solar flare, or an electromagnetic pulse disrupting electronic equipment. Hospitals may customize this Incident Planning Guide for their specific requirements.

## Scenario

Information technology assessments at your hospital indicate that about 80% of the systems are updated weekly with the latest patches and firewalls, but some systems are months out of date and, for a few, years out of date. Late last evening, all printers throughout your hospital begin to print reams of gibberish. This morning, there are widespread computer associated problems: computers are slow to boot up; are not loading; and are filling up with pornography. The Chief Information Officer received an email from someone claiming to have invaded the system using a Trojan horse program and threatened to broadcast the patient information database unless he's paid at least \$4 million. System administrative passwords are compromised. Email is not available. Servers are shut down and unable to reboot. Router traffic is unreliable. The internal phone system and computers used for patient monitoring are unreliable (data displays show altered information and alarms switch off by themselves). System surveys indicate that 90% of patient records in the system may have been compromised. The Chief Information Technology Officer's assessment is that with consultant support, he can sterilize and return to use about 75% of computers used for documentation and order entry in two days. Unfortunately, the computer based patient monitoring systems will remain unreliable for longer. Email servers and router traffic will also remain unavailable for at least two days. Backup tapes have been contaminated over the previous 2 months. As the news of these events spreads, there is great interest from local licensing and certification authorities, media, and social media.

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## **Does your Emergency Management Program address the following issues?**

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### **Mitigation**

1.	Does your hospital address the threat and impact of an information technology (IT) failure in the annual Hazard Vulnerability Analysis, including the identification of mitigation strategies and tactics, and a system-wide business impact analysis of all critical and non-critical IT systems?
2.	Does your hospital have: <input type="checkbox"/> The latest versions of firewall, antivirus, and spyware software technologies deployed across the enterprise? <input type="checkbox"/> A system to monitor misuse or unauthorized remote access of cybersystems, especially by personnel with access to major data and system integrity? <input type="checkbox"/> A proactive and well documented cybersecurity training program for all personnel with potential access? <input type="checkbox"/> Rules and remote filters for employees working from home to comply with information and systems security?
3.	Does your hospital complete a Hazard Vulnerability Analysis of all cybersystems to determine infrastructure security risks and identified improvements needed for all internal and external threats?
4.	Does your hospital have the ability to terminate access immediately upon an employee's termination of employment?

### **Preparedness**

1.	Does your hospital have an Information Technology Failure Plan that includes enhanced awareness training for staff?
2.	Does your hospital exercise the Information Technology Failure Plan annually and revise it as needed?
3.	Does your hospital include preparedness strategies to reduce the impact from an information technology failure in your emergency management program annual goals?
4.	Does your hospital establish criteria and procedures to activate a Hospital Command Center during emergencies, including who has the authority to activate the plan?
5.	Does your hospital have a Communications Plan that includes: <input type="checkbox"/> Working with the Joint Information Center in cooperation with local, regional, and state emergency management partners? <input type="checkbox"/> Use of social media for communication, including: <ul style="list-style-type: none"><li>○ Who can use social media?</li><li>○ Who approves the use of social media?</li><li>○ When is use of social media not appropriate?</li></ul> <input type="checkbox"/> Procedures for notification of internal and external authorities (local, county, region, state)? <input type="checkbox"/> A plan to distribute radios and auxiliary phones to appropriate people and hospital areas? <input type="checkbox"/> A plan for rapid communication of situation status to local emergency management and area hospitals?

	<p>Does your hospital have:</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> An information technology system malfunction alert and notification procedure?</li> <li><input type="checkbox"/> Trained personnel for information technology response and recovery operations?</li> <li><input type="checkbox"/> Standards for the development and security of systems and substructures (i.e., departments), including non information systems staff with special levels of cybersystems knowledge?</li> <li><input type="checkbox"/> Policies for the interface and deployment of wireless data and voice systems communications?</li> <li><input type="checkbox"/> Backup or alternate contingencies in place for communications, network failure, or equipment failure?</li> <li><input type="checkbox"/> Data backup and data redundancy processes and policies for enterprise wide and departmental specific data systems, including testing to ensure backups are functional?</li> <li><input type="checkbox"/> Data security exchange protocols for secure interface with authorized emergency management agencies?</li> <li><input type="checkbox"/> A management process to approve all information technologies utilized in the organization including, but not limited to, different systems sharing like data and how shared or exchanged data is protected from corruption while allowing access to critical data under emergent conditions?</li> <li><input type="checkbox"/> A protocol to monitor the number of cybersystem response incidents involving external attacks by deliberate attempts to penetrate security and to take appropriate protective actions?</li> <li><input type="checkbox"/> A system of cyber security audits using a scenario based evaluation or a series of critical benchmarks approved by a multidisciplinary committee within your organization?</li> <li><input type="checkbox"/> Policies and procedures for notification of patients and appropriate officials in the event of a protected health information breach?</li> <li><input type="checkbox"/> Departmental Business Continuity Plans with clear recovery time objectives in place? Are these plans tested and exercised?</li> </ul>
6.	
7.	Does your hospital comply with current standards on disaster and emergency management and business continuity as they apply to all third party vendors that support and supply cyber technology services, such as offsite backup and data recovery processes?
8.	Does your hospital comply with current standards on disaster and emergency management and business continuity as they apply to all third party vendors that support and supply cyber technology services, such as offsite backup and data recovery processes?

### **Immediate and Intermediate Response**

	<p>Does your hospital have:</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Systems and procedures to determine what information technology systems are affected by the incident?</li> <li><input type="checkbox"/> Procedures to obtain information on possible entry points of an information technology failure incident?</li> <li><input type="checkbox"/> Procedures to evaluate firewall management and containment, and to respond accordingly?</li> <li><input type="checkbox"/> Policies for the Chief Information Officer or Information Technology Manager to direct staff in identifying potential problem areas?</li> </ul>
1.	

	<p>Does your hospital have communication methods to:</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Issue organizational alerts regarding information technology system failures or viruses affecting systems?</li> <li><input type="checkbox"/> Determine contact lists and communication methods to immediately notify nursing staff and senior medical staff regarding affected information technology systems that will have direct impact on healthcare delivery and the potential to adversely affect patient safety?</li> <li><input type="checkbox"/> Provide emergency incident notification when affected systems will take a significant amount of time to return to full operational status and to alert the Incident Commander and disaster recovery personnel?</li> <li><input type="checkbox"/> Notify patients regarding any delays in service and the overall situation?</li> <li><input type="checkbox"/> Implement regular briefings on information technology systems restoration status for personnel?</li> </ul>
2.	
3.	Does your hospital have procedures for all administrators and healthcare delivery staff to use manual documentation systems or unaffected portable devices and later merge data with recovered systems?
4.	Does your hospital have procedures to identify critical systems and operations directly impacted by a cybersystem compromise (e.g., medical care, patient records, admissions, finance, supply management, computer aided hospital management)?
5.	Does your hospital have procedures to ensure resources (i.e., personnel, equipment, software, and hardware) are obtained as appropriate to provide the fastest and most secure level of information systems recovery?
<b>Extended Response and System Recovery</b>	
1.	Does your hospital have a Business Continuity Plan for long term events?
2.	Does your hospital have Hospital Incident Management Team position depth to support extended operations?
3.	Does your hospital have criteria to restore normal information technology operations?
4.	Does your hospital have procedures to complete incident documentation and archiving?
5.	Does your hospital have a continuing process to capture all costs and expenditures related to operations?
6.	Does your hospital have a plan to provide behavioral health support and stress management debriefings to patients, staff, and families, including obtaining services of local or regional resources?
7.	Does your hospital have 24/7 access to risk management and legal counsel?
8.	Does your hospital have procedures to collect and collate incident documentation and formulate an After Action Report and Corrective Action and Improvement Plan for submission to the Incident Commander?

# Incident Planning Guide: Mass Casualty Incident

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## Definition

This Incident Planning Guide is intended to address issues associated with a mass casualty incident and subsequent patient surge, regardless of the precipitating event, that taxes a hospital's ability to provide care to all patients. Mass casualty incidents can come from many situations, such as transit incidents, mass gatherings, building collapse, and others. Hospitals may customize this Incident Planning Guide for their specific requirements.

## Scenario

Late one afternoon, breaking news on the waiting room television shows reports of a bridge collapse over a nearby river as rush hour begins. Secondary fires have erupted and there are victims in the river. Your hospital is the closest to the incident. 911 dispatch notifies area emergency departments of the mass casualty incident and projects greater than 100 victims. The county Emergency Operations Center is activated. Your hospital's emergency department is at 90% capacity and is holding 16 inpatients waiting for beds. Several victims have begun to self-present on foot with minor injuries. In addition to casualties, you can anticipate a media onslaught, high telephone volume from families looking for relatives, licensed and non-licensed volunteers, and behavioral health counseling needs for patients, families, and staff.

## **Does your Emergency Management Program address the following issues?**

### **Mitigation**

1.	Does your hospital address the threat and impact of a mass casualty incident in the annual Hazard Vulnerability Analysis, including the identification of mitigation strategies and tactics?
2.	Does your hospital participate in pre-incident local response planning with public safety officials (e.g., emergency medical services, fire, and law enforcement), local emergency management officials, other area hospitals, regional healthcare coalition coordinators , and other appropriate public and private organizations, including meetings and conference calls to plan and share status?
3.	Does your hospital include mitigation strategies to reduce the risk from a mass casualty incident in your emergency management program?
4.	Does your hospital have agreements with other hospitals to share resources and information?
5.	Does your hospital have established mechanisms with emergency medical services to distribute patients to appropriate hospitals within the area to avoid overwhelming individual hospitals?

### **Preparedness**

	Does your hospital have a Mass Casualty Incident Plan that includes:  <input type="checkbox"/> A procedure for canceling elective surgeries, procedures, and outpatient appointments? <input type="checkbox"/> A procedure for rapid patient registration? <input type="checkbox"/> A procedure to track and identify patients? <input type="checkbox"/> A procedure to facilitate patient discharge from the emergency department? <input type="checkbox"/> A system to quickly move patients waiting to be admitted out of the emergency department? <input type="checkbox"/> A procedure to utilize alternate treatment areas within your hospital for overflow victims? <input type="checkbox"/> A procedure to facilitate early discharges and transfers out of your hospital? <input type="checkbox"/> A system to obtain current bed status, availability, and a census of patients waiting to be admitted? <input type="checkbox"/> A procedure to alert relevant staff (emergency department, critical care, surgery, radiology, blood bank, etc.) that will need to be called in?  1. <input type="checkbox"/> A mechanism for providing staff with information including notifying them when adequate staff have reported to your hospital? <input type="checkbox"/> A procedure to evaluate and activate emergency department diversion status? <input type="checkbox"/> A procedure to enforce patient discharge times and a holding area for discharged patients to wait until transportation arrives? <input type="checkbox"/> A plan for a staffed observation area for pediatric or other patients that have completed medical care but cannot be discharged? <input type="checkbox"/> Agreements with healthcare partners to provide nonessential services to patients? <input type="checkbox"/> A procedure to establish a family waiting area or reunification area? <input type="checkbox"/> A procedure to effectively manage special needs populations (i.e., deaf, blind, behavioral health, pediatric, and bariatric)? <input type="checkbox"/> A procedure to establish a media area?
2.	Does your hospital exercise the Mass Casualty Incident Plan yearly and revise it as needed?
3.	Does your hospital have a plan for prioritizing essential patient care, resources, and triggers for implementing crisis standards of care?

4.	Does your hospital have a trigger and a process to change documentation and ordering of clinical studies during a mass casualty incident?
5.	Does your hospital have a plan to increase emergency department capacity (e.g., doubling rooms, medical gas outlets, point-of-care testing)?
6.	Does your hospital have a process for secondary triage of patients for resources such as computed tomography (CT scan) or operating room (OR) availability?
7.	Does your hospital have a plan to supplement staffing, including use of registry nurses and other licensed healthcare professionals?
8.	Does your hospital have a Volunteer Utilization Plan for the use of solicited and unsolicited volunteers that includes verification of licensure and certification?
9.	Does your hospital have a plan to quickly deploy staff, supplies, equipment, and medications for a mass casualty incident?
10.	Does your hospital have a plan to contact medical staff to support emergency department physicians (e.g., hospitalists, intensivists, surgeons)?
11.	Does your hospital have a procedure for requesting resources and assistance from the local emergency medical services?
12.	Does your hospital have plans to supplement supplies, equipment, and medications for long-term operations with community-wide, regional, state, or national impact?
13.	Does your hospital have a plan to provide employee food, water, and rest areas throughout a prolonged incident?
14.	Does your hospital's Business Continuity Plan include a line of succession when administrative staff are unavailable?
15.	Does your hospital have a plan to provide dependent care for staff to encourage them to report for duty?
16.	Does your hospital have a process to provide accurate and continuous incident documentation, computerized or manual, that includes: <input type="checkbox"/> Patient care? <input type="checkbox"/> Incident management (Incident Action Plan, Hospital Incident Command System forms, etc.)? <input type="checkbox"/> Incident related expenses?
17.	Does your Mass Casualty Incident Plan address communications including: <input type="checkbox"/> Pre-incident standard messages for communicating the risks associated with this incident and recommendations to the public and media? <input type="checkbox"/> Participation in the Joint Information System or Joint Information Center in cooperation with local, regional, or state emergency management partners? <input type="checkbox"/> Use of social media for communication, including: <ul style="list-style-type: none"> <li>o Who can use social media?</li> </ul>

- Who approves the use of social media?
  - When is use of social media not appropriate?
- Procedures for notification of internal and external authorities (local, county, region, state)?
- A plan to distribute radios, auxiliary phones, and flashlights to appropriate people and areas?
- A plan for rapid communication of weather status (watch, warning)?
- A plan for rapid communication of the situation to local emergency management and area hospitals?
- A process to identify patients and to notify family members?

### **Immediate and Intermediate Response**

	<p>Does your hospital have a Triage Plan that includes:</p> <p><input type="checkbox"/> Criteria for when to institute triage?</p> <p><input type="checkbox"/> Designated areas for each victim type?</p> <p><input type="checkbox"/> Procedures for mass traumatic injury?</p> <p><input type="checkbox"/> Procedures for biological agent exposure or contamination or both?</p> <p><input type="checkbox"/> Procedures for screening infectious patients?</p> <p><input type="checkbox"/> Procedures for chemical exposure or contamination or both?</p> <p><input type="checkbox"/> Procedures for radiation exposure or contamination or both?</p> <p><input type="checkbox"/> Segregation of exposed versus contaminated patients?</p> <p><input type="checkbox"/> Behavioral health services for anxious or asymptomatic patients?</p>
1.	<p>Does the Mass Casualty Incident Plan include:</p> <p><input type="checkbox"/> Procedures to obtain additional medical support?</p> <p><input type="checkbox"/> Procedures to hold or cancel pending surgeries and outpatient procedures?</p> <p><input type="checkbox"/> Determination of “fitness for duty” (temperature checks, symptom review, etc.)?</p>
2.	<p>Does your hospital have a Fatality Management Plan that addresses:</p> <p><input type="checkbox"/> Integration with local or state Medical Examiner or Coroner?</p> <p><input type="checkbox"/> Preservation of evidence and chain of custody?</p> <p><input type="checkbox"/> Religious and cultural concerns?</p> <p><input type="checkbox"/> Management of contaminated decedents?</p> <p><input type="checkbox"/> Family notification procedures?</p> <p><input type="checkbox"/> Behavioral health support for family and staff?</p> <p><input type="checkbox"/> Documentation?</p>
3.	Does your hospital have a process to facilitate rapid discharge of patients to home or alternate sites?
4.	Does your hospital have a process to track patients who are transferred to other facilities?
5.	Does your hospital have a process to notify family members when patients are moved to other facilities?
6.	Does your hospital have a plan to regularly communicate with patients, staff, and families about the hospital’s status?
7.	Does your hospital have the ability to expedite the cleaning of patient care areas?

	Does your hospital have an Alternate Care Site Plan that includes:
9.	<input type="checkbox"/> Criteria and rapid decision making processes for determining the need to activate? <input type="checkbox"/> Provision of appropriate supplies, equipment, and staffing? <input type="checkbox"/> Provision of adequate communications and information technology capability once established? <input type="checkbox"/> Notification of local emergency medical services of location, type, and acuity of patients to be diverted from the hospital's emergency department?
10.	Does your hospital have a Volunteer Utilization Plan that includes: <input type="checkbox"/> Verification of license and identification? <input type="checkbox"/> Providing orientation to the facility and work area, including safety and infection control? <input type="checkbox"/> Confidentiality agreement? <input type="checkbox"/> Chain of command or supervision? <input type="checkbox"/> Assignment of duties? <input type="checkbox"/> Communication? <input type="checkbox"/> Documentation?
<b>Extended Response and System Recovery</b>	
1.	Does your hospital have a process to determine the need for canceling elective procedures and surgeries and other nonessential services (e.g., gift shop) and activities (e.g., conferences, meetings)?
2.	Does your hospital have a process to reschedule canceled surgeries, procedures, and services in a timely but graduated manner?
3.	Does your hospital have a plan and procedures to ensure continuation of patient care services?
4.	Does your hospital have a continuing process to capture all costs and expenditures related to operations?
5.	Does your hospital have a Demobilization Plan that includes criteria for deactivation of positions, reactivation of services, and the return to normal operations?
6.	Does your hospital have a plan to provide behavioral health support and stress management debriefings to patients, staff, and families, including obtaining services of local or regional resources?
7.	Does your hospital have procedures for reporting and documenting staff exposures and injuries?
8.	Does your hospital have Hospital Incident Management Team position depth to support extended operations?
9.	Does your hospital's Business Continuity Plan address long term events?
10.	Does your hospital have procedures to collect and collate incident documentation and formulate an After Action Report and Corrective Action and Improvement Plan?

# Incident Planning Guide: Missing Person

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## Definition

This Incident Planning Guide is intended to address issues associated with a missing person, whether an infant, child, or adult, caused by abduction, elopement, or wandering. Hospitals may customize this Incident Planning Guide for their specific requirements.

## Scenario: Infant Abduction

A newborn's grandmother has been visiting and helping to care for the newborn while the new mother rests. The grandmother tells a nursing assistant that she is going to the cafeteria while her daughter and the baby sleep. A short while later, the new mother contacts the nurses' station asking for her mother and the baby. Following some quick questions, the staff suspect the baby's grandmother may have taken the newborn with her to "protect" the baby from the mother's high-risk lifestyle. Your hospital's leadership and security are immediately notified and the Infant Abduction Response Plan is activated. An overhead announcement on the public address system notifies all staff. The baby is not found and law enforcement is called to assist. The mother is frantic and nursing staff requests support from behavioral health. Law enforcement officials arrive, ask for the hospital's Incident Commander, and request a private room in the pediatric unit to conduct interviews and collect evidence. The Hospital Command Center is activated and the Incident Commander begins to address ongoing coordination with law enforcement, securing the building from media reporters and other unsecured visitors, providing behavioral health support to patients, staff, and families; and preparing for a media briefing that is scheduled in one hour, and assessing the impact on the hospital's reputation.

## Scenario: Child Abduction

A 6-year-old boy is recovering from minor surgery on the pediatric ward. His parents are divorced, and his mother has sole custody. An order of protective custody is in effect to keep the father away from the child and his mother. While his mother goes to the cafeteria for coffee, the boy's father enters the hospital and takes the sleeping boy from his room. Upon return, the frantic mother notifies the nursing staff of her son's disappearance. Your hospital's Missing Child Response Plan is activated. An overhead announcement on the public address system notifies all staff. The boy is not found and law enforcement is called to assist. The mother is frantic and nursing staff requests support from, from behavioral health. Law enforcement officials arrive, ask for the hospital's Incident Commander, and request a private room in the pediatric unit to conduct interviews and collect evidence. The Hospital Command Center is activated and the Incident Commander begins to address ongoing coordination with law enforcement, securing the building from media reporters and other unsecured visitors, providing behavioral health support to patients, staff, and families, assessing the impact on the hospital's reputation, and preparing for a media briefing that is scheduled in one hour.

## **Scenario: Missing Adult**

A 62-year-old man with dementia is recovering from pneumonia on your hospital's medical ward. He is given sedation at night to help him sleep. Upon arriving in the morning to visit her father, the patient's daughter cannot locate him in his room or on the unit. Nursing staff report that he is not scheduled for tests today. The Missing Person Response Plan is activated. An overhead announcement on the public address system notifies all staff. The boy is not found and law enforcement is called to assist. The daughter is frantic and nursing staff requests support from, from behavioral health. Law enforcement officials arrive, ask for the hospital's Incident Commander, and request a private room to conduct interviews and collect evidence. The Hospital Command Center is activated and the Incident Commander begins to address ongoing coordination with law enforcement, securing the building from media reporters and other unsecured visitors, providing behavioral health support to patients, staff, and families, assessing the impact on the hospital's reputation, and preparing for a media briefing that is scheduled in one hour.

## **Does your Emergency Management Program address the following issues?**

### **Mitigation**

1.	Does your hospital address the threat and impact of a missing person (infant, child, adult) in the annual Hazard Vulnerability Analysis, including the identification of mitigation strategies and tactics?
2.	Does your hospital participate in pre-incident local response planning with public safety officials (e.g., emergency medical services, fire, and law enforcement), local emergency management officials, other area hospitals, regional healthcare coalition coordinators , and other appropriate public and private organizations, including meetings and conference calls to plan and share status?
3.	Does your hospital have security systems and procedures in place to prevent infant and child abduction (e.g., arm bands, secured areas, education and training)?
4.	Does your hospital have security systems to ensure patients with altered mental capacity (e.g., dementia) cannot wander from assigned areas or units?
5.	Does your hospital identify all potential entry and exit points of the hospital and contain this information in a single document or file for rapid access?
6.	Does your hospital have security cameras, panic alarms, automated door intrusion detection, etc.? Is there rapid access to the recordings or reports of these systems? Are these systems monitored 24/7?

### **Preparedness**

1.	Does your hospital have a Missing Person Plan that includes:  <input type="checkbox"/> The role of local law enforcement? <input type="checkbox"/> Primary and redundant contact information for law enforcement? <input type="checkbox"/> The use of a liaison role to coordinate response and recovery with law enforcement officials? <input type="checkbox"/> Policies, procedures, and equipment to coordinate communications, messaging, and information sharing with law enforcement officials? <input type="checkbox"/> Policies and procedures to share information obtained from security systems with law enforcement and, if necessary, prosecutorial authorities? <input type="checkbox"/> A method to rapidly notify staff and visitors of the incident? Are there standardized codes that signifies a missing (infant, child, adult) incident? Has staff been trained on the notification(s)?
2.	Does your hospital provide training and education to all staff to respond to a missing person, whether infant, child, or an adult?
3.	Does your hospital exercise the Missing Person Plan annually and revise it as needed?
4.	Does your hospital have a policy and procedures in place to rapidly notify staff and visitors of the incident? Is there a standardized code that signifies a missing person? Have staff been trained?
5.	Does your hospital have policy and procedure to search the campus that includes:  <input type="checkbox"/> Identifying, assigning, and training of staff or contractors to conduct and report searches across all areas of your hospital and campus? <input type="checkbox"/> Tracking systems to ensure all areas have been searched? <input type="checkbox"/> Hospital and campus floor plans, maps, and evacuation routes? <input type="checkbox"/> Response to all areas internal and external areas, and the surrounding neighborhood?

	<input type="checkbox"/> Search grids? <input type="checkbox"/> Restricting Movement? <input type="checkbox"/> Sharing search results with the Hospital Incident Management Team and law enforcement?
6.	Does your hospital have pre-incident standardized messages for communicating risks and recommendations to the public and the media?
<b>Immediate and Intermediate Response</b>	
1.	Does your hospital have a process to confirm that a person (infant, child, adult) is missing?
2.	Does your hospital identify in writing who has the authority to activate the Missing Person Plan?
3.	Does your hospital have a Lockdown Plan (full and zoned lockdown capabilities)?
4.	Does your hospital provide training for all staff on the lockdown procedure and impact on operations?
5.	Does your hospital have a plan and procedure in place to notify all staff and visitors of a missing person? Does messaging reach all areas of the hospital? Are multiple people trained and given the authority to activate notifications and messaging?
6.	Does your hospital have a staff person assigned to liaise with law enforcement?
7.	Does your hospital have a dedicated staging area for law enforcement on arrival? <input type="checkbox"/> Is the staging area documented in the Missing Persons Plan? <input type="checkbox"/> Is there a dedicated staff person to liaise with law enforcement? <input type="checkbox"/> Is there a staff person with responsibility to gather patient and employee information and provide intelligence to law enforcement?
8.	Does your hospital have 24/7 access to risk management expertise and legal counsel?
9.	Does your hospital use social media to disseminate information during and after the incident? <input type="checkbox"/> Who has approval over messages to be released? <input type="checkbox"/> Is information coordinated within the Joint Information Center?
<b>Extended Response and System Recovery</b>	
1.	Does your hospital have dedicated space for long term operations of outside response agencies, including law enforcement?
2.	Does your hospital have a means to relocate services if campus lockdown is extended?
3.	Does your hospital have memoranda of understanding with other hospitals to support clinical operations if campus lockdown is extended?
4.	Does your hospital have a plan to provide behavioral health support and stress management debriefings to patients, staff, and families, including obtaining services of local or regional resources?
5.	Does your hospital have Hospital Incident Management Team position depth to support extended operations?

6.	Does your hospital have a continuing process to capture all costs and expenditures related to operations?
7.	Does your hospital plan provide for the loved ones of hostages to have a quiet room in a secure area with support services?
8.	Does your hospital have a plan that oversees and coordinates reunification of the missing person and their family? Does it address law enforcement considerations?
9.	Does your hospital have an evidence collection policy developed in conjunction with local law enforcement and prosecutorial authorities?
10.	Does your hospital have a procedure to reunite hostages with their loved ones?
11.	Does your hospital have procedures to collect and collate incident documentation and formulate an After Action Report and Corrective Action and Improvement Plan for submission to the Incident Commander?

# Incident Planning Guide: Radiation Incident

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## Definition

This Incident Planning Guide is intended to address issues associated with a radiation incident (radiation dispersal device, small-scale improvised nuclear device, radiation leak or spill, etc.). Hospitals may customize this Incident Planning Guide for their specific requirements.

## Scenario

During a well-attended local baseball game, a bomb explodes, destroying half of the stands in one wing and the nearby vending areas. As survivors flee the stadium, an additional smaller bomb explodes near an exit, creating multiple casualties. Law enforcement, fire, and emergency medical services (EMS) are first to respond; the number injured and fatalities are estimated in the hundreds. Surviving victims are evacuated to local hospitals, yours of which is the closest. Four people have self-transported to your hospital emergency department. During survivor triage at the scene, significant radiation levels are detected and hospitals are notified of the radiation findings. Local law enforcement has determined that the second bomb was a “dirty bomb” containing cesium-137 stolen from another hospital. A local militia group is claiming responsibility. By the end of the day, a total of 150 people have been transported by EMS to your hospital with varying levels of injury. Local response partners performed gross decontamination at the scene, but at least 40% of these people still show significant levels of radiation, as do two of the people who self-transported to your hospital. Later that evening, triage and patient decontamination have been completed and all victims have been treated, transferred to another hospital, or discharged. In your hospital, three staff show symptoms of radiation exposure and require treatment and two emergency department bays require decontamination, as does the entrance and the patient decontamination area. Local law enforcement is collaborating with the Federal Bureau of Investigation (FBI) in interviewing victims and has begun collecting evidence, including patient clothing and nasal swabs. There is a need for behavioral health counseling for patients, staff, and visitors impacted by the incident.

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## **Does your Emergency Management Program address the following issues?**

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### **Mitigation**

1.	Does your hospital address the threat and impact of a radiation incident in the annual Hazard Vulnerability Assessment, including the identification of mitigation strategies and actions?
2.	Does your hospital participate in pre-incident local response planning with public safety officials (e.g., emergency medical services, fire, and law enforcement), local emergency management officials, other area hospitals, regional healthcare coalition coordinators , and other appropriate public and private organizations, including meetings and conference calls to plan and share status?
3.	Does your hospital have multiple methods and equipment for transportation of contaminated or decontaminated patients (e.g., chairs, stretchers, backboards and sled type devices, blanket drag, multiple person carry, single person carry)?
4.	Does your hospital define and provide special equipment that may be needed during a Radiation Incident (sealing tape, heavy duty plastic, decontamination equipment, appropriate personal protective equipment, radiation monitoring equipment, etc.)?
5.	Does your hospital have a plan to: <input type="checkbox"/> Secure the hospital and prevent contamination of patients, staff, and facilities? <input type="checkbox"/> Individually control heating, ventilation, and air conditioning and return air for impacted areas?
6.	Does your hospital use expert information sources (e.g., Poison Control Center; Radiation Emergency Assistance Center/Training Site [REAC/TS], Radiation Emergency Medical Management [REMM], city or county emergency operations plans, etc.) when planning for radiation incidents, decontamination, and patient treatment?
7.	Does your hospital identify how key missions (protection of life and provision of medical care) will be accomplished in the event of an electromechanical pulse (EMP) that destroys all electrical equipment in your area leaving your hospital without power, computers, communications, etc.?

### **Preparedness**

1.	Does your hospital have a Radiation Plan?
2.	Does your hospital exercise the Radiation Incident Plan yearly and revise it as needed?
3.	Does your hospital have preparedness strategies to reduce the risk from a radiation incident?
4.	Does your hospital have procedures to notify and engage appropriate internal and external experts, including: <input type="checkbox"/> Radiation Safety Officer, radiation health physicist, nuclear medicine supervisors and technologists, and radiology technicians as appropriate? <input type="checkbox"/> Security? <input type="checkbox"/> Emergency Department? <input type="checkbox"/> Safety? <input type="checkbox"/> Decontamination teams? <input type="checkbox"/> Respiratory? <input type="checkbox"/> Critical care?

	<input type="checkbox"/> Burn specialists? <input type="checkbox"/> Engineering, facilities, and plant operations? <input type="checkbox"/> Toxicologist or chemical expert?
5.	<p>Does your hospital provide staff training and exercise on:</p> <input type="checkbox"/> Use of decontamination equipment, including radiation detection and monitoring equipment, and maintaining the equipment in a ready state? <input type="checkbox"/> Decontamination and treatment of radiation exposed patients? <input type="checkbox"/> Use of appropriate level and type of personal protective equipment required? <input type="checkbox"/> Monitoring the health status of staff who participate in decontamination activities and providing appropriate medical follow up? <input type="checkbox"/> The management of contaminated and non-contaminated personal belongings? <input type="checkbox"/> Managing hospital security and personnel protection during a radiation incident?
6.	<p>Does your hospital have a procedure to regularly inventory and obtain:</p> <input type="checkbox"/> Bed availability and census? <input type="checkbox"/> Antidote supplies? <input type="checkbox"/> Blood products and other required supplies? <input type="checkbox"/> Specialized equipment and supplies to respond to a radiation incident, including detection and monitoring equipment?
7.	<p>Does your hospital's Radiation Plan address communications including:</p> <input type="checkbox"/> Pre event standardized messages for communicating the risks associated with this incident and recommendations to the public and the media? <input type="checkbox"/> Participation in the Joint Information Center in cooperation with local, regional, and state emergency management partners? <input type="checkbox"/> Use of social media for communication, including: <ul style="list-style-type: none"> <li>○ Who can use social media?</li> <li>○ Who approves the use of social media?</li> <li>○ When is the use of social media communication not appropriate?</li> </ul> <input type="checkbox"/> Procedure for notification of internal and external authorities (local, county, region, state)? <input type="checkbox"/> A plan to distribute radios, auxiliary phones, and flashlights to appropriate people and hospital areas? <input type="checkbox"/> A plan for rapid communication of weather status (watch, warning)? <input type="checkbox"/> A plan for rapid communication of situation status to local emergency management and area hospitals? <input type="checkbox"/> A process to identify patients and to notify family members?
8.	<p>Does your hospital have criteria and a rapid decision making processes to:</p> <input type="checkbox"/> Determine the safety threat to your hospital from the radiological incident? <input type="checkbox"/> Determine what safety measures should be taken to protect patients, staff, and visitors based on the threat? <input type="checkbox"/> Determine whether to shelter-in-place or evacuate (partial vs. complete hospital evacuation)? <input type="checkbox"/> Secure your hospital and control ingress and egress?
9.	<p>Does your hospital have badge or real time dosimetry for detecting and monitoring radiation levels in your hospital and on your people? If not, who would you contact to provide this service, if needed?</p>

10.	Does your hospital consider the possibility of being a secondary terrorist target and plan for appropriate measures to protect the hospital?
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### Immediate and Intermediate Response

1.	<p>Does your hospital have a plan and procedures to rapidly initiate shelter-in-place, including:</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Immediate shutdown of heating, ventilation, and air conditioning systems?</li> <li><input type="checkbox"/> Securing access to the hospital?</li> <li><input type="checkbox"/> Limiting hospital access to designated secure radiation screening points for staff and visitors entering your hospital?</li> <li><input type="checkbox"/> Regularly reevaluating sheltering-in-place versus evacuating and coordinating decision making with local officials?</li> </ul>
2.	<p>Does your hospital have a Decontamination Plan that can be immediately activated to receive patients? Does the plan include:</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Provisions for gross decontamination of victims until full decontamination can be conducted?</li> <li><input type="checkbox"/> A triage process to separate contaminated victims from non-contaminated persons presenting?</li> <li><input type="checkbox"/> A procedure to secure the decontamination area?</li> <li><input type="checkbox"/> A process to monitor that medically qualified and fit tested personnel are available and assigned to use personal protective equipment to provide patient decontamination?</li> <li><input type="checkbox"/> A process to contain or divert water run off collection and disposal in conjunction with the local Environmental Protective Agency and water authority, and to appropriately notify such authorities when decontamination is activated?</li> <li><input type="checkbox"/> A process for monitoring of patients, staff, visitors, and decontamination of the hospital?</li> <li><input type="checkbox"/> A procedure to provide appropriate personal protective equipment to staff and provide “just-in-time” training for staff participating in contaminated patient care?</li> <li><input type="checkbox"/> Procedures to manage radioactive shrapnel in traumatically injured and contaminated patients in surgery?</li> <li><input type="checkbox"/> Procedures to manage arriving patients with blast injuries?</li> </ul>
3.	<p>Does your hospital's Communication Plan address:</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> How your hospital receives timely and pertinent incident information from field command (radiological source information, decontamination provided, recommendations, etc.)?</li> <li><input type="checkbox"/> A procedure to provide pertinent incident information to the decontamination team, all treatment areas, Security, and the Hospital Command Center?</li> <li><input type="checkbox"/> A procedure to notify field command of hospital decontamination location and ingress and egress routes for emergency medical services?</li> <li><input type="checkbox"/> A procedure to notify the local Emergency Operations Center or emergency management of operational status?</li> <li><input type="checkbox"/> A procedure to receive information about the operational status of other area hospitals?</li> <li><input type="checkbox"/> A process to establish a media briefing area?</li> <li><input type="checkbox"/> A procedure to provide scheduled media briefings in conjunction with the Joint Information Center?</li> <li><input type="checkbox"/> A plan to work with the local Emergency Operations Center to address risk communication issues for the public?</li> </ul>

	Does your hospital's Security Plan include:
4.	<input type="checkbox"/> A procedure to secure the hospital to manage the influx of contaminated and non-contaminated patients? <input type="checkbox"/> Working with local law enforcement and public safety officers to preserve and secure evidence, contaminated patient belongings, and specimens? <input type="checkbox"/> A procedure to interface with local, state, and federal law enforcement agencies to interview patients, gather evidence, and investigate the incident? <input type="checkbox"/> Addressing the possibility that the perpetrators are among the injured?
5.	Does your hospital have a Fatality Management Plan that addresses: <input type="checkbox"/> Integration with local and state medical examiner or coroner? <input type="checkbox"/> Preservation of evidence and chain of custody? <input type="checkbox"/> Religious and cultural concerns? <input type="checkbox"/> Management of contaminated decedents? <input type="checkbox"/> Family notification procedures? <input type="checkbox"/> Behavioral health support for family and staff? <input type="checkbox"/> Documentation?
6.	Does your hospital consult with pre identified resident experts to obtain needed assistance; Poison Control Center; Radiation Emergency Assistance Center/Training Site (REAC/TS) and Radiation Emergency Medical Management (REMM), for assessment and treatment guidelines?
7.	Does your hospital have the ability to determine the isotope involved and how this information will be obtained in order to guide further necessary treatments?
8.	Does your hospital have "always on" radiation portal detection and procedures to assess victims of any explosion for radiation?
9.	Does your hospital have procedures to assess patients for potential internal contamination (nasal swabs, use of gamma camera, urine collection, etc.)?
10.	Does your hospital interface with local emergency medical services to transport and evaluate other victims who are potentially non-contaminated to alternate care sites?
11.	Does your hospital have plans in place to safely contain areas of secondary contamination within the hospital (walk off mats, cordons, etc.) and contracts in place for assessment, cleanup, and restoration?
12.	Does your hospital have a process to provide accurate and continuous incident documentation, computerized or manual, including: <input type="checkbox"/> Patient care? <input type="checkbox"/> Incident management (Incident Action Plan, Hospital Incident Command System forms, etc.)? <input type="checkbox"/> Incident related expenses?

### Extended Operations and System Recovery

	Does your hospital have criteria to prioritize business continuity and recovery activities including:
1.	<input type="checkbox"/> Repair and decontamination of the hospital? <input type="checkbox"/> Reevaluation of your hospital's ability to continue the medical mission and take corrective actions?

	<input type="checkbox"/> Restoration of communication and power systems? <input type="checkbox"/> Communicating to, educating, and monitoring staff? <input type="checkbox"/> Repatriation of evacuated patients? <input type="checkbox"/> Restoration of the hospital and operations to normal?
2.	Does your hospital have a plan and adequate supplies to maintain generator emergency power for an extended period?
3.	Does your hospital have a procedure to perform a detailed physical assessment and inspection of the hospital to determine damage from the incident and any other system damage?
4.	Does your hospital have procedures for: <input type="checkbox"/> Reporting and documenting staff exposures and injuries? <input type="checkbox"/> Addressing biohazardous and contaminated waste disposal? <input type="checkbox"/> Cleaning up the decontamination area and any other contaminated areas for reopening?
5.	Does your hospital have procedures for providing behavioral health support and stress management debriefings to patients, staff, and visitors, including obtaining services of local or regional resources?
6.	Does your hospital have a continuing process to capture all costs and expenditures related to operations?
7.	Does your hospital have a process for submitting costs for disaster reimbursement from insurance carriers, as well as local, state, and Federal Emergency Management Agency disaster relief?
8.	Does your hospital have Hospital Incident Management Team position depth to support extended operations?
9.	Does your hospital have a Business Continuity Plan for long term events?
10.	Does your hospital have procedures to collect and collate incident documentation and formulate an After Action Report and Corrective Action and Improvement Plan?

# Incident Planning Guide: Severe Weather with Warning

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## Definition

This Incident Planning Guide is intended to address severe weather situations such as ice storms, heavy snowstorms, rain, flooding, severe heat or cold, or other severe weather events where warning is provided prior to the incident. Severe thunderstorms and hail associated with tornados are considered in a separate Incident Planning Guide. Hospitals may customize this Incident Planning Guide for their specific requirements.

## Scenario

An extended and severe storm was predicted and your hospital implemented response plans including an activation of the Hospital Command Center. Heavy rains started yesterday morning as forecasted and are expected to continue for the next day and a half. High winds have caused many fallen trees, resulting in traffic congestion and lack of vehicle access in some areas. Local officials predict flash floods with small streams and local flooding. There are areas in the community that have lost power with unknown time estimates for restoration of service. About 100 community members have taken shelter in the hospital cafeteria and waiting rooms. Traffic blockage and family needs have affected your staffing with about 20% absenteeism so far. Your hospital's campus grounds are saturated and there is an inflow of water from the street and local creeks, creating large areas of pooled, deep water in low lying areas. Water is slowly seeping through saturated ground into the hospital basement but pumps have been able to keep it under control. This morning your hospital's roof was damaged by the winds and some water is leaking into the upper floors leading to internal patient evacuation to lower floors. Plant engineers are concerned the water may disrupt electrical circuits and lines. Further, your emergency generators are in the basement and could be rendered inoperable if flooding further impacts that area. Several staff have been on site for two days and are requesting to go home to care for their families and check on property. The hospital's main entrance and the entrance to the emergency department will soon be flooded if the rain continues. Engineering reports that water from the roof leak has damaged wiring in the ambulatory surgery and pediatric departments. There are repeated calls from media for information and interviews as well as concerned calls from patient families. Regulatory agencies have requested status reports every six hours. There is a need for behavioral health counseling for patients, staff, and visitors impacted by the events.

## **Does your Emergency Management Plan address the following issues?**

### **Mitigation**

1.	Has your hospital addressed the threat and impact from severe weather in your annual Hazard Vulnerability Analysis, including the identification of mitigation strategies and actions?
2.	Does your hospital reside in a safe location to maintain operations during severe weather?
3.	Does your hospital have a process to consider relocating hazardous materials and chemical agents to prevent storm damage?
4.	Does your hospital regularly monitor pre-incident weather forecasts and projections?
5.	Does your hospital participate in pre-incident local response planning with public safety officials (e.g., emergency medical services, fire, and law enforcement), local emergency management officials, other area hospitals, regional healthcare coalition coordinators , and other appropriate public and private organizations, including meetings and conference calls to plan and share status?
6.	Does your hospital have a plan to initiate pre-incident hospital protective actions to: <input type="checkbox"/> Protect windows? <input type="checkbox"/> Secure outside loose items? <input type="checkbox"/> Test backup generators? <input type="checkbox"/> Bring in supplemental supplies of essential items (e.g., food, water, medications, lighting)? <input type="checkbox"/> Protect basement high risk areas? <input type="checkbox"/> Relocate at risk items to other areas? <input type="checkbox"/> Secure surveillance cameras? <input type="checkbox"/> Activate and support amateur radio operators? <input type="checkbox"/> Top off fuel tanks? <input type="checkbox"/> Consider other actions as indicated?
7.	Does your hospital have multiple methods and equipment for evacuating patients (e.g., chairs, stretchers, backboards, sled type devices, blanket drag, single person carry, multiple person carry)?
8.	Does your hospital have evacuation equipment for bariatric and special needs patients?

### **Preparedness**

1.	Does your hospital have a Severe Weather Plan that includes: <input type="checkbox"/> Education of staff on sheltering and other actions to be taken during a tornado? <input type="checkbox"/> Identification of who has the authority to emergently relocate patients away from a hazard?
2.	Does your hospital have a plan for reminding staff about personal and home emergency preparedness and the importance of exercising it annually?
3.	Does your hospital exercise the Severe Weather Plan annually and revise it as needed?
4.	Does your hospital provide training and education for staff regarding severe weather in your emergency management program annual goals?
5.	Does your hospital participate in community severe weather exercises?

6.	<p>Does your hospital:</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Plan to participate in the Joint Information Center in cooperation with local, regional, and state emergency management partners?</li> <li><input type="checkbox"/> Have pre-incident standardized messages for communicating risks and recommendations to the public and media?</li> </ul>
7.	<p>Does your hospital have technology (e.g., television, internet, radio) and policies in place to monitor external events?</p>
8.	<p>Does your hospital's communication plan include:</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Use of social media for communication? If so, <ul style="list-style-type: none"> <li>○ Who can use social media?</li> <li>○ Who approves the use of social media?</li> <li>○ When is the use of social media not appropriate?</li> </ul> </li> <li><input type="checkbox"/> Distribution of radios and auxiliary phones to appropriate people and areas?</li> <li><input type="checkbox"/> Rapid communication of weather status (watch, warning) and direction of storm?</li> <li><input type="checkbox"/> Rapid communication of situation status to local emergency management and area hospitals?</li> </ul>
9.	<p>Does your hospital have staffing plans that include:</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Contingency staff utilization and support plans?</li> <li><input type="checkbox"/> An established list of backup or relief staff that need to be in the hospital during or after the storm to continue patient care?</li> <li><input type="checkbox"/> A list of nonessential staff that may be used in alternate roles?</li> <li><input type="checkbox"/> A plan to modify staffing and hours of work?</li> <li><input type="checkbox"/> A plan to provide child, dependent and pet care for staff so they can report to and remain on duty during or after the storm?</li> </ul>
10.	<p>Does your hospital have a process to determine daily clinical and nonclinical services to be continued or modified during the storm?</p>
11.	<p>Does your hospital have a plan for alternate care sites within the hospital or on campus, including set up, equipment, staffing, and signage? Does the plan indicate who can activate the alternate care sites?</p>
12.	<p>Does your hospital have a plan to accommodate pregnant women who report to your hospital before or after the storm?</p>
13.	<p>Does your hospital have plans to maintain infrastructure during and after the storm, including:</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Power?</li> <li><input type="checkbox"/> Water?</li> <li><input type="checkbox"/> Personal hygiene and sanitation supplies (e.g., hand wipes, portable toilets, potable water)?</li> <li><input type="checkbox"/> Lighting (e.g., flashlights, portable lights)?</li> <li><input type="checkbox"/> Sewer?</li> <li><input type="checkbox"/> Heating, ventilation, and air conditioning?</li> <li><input type="checkbox"/> Medical gases?</li> <li><input type="checkbox"/> Agreements with fuel suppliers to ensure a supply of fuel for emergency generators and vehicles?</li> <li><input type="checkbox"/> Agreements with contractors that can perform repairs after the storm?</li> </ul>

	<input type="checkbox"/> Other infrastructure as required?
14.	Does your hospital have supplies and plans to address extreme heat, including: <input type="checkbox"/> Cooling measures (fans, ice, cold packs)? <input type="checkbox"/> Cold water and fluids for hydration? <input type="checkbox"/> Medications for sunburn, heat exhaustion, and heat stroke?
15.	Does your hospital have supplies and plans to address extreme cold, including: <input type="checkbox"/> Warm blankets? <input type="checkbox"/> Warm IV fluids? <input type="checkbox"/> Warm liquids for hydration? <input type="checkbox"/> Medications for hypothermia and frostbite?
16.	Does your hospital have a protocol to immediately assess patient conditions and prioritize those most at risk for heat and cold related emergencies?
17.	Does your hospital have mutual aid agreements with emergency medical services and with other hospitals when your hospital has to be abandoned?

#### **Immediate and Intermediate Response**

1.	Does your hospital identify trigger points and who has the authority to activate the Severe Weather Plan?
2.	Does your hospital have a plan and backup systems to maintain communications with the local Emergency Operations Center and other officials during and after the storm?
3.	Does your hospital have a process to evaluate the need for further evacuation of areas of the hospital as a result of structural damage, flooding, or other storm damage?
4.	Does your hospital's evacuation plan include notification of family members when patients are moved to other hospitals?
5.	Does your hospital have a Fatality Management Plan that integrates with law enforcement and the medical examiner or coroner?
6.	Does your hospital have protocols to notify local public health and other response agencies as appropriate of patient status and medical and health problems presenting by types of illness or injury?
7.	Does your hospital have a process to determine the need for canceling elective procedures and surgeries and other nonessential hospital services and activities?
8.	Does your hospital have a plan to transport staff and their families without transportation to the hospital, and a way to house staff and their families and dependents that cannot return to or lose their homes in the storm?
9.	Does your hospital have a plan and procedures to ensure continuation of patient care services?
10.	Does your hospital have a plan to provide rest and sleep, nutrition, and hydration to patients, staff, and visitors before, during, and after the incident?

11.	Does your hospital have procedures to regularly evaluate infrastructure and operational needs, and to implement appropriate actions to meet those needs?
12.	Does your hospital have a plan to maintain essential contract services (e.g., trash pickup, food service delivery, linen and laundry)?
13.	Does your hospital have procedures to monitor environmental issues, water safety, and biohazardous waste disposal during and after the storm for an extended period?
<b>Extended Response and System Recovery</b>	
1.	Does your hospital have a Business Continuity Plan for long term events?
2.	Does your hospital have adequate space for rest and hygiene for staff and family members and dependents who may be required to remain in the hospital due to external hazards?
3.	<p>Does your hospital have procedures to:</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Perform damage assessment (interior and exterior)?</li> <li><input type="checkbox"/> Evaluate infrastructure needs?</li> <li><input type="checkbox"/> Initiate a repair plan or contract for needed repair assistance?</li> <li><input type="checkbox"/> Reevaluate the need for evacuation?</li> <li><input type="checkbox"/> Report damage to the Hospital Command Center and initiate appropriate repairs during and after the storm?</li> <li><input type="checkbox"/> Monitor contractor services (e.g., work quality, costs, etc.)?</li> <li><input type="checkbox"/> Inventory equipment, medications, and supplies?</li> <li><input type="checkbox"/> Salvage equipment remaining onsite?</li> <li><input type="checkbox"/> Secure kitchen and laundry areas?</li> <li><input type="checkbox"/> Secure diagnostic radiology areas, medications, and isotopes?</li> <li><input type="checkbox"/> Maintain heating, ventilation, and air conditioning control?</li> <li><input type="checkbox"/> Maintain traffic control on campus?</li> <li><input type="checkbox"/> Support remaining staff?</li> <li><input type="checkbox"/> Ensure equipment, medications, and supplies are reordered to replace stock supplies?</li> <li><input type="checkbox"/> Ensure all necessary equipment is usable and safety checked, and equipment and supplies are reordered, repaired, and replaced, as warranted?</li> <li><input type="checkbox"/> Return borrowed equipment after proper cleaning and replenishment of supplies?</li> <li><input type="checkbox"/> Prioritize service restoration activities?</li> <li><input type="checkbox"/> Restore normal nonessential service operations?</li> <li><input type="checkbox"/> Repatriate evacuated patients and staff?</li> </ul>
4.	Does your hospital have Hospital Incident Management Team position depth to support extended operations ?
5.	Does your hospital have procedures for reporting and documenting staff injuries?
6.	Does your hospital have a policy and procedures to address line-of-duty death?
7.	Does your hospital have a plan to provide behavioral health support and stress management debriefings to patients, staff, and families, including obtaining services of local or regional resources?

8.	Does your hospital have procedures to debrief patients, staff, and community partners?
9.	Does your hospital have a continuing process to capture all costs and expenditures related to operations?
10.	Does your hospital have a process for submitting costs for disaster reimbursement from insurance carriers, as well as local, state, and Federal Emergency Management Agency disaster relief?
11.	Does your hospital have procedures to collect and collate incident documentation and formulate an After Action Report and Corrective Action and Improvement Plan?

# Incident Planning Guide: Staff Shortage

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## Definition

This Incident Planning Guide is intended to address issues associated with a staff shortage. Hospitals may customize this Incident Planning Guide for their specific requirements.

## Scenario

Your hospital staff is represented by multiple labor unions. Contract negotiations have been ongoing for several days but several key issues have remained unresolved. Although negotiations continue, union officials made statements yesterday that a strike including nursing was likely. A report of the planned labor action reached the local news channels and was included in their 6:00 PM and 11:00 PM reports yesterday. At 6 AM today the expected staff walkout was ordered by the union and the Incident Commander activated the Hospital Command Center. The hospital's inpatient census is 90%, with a full schedule planned for the operating room and outpatient clinics. Physicians, patients, and family members begin calling the hospital to ask about whether scheduled patient care services would continue. The night shift nursing teams are saying they will not return on their next planned shift and will not cross any picket lines. At the direction of the union, many day shift staff are also not reporting to work nor calling in to notify of their absence despite work rules requiring notification. Nursing and other licensed staff who do not normally provide direct patient care have been asked to provide inpatient care. Unfortunately, there are not enough to meet required nurse staffing ratios. Several staffing agencies have been contacted to provide additional support and leadership is planning for contract support by setting up employee health screening, security badging, credentialing verification, etc. Nurse staffing is expected to be reduced by as much as 50% in some units. Many nonessential services and surgeries are being canceled as the walkout scope becomes clear. Inpatients are being assessed for any who may be discharged or transferred. The media have been covering the walkout and are posing many questions regarding the quality and safety of the care provided while staffing is significantly reduced.

## **Does your Emergency Management Program address the following issues?**

### **Mitigation**

1.	Does your hospital address the threat and impact of a staff shortage incident in the annual Hazard Vulnerability Analysis, including the identification of mitigation strategies and tactics?
2.	Does your hospital participate in pre-incident local response planning with public safety officials (e.g., emergency medical services, fire, and law enforcement), local emergency management officials, other area hospitals, regional healthcare coalition coordinators , and other appropriate public and private organizations, including meetings and conference calls to plan and share status?
3.	Does your hospital's Emergency Operations Plan include triggers or criteria for activation of the Emergency Operations Plan and the Hospital Command Center?
4.	Does your hospital have a plan for a staff shortage due to unexpected crises or labor action? Does this include the impact of all representing unions?
5.	Does your hospital have a process to conduct pre-incident planning and prepare for the staff shortage?
6.	Does your hospital have a process to assess the impact of a staff shortage on hospital operations?
7.	Does your hospital have a Business Continuity Plan?

### **Preparedness**

1.	Does your hospital have a Staff Shortage Plan that includes?  <input type="checkbox"/> Contingency staff utilization and support plans? <input type="checkbox"/> A plan to supplement staffing and obtain staffing from outside resources (e.g., registries, other hospitals, out-of-area or state resources, etc.)? <input type="checkbox"/> A protocol for revising staffing patterns, scheduling, and assigned duties during the staff shortage? <input type="checkbox"/> Established lists of backup or relief staff that can be used to continue patient care? <input type="checkbox"/> A plan to assign remaining staff to other duties? <input type="checkbox"/> A list of nonessential staff that may be used in alternate roles? <input type="checkbox"/> A plan to modify staffing and hours of work? <input type="checkbox"/> Plans for alterations in support services to maintain clinical services?
2.	Does your hospital exercise the Staff Shortage Plan annually and revise it as needed?
3.	Does your hospital have procedures to reduce or cancel nonessential inpatient or outpatient services?
4.	Does your hospital have a plan to decrease patient census through early discharges, transfers, and ambulance diversion?
5.	Does your hospital have pre-incident standardized messages for communicating risks and recommendations to the public, patients, staff, and the media regarding the hospital's ability to continue operations?
6.	Does your hospital have a plan for traffic and crowd control that considers picket lines, demonstrations, media attention, while maintaining security of your staff, hospital, and visitors?

7.	Does your hospital have an agreement with other hospitals to provide elective procedures and outpatient services (e.g., dialysis, physical therapy, and clinic visits) in the event of a staff shortage?
8.	Does your hospital have a plan to receive and process healthcare volunteers? Does it require the activation of the Emergency Operations Plan for activation of processing and utilizing volunteers?
<b>Immediate and Intermediate Response</b>	
1.	Does your hospital have a policy to monitor the health status and absenteeism of staff during the incident?
2.	Does your hospital have a procedure to address hospital security, including the threat of violence or civil disturbances?
3.	Does your hospital plan have a mechanism to establish a liaison role with local law enforcement, special weapons and tactics (SWAT) team and the Federal Bureau of Investigation?
4.	Does your hospital have a process to assess the impact of modified staffing on patient care services?
5.	Does your hospital have a process for including local emergency management, local health authorities, local emergency medical services, medical mutual aid coordinators, and other hospitals in the response?
6.	Does your hospital have a procedure for providing situation updates and information to local emergency management and area hospitals?
7.	<p>Does your hospital have a plan to manage temporary staff, including:</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Credentialing, privileging, and primary source verification?</li> <li><input type="checkbox"/> Identification badges?</li> <li><input type="checkbox"/> Food and housing support, transportation assistance, and medical care if needed?</li> <li><input type="checkbox"/> Orientation to the hospital and assigned areas, including emergency codes, infection control practices and performance evaluation?</li> <li><input type="checkbox"/> Staff security and safety?</li> <li><input type="checkbox"/> Scheduling and hours of work?</li> <li><input type="checkbox"/> Supervision while on duty?</li> <li><input type="checkbox"/> Payroll?</li> <li><input type="checkbox"/> Compliance issues (e.g., The Joint Commission, Centers for Medicare &amp; Medicaid Services [CMS], Health Insurance Portability and Accountability Act [HIPAA])?</li> </ul>
8.	<p>Does your hospital have a plan to provide regular information and updates to on duty staff, including:</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Staff attendance?</li> <li><input type="checkbox"/> Staff attitude and compliance with hospital policies?</li> <li><input type="checkbox"/> Staff security needs?</li> <li><input type="checkbox"/> Need for information and updates, including rumor control?</li> <li><input type="checkbox"/> Threat of violence or civil disobedience?</li> <li><input type="checkbox"/> Parking and traffic control?</li> </ul>
9.	Does your hospital have a plan to establish a media staging area and provide regular updates and briefings with situation status and appropriate patient information?

	Does your hospital have a plan to provide regular information and updates to patients and families, including:
10.	<input type="checkbox"/> Rumor control? <input type="checkbox"/> Parking and traffic control? <input type="checkbox"/> Scope of services? <input type="checkbox"/> Staff availability and competence?
11.	Does your hospital have procedures for outsourcing certain services (e.g., laboratory, environmental services)?
12.	Does your hospital have a plan to establish an alternate loading dock area to accept vendor deliveries if vendors refuse to cross picket lines?
13.	Does your Communications Plan include: <input type="checkbox"/> Rapid notification of local emergency management, other hospitals, local emergency medical services and regional medical resources regarding hospital situation status and to ascertain their situation status? <input type="checkbox"/> Regularly providing information and updates to the media? <input type="checkbox"/> Use of social media for communication, including: <ul style="list-style-type: none"> <li>○ Who can use social media?</li> <li>○ Who approves the use of social media?</li> <li>○ When is the use of social media not appropriate?</li> </ul> <input type="checkbox"/> Procedure for notification of internal and external authorities (local, county, region, state)?
14.	Does your hospital have a plan to address behavioral health support needs and stress management services of patients, staff, and families, including obtaining services from local or regional resources?
15.	Does your hospital have 24/7 access to risk management and legal counsel?

#### **Extended Response and System Recovery**

1.	Does your hospital have position depth to support extended operations of the Hospital Incident Management Team?
2.	Does your hospital have a Business Continuity Plan for long term incidents?
3.	Does your hospital have a Demobilization Plan that includes criteria for deactivation of positions, reactivation of services, and the return to normal operations?
4.	Does your hospital have a process for notification of reopening to staff, other hospitals, local emergency management, the local Emergency Operations Center, media, and patients' families?
5.	Does your hospital have procedures for canceling outsourced services?
6.	Does your hospital have a plan for team rebuilding?
7.	Does your hospital have a continuing process to capture all costs and expenditures related to operations?
8.	Does your hospital have procedures to debrief patients, staff, and community partners?

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9. Does your hospital have procedures to collect and collate incident documentation and formulate an After Action Report and Corrective Action and Improvement Plan?
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# Incident Planning Guide: Tornado

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## Definition

This Incident Planning Guide is intended to address issues associated with a tornado. Tornadoes involve cyclonic high winds with the potential to generate damaging hail and rain. They can develop during severe thunderstorms and typically have durations of minutes to hours. Hospitals may customize this Incident Planning Guide for their specific requirements.

## Scenario

At 2:30 PM on a Sunday afternoon, the National Weather Service issues a tornado watch that includes a large portion of your state, including the areas surrounding your hospital. At 3:35 PM the National Weather Service issues a severe thunderstorm watch concerning a line of severe storms developing in your general area. At 5:45 PM the National Weather Service upgrades the watch to a warning, and radar reports indicate a large line of severe thunderstorms moving toward the areas around your hospital. At 6:45 PM a local weather spotter confirms a tornado on the ground in your immediate vicinity moving toward your hospital. At 7:00 PM the power blinks off and on but then stabilizes. At 7:06 PM the tornado hits the south and west sides of the hospital. The roof is damaged and the top floor of a patient care wing is exposed. The tornado that damages the hospital lasts approximately 15 minutes with severe winds and heavy rainfall in the immediate area. At 11:00 PM, the main utility electrical power fails and your emergency generators engage to power critical circuits. The phone system outside of the hospital has been disrupted and some cell towers are down. Major damage is reported by media throughout the local area. Your hospital's damage assessment includes numerous broken windows, damage to two load bearing walls on the south and west sides of the hospital, where the roof was damaged as well as the areas directly beneath it. Staff and patient injuries have been reported, but there are no fatalities. All patients, staff, and visitors are accounted for. Some areas remain able to provide safe patient care. Downed trees and power lines are expected to prevent restoration of utility power systems until tomorrow morning at the earliest. Families of patients and staff are attempting to contact or come to the hospital to find out about their loved ones. Media representatives are also beginning to arrive onsite and are requesting interviews with staff and patients. There is a need for behavioral health counseling for patients, staff, and visitors impacted by the incident.

## **Does your Emergency Management Program address the following issues?**

### **Mitigation**

1.	Does your hospital address the threat and impact of a tornado incident in the annual Hazard Vulnerability Analysis, including the identification of mitigation strategies and tactics?
2.	Does your hospital reside in a safe location to maintain operations during a tornado?
3.	Does your hospital have a process to consider relocating hazardous materials and chemical agents to prevent contamination in case of storm damage?
4.	Does your hospital regularly monitor pre incident weather forecasts and projections?
5.	Does your hospital participate in pre-incident local response planning with public safety officials (e.g., emergency medical services, fire, and law enforcement), local emergency management officials, other area hospitals, regional healthcare coalition coordinators , and other appropriate public and private organizations, including meetings and conference calls to plan and share status?
6.	<p>Does your hospital have a plan to initiate pre incident protective actions to:</p> <ul style="list-style-type: none"><li><input type="checkbox"/> Protect windows?</li><li><input type="checkbox"/> Secure outside loose items?</li><li><input type="checkbox"/> Test backup generators?</li><li><input type="checkbox"/> Bring in supplemental supplies of essential items (e.g., food, water, medications, lighting)?</li><li><input type="checkbox"/> Protect or relocate high risk areas?</li><li><input type="checkbox"/> Relocate at risk items to lower levels?</li><li><input type="checkbox"/> Secure surveillance cameras?</li><li><input type="checkbox"/> Activate amateur radio operators?</li><li><input type="checkbox"/> Top off fuel tanks?</li><li><input type="checkbox"/> Consider other actions as indicated?</li></ul>
7.	Does your hospital have multiple methods and equipment for evacuating patients (e.g., chairs, stretchers, backboards, sled type devices, blanket drag, single person carry, multiple person carry)?
8.	Does your hospital have evacuation equipment for bariatric and special needs patients?

### **Preparedness**

1.	Does your hospital have a Tornado Plan?
2.	Does your hospital have a plan for reminding staff about personnel and family emergency preparedness? Do they exercise the plan annually?
3.	Does your hospital exercise the Tornado Plan annually and revise it as needed?
4.	Does your hospital provide training and education for staff preparedness related to tornado weather in your emergency management program annual goals?
5.	Does your hospital participate in community tornado exercises?
6.	Does your hospital have a plan to participate in the Joint Information Center in cooperation with local, regional, and state emergency management partners?

	<p>Does your hospital's communication plan include:</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Use of social media for communication? If so,           <ul style="list-style-type: none"> <li>○ Who can use social media?</li> <li>○ Who approves the use of social media?</li> <li>○ When is use of social media not appropriate?</li> </ul> </li> </ul>
7.	<ul style="list-style-type: none"> <li><input type="checkbox"/> A plan to distribute radios, auxiliary phones to appropriate people and hospital areas?</li> <li><input type="checkbox"/> A plan for rapid communication of weather status (watch, warning) and direction of storm?</li> <li><input type="checkbox"/> A plan for rapid communication of situation status to local emergency management and area hospitals?</li> <li><input type="checkbox"/> Does your hospital have pre incident standardized messages for communicating risks and recommendations to the public and media?</li> </ul>
8.	Does your hospital have the technology (e.g., TV, internet, radio) and a policy in place to monitor external events?
9.	<p>Does your hospital have staffing plans that include:</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Contingency staff utilization and support plans?</li> <li><input type="checkbox"/> An established list of backup or relief staff that need to be in the hospital before or after the storm to continue patient care?</li> <li><input type="checkbox"/> A list of nonessential staff that may be used in alternate roles?</li> <li><input type="checkbox"/> A plan to modify staffing and work hours?</li> <li><input type="checkbox"/> A plan to provide child care or dependent care for staff so they can report to and remain on duty during or after the storm?</li> </ul>
10.	Does your hospital have a process to determine daily clinical and nonclinical services to be continued or modified during the incident?
11.	Does your hospital have a plan for alternate care sites within the hospital, including set up, equipment, staffing, and signage? Does the plan indicate who can activate the alternate care sites?
12.	Does your hospital have a plan to accommodate pregnant women who report to your hospital before or after the storm?
13.	<p>Does your hospital have plans to maintain infrastructure during and after the storm, including:</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Power?</li> <li><input type="checkbox"/> Water?</li> <li><input type="checkbox"/> Personal hygiene and sanitation supplies (e.g., hand wipes, portable toilets, and potable water)?</li> <li><input type="checkbox"/> Lighting (e.g., flashlights, portable lights, etc.)?</li> <li><input type="checkbox"/> Sewer?</li> <li><input type="checkbox"/> Heating, ventilation, and air conditioning?</li> <li><input type="checkbox"/> Medical gases?</li> <li><input type="checkbox"/> Agreements with fuel suppliers to ensure a supply of fuel for emergency generators and vehicles?</li> <li><input type="checkbox"/> Agreements with contractors that can perform repairs after the storm?</li> <li><input type="checkbox"/> Other infrastructure as required?</li> </ul>

14.	Does your hospital have supplies for response to injuries on campus in damaged areas, including <input type="checkbox"/> First aid supplies? <input type="checkbox"/> Work gloves? <input type="checkbox"/> Safety goggles and helmets? <input type="checkbox"/> "Safesticks" for live wires?
15.	Does your hospital have a process for a structural assessment including use of a structural engineer to determine structural safety?
16.	Does your hospital have mutual aid agreements with emergency medical services and with other hospitals when your hospital has to be abandoned?
17.	Does your hospital educate staff on sheltering and other actions to be taken during a tornado? Does the plan indicate who has the ability to emergently relocate patients away from a hazard?

#### **Immediate and Intermediate Response**

1.	Does your hospital identify who has the authority to activate the Tornado Plan?
2.	Does your hospital have a plan and backup systems to maintain communications with the local Emergency Operations Center and other officials during and after the storm?
3.	Does your hospital have a process to evaluate the need for further evacuation of areas of the hospital as a result of structural damage, flooding, or other storm damage?
4.	Does your hospital's evacuation plan include notification of family members when patients are moved to other hospitals?
5.	Does your hospital have a Fatality Management Plan that integrates with law enforcement and medical examiner or coroner?
6.	Does your hospital have protocols to notify local public health and other response agencies as appropriate of patient status and medical and health problems presenting by types of illness or injury?
7.	Does your hospital have a process to determine the need for canceling elective procedures and surgeries and other nonessential hospital services and activities?
8.	Does your hospital have a plan to transport staff and their families living in potentially flooded areas or without transportation to the hospital to ensure staffing? Does your hospital have a plan to house staff and their families that cannot return to or lose their homes in the storm?
9.	Does your hospital have a plan and procedures to ensure continuation of patient care services?
10.	Does your hospital have a plan to provide rest and sleep, nutrition, and hydration to patients, staff, and visitors before, during, and after the incident?
11.	Does your hospital have procedures to regularly evaluate infrastructure and operational needs and to implement appropriate actions to meet those needs?
12.	Does your hospital have a plan to maintain essential contract services (e.g., trash pickup, food service delivery, linen and laundry)?

13.	Does your hospital have procedures to monitor environmental issues, water safety, and biohazardous waste disposal during and after the storm, for an extended period?
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### **Extended Response and System Recovery**

1.	Does your hospital have a Business Continuity Plan for long term incidents?
2.	Does your hospital have position depth to support extended operations of the Hospital Incident Management Team?
3.	<p>Does your hospital have procedures to:</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Perform interior and exterior damage assessments?</li> <li><input type="checkbox"/> Evaluate infrastructure needs?</li> <li><input type="checkbox"/> Initiate a repair plan and contract for needed repair assistance?</li> <li><input type="checkbox"/> Reevaluate need for evacuation?</li> <li><input type="checkbox"/> Report damage to the Hospital Command Center and initiate appropriate repairs during and after the storm?</li> <li><input type="checkbox"/> Monitor contractor services (e.g., worker safety and costs)?</li> <li><input type="checkbox"/> Inventory equipment, medications, and supplies?</li> <li><input type="checkbox"/> Salvage equipment remaining onsite?</li> <li><input type="checkbox"/> Secure kitchen and laundry areas?</li> <li><input type="checkbox"/> Secure diagnostic radiology areas, medications, and isotopes?</li> <li><input type="checkbox"/> Maintain heating, ventilation, and air conditioning control?</li> <li><input type="checkbox"/> Maintain traffic control on campus?</li> <li><input type="checkbox"/> Support remaining staff?</li> <li><input type="checkbox"/> Ensure equipment, medications, and supplies are reordered to replace stock supplies?</li> <li><input type="checkbox"/> Ensure all necessary equipment is usable and safety checked, and equipment and supplies are reordered, repaired, and replaced, as warranted?</li> <li><input type="checkbox"/> Return borrowed equipment after proper cleaning and replenishment of supplies?</li> <li><input type="checkbox"/> Prioritize service restoration activities?</li> <li><input type="checkbox"/> Restore normal nonessential service operations?</li> <li><input type="checkbox"/> Repatriate evacuated patients and staff?</li> </ul>
4.	Does your hospital have procedures for reporting and documenting staff injuries?
5.	Does your hospital have a policy and procedure to address line-of-duty death?
6.	Does your hospital have a plan to provide behavioral health support and stress management debriefings to patients, staff, and families, including obtaining services of local or regional resources?
7.	Does your hospital have procedures to debrief patients, staff, and community partners?
8.	Does your hospital have a continuing process to capture all costs and expenditures related to operations?
9.	Does your hospital have a process for submitting costs for disaster reimbursement from insurance carriers, as well as local, state, and Federal Emergency Management Agency disaster relief?

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10. Does your hospital have procedures to collect and collate incident documentation and formulate an After Action Report and Corrective Action and Improvement Plan?

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# Incident Planning Guide: Utility Failure

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## Definition

This Incident Planning Guide is intended to address issues associated with a utility failure in hospital systems such as power, water, heating, ventilation, air conditioning, medical air, vacuum, or medical gases. Hospitals may customize this Incident Planning Guide for their specific requirements.

## Scenario

Your hospital has an active construction project that requires a scheduled temporary power outage to tie new services into an existing utility circuit. Staff in the affected areas are notified and written procedures are developed and distributed. The outage is scheduled on a weekday third shift to minimize disruption in the operating room. The Incident Commander has decided to activate the Hospital Command Center during the tie-in outage period. At 12:30 AM on the day of the scheduled outage the construction manager notifies the Hospital Command Center and begins the shutdown. Within minutes, the Hospital Command Center receives calls from several inpatient care areas and support departments including the laboratory, pharmacy, and operating rooms reporting unanticipated power outages and associated patient care impact. Patient census is at 85%. The construction manager reports that some unexpected damage occurred during disconnection and it is too late to reverse the process and discontinue the tie-in at this point. Within 30 minutes, the construction team was able to determine the hospital's master drawings were incorrect and the power shutdown affected areas that had not been expected to lose power. Emergency clinical interventions and call in of critical managers and staff are underway. After one hour the construction team determines that to fully repair the affected circuits the hospital requires significant resources not on hand. The needed resources are on order but will not arrive for an estimated 48 hours. Once onsite, vendors and engineering staff will require at least six hours for the parts to be installed and to return to normal electrical services throughout the entire hospital. Surgeries and elective procedures are canceled. Clinical assessments have been initiated to facilitate the transfer or discharge of patients from areas without power, and the Hospital Command Center is beginning to work on contracting out required ancillary services. The hospital is receiving considerable media interest as well as calls from patients' families, staff, and regulatory agencies.

## **Does your Emergency Management Program address the following issues?**

### **Mitigation**

1.	Does your hospital address the threat and impact of a utility failure in the annual Hazard Vulnerability Analysis, including the identification of mitigation strategies and tactics?
2.	Does your hospital participate in pre-incident local response planning with public safety officials (e.g., emergency medical services, fire, and law enforcement), local emergency management officials, other area hospitals, regional healthcare coalition coordinators , and other appropriate public and private organizations, including meetings and conference calls to plan and share status?
3.	Does your hospital have a plan and systems to connect to alternate water sources to support fire suppression, wastewater, and cooling systems?
4.	Does your hospital have a procedure for rationing utilities, if necessary?
5.	Does your hospital have a process to conduct utility inspections, testing, and maintenance for: <input type="checkbox"/> Generator (fixed, emergency, and deployable)? <input type="checkbox"/> Power system? <input type="checkbox"/> Water? <input type="checkbox"/> Sewage? <input type="checkbox"/> Natural gas? <input type="checkbox"/> Medical gas?
6.	Does your hospital regularly evaluate the utility systems during high use and high demand periods to ensure continued service and to prevent failure?
7.	Does your hospital have utility contractors or service vendors for emergency repairs and immediate response?
8.	Does your hospital have agreements or contracts for provision of potable water, generator fuel, repairs, etc.?
9.	Does your hospital have multiple inlets for utility suppliers?
10.	Does your hospital have procedures to rapidly replace utility system components such as air filters (e.g., High-efficiency particulate absorption [HEPA]) within the heating, ventilation, and air conditioning systems?
11.	Does your hospital have a plan to initiate pre-incident hospital hardening actions (e.g., test backup generators, protect high risk areas, top off fuel tanks, etc.)?
12.	Does your hospital clearly identify valve controls to main and area supply valves and area shutoff valves for piped utilities such as medical gases and vacuum systems accessible?
13.	Does your hospital maintain a list of areas on emergency power and is this list available to the Hospital Command Center?
14.	Does your hospital maintain a cache of spare phones and a communication directory? Is the plan updated annually?

15.	Does your hospital have pre-incident standardized messages for communicating risks and recommendations to the public and media?
<b>Preparedness</b>	
1.	<p>Does your hospital have a Utility Failure Plan that includes:</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Defined criteria and procedures to evacuate all or sections of the hospital based on damage assessments or utility failure?</li> <li><input type="checkbox"/> A process to assess damage to the structure and infrastructure, including damaged water and sewer lines, electrical and information systems, fuel sources, communications, medical gases, alarm systems, waste and hazardous materials?</li> <li><input type="checkbox"/> Addressing the loss of heating, ventilation, or air conditioning systems and also include measures to temporarily heat and cool the hospital to protect patients, staff, and visitors?</li> <li><input type="checkbox"/> Addressing alternative sources and systems if any utility fails?</li> <li><input type="checkbox"/> Communicating utility conservation measures to patients and staff?</li> </ul>
2.	Does your hospital exercise the Utility Failure Plan annually and revise it as needed?
3.	Does your hospital's Emergency Operations Plan include triggers or criteria for activation of the Emergency Operations Plan and the Hospital Command Center?
4.	Does your hospital have a plan to participate in the Joint Information Center in cooperation with local, regional, and state emergency management partners?
5.	Does your hospital have a process for determining the impacts of the loss of utility on clinical operations (e.g., surgery schedule, outpatient services) and infrastructure systems?
6.	Does your hospital have a process to assess the impact of a utility failure on hospital operations?
7.	Does your hospital have a protocol to immediately assess patient conditions and prioritize those most at risk for heat and cold related emergencies?
8.	Does your hospital have procedures to maintain sanitation systems throughout the hospital, including providing personal hygiene and sanitation supplies (e.g., hand wipes, portable toilets, potable water)?
9.	Does your hospital have procedures to evaluate the need for and to obtain additional staff?
10.	<p>Does your hospital have a Communications Plan that includes:</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> A protocol to notify local emergency management, the public health department, emergency medical services, ambulance providers, and other area hospitals of the situation and possible need to evacuate?</li> <li><input type="checkbox"/> Procedures for establishing a media staging area and for providing regular media briefings regarding hospital status?</li> <li><input type="checkbox"/> Procedures to communicate situations and safety information to patients, staff, and families?</li> </ul>

	<p>Does your hospital have procedures to:</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Verify that all emergency generators are assuming the hospital's power load as designed?</li> <li><input type="checkbox"/> Verify that the exhaust fans and air handlers supplied by emergency power are operating?</li> <li><input type="checkbox"/> Evaluate, verify, and communicate to staff that only essential equipment is plugged into emergency power outlets throughout the hospital?</li> <li><input type="checkbox"/> Contact the utility company's operations center to ascertain scope and length of service interruption?</li> <li><input type="checkbox"/> Evaluate critical areas to determine emergency power needs and supply; provide alternative light sources (e.g., battery powered lights, flashlights, etc.)?</li> <li><input type="checkbox"/> Acquire generator fuel and needed repairs to maintain emergency power?</li> <li><input type="checkbox"/> Prioritize emergency power allocation to critical infrastructure (e.g., heating, ventilation, and air conditioning units, morgue, elevators, patient monitors, laboratory, blood bank, ventilators, information technology, and other systems)?</li> <li><input type="checkbox"/> Evaluate the power system for load shedding potential?</li> <li><input type="checkbox"/> Identify equipment or areas in the hospital that do not have emergency power capability and will be unavailable for use?</li> </ul>
11.	

#### **Immediate and Intermediate Response**

	<p>Does your hospital have a mechanism for regularly evaluating performance of the following:</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Electrical systems?</li> <li><input type="checkbox"/> Phones?</li> <li><input type="checkbox"/> Water?</li> <li><input type="checkbox"/> Natural gas?</li> <li><input type="checkbox"/> Medical gas?</li> </ul>
1.	
2.	<p>Does your hospital have a switching team protocol (sometimes called switching orders) that addresses transfer load?</p>
3.	<p>Does your hospital have a plan to conduct regular media briefings, in collaboration with the local emergency management agency, local Emergency Operations Center, and the Joint Information Center?</p>
4.	<p>Does your hospital have a plan to document actions, decisions, and activities and to track response expenses and lost revenues?</p>
5.	<p>Does your hospital have a plan to provide staff with information on the situation and temporary measures to implement in order to protect patients and visitors including:</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Supplies and plans to address extreme heat including cooling measures (e.g., fans, ice, cold packs), cold water and fluids for hydration, medications for sunburn, heat exhaustion, heat stroke?</li> <li><input type="checkbox"/> Supplies and plans to address extreme cold, including warm blankets, warm IV fluids, warm liquids for hydration, and medications for hypothermia and frostbite?</li> </ul>
6.	<p>Does your hospital have a plan to secure the hospital?</p>
7.	<p>Does your hospital have a process to assess patients for early discharge to decrease patient census?</p>
8.	<p>Does your hospital have a procedure to request diversion?</p>

9.	Does your hospital have a process to determine the need for canceling elective procedures and surgeries and other nonessential hospital services?
10.	Does your hospital identify criteria and procedures to modify the patient visitation policy during an incident?
11.	Does your hospital have a process to evaluate the short term and long term impact of utility loss on the patients, staff, and hospital?
12.	Does your hospital have criteria and a process to determine the need for complete or partial evacuation of the hospital?
13.	Does your hospital have multiple methods and equipment for evacuating patients (e.g., chairs stretchers, backboards, sled type devices, blanket drag, single person carry, multiple person carry)?
14.	Does your hospital have evacuation equipment for bariatric and special needs patients?
15.	Does your hospital have a Communications Plan that includes: <input type="checkbox"/> Procedures for obtaining situation reports and utility status updates from the local emergency management agency and utility providers? <input type="checkbox"/> Procedures to notify patients' family members of the situation? <input type="checkbox"/> Procedures to provide accurate and timely briefings to staff, patients, families, and area hospitals during extended operations?
16.	Does your hospital have procedures to assess the extent and possible duration of loss of utility?
17.	Does your hospital have procedures to document patient, visitor, and staff injuries?
18.	Does your hospital have the capability to provide temporary negative pressure isolation (e.g., portable filtration)?
19.	Does your hospital have procedures for assessing and implementing Interim Life Safety Measures including pre identified notifications if they are implemented?

#### **Extended Response and System Recovery**

1.	Does your hospital have a Business Continuity Plan that addresses the need for alternate service providers for critical functions (e.g., radiology, laboratory)?
2.	Does your hospital have position depth to support extended operations of the Hospital Incident Management Team?
3.	Does your hospital have procedures for repatriation of patients that were transferred or evacuated?
4.	Does your hospital have a procedure to inventory equipment, supplies, blood supply, and medications?
5.	Does your hospital have procedures to: <input type="checkbox"/> Monitor contractor services (work quality, costs, etc.)? <input type="checkbox"/> Monitor and revise the hospital repair plan, as appropriate?

6.	Does your hospital have procedures for restoring normal hospital visitation and nonessential service operations?
7.	Does your hospital have a plan to provide behavioral health support and stress management debriefings to patients, staff, and families, including obtaining services of local or regional resources?
8.	Does your hospital have procedures to debrief patients, staff, and community partners?
9.	Does your hospital have a Demobilization Plan that includes criteria for deactivation of positions, reactivation of services, and the return to normal operations?
10.	Does your hospital have a continuing process to capture all costs and expenditures related to operations? Does it include addressing insurance reporting requirements?
11.	Does your hospital have procedures to collect and collate incident documentation and formulate an After Action Report and Corrective Action and Improvement Plan?

# Incident Planning Guide: Wildland Fire

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## Definition

This Incident Planning Guide is intended to address the consequences and impact on a hospital when a wildland fire is either imminent or ongoing in the region. Hospitals are encouraged to customize this Incident Planning Guide for their specific requirements.

## Scenario

The rainfall this year was less than average. Drought conditions and higher temperatures have created an increased risk for large scale wildfires. Over the last two days a wildland fire has burned hundreds of acres less than 40 miles from your hospital. Large areas have been evacuated and those remaining in their homes have been instructed to stay inside as much as possible and monitor television and radio for any changes or for the need to evacuate. A clinic near the wildland fire was forced to close because of heavy smoke and ash, and the difficulty of access due to road closures. There has been low humidity for several days and winds have picked up and shifted directions daily, driving smoke and ash to different areas through the community. The most recent shift in winds is pushing the fire toward your hospital. The Emergency Department is seeing an increase in patients with respiratory related distress. Some community skilled nursing facilities near the fire have begun to evacuate and 25 patients from one facility are being transported to your hospital. Schools are closing and many employees with children will need childcare to be able to come to work. Some staff are unable to return home at the end of their shifts due to road closures and air quality from smoke, yet area hotels are already full with evacuees, and staff are requesting that disaster tents and cots be set up so they can sleep on site. Staff and patients throughout the community report they can smell smoke in the air and are anxious. Further, they are confused by varying recommendations reported in the media regarding respiratory risks and the need for appropriate masks or other protection. Many homes appear to have been damaged or destroyed, including some hospital staff homes. Some of the many evacuated families have become separated. There is an emerging need for behavioral health counseling for patients, staff, and the public.

## Does your Emergency Management Program address the following issues?

### Mitigation

1.	Does your hospital address the threat and impact of a wildland fire in the annual Hazard Vulnerability Analysis, including the identification of mitigation strategies and tactics?
2.	Does your hospital participate in pre-incident local response planning with public safety officials (e.g., emergency medical services, fire, and law enforcement), local emergency management officials, other area hospitals, regional healthcare coalition coordinators , and other appropriate public and private organizations, including meetings and conference calls to plan and share status?
3.	Does your hospital have a plan to: <input type="checkbox"/> Secure the hospital and prevent exposure of patients, staff, and facilities? <input type="checkbox"/> Individually control heating, ventilation, and air conditioning and return air for impacted areas?
4.	Does your hospital have a plan to initiate wildland fire facility hardening actions (protect windows; test backup generators; obtain supplemental supplies of essential items [food, water, medications, lighting]; activate amateur radio operators; top-off fuel tanks, etc.)?
5.	Does your hospital maintain a fire defensible space that includes all buildings on site?
6.	Does your hospital: <input type="checkbox"/> Map accessibility for the location of all on site fire hydrants, stand pipes, sprinkler systems, dry suppression systems, hose bibs, and other fire suppression systems? <input type="checkbox"/> Ensure all detection systems and procedures are in compliance with regulatory and accreditation standards? <input type="checkbox"/> Keep this information readily available in the Hospital Command Center? <input type="checkbox"/> Have this information reviewed by the local fire service? <input type="checkbox"/> Routinely test systems and document findings?

### Preparedness

1.	Does your hospital have a Wildland Fire Plan?
2.	Does your hospital exercise the Wildland Fire Plan yearly and revise as needed?
3.	Does your hospital have preparedness strategies to reduce the risk from wildland fires?
4.	Does your hospital's Wildland Fire Plan have elements of an Evacuation Plan including: <input type="checkbox"/> Procedures for immediate, controlled, and planned shelter-in-place, or evacuation of the hospital? <input type="checkbox"/> Authority to activate the plan and recover from the event? <input type="checkbox"/> Established priorities for patients and locations in the hospital? <input type="checkbox"/> Procedures and tracking systems for all patients (ambulatory and non-ambulatory), visitors, staff, and equipment? <input type="checkbox"/> Designated evacuation locations, assembly areas, and routing options, including <ul style="list-style-type: none"><li>o Within the hospital (atrium, auditorium, gym, etc.)?</li><li>o External to the hospital (adjacent building, nursing home, other hospitals, schools, etc.)?</li></ul> <input type="checkbox"/> Processes for initiating assembly area and holding area operations, including provision of adequate staff and equipment?

	<ul style="list-style-type: none"> <li><input type="checkbox"/> Processes to facilitate transfer of individual patient information, medications, and valuables with the patient?</li> <li><input type="checkbox"/> Defined personnel roles in evacuation?</li> <li><input type="checkbox"/> Processes to reassign staff (alternate sites/staging areas, other facilities)?</li> <li><input type="checkbox"/> Coordination with ambulances, aeromedical services, and other transportation providers, including:           <ul style="list-style-type: none"> <li>○ Additional out of area medical transportation?</li> <li>○ Nonmedical transportation providers (school buses, other types of buses, etc.)?</li> </ul> </li> <li><input type="checkbox"/> Business Continuity Plans that include use of computerized patient and billing records from another, adequately secured, location?</li> </ul>
5.	Does your hospital have criteria for cancelling home healthcare services, electives, admissions, surgeries, outpatient appointments, visiting hours, deliveries, other nonessential facility services (e.g., gift shop), and other activities (e.g., meetings) due to external health hazards resulting from wildland fire?
6.	Does your hospital have plans for loss of power or loss of other utilities and services?
7.	Does your hospital have technology (e.g., television, internet, radio) and policies in place to monitor external events such as a wildland fire?
8.	Does your hospital conduct annual fire safety training and education, including fire response and evacuation procedures, in conjunction with local fire service?
9.	<p>Does your hospital have a Communications Plan that includes:</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Pre incident standard messages for communicating the risks associated with this threat and recommendations to the public and media?</li> <li><input type="checkbox"/> Participation in the Joint Information Center?</li> <li><input type="checkbox"/> Use of social media for communication, including           <ul style="list-style-type: none"> <li>○ Who can use social media?</li> <li>○ Who approves the use of social media?</li> <li>○ When is the use of social media not appropriate?</li> </ul> </li> <li><input type="checkbox"/> Procedure for notification of internal and external authorities (local, county, region, and state)?</li> <li><input type="checkbox"/> A plan to distribute radios, auxiliary phones, and flashlights to appropriate people and areas?</li> <li><input type="checkbox"/> A plan for rapid communication of weather status (watch, warning)?</li> <li><input type="checkbox"/> A plan for communication of status to local emergency management and other area hospitals?</li> </ul>
10.	Does your hospital have a plan to regularly monitor vital service delivery gauges (e.g., boiler temperature, oxygen levels, etc.)?
11.	<p>Does your hospital provide home healthcare services? If so:</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Are home healthcare patients and caregivers provided with education on where to get timely information in the event of a wildland fire, including when and how to evacuate if at risk?</li> <li><input type="checkbox"/> Are patient locations identified and mapped?</li> <li><input type="checkbox"/> Are there policies and procedures to notify patients who may be in the path of a wildland fire?</li> <li><input type="checkbox"/> Is there a policy for bringing patients to the hospital?</li> <li><input type="checkbox"/> Does home health care assess patients for acuity and prioritize for evaluation pre- and post-incident?</li> </ul>

	<input type="checkbox"/> Does your hospital have policies and procedures to assist, if possible, with medical supplies (oxygen, prescriptions, supplies, etc.) for home healthcare patients who have to evacuate and would not have continued access to services?
12.	Does your hospital engage in local or regional activities to track evacuated patients (including home healthcare patients)?
13.	Does your hospital have a plan for alternate care sites including set up, equipment, staffing, and signage?
14.	Does your hospital have a plan to protect or recover lost data or damaged documents?
15.	Does your hospital provide training for staff in their roles and responsibilities due to the threat of an impending wildland fire?
16.	Does your hospital identify and have agreements with contractors that can perform repairs after the fire?
17.	Does your hospital have procedures in place to limit entry to and exit from the hospital, to decrease exposure to heat, ash, or smoke?

#### **Immediate and Intermediate Response**

1.	Does your hospital have criteria to initiate, and the capability to, shut down air intakes to prevent smoke from entering the hospital?
2.	Does your hospital have criteria and a rapid decision making process to determine the need to activate the Wildland Fire Plan?
3.	Does your hospital train all staff in evacuation policies, procedures, and operations, including use of evacuation assist devices, prioritization of patient movement, safe patient handling, staging sites post-evacuation, and identified routes of egress?
4.	Does your hospital have multiple methods and equipment for evacuating patients (e.g., chairs, stretchers, backboards, sled type devices, blanket drag, single person carry, multiple person carry)?
5.	Does your hospital have evacuation equipment for bariatric and functional access needs patients?
6.	Does your hospital have an evacuation policy for non-patient care areas that includes the movement of data and equipment if in harm's way?
7.	Does your hospital's Evacuation Plan include notification of family members when patients are relocated to other facilities?
8.	Does your hospital assess the need and plan for sheltering staff and families? Does the plan include: <ul style="list-style-type: none"> <li><input type="checkbox"/> Provisions for dependent elders, children, and pets?</li> <li><input type="checkbox"/> Location of rest and hygiene facilities for staff, visitors, and families?</li> <li><input type="checkbox"/> Sufficient supplies for hygiene, food and water, sleeping, and recreation?</li> <li><input type="checkbox"/> Food and water for pets?</li> <li><input type="checkbox"/> Policy for pet sheltering that addresses identification, vaccines, medicines, bedding, and litter?</li> <li><input type="checkbox"/> Orientation to the site including safety and security, hours of operations, and feeding options?</li> </ul>

9.	Does your hospital have policy and procedure that addresses the securing or movement of hazardous materials if the hospital is evacuated due to a wildland fire?
10.	Does your hospital have a process to provide accurate and continuous incident documentation, computerized or manual, including: <input type="checkbox"/> Patient care? <input type="checkbox"/> Incident management (Incident Action Plan, Hospital Incident Command System forms, etc.)? <input type="checkbox"/> Incident related expenses?
	<b>Extended Response and System Recovery</b>

1.	Does your hospital identify and train staff to continually monitor: <input type="checkbox"/> Weather conditions? <input type="checkbox"/> Directions from public safety officials? <input type="checkbox"/> Other intelligence sources to maintain current situational awareness of the event?
2.	Does your hospital identify and train staff to monitor the environmental climate for increases in heat, failures in operation due to shutdown of air intake, and adverse effects due to smoke?
3.	Does your hospital have adequate space for rest and hygiene for staff and family members who may be required to remain in the hospital due to external health hazards?
4.	Does your hospital have a procedure to inventory equipment, supplies, medications, and blood supply?
5.	Does your hospital have procedures to: <input type="checkbox"/> Perform damage assessment (interior and exterior)? <input type="checkbox"/> Evaluate infrastructure operational needs? <input type="checkbox"/> Initiate a repair plan or contract for needed repair assistance? <input type="checkbox"/> Reevaluate need for evacuation, partial or complete?
6.	Does your hospital have procedures to provide regular situation updates and safety recommendations to patients, staff, and families?
7.	Does your hospital have procedures to ensure all necessary equipment is usable and safety checked and that equipment and supplies are reordered, repaired, and replaced as warranted?
8.	Does your hospital have procedures to debrief patients, staff, and community partners?
9.	Does your hospital have policies and procedures for the repatriation of patients following an evacuation?
10.	Does your hospital have plans for restoration of critical infrastructure (e.g., electrical, heating, ventilation, air conditioning, vacuum systems, etc.)?
11.	Does your hospital have a continuing process to capture all costs and expenditures related to operations?
12.	Does your hospital have a process for submitting costs for disaster reimbursement from insurance carriers, as well as local, state, and Federal Emergency Management Agency disaster relief?

13.	Does your hospital have Hospital Incident Management Team position depth to support extended operations?
14.	Does your hospital have procedures to collect and collate incident documentation and formulate an After Action Report and Corrective Action and Improvement Plan?
15.	Does your hospital have procedures for reporting and documenting staff injuries?
16.	Does your hospital have a policy and procedure to address line of duty death?