

Emergency Management Fundamentals

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Objectives

- Describe the role of an Emergency Management Coordinator
- List the primary responsibilities of an Emergency Management Coordinator
- Describe the components of an Emergency Management Program (EMP)
- Evaluate an Emergency Operations Plan utilizing the CHA EMP Checklist tool



- There is no one standard format for an Emergency Management Program
- It is NOT the intent of this session to state that your program must look like the examples presented
- Your program should reflect your Hazard Vulnerability
 Analysis (HVA) findings and regulatory agency(s) needs

Who are You

Emergency Management/Preparedness Coord:

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

Who are You

Your Facility:

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

Who are You

What was your Training:

- On the job
- Corporate guidance
- Community Peers

EP Committee

Who is on the Committee

- Shared with the Safety (EOC) Committee
- Multi-disciplinary representation
- MD
- Transplant Program

Write Policies / Plans / Procedures:

- Emergency Management Plan
- Emergency Operations Plan

Tool

 CHA Hospital Emergency Mgmt Program Checklist

CHA EMP Checklist

Program Description:

- Policy and Purpose
- Approval Signatures
- Scope and Applicability
- Delegations of Authority
 - Succession Plan (new CMS)
- Program Evaluation

CHA EMP Checklist

Mitigation:

- Mitigation program overview
- Background and community description/ demographics
- Hazard Vulnerability Analysis (HVA)
 - Annual review
 - HVA integrated with community

Preparedness:

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

Preparedness: cont.

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

Response:

- Response program overview
- Initiation and termination of the EOP
- Activation of the hospital command center
- HICS reference materials
- Hospital emergency codes

Response: cont.

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

Response: cont.

- Communications systems
 - hardware
- Emergency communications strategies
 - Communication plan
 - Contact list

Response: cont.

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

Recovery:

- Initiation of demobilization/recovery activities
- Return to normal operations
- Event documentation / evaluation

Write Resource Material:

EP flip charts

- Deptartment specific binders
- Intranet information

Educate to the Plan:

- Classes
- In-services
- Flyers

Drills/Exercises:

- Types
- Documentation
- After action plan/corrective action plans



Types of Exercises

- Drills
- Table top
- Functional
- Full scale



Exercise Documentation

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



Incident Action Plan

Made up of the:

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



IAP – Quick Start

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HICS INCIDENT ACTION PLAN (IAP) QUICK START

1. Incident Name	2. Operational Period (#)
	DATE: FROM: TO:
	TIME: FROM:TO:
3. Situation Summary	— HICS 201 —
4. Current Hospital Incident Management Team (fill in additional public Information Officer Liaison Officer Safety Officer Operations Section Chief Planning Section Chief	I positions as appropriate) — HIC\$ 201, 203— Interpretation Medical-Technical Specialists Logistics Section Chief Finance / Administration Section Chief

HICS INCIDENT ACTION PLAN (IAP) QUICK START COMBINED HICS 201—202—203—204—215A

personal protective equipment, warn people of the hazard) to protect responders from those hazards. —HICS 202, 215A—				
6. Incident Objectiv	ves			— HICS 202, 204—
6a. OBJEC	6a. OBJECTIVES 6b. STRATEGIES / TACTICS 6c. RESOURCES REQUIRED 6d. ASSIGNED TO			
	-,			
7. Prepared by	PRINT NAME: _		SIGNATURE:	
	DATE/TIME:		FACILITY:	



Purpose: Short form combining HICS Forms 201, 202, 203, 204, and 215A Origination: Incident Commander or Planning Section Chief Copies to: Command Staff, Section Chiefs, and Documentation Unit Leader INCIDENT COMMAND SYSTEM Perpose: Short form combining HICS Forms 201, 202, 203, 204, and 215A Origination: Indident Commander or Planning Section Chief Copies to: Command Staff, Section Chiefs, and Documentation Unit Leader

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After Action Plan

Sacramento Region Hospital Template	9. Met Not Met Goal: Complete an Incident Action Plan for each Operational Period Explanation: [brief explanation of how it was met or why not] 10. Met Not Met Goal: Demobilize Hospital Command Center management Explanation: [brief explanation of how it was met or why not] 11. Met Not Met Goal: Other - Describe:
Date of Activity: Time: Name of Event:	Explanation: [brief explanation of how it was met or why not]
Exercise	General Drill / Exercise Conduct: (Joint Commission EM.03.01.03) 1.
Funding Source: ☐ Hospital ☐ HPP/ASPR Grant ☐ Other:	
Observer(s):	III. Event Synopsis This can be the Master Sequence of Events List (MSEL) for an exercise, or a summary of an actual event.
II. Goals and Objectives These can be the goals/objectives set prior to an exercise or the ones developed during an actual incident.	
Communications: (Joint Commission EM.02.02.01 & HSEEP Communications, Intelligence and Sharing) 1.	IV. After Action Meeting and Critique Method of After Action Analysis: Debriefing Written departmental critiques Diserver evaluation Other: Date/Time of Debriefing: Attendance — V. Conclusions / Summary of Response: [Brief narrative — Participants demonstrated capabilities Lessons learned for improvement and major recommendations A summary of what steps should be taken to ensure that the concluding results will help to further refine plans, procedures, training for this type of incident?
Explanation: [brief explanation of how it was met or why not]	

See Corrective Action Plan 25



Abbreviated After Action Report

Sutter Medical Center, Sacramento Emergency Preparedness Abbreviated After Action Report

I. Event Overview (what happened):
Date of Activity: Time:
Name of Event:
☐ Exercise ☐ Actual Incident: ☐ Internal Event ☐ External Event
Summary of the Event:
II. Goals and Objectives
Communications: (Joint Commission EM.02.02.01 & HSEEP Communications, Intelligence and Sharing) 1.
 Met Not Met N/A Goal: /ble to send message to internal staff via overhead page, phone, gtp Explanation:
 Met Not Met N/A Goal: Leadership / Management was notified in a timely manner Explanation:
Met Not Met Goal: Other - Describe: Explanation:
Resources and Assets: (Joint Commission EM.02.02.03 & HSEEP Medical Surge) 1. Met Not Met N/A Goal: Needed resources were available and utilized appropriately. Explanation:
2. Met Not Met Goal: Other: Describe Explanation:
Safety and Security: (Joint Commission EM.02.02.05 & HSEEP Medical Surge) 1. Met Not Met N/A Goal: Adequate security personnel were available during the incident Explanation:
 Met Not Met N/A Goal: Appropriate level of Access Control was established and maintained Explanation:
 Met Not Met N/A Goal: Appropriate isolation of infectious or contaminated persons was established in a timely manner Explanation:
4. Met Not Met Goal: Other – Describes Explanation:
Sutter Medical Center, Sacramento Event: After Action Report

	esponsibilities: (Joint Commission EM.02.02.07 & HSEEP Medical Surge) ☐ Met ☐ Not Met ☐ N/A Goal: Staff responded to pre-assigned positions Explanation:
2.	☐ Met ☐ Not Met ☐ N/A Goal: Staff were able to perform responsibilities Explanation:
	☐ Met ☐ Not Met ☐ N/A Goal: Adequate staffing for essential functions was made Explanation:
4.	☐ Met ☐ Not Met Goal: Other – Describe: Explanation:
1.	Management: (Joint Commission EM.02.02.09 & HSEEP Medical Surge) Met □ Not Met □ N/A Goal: Management of Loss of IT or EHR was adequate Explanation:
2.	☐ Met ☐ Not Met ☐ N/A Goal: Management of Loss of Power was adequate Explanation:
3.	☐ Met ☐ Not Met ☐ N/A Goal: Management of Loss of Water was adequate Explanation:
4.	☐ Met ☐ Not Met ☐ N/A Goal: Management of Loss of Sewer was adequate Explanation:
	☐ Met ☐ Not Met ☐ N/A Goal: Management of Loss of Medical Gas / Vacuum was adequate Explanation:
	☐ Met ☐ Not Met ☐ N/A Goal: Management of Loss of HVAC was adequate Explanation:
7.	☐ Met ☐ Not Met ☐ N/A Goal: Management of Loss of Other Utilities (elevators, Steam, etc) was adequate Explanation:
8.	☐ Met ☐ Not Met Goal: Other – Describe: Explanation:
	t and Clinical Support Activities: Met Not Met N/A Goal: Ability to provide for patient basic care
	☐ Met ☐ Not Met ☐ N/A Goal: Ability to continue patient care documentation Explanation:
3.	☐ Met ☐ Not Met Goal: Other - Describe: Explanation:
	al Command Center Management: (Joint Commission EM.01.01.01 & HSEEP Emergency Operations
	Management) Met Not Met N/A Goal: Activation of the Hospital Incident Command System Explanation:
2.	☐ Met ☐ Not Met ☐ N/A Goal: Activation and set up of the Hospital Command Center Explanation:

After Action Report

version: 12-21-17

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3.	☐ Met ☐ Not Met Explanation:	□ N/A	Goal: Gather and provide in	formation
4.	☐ Met ☐ Not Met Explanation:	□ N/A	Goal: Identify and address iss	sues
5.	☐ Met ☐ Not Met Explanation:	□ N/A	Goal: Prioritize and provide r	resources
6.	☐ Met ☐ Not Met Explanation:	□ N/A	Goal: Support and coordinate	e the response
7.	☐ Met ☐ Not Met Explanation:	□ N/A	Goal: Document Activities	
8.	☐ Met ☐ Not Met Explanation:	Goal:	Other – Describe:	
Mame	e of person comple	eting for	m:	
	ture:			
orgin				

After Action Report

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Corrective Action Plan

Exercise / Event Objective Tracking - COMMUNICATIONS Corrective Action Plan

Event Date	Improvement Issue	Action	Responsibility	Status
Objective	e/Activity: 1. Able to use cell pl	nones to reach internal / external partne	rs	
1/2/11		•	•	>
1/2/11		•	•	>
2/3/11		•	•	>
3/4/11		•	•	>
Objective	e/Activity: 2. Able to use HAM I	adio to reach external partners		
1/2/11		•	•	>
1/2/11		•	•	>
2/3/11		•	•	>
3/4/11		•	•	>
Objective	e/Activity:			
1/2/11		•	•	>
2/3/11		•	•	>
3/4/11		•	•	>
Objective	e/Activity:			
1/2/11		•	•	>
2/3/11		•	•	>
3/4/11		•	•	>
Objective	e/Activity:			
1/2/11		•	•	>
2/3/11		•	•	>
3/4/11		•	•	>
		•	•	>

Incidents:

- Manage the incident
 - Role in the hospital command center
- Documentation
- After action plan/corrective action plan

What do you Do (cont.)

Command Center:

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

What do you Do (cont.)

Other:

- Reports
- Tracking
- Facility planning/input

Community Collaboration-

- Community planning groups
- Corporate groups
- Health care coalition
- Exercises

Other

• What else do you do?

Questions?

Thank you

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Thank You

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