

		Policy Title:	Disaster Plan
Effective Date:	1/2004	Policy Number:	7300
Review Date:		Category:	Environment of Care
Revised Date:	10/24/2018	Oversight Level:	2
Administrative Responsibility:		Operations Directors, Operations Managers	

1. Purpose

1.1. To define the process through which McLaren Medical Group (MMG) prepares for and responds to disasters.

2. Scope

2.1. All employees of McLaren Medical Group (MMG) and/or employees working at a MMG-managed clinic.

3. Definitions

3.1. Disaster - is a type of emergency that, due to its complexity, scope or duration, threatens the organization's capabilities and requires outside assistance to sustain patient care, safety or security functions. A disaster can be human-made or natural, or a combination of both.

3.2. Incident Command System (ICS) - a management system designed to enable effective and efficient domestic incident management by integrating a combination of facilities, equipment, personnel, procedures and communications operating within a common organizational structure.

MMG's Incident Command System will be composed of applicable regional Directors of Operation and Operations Managers, Vice President of Operations, President & CEO, and, as applicable, members of the regional Hospital's Incident Command System (HICS).

3.3. Emergency Management Disaster Plan (EMDP) - an all-hazards plan that has been developed utilizing the Incident Command System.

3.4. Mitigation - activities designed to reduce or eliminate the impact disasters may have on people and property.

4. Policy

4.1. Guidelines instituted by the regional hospital may supersede those in this policy.

4.2. MMG will utilize the Incident Command System described in the Procedure as a guide to manage disasters.

5. Procedure

5.1. MMG will work with the regional Hospital's Incident Command System (HICS) as applicable, in the event of a disaster.

5.2. MMG will prepare to be self-sufficient for the first 24 to 48 hours following the occurrence of a disaster.

5.3. Measures to conserve available resources will be in effect until the extent of the emergency is determined.

5.4. Scheduling of employees will be directed by the Incident Command System in accordance with the nature of the event and/or travel restrictions issued by the local County.

5.5. Communication methods may include but are not limited to: verbal, telephone, electronic and paper.

5.6. In the event a State of Emergency is declared by the local County department of Emergency Management and the patient load exceeds the available beds at the regional hospital, alternate care areas may be utilized at MMG-managed sites (see Appendix A, Disaster Action Plan Checklist and Appendix B, Disaster Management Personnel Availability Form).

5.7. Revisions to the Emergency Management Disaster Plan may be made as needed according to the nature of the disaster.

5.8. The Emergency Management Disaster Plan is designed to address the four phases of Emergency Management activities: mitigation, preparedness, response and recovery.

5.8.1. MITIGATION and PREPAREDNESS activities include:

5.8.1.1. Periodically testing utilities and backups

5.8.1.2. Availability of fire extinguishers, alarms and suppression systems

5.8.1.3. Staff education and competency

5.8.1.4. Availability of security and alarm systems

5.8.1.5. Employee identification system, and regularly updated phone lists and fan out lists

5.8.1.6. Mutual aid agreements

5.8.1.7. Environment of Care surveillance rounding

5.8.1.8. Assess and maintain an inventory of supplies

5.8.1.9. Hazard Vulnerability Analysis

5.8.1.10. MMG-managed clinics will complete an Annual Disaster Drill using the Disaster Drill Critique Form (P/P 7300a).

5.8.2. RESPONSE activities include:

- 5.8.2.1. Display of staff identification badges
- 5.8.2.2. Review of local media sources, such as radio and television, for information related to travel restrictions and/or other instructions communicated by the local County Department of Emergency Management.
- 5.8.2.3. Staff should report to work according to regular schedules, unless instructed otherwise. Be aware that health care employees may be instructed to report to work through local County Management communication systems.
- 5.8.2.4. Participate in work assignments as directed by the Operations Manager or other members of the Incident Command System

5.8.3. Activation of the Emergency Management Disaster Plan:

- 5.8.3.1. The Emergency Operations Center may be located at MMG's Practice Management headquarters. Alternate locations may be determined based on the size, scope, location or nature of the emergency situation.
- 5.8.3.2. Selection of the Incident Commander (Leader) will be based on availability and the expertise of the individual as appropriate to the nature of the emergency.
- 5.8.3.3. The staff member who received notification of a disaster will notify available Leadership (e.g., Operations Manager, Operations Director).
- 5.8.3.4. Leadership at the Emergency Operations Center will evaluate the situation and appoint an Incident Commander as appropriate to the event and person's experience level.
- 5.8.3.5. The Incident Commander will notify the facility about the nature of the emergency and instruct staff to stand by for further details/direction.
- 5.8.3.6. The Incident Commander may ask Operations Managers to report a list of available personnel at each site.

5.8.4. RECOVERY activities may include:

- 5.8.4.1. Debriefing
- 5.8.4.2. Availability of employee assistance, if appropriate.
- 5.8.4.3. Completion of paperwork related to financial processes.
- 5.8.4.4. Review of outcomes for areas of improvement.

6. Exceptions

- 6.1. None

7. References

- 7.1. Department of Homeland Security. (2018). Emergency Response Plan. Retrieved from <http://www.ready.gov>
- 7.2. Federal Emergency Management Agency (FEMA). (November 15, 2017). Retrieved from <https://www.fema.gov/incident-command-system-resources>
- 7.3. The Joint Commission e-dition. (July 1, 2018). Emergency Management

8. Appendix

- 8.1. Appendix A - Disaster Management Action Plan
- 8.2. Appendix B - Disaster Management Personnel Availability Form

9. Approvals

Rochelle Schiller
Vice President of Operations

Date

Previous Revision Dates/Supercedes Policy:
11/2005, 5/1/2012, 2/13/2015



Disaster Drill Critique Form

Site Name: _____
 Date of Drill: _____ Time of Drill: _____
 Type of Disaster: _____
 Location of Drill in Building: _____

Drill requires two designated staff members to act as observers.

Observer 1 (first and last name): _____ **Observer 2** (first and last name): _____

Instructions: Check Yes, No, or N/A next to each item.

<i>Performed:</i>		
Yes	No	N/A

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RESPONSE – SYSTEM
 Overhead Page Audible, if available.

RESPONSE - OTHER
 Security Present
 Staff maintains escape route to designated meeting place outside of the building.

STAFF KNOWLEDGE
 Elevators held.
 Primary Evacuation Location
 Secondary Evacuation Location
 Location of equipment needed to evacuate patients (e.g. wheelchair)

POLICY
 Policy reviewed with staff.
 List of employees participating in the drill is attached.

Details of drill and critique form completed.
 Evacuation route is posted in building.
 Staff has reviewed route.

Details of the drill (Give a description of the results of the drill).

Critique of the drill (Note any deficiencies of the drill and plans for correction).

Document prepared by: _____

