Hospital Disaster Preparedness Awareness Training

2017 JHS Annual Mandatory Education
Objectives

Upon completion, the participant will be able to:

• State basic principles of Emergency Management & likely threats
• Define your role related to emergency response while at work
• Describe the basics of JHS’ Incident Command System
• Explain how to continue the delivery of healthcare services during a disaster or emergency situation
The Four Phases of Emergency Management

• Mitigation
  – actions taken to lessen the severity and impact
• Preparedness
  – actions taken to build capacity and identify available resources
• Response
  – actions taken by management, staff and external responding agencies (if any) when confronted by an emergency
• Recovery
  – actions directed towards restoring essential services and resuming normal operations
Six Critical Areas of Emergency Management

• Communication
• Resources and Assets
• Safety and Security
• Staff Responsibilities
• Utilities Management
• Patient Clinical and Support Activities
Key External Threats

Scenario 1: Earthquake
Scenario 2: Explosive Incident
Scenario 3: Biological Attack
Scenario 4: Chemical Attack
Scenario 5: Radiological Attack
Scenario 6: Mass Casualty Incident
Scenario 7: Severe Weather with Warning
Scenario 8: Tornado
Scenario 9: Wildland Fire
Key Internal Threats

Scenario 1: Active Shooter
Scenario 2: Evacuation, Shelter-in-Place/ Hospital Abandonment
Scenario 3: Chemical Incident/ Hazardous Material Spill
Scenario 4: Infectious Disease
Scenario 5: Information Technology (IT) Failure
Scenario 6: Hostage/Barricade
Scenario 7: Infant/Child Abduction and/or Missing Person
Scenario 8: Internal Flooding
Scenario 9: Utility Systems Failure
Scenario 10: Staff Shortage
JHS Emergency Codes

- BLACK  Bomb Threat/Hospital Ordered Bomb Search
- BLUE    Cardiopulmonary Arrest
- BROWN   Hurricane/Tornado/Severe Weather
- GRAY    Aggressive/Combative Patient/Visitor
- GREEN   Internal/External Disaster
- ORANGE  Hazardous Material Spill
- PINK    Infant/Pediatric Abduction
- RED     Fire/Smoke
- WHITE   Hostage Situation
### Emergency Alert Codes & Basic Staff Response

**This quick reference provides a brief overview to assist employees in responding to emergency situations.**

<table>
<thead>
<tr>
<th>Emergency Code</th>
<th>Description</th>
<th>Explanation &amp; Staff Response</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Code Black</strong></td>
<td>Bomb Threat/Hospital Ordered Bomb Search</td>
<td>If a call is received, obtain as much information from the caller as possible and report all information to (305) 595-6121 (e.g., location, description, activation, and duration). Notify manager/supervisor and area staff members. If a suspicious or out-of-place package/container is observed, do not touch it; report it to (305) 595-6121. Secure/isolate the area. Emergency Operator will notify appropriate individuals to coordinate a search. Be prepared to evacuate only if instructed to do so. Complete and submit an incident report. Wait for &quot;All Clear&quot; announcement.</td>
</tr>
<tr>
<td><strong>Code Blue</strong></td>
<td>Cardiopulmonary Arrest</td>
<td>Call (305) 595-6121 and report your name and the location of the cardiac arrest.</td>
</tr>
<tr>
<td><strong>Code Brown</strong></td>
<td>Hurricane/Tornado/Severe Weather</td>
<td>Notify weather conditions. Call employee hotline for updates at (305) 745-3500. Obtain information/instructions from manager/supervisor. Follow established division or department-specific policies and procedures. Security/contaminated areas will implement lockdown.</td>
</tr>
<tr>
<td><strong>Code Green</strong></td>
<td>Internal/External Disaster</td>
<td>An incident where the relocation of patients is necessary, or where there is an anticipated or actual arrival of a large number of patients into the Emergency Department and/or Trauma Center. Immediately report the emergency to manager/supervisor and/or Executive Senior Hospital Administrator/Administrator-in-Charge (AIC). If necessary, incident command will be established. Obtain information/instructions from manager/supervisor. Follow established division or department-specific policies and procedures.</td>
</tr>
<tr>
<td><strong>Code Orange</strong></td>
<td>Hazardous Material Spill</td>
<td>Secure the area. Obtain PPE and spill kit and clean up spills. Report larger spills to (305) 595-6121. Notify manager/supervisor. Assist those who may have been contaminated, only if your exposure is limited. Prepare to assist with evacuating if necessary. Complete and submit an incident report. Wait for &quot;All Clear.&quot;</td>
</tr>
<tr>
<td><strong>Code Pink</strong></td>
<td>Infant/Pediatric Abduction</td>
<td>Notify security services at (305) 595-6111. Notify manager/supervisor and area staff members. Conduct immediate search of the area. Security/contaminated areas will implement a permissive and restrictive lockdown if necessary.</td>
</tr>
<tr>
<td><strong>Code Red</strong></td>
<td>Fire/Smoke</td>
<td>Follow E.A.C.S.: Escort individuals from the immediate danger of the fire. Signal by ringing (305) 585-6123, activating sound fire alarm pull-stations, and notifying manager/supervisor and area staff members. Evacuate by closing all doors and windows and turning off medical gases. Extinguish fire if it is safe to do so by following the instructions on the extinguisher and using the F.A.S.S. technique (Full, Aim, Squirt, Squash). Pay attention to the location of the fire extinguisher and exit way reception. Follow horizontal evacuation procedures and/or vertical evacuation procedures according to established division or department-specific policies and procedures. Complete and submit an incident report. Wait for &quot;All Clear.&quot; announcement.</td>
</tr>
<tr>
<td><strong>Code White</strong></td>
<td>Hostage Situation</td>
<td>Notify security services at (305) 595-6111. Maintain communication with security dispatch. Stay as calm as possible; security/contaminated areas will implement appropriate perimeters and implement lockdown if necessary. Notify manager/supervisor. Complete and submit an incident report. Wait for &quot;All Clear&quot; announcement.</td>
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Initial All Hazards Response

Key Point: RAIN:

- Recognize the presence of hazard
- Avoid contamination through use of protection
- Isolate hazards by securing the area
- Notify appropriate higher level person

What can I do?
Recognize

- Unusual Activity / Suspicious Behavior
- Hazardous weather conditions
- Things out of place
  - Unexplained liquids
  - Strange smells
  - Abnormal fogs or mists
  - Suspicious packages

Does it belong?
Avoid

• **DO NOT:**
  – Become a victim
  – Rush into a situation
  – Taste, Eat, Smell, or Touch any foreign substance
  – Assume anything

• **DO**
  – Learn the appropriate use of PPE available
  – Follow Occupational Health Service (OHS) Respiratory Protection Plan, as applicable
  – Be familiar with Departmental/Unit specific Emergency Response Plan
Isolate & Notify

- Keep others away from hazard area
- Notify immediate Supervisor

- Hospital Emergency Phone Number:
  - Jackson Main  (305) 585-6123 (or 85-6123 from landline)
  - Jackson North (305) 690-4060 (or 5555 from landline)
  - Jackson South (305) 256-2133 (or 7777 from landline)

Remember RAIN: Recognize, Avoid, Isolate, Notify
## RAIN Examples

<table>
<thead>
<tr>
<th>Recognize:</th>
<th>Suspicious package</th>
<th>Recognize:</th>
<th>Chemical Spill</th>
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<tbody>
<tr>
<td>Avoid:</td>
<td>Do not touch object</td>
<td>Avoid:</td>
<td>Do not touch, taste, or smell</td>
</tr>
<tr>
<td>Isolate:</td>
<td>Contain the area &amp; keep others away from hazard area</td>
<td>Isolate:</td>
<td>Contain the scene &amp; keep others away from hazard area</td>
</tr>
<tr>
<td>Notify:</td>
<td>Call for help!</td>
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JHS Emergency Operations Plan (EOP)

• Can be accessed through the JHS Intranet Portal
  – Click on “Content Directory”, then click on

• To facilitate and ensure predictable behavior by the majority of staff directly following a disaster or emergency situation
• To provide specific guidelines for staff to follow in a disaster/emergency
• To establish Incident Command - a team of individuals who can handle the immediate situation while arranging for experts to deal with long-term consequences of the disaster or emergency incident
JHS Hospital Incident Command System (HICS)

- An established framework used to designate responsibilities and reporting relationships for both leaders and staff members during an emergency. The HICS helps us identify who is in charge during an emergency and the individuals who will carry out the decisions of the individual in charge.
Hospital Incident Command Center

- Designated area in the hospital for planning and execution of disaster incident management
- Provides overall direction for hospital operations during a disaster

Command Centers
Telephone/Location:
- Jackson Main (305) 585-5750
  West Wing Room 124
- Jackson North (305) 651-1100 ext 3333
  2nd Floor Administrative Conference Room
- Jackson South (305) 256-5150
  Executive Conference Room
JHS HICS
(For specific names of the people in these roles please refer to facilities specific HICS organization Charts)
Activation of the JHS Emergency Operations Plan

• System Chief Executive Officer (CEO) or Designee (e.g. System Chief Operating Officer, System Chief Medical Officer) has the authority to activate the emergency operations plan

• Facility Specific (JMH, Holtz Children, Behavioral Health, Rehabilitation Hospital, JNMC and JSCH) CEO or Designees (Facility COO, Facility CMO, Facility CNO or Facility AIC (Administrator In charge) has the authority to activate emergency operation plan for their respective facilities

• Employees can be notified of the disaster plan activation by various means including their Supervisors, Page Operators, Pagers, JHS Emergency Notification System (Everbridge) and/or JHS Employee Hotline (305-585-8000) or mass e-mail

• Follow your department-specific disaster response plan for your individual assignments when the emergency is declared
Employee’s Role and Disaster Response

• All employees are required to participate in disasters/emergencies if called in to work
• All employees will participate in hospital and/or departmental drills/exercises
• All employees that are not part of the HICS, are to report to their supervisor for direction
• Employees that are part of specialized response teams are on 24 hour call
• Directors, Managers, and/or designees will review department specific resources available for use
  – As per JHS Administrative Policy #371:
    • “..failure to report to duty during an emergency could result in disciplinary action up to, and including, termination”
Employee Information

- How will I know when to come to work?
  - Notification by the Supervisors; call trees
  - Notification by Communicator Mass Notification System
  - Television announcements
  - Radio announcements
  - Employee Hotline
  - Community Information Line
  - Cell Phones, Pagers, E-mail
  - Newspapers
Resources

- JHS maintains a documented inventory of resources/assets it has on site that may be needed during an emergency including but not limited to personal protective equipment (PPE), food, water, fuel, generators, and surgical/medical related resources and assets
- Specifics regarding the amounts, locations, processes for obtaining/replenishing supplies is established by each department in advance of an event occurring
- Specific instructions for conserving resources will be provided as needed
Downtime Procedures

- **Power:** Call your supervisor or hospital emergency number
  - Use RED power outlets for all critical equipment
  - Use battery powered and manual backup equipment

- **Water:** Nutrition Services has emergency supply of water/food. Procurement Department will try to have vendors deliver additional water and food as needed

- **Utilities:** Charge nurse to follow Medical Gases Shut-Off Protocol

- **Phones:** Try to use other available lines, cell phones, radios, or runners

- **Computers:** Follow advice from IT (Information Technology) and also look at JHS Business Continuity/Downtime Procedures Policy 249

- **EHR:** Return to paper documentation and lab requisition slips

- **Radios:** Operating instructions for radios will be posted on the radios/command center
Security

- If necessary, locking of all entrance/exit doors to buildings & posting of personnel at these doors to assure only authorized persons enter or exit
- If necessary, certain perimeter gates will also be locked/secured to limit the flow of traffic onto the premises
- Barrier gates along the perimeter of JMH assist in the prevention of unauthorized access. Access points along these gates can be manually closed and locked
- The movement of individuals between buildings is controlled by
  - automated access control devices (such as swipe-card or proximity-card readers, magnetic locks, and surveillance cameras)
  - Security personnel or by other JHS staff (via intercom buzzers)
  - Color-coded employee and contractor badges and temporary (peel and stick) visitor badges help restrict access and identify authorized and unauthorized persons in any given location within the campus

**Gate drills and inspections are conducted by Security on a regular basis**
Chain of Custody: Personal Belongings

- Personal belongings will be given to a family member, a person designated by the patient, or kept in the Cashier’s Vault
- Documentation is necessary per JHS Administrative Policy #400.081.1:
  - Property List
  - Patient Valuables Record
- If patient cannot communicate, two staff members will sign and send valuables to the Cashier’s Vault
- If anyone other than the patient is retrieving the valuables, the Valuables Release Form must be completed and presented to the cashier, along with a picture identification
Chain of Custody: Evidence

What is forensic evidence?

- Bullets, knives, or any other object suspected as being used to harm the patient often surgically removed in OR
- Any chemically/radiological contaminated articles or clothing
- Specimens/objects collected require:
  - Confirmation & label of the identity and origin of evidence collected
  - Decontaminate outside surface of specimen container
  - Labels should have patient’s room #, date and name of surgeon who identified the specimen or patient identification information
Chain of Custody: Evidence

- Specimens need to be logged appropriately

- Deliver specimens/evidence to appropriate area as outlined in the latest version of JHS and/or department-specific policies or other appropriate law enforcement entities immediately after surgical removal or specimen availability
Community Interface

- JHS collaborates with different agencies during an incident, a few are:
  - Miami-Dade County Emergency Management
  - Miami-Dade Fire/EMS
  - Florida Department of Health in Miami-Dade County
  - Miami Dade Healthcare Preparedness Coalition
  - City of Miami Fire/EMS
  - SE Regional Domestic Security Task Force
Personal Preparedness

- Family preparedness
- Photocopies of vital personal documents
- Food/water/medications/batteries/other supplies
- Battery operated radio
- Flash lights
- Cell phones with extra batteries
- Cash at hand
- Pet supplies
- Evacuation plan
- Nearest shelter location

Refer to:
- JHS Emergency Operations Plan
- Hurricane Response Plan
- Employee Work/Life Services Hurricane Toolkit
For Emerging Infectious Diseases please refer to specific modules in JEN and/or policies/protocols related to specific Emerging Infectious Diseases.