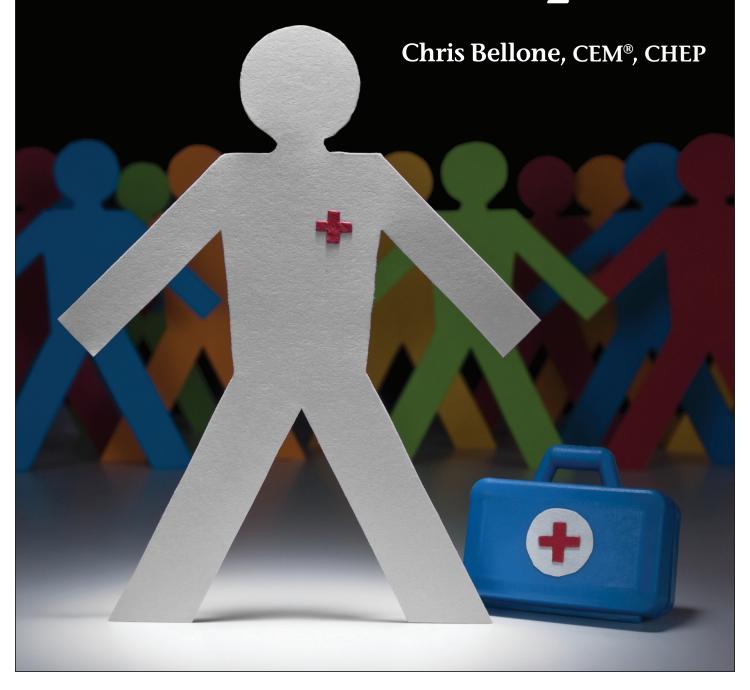


Emergency
Preparedness
Solutions

Emergency Operations Plan Template



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Chris Bellone, CEM®, CHEP, is currently the Emergency Medical System Region Planning Area coordinator for Illinois Region 1 EMS and the Emergency Preparedness Coordinator for the Rockford Health System in Rockford Illinois. Rockford Health System has nearly 3,000 employees and Rockford Memorial Hospital is a 391-bed level 1 trauma center. He is a CEM® and a Certified Healthcare Emergency Professional (CHEP). Prior to this position, he was an Emergency Communications Specialist and Emergency Medical Technician for Rockford Memorial Hospital where he worked fulltime for 10 years before leaving to fill the newly designated position. He currently serves on the FEMA Region V Regional Emergency Communications Workgroup (RECWG) and Illinois Terrorism Task Force Communications Sub-Committee. He served as the Chairman of the Winnebago County Local Emergency

Planning Committee from 2004-2006. He also served his country during Desert Storm as a Navy Hospital Corpsman from 1989-1992 at the Naval Hospital Great Lakes in the Emergency Department where he functioned as the lead corpsman and preceptor for incoming naval reserve personnel.

He has particular interest in the evaluation and implementation of emergency preparedness plans, procedures, capabilities and exercises all hazards including radiological accidents at the federal, state or local level. He has developed documents/materials for publication including instructional documents. He has provided liaison, coordination, assistance between federal, state and local offices during emergency planning while assisting in developing training needs. He has coordinated large conferences, meetings, training, seminars and workshops on emergency response to all hazards including nuclear and radiological accidents.

He led a regional team in the development of the Region 1 EMSRPA communications initiative, disaster plan, developed the Region-1 Regional Medical Emergency Response Team, and developed the Winnebago County alternate care site plan. He has developed and evaluated many hospital-based tabletops, functional and full-scale hospital exercises. Some of his responsibilities at the Rockford Health System include direction of the systemwide emergency management program and maintenance, training and coordination of the Rockford Memorial Hospital's Hospital Incident Command System program (HICS). He has developed many plans that include Rockford Health System EOP, communications, decontamination, surge, nursing unit isolation, and disaster credentialing. He was the project manager for fixed and mobile decontamination facility and internal isolation unit.

INTRODUCTION

Instructions

This document is a template of a hospital emergency operations plan (HEOP). This template is not intended to be a boilerplate document. This template is intended to assist your facility with the development of a healthcare-specific HEOP. It is intended to be used as a tool to guide and enhance the emergency planning process, which should include all stakeholders within the healthcare organization as well as external agencies and organizations.

Actionable instructions are in *italics*, and the examples that you should change to be specific to your facility are in **bold**. These items should be reviewed, then expanded, deleted, or modified as necessary to fit the needs of your organization.

There are elements that appear in *red italics* that reference elements of the National Incident Management System (NIMS) as recommended in the NIMS *Implementation Activities For Hospitals and Healthcare Systems* (Department of Homeland Security, NIMS Integration Center, September 12, 2006, NIMS Alert: 013-06). The NIMS items are also suggestions, but could enable your organization to develop a plan that could be coordinated more easily with the local government's emergency operation plan.

There are references in *blue italics* to standards and elements that may address certain Joint Commission emergency management standards. Please note that these are only recommendations. In planning committee, each **healthcare entity** is responsible for developing appropriate facility-specific HEOP documentation and independently decides whether its HEOP appropriately satisfies the standards and compliance references.

Please customize the template by using appropriate logos or seals. Do not forget to replace the term "healthcare entity," which is used in the template, with your organization's name.

Finally, please add acronyms and definitions into the glossary that reflect the relevant terms used by your organization and community.

Structure

The structure of this planning template will revolve around the following six concept areas:

- Communication
- Resources and assets
- Safety and security
- Staff responsibility
- Utilities
- Patient clinical and support activities

When structuring the HEOP, it is important to remember that healthcare emergencies vary greatly; however, their potential effects do not. This means that healthcare organizations can plan to deal with effects common to several hazards rather than developing separate plans for each hazard. For example, a tornado, flood, and hurricane can all force the evacuation of a hospital. Instead of developing three separate plans for each, hospital and healthcare organizations can develop an incident plan for patient evacuation, communications, resources, and staff responsibility.

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Promulgation Document

EM.01.01.01, EP 1; EM.02.02.01.01, EP 1

The promulgation document puts the plan in force. This document may need to be reviewed by the healthcare institution compliance or equivalent accreditation and licensure department. It announces the HEOP and makes it official, giving both authority and responsibility to those individuals and departments identified within it to perform their given tasks. It should describe the process and responsibilities for those tasked with identifying, preparing, and maintaining standard operating procedures that explain how the tasks will be completed. It should also commit those individuals and departments tasked to train and exercise as appropriate to successfully implement the plan.

Promulgation of the HEOP

By virtue of the authority vested in me by **authorizing policy/regulation** as **CEO** of **healthcare entity** and as the administrator ultimately responsible for emergency management of **healthcare entity**, I hereby promulgate and issue the **healthcare entity** Hospital Emergency Operations Plan ("the Plan") dated **date**. The Plan provides for **healthcare entity** response to emergencies and disasters to save lives; to protect public health, safety, and property; to restore essential services; and to enable and assist with economic recovery.

The Plan complies with the <u>state hospital licensure laws/acts</u>, as amended, and is consistent with the National Incident Management System as implemented in the *National Response Framework*, adopted in January 2008.

The **healthcare entity** emergency management coordinator, **name of coordinator**, on behalf of the **healthcare entity** administration, is hereby authorized to activate the **healthcare entity** Hospital or Healthcare Command Center (HCC) in order to direct and control **healthcare entity** emergency operations. Augmentation of the HCC shall constitute implementation of the Plan.

Further, the **healthcare entity** emergency management coordinator is hereby authorized, in coordination with the **healthcare entity** administration, to amend the Plan as necessary to ensure the continued health and safety of the patients, staff members, visitors, and property of **healthcare entity**.

Assigned in the Plan, the head of each designated **healthcare entity** department or unit shall appoint a lead and at least one alternative for the department or unit.

This promulgation shall be effective upon its signing and shall remain in full force and effect until amended or rescinded by further promulgation.

Given under my hand and under the seal of healthcare entity, this date day of month year.

Healthcare Entity CEO
Attest:
Witness:

Approval and Implementation

EM.01.01.01, EP 1; EM.02.02.01.01, EP 1

This document introduces the plan, outlines its applicability, and indicates that it supersedes all previous plans. It must include a date and be signed by the senior leadership.

Resolution

Healthcare Emergency Operations Plan

WHEREAS the environment of care/disaster preparedness/accreditation and licensure committee of healthcare entity, location of healthcare entity, recognizes the need to prepare for, respond to, and recover from natural and manmade disasters; and

WHEREAS **healthcare entity** has a responsibility to provide for the safety and well-being of its patients, staff members, and visitors; and

WHEREAS **healthcare entity** has established and appointed a director and coordinator of emergency management

NOW, THEREFORE, BE IT RESOLVED by the environment of care/disaster preparedness/accreditation and licensure of healthcare entity, location of healthcare entity, this Healthcare Emergency Operations Plan as revised is officially adopted, and

IT IS FURTHER RESOLVED AND ORDERED that the director of emergency management, or his/her designee, is tasked and authorized to maintain and revise as necessary this document during the next four (4)-year period or until such time be ordered to come before this board.

Chairman, envi r	conment of care/disaster prepar	redness/accreditation and licensure
Adopted this	_ day of	_ 20##

Record of Changes

EM.02.02.01.01, EP 2

All updates to the HEOP document must be tracked. This section should include some format in which to do this. It should, at minimum, contain date of change, page or section of change, and name and title of person making the change.

Change number	Date of change	Page or section changed	Summary of change	Name of person or committee authorizing change
1				
2				
3				
4				
5				
6				
7				
8				
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10				

Record of Distribution

EM.02.02.01.01, EP 2

The record of distribution can be used to prove that those tasked within the plan have acknowledged receipt, reviewed, and accepted the plan. Distribution to the public can also be listed, but the plan should be clean (i.e., without any sensitive or personal information).

Name	Department/unit	Title of recipient	Distribution form (electronic or hardcopy)

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