

## Hospital Template Evacuation Plans

*Consider differences in evacuation planning for immediate evacuation (e.g. fire), rapid evacuation (e.g., loss of building heat or pre-emptive evacuation (e.g., known flood risk exceeds threshold))*

- Encourage staff to have family emergency plans including
  - Shelter in place with needed supplies and medications.
  - If evacuating the home, where to go, when to go, provisions for needed supplies and medications, provision for pets, what important documents to take with.

### *Evacuation*

- Designate authority to activate an evacuation
- Have plan for authority to devolve to other staff in the event of command gap.
- Describe how evacuation of the facility would fit into the ICS structure.
- Identify partners to be notified of evacuation.
  - ND DoH
  - Local emergency management
  - Local public health
  - Hospital Board
  - EMS provider
- Describe how patient family members would be notified of impending evacuation and patient destination.
- Designate authority to authorize patient movement/transfer and coordinate the transfer of medical care to a receiving physician.
- Define criteria for activation of evacuation
- Include evacuation responsibilities in ICS job action sheets
- Define staff responsibilities in evacuation
  - Will you call back off duty staff to assist with evacuation and/or accompany patients to designated facilities to provide care in new locations?
    - Assure that employment policies include the expectation of response.
  - Do you expect non employed providers such as physicians with privileges to assist with evacuation?
    - Assure contracts and agreements reflect the expectations
- Describe a process for determining the order in which patients will be evacuated or pre-determine the order. (Geographic areas, patient acuity, medical specialty area, or other)
- Describe a process to identify rooms that have been cleared. (i.e. labels on the door of the rooms)
- Designate the “safest” location in the facility, based on a variety of scenarios (i.e. flood, structural damage due to tornado, other scenarios as identified in facility or community vulnerability assessments) if certain patients cannot be evacuated or

evacuation cannot be accomplished in an appropriate time prior to the event. Alternatively, describe the process for rapidly determining the best safe area during the disaster)

- Identify an evacuation staging area for transport of patients from the building
- Identify any supplemental transportation vehicle in addition to ambulance services that your hospital or community could use to evacuate patients.
- Discuss use of the state wide patient tracking system
- Determine process and responsibility for preservation or transfer of specimens, blood products, etc. (Laboratory)
- Determine protocol and responsibility for closing the facility
  - Turning off power, medical gases, heating/cooling systems, air handling system, etc. (Engineering of Facility Department)
- Identify alternate location for continuation of administrative business functions and ICS operations and notification of critical partners of how to continue to reach facility administration.

### ***Re-entry***

- Identify criteria for re-entry to the facility
  - Safety
    - Determination of structural safety
    - Biomedical equipment checks
    - Cleaning and disinfection of facility
  - Availability/re-stocking of medical supplies and pharmaceuticals
    - Process for sorting of damaged vs. salvageable supplies and equipment.
  - Inspection and approval of re-occupancy by Health Facilities (Administrative licensure requirements)
    - Identify responsibility for communication with Health Facilities
- Describe number of patients facility can reasonably receive in a single day.
- Describe how staff will be notified and scheduled to return to duty at your facility
- Describe how the medical providers and staff will be notified of facility re-opening. (Similar to discussion under Communications section of this plan.)
  - Media
  - Web site
  - Mail
  - E-mail
  - Phone calls
- Determine what message you will provide for the public and how it will be distributed.

### ***Receiving patients from another facility that is evacuating***

- Describe how ICS will be used for process of receiving patients evacuated from another facility.
- Identify which portions of the surge plan will apply to this situation.
- Identify process to assess supply levels (medical supplies, food, pharmaceuticals, linens, equipment, etc.) and order additional supplies

- Designate in-take area for arriving patients
  - Ambulatory
  - Non-ambulatory
- Determine responsibility for assessment and assignment of resources to the incoming patients.

If some portions of this section have already been addressed in other sections of the plan, it is not necessary to repeat the language of the plan; however you should reference the appropriate sections that are applicable here.