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| Upstate-color |  | Department disaster Plan manual | Upstate University Hospital at Community General |

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| Policy Number: **DDP/DDPC A-XXX** | **Approved by: Title of** Nursing Director/Associate Administrator |
| Issue Date: **mm/dd/yyyy** | Applies to: **Outpatient Areas & Clinics** |
| Value(s): ***Respect, Integrity, Innovation*** | Page(s):  **1 of 9** |

Departmental Disaster Plan

ENTER Department name here

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| --- | --- |
| **Review Date:** | **Change Description:** |
| mm/dd/yyyy | Completed only if policy reviewed, but not revised |
| **Revised Date:** | **Change Description:** |
| mm/dd/yyyy | A summary description of the changes to the document |

1. **Purpose & Planning Assumptions:**
   1. **This document is intended to be a basic review of important information that can be used as an initial reference during times where Incident Command has been activated.**
   2. **It should not be considered an all-inclusive document or a substitute for facility wide procedures for specific events that have already been developed in the Upstate Emergency Operations Plan (EOP). Any event specific procedures (evacuation, utility failure, patient surge, pandemic, etc) can be found in the MCN Policy Manager System. This should always be the first location to seek additional information.**
   3. **This Department procedure is to be considered a part of the overall plan in which SUNY Upstate responds to critical incidents across all geographic areas in a manner that takes into account each department’s unique circumstances, patient populations, and services offered.**
   4. **All departments will follow these recommended guidelines in the event that Incident Command is initiated at SUNY Upstate as detailed in policies DIS C-00 and DIS J-12 and an integrated disaster communications annex DIS J-00.**
   5. **This policy is not to be considered a standalone reference for fire related evacuation routes but intended to offer tips on expected actions for staff.**
   6. **SUNY Upstate is to be considered, for disaster planning purposes, a healthcare system consisting of multiple separately certified healthcare facilities that have a unified and integrated emergency preparedness program. Each department at SUNY Upstate has an opportunity to actively participate in the development of the unified and integrated emergency preparedness program by completing this procedure.**
2. **Locations this plan applies to** 
   * 1. **Please list the specific Building, floor or any specific rooms that your department uses during the course of normal business. This should only list your departments primary work space and should NOT be a listing of everywhere your staff could go during normal operations. If your department works in many areas during the day simply put the word “global” when indicating the floor. *Please delete the highlighted paragraph above when you have completed this section***

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| **Building** | **Floor** | **Other locations (if needed)** |
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1. **Incident Command Activation Levels:**

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| **Level 3** | **MONITORING: Activation by SUNY Upstate staff to closely monitor a developing situation or an incident make preparations to increase SUNY Upstate’s response posture, as appropriate.** |
| **Level 2** | **ACTIVATION: Responding to an incident that can effectively be handled by personnel on duty. Emergency Operations Center is activated and staffed.** |
| **Level 1** | **FULL ACTIVATION: This event has or will have a significant impact on SUNY Upstate’s Operations. This event cannot be handled effectively by only personnel on duty.** |

1. **Continuous improvement and training:**
   1. **It is expected that each department manager or supervisor reviews the Department/Unit Disaster Plan with staff at least on a yearly basis. Any changes or improvements should be initiated with the department leaders and reviewed by the Department of Emergency Management. Please use tracker code: DISASTERPLANEDU**
2. **Initial Notification:** 
   1. **Any incident begins with the recognition that something may occur or has occurred and that the impact is likely to disrupt normal operations.**
   2. **Typically, we often receive little or no warning of an incident happening in the surrounding community.**
   3. **After the decision has been made to activate HICS (Hospital incident command system) at SUNY Upstate (see DIS C-00)** 
      * 1. **All notifications and communications should follow DIS J-00 Incident Command Communications Annex whenever possible.**
        2. **A GroupWise email will be sent to all SUNY Upstate staff.**
        3. **An Everbridge notification will be sent whenever possible.**
3. **Expected Steps for All Staff members (see DIS J-12):** 
   1. **Stay calm.**
   2. **If you are away from your work area, return to it and report in.**
   3. **Assess your current operational status.**
   4. **Do not leave at the end of your shift unless you have been told to do so by your supervisor or Incident Command.**
   5. **Continue normal operations unless instructed (or unable) to do otherwise.**
4. **All Departmental Supervisors or Managers currently on duty should:** 
   1. **Assess your current operational status.**
   2. **Continue normal operations unless instructed (or unable) to do otherwise.**
   3. **Report any operational problems through your chain of command or Incident Command via phone if urgent.**
   4. **Maintain a heightened sense of awareness to:**
   5. **Changes in the environment.**
   6. **Operational problems.**
   7. **Reaction of staff, patients, families.**
   8. **Observe staff for signs of stress.Inform your staff that shifts have been extended until further notice.**
5. **Contact your Ambulatory Director to communicate any resource needs.**
6. **Ensure your department has utilized their “Go-Kits” and each department has a person in charge who is wearing the reflective vest. Location of Departmental Go-Kit: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**
   1. **The person wearing the vest must communicate with the Designated Building director at your specific location.**
   2. **If this person has not been designated, please assume that role until otherwise directed.**
7. **Command Integration: (see DIS M-81) for an Outpatient/ Clinic**
   1. **Under ICS, the clinic’s overall response is to be managed by each area’s normal chain of command.**
   2. **Integration with Community-wide Response**
      * 1. **SUNY Upstate Ambulatory and Outpatient Clinics will coordinate its response to community-wide disasters with the overall medical and health response directed by the SUNY Upstate Incident Commander or SUNY officers as the situation warrants.**
        2. **Clinic personnel will cooperate fully with Emergency Medical Services, Fire and Law Enforcement personnel. This may include providing information about the location of hazardous materials or following instructions to evacuate and close the clinic.**
   3. **SUNY Upstate Ambulatory and Outpatient Clinics will coordinate the distribution of additional supplies, equipment and in some circumstances personnel through the SUNY Upstate Incident Command structure.**
8. **IN CASE OF FIRE:** 
   * 1. **Pre-Planning:**
        1. **Know the location of fire alarm pull box locations.**
        2. **Check the fire exits to make sure they are usable.**
        3. **Know the location of fire-rated stairwells that will provide a protected path all the way to the outside.**
        4. **Learn the sound of your building’s fire alarm. It could be bells, chimes, horns or a coded gong.**
     2. **During a Fire**
        1. **Use nearest pull alarm box if you are able.**
        2. **Outpatient Areas Call 9-911**
        3. **Do not hang up…..Give specific location of fire.**
        4. **Examine Environment.**
        5. **Evaluate if oxygen needs to be shut off.**
        6. **Turn off all unnecessary electrical equipment.**
        7. **Clear corridors of all equipment and obstacles.**
        8. **Close all windows and doors.**
        9. **If evacuation is needed for smoke/fire, the movement should always be to an area past the next set of fire doors. The fire doors should then be closed.**
        10. **DO NOT USE ELEVATORS, (unless specifically instructed to do so by the Fire Department).**
        11. **Whenever possible, identify a buddy to assist disabled individuals during an emergency.**
        12. **Do not attempt to lift/carry disabled individuals since this may cause serious injuries.**
        13. **Only professional rescue personnel should lift or carry disabled people.**
        14. **If a disabled person is not able to exit a building, they should be assisted by a buddy to an area of refuge.**
        15. **The buddy should immediately notify rescue personnel where disabled people are located inside buildings via phone or designate someone to communicate that information to resources outside.**
        16. **NEVER hesitate to relocate because of imminent danger.**
        17. **Designated Rally point for staff members and patients to gather in order to perform a headcount for emergency services is :\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**
            1. **Once outside, stay at least 50 feet away from buildings. Whenever possible, congregate with people from your class, department or work group. Try to account for all people after gathering at the assembly point to ensure everyone has evacuated safely. If you suspect there are still people in the building, immediately notify emergency personnel.**
        18. **LOCATION OF NEAREST EVACUATION EQUIPMENT:** *(optional as not all areas need evacuation equipment)* INDICATE HERE
9. **Orders of Succession:**
   1. **This section identifies orders of succession to key positions within the department.**
   2. **Orders should be of sufficient depth to ensure the department’s ability to manage and direct its essential functions and operations. Recommended practice is at least three deep.**
   3. **List the people who can make policy determination and operational decisions if the head of your department or unit is absent.**
   4. **This list of names should be of those underneath the primary departmental manager who have the experience and leadership to assist the department in times of emergency in which the normal chain of command is not available or on the department. Alternate contact info may be cell phone numbers but it is not mandatory to list those in this document. DELETE THIS HIGHLIGHTED SECTION WHEN DONE WITH ORDERS OF SUCCESION**
   5. **The following table shows the order of succession for the Department.**

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|  | **Name** | **Contact Info** | **Alternate Contact Info** |
| **Primary Manager** |  |  |  |
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1. **Emergency Code Names:** 
   1. **SUNY Upstate Medical University and University Hospital utilize a standard set of emergency codes for announcing critical events while minimizing the alarm to non-staff present in the facility. It is each person’s responsibility to be familiar with these policies and your actions during these events.**

| **Type** | **Code Name** | **Policy #** |
| --- | --- | --- |
| **FIRE** | **CODE RED** | **F-01** |
| **ALL CLEAR** | **CODE CLEAR** | **DIS C-00** |
| **MEDICAL EMERGENCY ADULT** | **CODE BLUE** | **CM E 15** |
| **MEDICAL EMERGENCY PEDS** | **CODE WHITE** | **CM E 15** |
| **MISSING CHILD** | **CODE AMBER** | **M-03** |
| **MISSING ADULT PATIENT** | **CODE GREY** | **M-03** |
| **SEVERE WEATHER** | **CODE BLACK** | **UW S-04** |
| **PERSON WITH A WEAPON/ACTIVE SHOOTER** | **CODE SILVER** | **H-11** |
| **BOMB THREAT** | **CODE YELLOW** | **DIS M-15** |
| **Evacuation** | **N/A** | **DIS M-40** |

1. **Hazard Vulnerability Assessment:** 
   1. **Yearly the Emergency Management Committee undertakes a detailed assessment of hazards and threats that could impact SUNY Upstate.**
   2. **The results of that assessment are listed in policy DIS M-46. It is the responsibility of every SUNY Upstate employee to be familiar with the top five hazards.**
2. **Workforce Deployment in Extraordinary Circumstances: (See UW W-04)**
   1. **Only the Governor has the authority to close State offices and facilities and direct State employees not to report to work or to depart from work early, without charge to their leave credits/accruals.**
   2. **In the event of extraordinary circumstances when the Governor has not issued such a directive, campus presidents are authorized to cancel classes for students and cancel appointments for patients.**
   3. **In such circumstances, employees who do not work as scheduled are required to obtain prior supervisory approval to ensure their services are not required and must charge appropriate leave credits/accruals (other than sick leave) in order to remain in a paid status.**
   4. **In circumstances when the Governor directs that only “essential employees” are expected to work to ensure that vital operations are continued, the following employees are typically considered “essential employees”:**
      * 1. **Employees who are involved in the direct care of patients** *(e.g., physicians, RN’s, LPN’s, HCT’s, UST’s, Radiation Techs, Physical Therapists, Respiratory Therapists, Phlebotomists, etc.).*
        2. **Employees who work in departments that support direct patient care** *(e.g., Materials Management, Pharmacy, Clinical Data, Dietary, Clinical Pathology, etc.).*
        3. **Employees who preserve the public safety or welfare of the Upstate community** *(e.g., University Police Department, Physical Plant, Environmental Services, etc.).*
        4. **Employees with responsibility for laboratory experiments or other time-sensitive activities.**
        5. **Employees who work in units and departments that are open/operative and staff for essential services on “red” holidays.**
   5. **Upstate reserves the right to consider all employees “essential” depending on the nature of the particular emergency. Employees are expected to confirm with their supervisors whether they are considered an “essential employee” before deciding not to report to work.**
3. **Insert Department Specific Plans/Procedures Here:** 
   1. **Examples:** 
      1. **Equipment that needs special care during an emergency incident**
      2. **Any special needs of your patient population, visitors or staff members.**
      3. **Several departments have referenced other documents based on their regulatory needs that ar specific to disaster preparedness.**
      4. **Some areas have explained the processes you will contact your staff during a severe weather event.**
      5. **The possibilities are endless; this is a great location for those items specific to you and your department. IF NOT NEEDED DELTE THIS SECTION**

**Education/Related Resources:**

* **F-01**
* **M-03**
* **H-11**
* **CM E-15**
* **UW S-04**
* **UW W-04**
* **DIS M-15**
* **DIS M-30**
* **DIS M-40**
* **DIS M-69**
* **DIS M-70**
* **DIS M-75**
* **DIS M-46**
* **DIS J-00**
* **DIS J-12**
* **DIS C-00**

**Form Names and Numbers:**

**None**

**Originating Department: Department Name**

**Contributing Department(s): Emergency Management**

**Evidence-Based References:**

**None**