Welcome to the Webinar “How to use the Maryland Emergency Preparedness Manual for Your Home Care Company”

The Webinar will begin shortly.

Please be sure to dial in to hear the audio:

Call-in: 866-906-9888
Pass code: 1694816
HOW TO USE THE MARYLAND EMERGENCY PREPAREDNESS MANUAL FOR YOUR HOME CARE COMPANY

Diane Link RN, MHA
Presented by MNCHA and Maryland DHMH Office of Preparedness and Response
OVERVIEW:

- Why Home Care Companies Need EP
- Hazard Vulnerability Assessment
- Agency Assessment of EP
- EP by Event
- Incident Commands
- Business Continuity Plan
- Community Resources
Why Does Your Company Need This?
- We take care of the most VULNERABLE patients
- We provide care to over 95,000 Maryland residents yearly
- 2014 - Weather Disasters Cost over $6 Million
- Maryland has been impacted by the following:
  - Natural Disasters
  - Biological/Environmental Disasters
  - Man-Made Disasters
  - Operational
HAZARD VULNERABILITY ASSESSMENT, ACUITY ASSESSMENT AND ASSESSING EMERGENCY PREPAREDNESS PLAN

Using information on your location/patient service area evaluate the risk and preparedness of your agency

Identifying the acuity (patient status/needs) level

Assessing your current plan does it meet the need?
# Hazard Vulnerability Assessment

Exhibit A.2: Hazard Vulnerability Assessment Tool

<table>
<thead>
<tr>
<th>EVENT</th>
<th>PROBABILITY LEVEL</th>
<th>VULNERABILITY LEVEL</th>
<th>PREPAREDNESS LEVEL</th>
<th>TOTAL SCORE Multiply each column</th>
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<td>Natural Disasters</td>
<td>Very Likely</td>
<td>Likely</td>
<td>Unlikely</td>
<td>Total Disruption</td>
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<td>Heat Emergency</td>
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<td>Epidemic/Pandemic Flu</td>
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<td>Epidemic/Pandemic Disease</td>
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<td>Chemical Incident</td>
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<td>Nuclear Incident</td>
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<td>Air Pollution/Air Quality</td>
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<td>Man Made Disasters</td>
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<td>Civil Disturbance</td>
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<td>Bomb Threat</td>
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<td>Active Shooter</td>
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<td>Operational</td>
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<td>Electrical Power Failure</td>
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<td>Communication Failure</td>
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<td>Informational System Failure</td>
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OVERVIEW HAZARD VULNERABILITY ASSESSMENT

Data resources include:
- NOAA – National Oceanic And Atmospheric Administration
- MEMA – Maryland Emergency Management Agency
- FEMA – Federal Emergency Management Agency
- DHMH – Office of Preparedness
DEFINITIONS

- **Probability**— likelihood/frequency event occurring
  - 3 Very Likely – occur every year to every 3 years
  - 2 Likely – occur every 3 – 10 years
  - 1 Unlikely – occurred over 10 years ago

- **Vulnerability**— degree which your company will be impacted
  - 3 Total Disruption – inability to provide service extended time
  - 2 Moderate Disruption – inability to provide service short period time
  - 1 Low Disruption – little or no impact to service
DEFINITIONS:

- Preparedness – Company’s experience in dealing with events or strength of emergency preparedness plan
  - 1 Good – Plan in place and agency experienced with good outcome
  - 2 Fair – Plan in place but could be improved, event occurred with challenges preventing good outcome
  - 3 Poor – No plan in place or event occurred with poor outcome
Utilizing Hazard Vulnerability Assessment Chart

- Rate your company for each event for each area
  - Probability – how likely to occur
  - Vulnerability - agency impact level
  - Preparedness – Plan in place – outcomes
- Multiply the ratings in each area
- Higher Score identify the highest risk
- Identify an acceptable risk level
  - Probability – how likely to occur
  - Vulnerability - agency impact level
  - Preparedness – Plan in place – outcomes
PATIENT ACUITY ASSESSMENT

- Identifies each patient acuity level in case of emergency
  - High Acuity Risk – assistance is needed, no caregiver available, requires visit within 24 hours
  - Moderate Acuity Risk – Caregiver available but needs support, requires visit within 24 – 48 hours
  - Low Acuity Risk – Caregiver available visits can be postponed greater than 48 hours

- Each agency needs to modify this assessment to meet the needs of agency/clients served
HC EMERGENCY PREPAREDNESS ASSESSMENT

- IF you have an EP plan and.....
- IF you completed the Hazard Vulnerability Assessment.....THEN

You need to assess your current EP Plan!

Using the Homecare EP Assessment Tool evaluate your current EP Plan to see if it meets all the criteria. If it doesn’t then NOW is the time to update it.
EMERGENCY PLANNING BY EVENT

Or.. What do I do if the worst happens
A PLAN IS ONLY AS GOOD AS SOMEONE BEING ABLE TO USE IT

- Utilize the event planning advice in the manual to build or revise your current EP program
- Create a Emergency Preparedness Folder for each clinician or manager to keep handy
- Use the EP by Event to guide decision making of office/field clinicians, managers and patients
- Review at least annually or after each event
- Update as needed
- Educate at least annually with all staff
INCIDENT COMMAND

Or... Who’s on first, What’s on second and I don’t know is on third
WHAT IS AN INCIDENT COMMAND AND WHY DO I CARE

Incident Command is a national template for preparedness and response that allows providers (first responders-government agencies-agencies) to work together through collaboration of providers.

As home care companies we are unique in that we are focused in the community not in a facility.

Utilizing an incident command structure allows integration of agencies and emergency management providers in an established chain of command.
INCIDENT MANAGEMENT TEAM ROLES AND RESPONSIBILITIES

- Incident Command Structure (ICS) is not an organizational chart!
- Titles may not correlate to company titles and vice versa
- Companies need to use the ICS titles to avoid confusion
- Based on company size one person may hold many titles and roles
- A written ICS will avoid confusion in the event of an emergency
INCIDENT COMMAND TEAM MEMBERS

- Incident Commander – always activated in emergency sets devices strategy, overall responsibility of managing incident

Supported by

- Operations – Responsible for tactical operations
- Planning – collects and evaluates info and data, responsible for documentation of incident
- Logistics – Provides support, resources and essential services
- Finance – monitors cost related to incident, procurement of items, time recording and cost analysis
COMMAND SECTION

The Incident Commander and Officers who Support the Incident Commander
COMMAND ROLES/ RESPONSIBILITIES

- **Incident Commander** – Always activated and responsible for incident response. Determines the level of response to the incident
- **Public Information Officer** – Develops and releases information about incident to personnel, other agencies, news
- **Safety Officer** – Overall safety of response activities. Evaluates data (weather alerts) and communicates to Incident Commander. Ensures safety of internal environment
- **Liaison Officer** – Link between external partners and agency (Emergency Officials, Health Dept)
- **Medical Director/Specialist** – Expert in clinical areas-acts as resource
OPERATIONS SECTION

The ‘doers’ of the ICS
OPERATIONS ROLES/RESPONSIBILITIES

- **Operations Section Chief** – oversees tactical operations. Activates additional staff, tracks availability of staff.

- **Patient Care Branch Director** – responsible for continuation of patient care services, patient census, triaging patients and patient location/acuity. Responsible for care to volunteers/staff.

- **Infrastructure Branch Director** – Assess functionality of agency facility structure – maintaining safety and security. Integrates with first responders/law enforcement.
LOGISTICS SECTION

The “getters’ provider support to sustain operations including communications, IT, supply management, staffing, scheduling, transportation
Logistics Section roles/responsibilities

- **Logistics Section Chief** – Oversees the provision of serves/support to sustain operations. Works closely with operations section.

- **Service Branch Director** – Ensuring essential service of communication and IT.

- **Support Branch Director** – Organizes and maintains supplies, medical supplies, transportation, labor/volunteer pool.
The “thinkers” role of gathering, analyzing and track data to assist with planning to project the ability to sustain operations
PLANNING SECTION ROLES/RESPONSIBILITIES

- **Planning Section Chief** – Oversees planning and determine need for activation of units. Collects/disseminates info to Incident Commander responsible for Incident Action Plan.

- **Situation Unit Leader** – Writing and maintaining incident updates.

- **Documentation Unit Leader** – Works with all members of ICS to ensure complete documentation of incident and archiving documents upon completion of event.
FINANCE/ADMINISTRATION SECTION

Oversees the cost, time allowance, expenditures, purchasing supplies and meals related to incident
FINANCE/ADMINISTRATION SECTION

- **Finance Administration Section Chief** – accounts for all expenditures, loss revenue, incident claims related to loss.

- **Time Unit Leader** – ensures that all hours are recorded and assists with screening volunteers.

- **Procurement/Claims/Cost Unit Leader** – works with logistics to obtain additional supplies/equipment. Documents cost related to recovery phase and coordinates all claims and compensation.
BUSINESS CONTINUITY PLANNING

Incorporating prevention, preparedness, response and recovery as part of the planning process to manage risk
WHY DO I NEED A BUSINESS CONTINUITY PLAN

- Designed for severe impacting events that interrupt operations for extended period
- Address critical processes in each department
- Includes multidisciplinary approach
- Keeps patient care first, then...
- Solvency of agency
- Focus is the recovery phase period of emergency incident and maintaining operations
BUSINESS CONTINUITY CHECKLIST

- Provides a checklist or guide to components of business continuity plan
- Used as a location guide for location of information
- Recommend keeping supporting information in separate file or computer system
BUSINESS IMPACT ANALYSIS

- Each department completes
- Identify and Prioritize essential processes
- Identify impact or loss if process not completed
- Identify approximate time frame for return to operations
CONTACT INFORMATION

- Employee Contact Information Report – includes address, and alternative phone numbers. Can be used to track notification during event.
- Emergency Contact List – External key community contacts that may be needed during emergency.
- Vendor List – includes patient related and operational vendors, contact name/address/number.
- Insurance Contact List – All carries including policy coverage, exclusions, company contact.
RECORD/SOFTWARE INFORMATION

- Business Record Location – identifies where records are maintained with alternative locations
- Information System Data Back Up Log – where information is backed up and responsible person
- Information Systems Software List – identification of what software is used/vendors and platform
- Information Systems Report – listing of reports needed for operations
- Forms/Supplies – location of all paper forms, office equipment, medical supplies and providers including back up resources
EVENT DOCUMENTATION

- Event Log – filled out upon initiation of incident command and maintained through event
- Financial Tracker – filled out upon initiation of incident event tracking expenses related to incident
RISK MANAGEMENT PLAN

- Identifies potential risks based on hazard assessment and identify actions that can be done to minimize impact
- Identifies a contingency plan in case of operation impairments

***Think of it as the WORST CASE SCENERIO***

Use this Risk Management Plan to ensure that you have addressed each potential risk within your business continuity plan
RESOURCE CONTACT INFORMATION

Or…..Who do I call for HELP?
ADDITIONAL RESOURCES:

HTTP://WWW.MNCHA.ORG/EMERGENCY-PREPAREDNESS
HTTP://PREPAREDNESS.DHMH.MARYLAND.GOV/PAGES/HOME.ASPX
HTTP://MEMA.MARYLAND.GOV/PAGES/DEFAULT.ASPX
FOR MORE INFORMATION ON EMERGENCY PREPAREDNESS OR BUSINESS CONTINUITY CONTACT ME AT:

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Questions: