Incident Response Guide: Utility Failure

# Mission

To safely manage patient care through effective and efficient hospital operations during the loss of a major utility within the hospital.

# Directions

Read this entire response guide and review the Hospital Incident Management Team Activation chart.

Use this response guide as a checklist to ensure all tasks are addressed and completed.

# Objectives

* Identify extent of outage and consider evacuation
* Maintain patient care capabilities
* Minimize impact on hospital operations and clinical services
* Communicate the situation status to patients, staff, and the public

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| **Immediate Response (0 – 2 hours)** |
| **Section** | **Officer** | **Time** | **Action** | **Initials** |
| **Command** | **Incident Commander** |  | Activate the hospital Emergency Operations Plan, Utility Failure Plan, the Hospital Command Center and appropriate Hospital Incident Management Team positions. |  |
|  | Establish operational periods, objectives, and regular briefing schedule. Consider using the Incident Action Plan Quick Start for initial documentation of the incident. |  |
|  | Determine the need for shelter-in-place or evacuation and activate appropriate incident response plans.  |  |
|  | Consider limiting nonessential services. |  |
|  | Notify the hospital Chief Executive Officer, Board of Directors, and other appropriate internal and external officials of situation status. |  |
| **Public Information Officer** |  | Activate the Risk Communication Plan and media staging area. |  |
|  | Prepare a media release to inform the community about the utility outage. |  |
|  | Maintain communication with patients, staff, and families regarding the current situation and what is being done to address it. |  |
|  | Conduct a hospital census and identify possible discharges, transfers and surgery or procedure cancellations. |  |
|  | Update internet, intranet, and social media to disseminate information about hospital status and alteration in services to patients, staff, families, and stakeholders. |  |
|  | Monitor media outlets for updates on the incident and possible impacts on the hospital. Communicate information via regular briefings to Section Chiefs and the Incident Commander. |  |
| **Liaison Officer** |  | Notify community partners in accordance with local policies and procedures (e.g., consider local Emergency Operations Center, other area hospitals, local emergency medical services, and healthcare coalition coordinator),to determine incident details, community status, and establish contacts for requesting supplies, equipment, or personnel not available in the hospital. |  |
|  | Communicate with other hospitals to determine situation status, ability to accept patients if transfer, hospital abandonment, or evacuation is ordered. |  |
| **Safety Officer** |  | Complete the HICS 215A to assign, direct, and ensure safety actions are adhered to and completed. |  |

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| **Immediate Response (0 – 2 hours)** |
| **Section** | **Branch/Unit** | **Time** | **Action** | **Initials** |
| **Operations** | **Section Chief** |  | Implement the Evacuation, Shelter-in-Place, and Hospital Abandonment Plan as needed and in cooperation with the Incident Commander. |  |
| **Medical Care Branch Director** |  | Request diversion if needed.  |  |
|  | Identify evacuation priorities and transfer requirements. |  |
|  | Implement downtime documentation procedures for patient care and incident management documentation as required. |  |
|  | Conduct a hospital census and determine discharges, transfers, and surgery or procedure cancellations.  |  |
|  | Assess patients for risk and prioritize care and resources, as appropriate. |  |
| **Infrastructure****Branch Director** |  | Implement emergency support procedures to sustain critical services (i.e., power, water, medical gasses, communications) until utility restoration can be accomplished. |  |
|  | Activate damage assessment teams to determine the impact and severity of utility outage. |  |
| **Security Branch Director** |  | Initiate emergency procedures to support hospital and campus security in response to a utility outage. |  |
| **Planning** | **Section Chief** |  | Establish operational periods, incident objectives, and the Incident Action Plan in collaboration with the Incident Commander. |  |
| **Resources Unit Leader** |  | Prepare for personnel and equipment tracking. |  |
| **Situation Unit Leader** |  | Monitor and document all actions and activities. |  |
|  | Prepare for patient tracking including patient transfers. |  |
| **Logistics** | **Section Chief** |  | Refer to the Job Action Sheet for appropriate tasks.  |  |
| **Service Branch Director** |  | Assess the impact of the utility outage on communications and information technology systems. |  |
|  | Initiate backup documentation systems if electronic systems are not functioning. |  |
| **Support Branch Director** |  | Respond to requests for supplies and equipment; distribute appropriate equipment throughout the hospital (e.g., portable lights, flashlights, blankets). |  |
| **Finance/ Administration** | **Section Chief** |  | Activate vendor Memoranda of Understanding. |  |
|  | Track all costs and expenditures of response, and estimate lost revenues due to canceled procedures, surgeries, and other services. |  |

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| **Intermediate Response (2 – 12 hours)** |
| **Section** | **Officer** | **Time** | **Action** | **Initials** |
| **Command** | **Incident Commander** |  | Obtain assessment of staffing, equipment, and supply needs and the overall impact from the ongoing utility outage on patient care, remaining staff, and the hospital. |  |
|  | Activate Medical-Technical Specialists if needed (e.g., Risk Management, Legal). |  |
| **Public Information Officer** |  | Continue media briefings and updates. |  |
|  | Continue briefings and situation updates with patients, staff, and families. |  |
|  | Update internet, intranet, and social media to disseminate information about hospital status and alteration in services to patients, staff, families, and stakeholders.  |  |
| **Liaison Officer** |  | Continue to update local emergency management and the Emergency Operations Center of situation status and critical issues, and to request assistance as needed. |  |
|  | Continue communications with area hospitals and facilitate patient transfers. |  |
| **Safety Officer** |  | Conduct ongoing analysis of exiting response actions for safety issues, implement corrective actions, and update the HICS 215A. |  |

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| **Intermediate Response (2 – 12 hours)** |
| **Section** | **Branch/Unit** | **Time** | **Action** | **Initials** |
| **Operations** | **Section Chief** |  | Refer to the Job Action Sheet for appropriate tasks.  |  |
| **Medical Care Branch Director** |  | Continue the evaluation of patients and patient care; reevaluate the need to curtail or cancel nonessential services. |  |
|  | Reevaluate staffing needed to maintain essential services and to provide patient care. |  |
|  | Evaluate staff working in alternate roles and all supplemental staff. |  |
|  | Reevaluate the need to continue ambulance diversion. |  |
| **Infrastructure Branch Director** |  | Continue to assess extent of damage or outage; if possible, provide the Incident Commander and Section Chiefs with projected length of the service interruption. |  |
|  | Initiate repairs as required. |  |
| **Security Branch Director** |  | Continue to provide hospital security; develop plans to alter security services if phone or power is interrupted. |  |
| **Planning** | **Section Chief** |  | Prepare the Incident Action Plan for the next operational period; engage all sections to provide updates on staffing and alterations in strategies and tactics. |  |
| **Resources Unit Leader** |  | Continue staff and equipment tracking. |  |
| **Situation Unit Leader** |  | Continue patient and bed tracking. |  |
| **Documentation Unit Leader** |  | Ensure complete documentation of all postponed and canceled appointments and procedures.  |  |
| **Logistics** | **Section Chief** |  | Refer to the Job Action Sheet for appropriate tasks.  |  |
| **Support Branch Director** |  | Continue to provide staff for essential operations. |  |
|  | Monitor, report, follow up on, and document patient or staff injuries. |  |
| **Finance/ Administration** | **Section Chief** |  | Refer to the Job Action Sheet for appropriate tasks.  |  |
| **Time Unit Leader** |  | Track hours associated with the emergency response. |  |
| **Procurement Unit Leader** |  | Facilitate contracting for resources and services. |  |
| **Cost Unit Leader** |  | Track costs, staff hours, expenditures, and lost revenue.  |  |

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| **Extended Response (greater than 12 hours)** |
| **Section** | **Officer** | **Time** | **Action** | **Initials** |
| **Command** | **Incident Commander** |  | Continue to monitor operations, consider the length of onsite operations, and determine the need for expanded postponement of procedures. |  |
|  | With the Public Information Officer, prepare to speak with patients, staff, visitors, media, and stakeholders. |  |
|  | Update the hospital Chief Executive Officer, Board of Directors, and other appropriate internal and external officials of situation status. |  |
| **Public Information Officer** |  | Continue to hold regularly scheduled media briefings in conjunction with the Joint Information Center. |  |
|  | Address social media issues as warranted; use social media for messaging as situation dictates. |  |
| **Safety Officer** |  | Update the HICS Form 215A for extended operations. Ensure an updated safety plan is incorporated into the Incident Action Plan. |  |

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| **Extended Response (greater than 12 hours)** |
| **Section** | **Branch/Unit** | **Time** | **Action** | **Initials** |
| **Operations** | **Section Chief** |  | Continue the evaluation of patients and the ability to provide patient care, and begin to plan for the restoration of utilities.  |  |
|  | Ensure that all documentation, including damage assessments, repair costs, and tracking materials, are submitted to the Planning Section. |  |
| **Medical Care Branch Director** |  | Continue the evaluation of patients and patient care, and begin to plan for restoration of normal staffing and services.  |  |
| **Infrastructure****Branch Director** |  | Continue to provide regular updates to Section Chiefs on repairs, restoration of services, or continued service interruptions. |  |
| **Planning** | **Section Chief** |  | Ensure that updated information and intelligence is incorporated into the Incident Action Plan. Ensure the Demobilization Plan is being readied. |  |
| **Resources Unit Leader** |  | Continue equipment and personnel tracking, including resources transferred to other hospitals. |  |
| **Situation Unit Leader** |  | Continue patient and bed tracking, including resources transferred to other hospitals. |  |
| **Documentation Unit Leader** |  | Ensure appropriate documentation of ongoing activities. |  |
|  | Collect and collate documentation of actions, decisions, and activities. |  |
| **Demobilization Unit Leader** |  | Prepare for demobilization and system recovery. |  |
| **Finance/ Administration** | **Section Chief** |  | Continue to record ongoing and projected costs from postponements and modifications in operations. |  |

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| **Demobilization/System Recovery** |
| **Section** | **Officer** | **Time** | **Action** | **Initials** |
| **Command** | **Incident Commander** |  | Determine hospital status and declare termination of the incident. |  |
|  | Approve the Demobilization Plan. |  |
|  | Oversee the hospital's return to normal operations. |  |
|  | Assess if criteria for partial or complete reopening of hospital are met, and order reopening and repatriation of patients. |  |
|  | With the Public Information Officer prepare to speak with the media. |  |
| **Public Information Officer** |  | Conduct a final media briefing to provide incident resolution; work with the Joint Information Center. |  |
| **Liaison Officer** |  | Maintain contact with the local Emergency Operations Center, other area hospitals, local emergency medical services, and regional medical health coordinator to relay status and critical needs to receive incident and community updates.  |  |
|  | Continue monitoring of the utility failure impact to hospital and home care services; coordinate information with the Operations Section. |  |
| **Safety Officer** |  | Ensure entry and exit points are open and functioning. |  |
|  | Ensure fire doors and alarms are in working order. |  |
|  | Monitor and maintain a safe environment during the return to normal operations. |  |

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| **Demobilization/System Recovery** |
| **Section** | **Branch/Unit** | **Time** | **Action** | **Initials** |
| **Operations** | **Section Chief** |  | Oversee the restoration of normal patient care operations. |  |
| **Medical Care Branch Director** |  | Discontinue ambulance diversion, if applicable. |  |
|  | Reschedule canceled surgeries, procedures, and outpatient appointments.  |  |
|  | Repatriate evacuated or transferred patients. |  |
| **Infrastructure****Branch Director** |  | Complete a hospital damage report, including the progress of repairs, and estimated timelines for restoration to pre-incident condition.  |  |
|  | Schedule and oversee a test of the hospital alarm systems.  |  |
| **Security Branch Director** |  | Maintain hospital security and traffic control. |  |
| **Business Continuity Branch Director** |  | Oversee the restoration of essential services including internet connectivity and communications. Oversee the entry of information and data into electronic records if necessary. |  |
|  | If record keeping included the use of paper based records, ensure all clinical information is entered into electronic medical records. |  |
| **Patient Family Assistance Branch Director** |  | Provide behavioral health support and information about community services for patients and families, if needed. |  |
| **Planning** | **Section Chief** |  | Finalize and distribute the Demobilization Plan.  |  |
|  | Ensure that the status of all impacted clinical and support operations are relayed to appropriate sections for resolution. |  |
|  | Conduct debriefings and a hotwash with: * Command Staff and section personnel
* Administrative personnel
* All staff
* All volunteers
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|  | Write an After Action Report and Corrective Action and Improvement Plan for submission to the Incident Commander, including:* Summary of the incident
* Summary of actions taken
* Actions that went well
* Actions that could be improved
* Recommendations for future response actions
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| **Documentation Unit Leader** |  | Collect, collate, file, and secure completed documentation of actions, decisions, and activities. |  |
|  | Prepare a summary of the status and location of all incident patients, staff, and equipment. After approval by the Incident Commander, distribute it to appropriate external agencies. |  |
| **Logistics** | **Section Chief** |  | Inventory all Hospital Command Center and hospital supplies and replenish as necessary, appropriate, and available. |  |
| **Support Branch Director** |  | Release temporary staff and other personnel to normal positions. |  |
|  | Complete documentation and follow up of personnel injuries if needed.  |  |
| **Finance/ Administration** | **Section Chief** |  | Compile a final summary of all response and recovery costs and expenditures, and estimated lost revenues. Submit to the Planning Section Chief for inclusion in the After Action Report.  |  |
| **Compensation/Claims Unit Leader** |  | Contact insurance carriers to initiate reimbursement and claims procedures. |  |
|  | Coordinate with Risk Management for additional insurance and documentation needs, including photographs of damage, etc. |  |

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| **Documents and Tools** |
| **Emergency Operations Plan, including:*** Utility Failure Plan
* Emergency Operations Plan
* Evacuation, Shelter-in-Place and Hospital Abandonment Plan
* Alternate Care Site plan
* Business Continuity Plan
* Memoranda of Understanding with appropriate entities
* Discharge Policy
* Paper charts and electronic medical record downtime procedures
* Patient, staff, and equipment tracking procedures
* Hospital and campus maps, blueprints and floor plans
* Risk Communication Plan
* Interoperable Communications Plan
* Demobilization Plan
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| **Forms, including:*** HICS Incident Action Plan (IAP) Quick Start
* HICS 200 – Incident Action Plan (IAP) Cover Sheet
* HICS 201 – Incident Briefing
* HICS 202 – Incident Objectives
* HICS 203 – Organization Assignment List
* HICS 205A – Communications List
* HICS 214 – Activity Log
* HICS 215A – Incident Action Plan (IAP) Safety Analysis
* HICS 221 – Demobilization Checklist
* HICS 251 –Facility System Status Report
* HICS 254 – Disaster Victim/Patient Tracking
* HICS 255 – Master Patient Evacuation Tracking
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| Job Action Sheets |
| Access to paper forms for documentation, data entry, etc. |
| Access to hospital organization chart |
| Television/radio/internet to monitor news |
| Telephone/cell phone/satellite phone/internet/amateur radio/2-way radio for communication |

Hospital Incident Management Team Activation: Utility Failure

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| **Position** | **Immediate** | **Intermediate** | **Extended** | **Recovery** |
| **Incident Commander** | X | X | X | X |
| Public Information Officer | X | X | X | X |
| Liaison Officer | X | X | X | X |
| Safety Officer | X | X | X | X |
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| **Operations Section Chief** | X | X | X | X |
| Medical Care Branch Director | X | X | X | X |
| Infrastructure Branch Director | X | X | X | X |
| Security Branch Director | X | X | X | X |
| Business Continuity Branch Director |  |  |  | X |
| Patient Family Assistance Branch Dir. |  |  |  | X |
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| **Planning Section Chief** | X | X | X | X |
| Resources Unit Leader | X | X | X | X |
| Situation Unit Leader | X | X | X | X |
| Documentation Unit Leader |  | X | X | X |
| Demobilization Unit Leader |  |  | X | X |
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| **Logistics Section Chief** | X | X | X | X |
| Service Branch Director | X | X | X | X |
| Support Branch Director | X | X | X | X |
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| **Finance /Administration Section Chief** | X | X | X | X |
| Time Unit Leader |  | X | X | X |
| Procurement Unit Leader |  | X | X | X |
| Compensation/Claims Unit Leader |  |  |  | X |
| Cost Unit Leader |  | X | X | X |