



*Georgia Department of Public Health*

# Emergency Management Overview

Presentation to:

## ***Basic Healthcare Emergency Management Course***



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# Objectives

**Upon lesson completion, you should be able to:**

- Define “emergency” and “disaster”
- Discuss some types of disasters
- Define Emergency Management (EM)
- Identify the four phases of the EM cycle
- Identify key considerations in healthcare disaster planning
- Identify Best Practices for Disaster and Emergency Management requirements
- Understand the importance of the all-hazards approach
- Describe how planning efforts at different levels are integrated into emergency response

# Definitions

- Emergency

An unforeseen combination of circumstances or the resulting state that **calls for immediate action**

(*Merriam-Webster's Dictionary of Law*. Merriam-Webster, Inc.)

- Disaster

A disaster is a situation or event which **overwhelms local capacity**, necessitating a request for external assistance.



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# Types of Disasters

## “All-Hazards”

- Natural

- ✓ Tornado
- ✓ Hurricane
- ✓ Flood
- ✓ Etc.

- Man Made

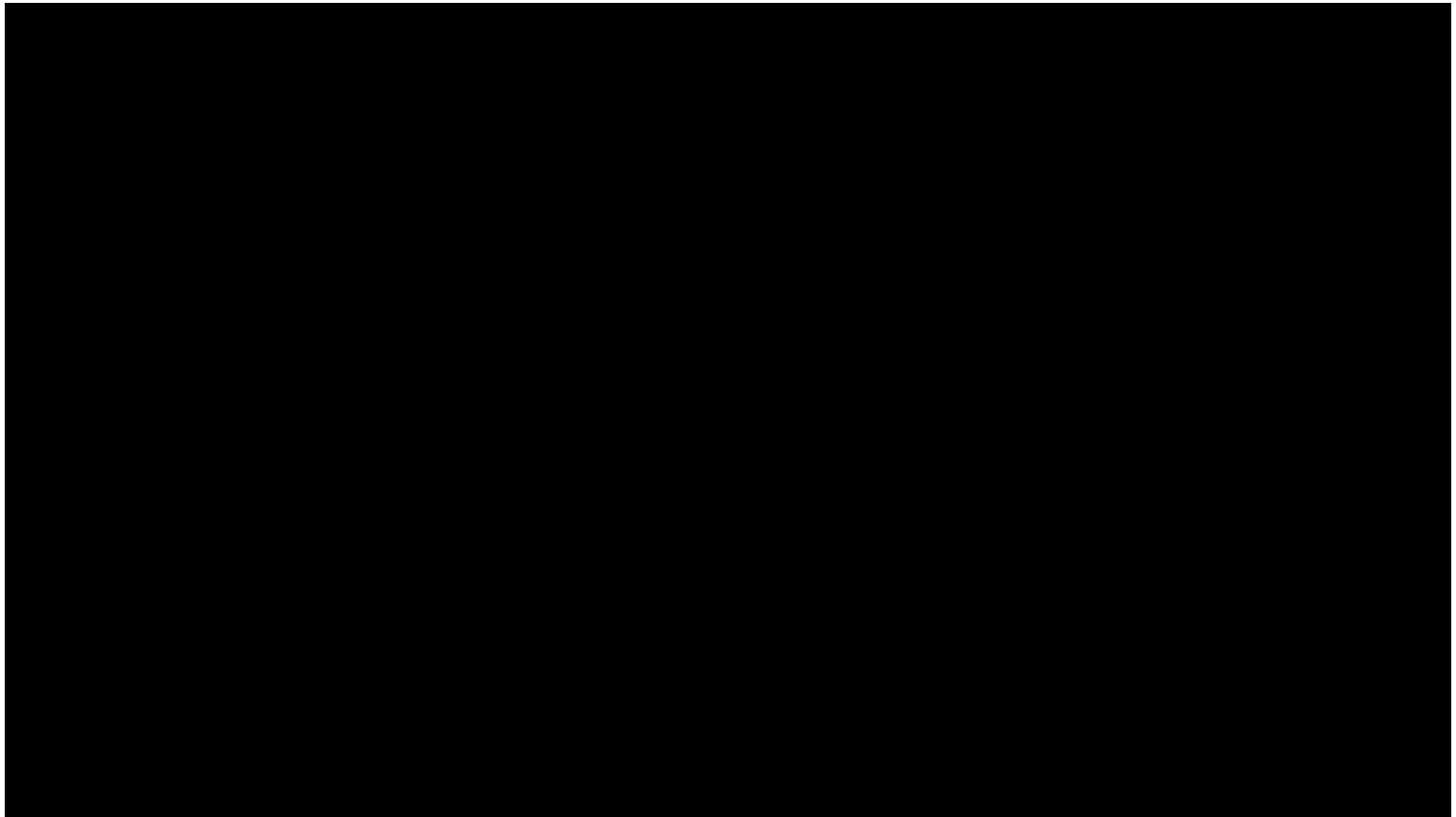
- ✓ Technological
- ✓ Complex (natural and technological)
- ✓ Emerging threats
- ✓ Acts of terrorism
- ✓ Etc.



Train Wreck, Graniteville, SC, Courtesy of Jeff Wilkinson.

# Acts of Terrorism...

- Disaster Video (active shooter)



# A Little More on Acts of Terrorism...

- Weapons of Mass Destruction (WMD)
  - CBRNE (Chemical, Biological, Radiological, Nuclear, Explosive)
  - If you are prepared for a bombing, you're prepared for almost anything



# WMD Defined

- Weapons capable of inflicting massive destruction to property and/or populations, using chemical, biological or radioactive material
- Weapons that can kill many people and/or cause great damage to man-made structures (e.g., buildings), natural structures (e.g., mountains), or the biosphere in general
  - covers several weapon types, including CBRNE

# Chemical Weaponry

- **Chemical warfare (CW)** involves using the toxic properties of chemical substances as chemical weapons to kill, injure, or incapacitate an enemy



# Chemical Weaponry (cont.)

- Lethal agents (some examples)
  - Blood agents: Cyanogen chloride, Hydrogen cyanide
  - Blister agents: Lewisite, Sulfur & Nitrogen mustard gases
  - Nerve agents:
    - *G-Agents*: Tabun (GA), Sarin (GB), Soman (GD)
    - *V-Agents*: VE, VG, VM, VR, VX
  - Pulmonary agents: Phosgene (CG), Diphosgene (DP)
  - Riot control agents: Pepper spray (OC), CS gas, CN gas (mace)
- The use of nonliving toxic products produced by living organisms (e.g., toxins such as botox & ricin) *is* considered chemical warfare under the provisions of the Chemical Weapons Convention

# Biological

- Anthrax, botulism, plague, smallpox, tularemia, and viral hemorrhagic fevers are diseases caused by the Category A biological agents, so-called because they pose particularly serious threats as bioweapons



# Radiological

A radiological weapon or radiological dispersion device (RDD) is **any weapon that is designed to spread radioactive material with the intent to kill, and cause disruption upon a city or nation**

- Known as a dirty bomb — it is not a true nuclear weapon and does not yield the same destructive power
- Uses conventional explosives to spread radioactive material
  - spent fuels from nuclear power plants or radioactive medical waste may be used



# Nuclear

A nuclear weapon/bomb is an explosive device that derives its destructive force from nuclear reactions (either fission or a combination of fission and fusion)

- Both release vast quantities of energy from relatively small amounts of matter
- A weapon weighing little more than a thousand kilograms can produce an explosion comparable to the detonation of more than a billion kilograms of conventional high explosive



# Explosives

- Includes pipe bombs to improvised explosive devices (IEDs)
- Becoming increasingly sophisticated and difficult to detect
- Non-nuclear explosives are the most common terrorist weapon now in use



# Other Considerations

Handguns and long guns, in the hands of terrorists, can be weapons of mass destruction

- Sandy Hook Elementary
- Colorado Movie Theatre
- Virginia Tech
- Columbine High School
- Hospital shootings (several in GA)
- Mumbai, India
- Beslan
- Haiti



# Definition and Description of EM

Emergency Management is:

- **Managerial function** that creates the framework for organization **to reduce hazards vulnerability and to cope with disasters**
- An **integrated, all-hazards approach to manage emergencies** utilizing response programs and activities

Emergencies are organized into **four phases**: **mitigation, preparedness, response, and recovery**

- Applies to all types of emergencies and disasters
- Used by all levels of government and the private sector



# All-Hazards Planning

**“How you prepare for one disaster or emergency situation is the same for any other disaster.**

Whether you represent a business or nonprofit organization, work for a state or local government, or want to prepare your family for disaster, preparedness can be **achieved through thoughtful planning before a disaster.”**



# Emergency Management Cycle



# The Four Phases

## Mitigation —

Preventing disasters through reduction of vulnerability

## Recovery —

Short- and long-term restoration of the damages caused by disaster



Mississippi, Hurricane Katrina  
Courtesy of Charles Reneau

## Preparedness —

Building capability to manage the impact of hazards

## Response —

Decreasing or stopping the ongoing negative effects of disasters

# Healthcare-specific Considerations

**MITIGATION:** Structural and nonstructural mitigation in order to remain operational (e.g., laws, guidelines, standards, security measures, surveillance)

**PREPAREDNESS:** Training, education, exercises, stockpiling, and planning

# Healthcare-specific Considerations

**RESPONSE:** Triage, treatment, transfer, disposition and management of victims

- Documentation actions should be initiated early in an emergency
- Adequate documentation:
  - Is essential to operational decision-making
  - May have future legal ramifications
  - May have implications for reimbursement eligibility

**RECOVERY:** Operational and business recovery; returning to normal operations



# pop? quiz

# Match the cycle step with the correct action:

**Mitigation**

Activate the EOP

**Preparedness**

Add wind retro-fits

**Response**

Exercise with staff

**Recovery**

Re-opening a wing of the facility

# Lego®

# Activity



## Instructions:

- In a manner such that no other team can see what you are building, build something in ten (10) minutes using all the Lego® pieces from your bag.
- **ALL** pieces **MUST** be attached into **ONE** built item.
- Assign a team member to write directions to accurately re-create your built item.



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# Hazard Vulnerability Analysis

Event	Probability	Risk	Level of Preparation
Natural			
Biological			
Man-made			

**Define the preparedness gap**

# Healthcare Disaster Planning: Three Deadly Misconceptions

- It will not happen here
- It will not happen to me
- Someone else will be there to take care of the problem

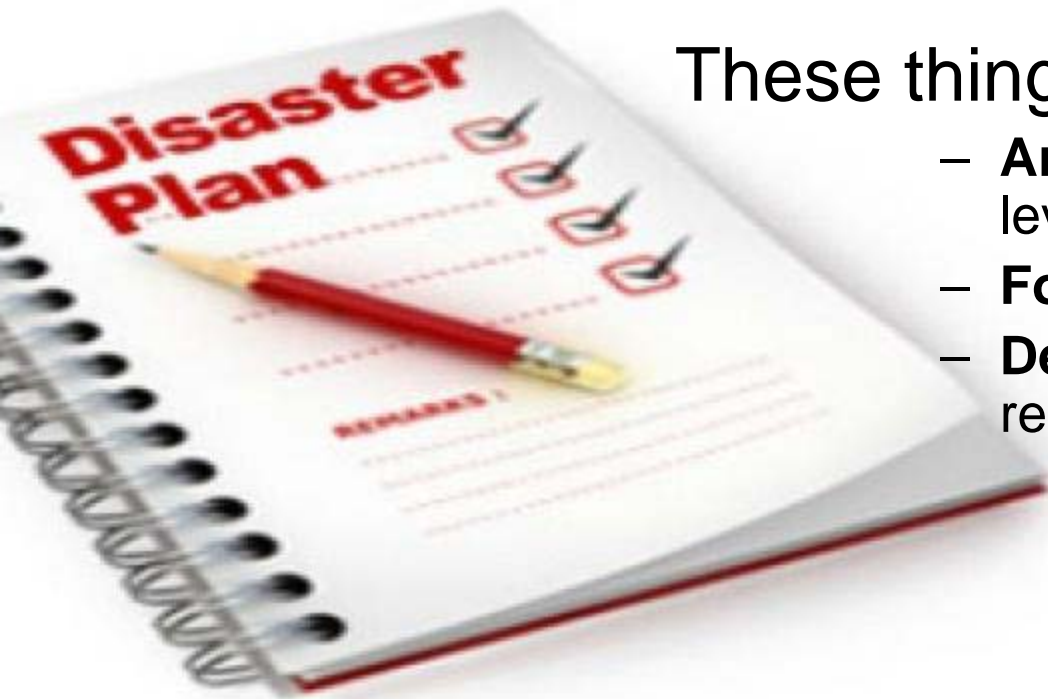


Pass Christian, MS (Katrina)  
Courtesy of Charles Reneau

# Healthcare Disaster Planning: Why Plan?

The objectives of disaster planning are to:

- improve the current readiness capability
- ensure the handling of disasters with the least possible loss of life and property



These things are accomplished by:

- **Analyzing** the current readiness level
- **Focusing** on areas of vulnerability
- **Developing a plan** based on realistic capabilities and resources

# Why Else Should We Plan?

- Because it's required...



# Accreditation

Many accrediting bodies exist for all types of health care settings, for example:

- The Joint Commission (TJC)
- DNV Healthcare, Inc. (DNV)
- Accreditation Commission for Health Care (ACHC)
- Health Facilities Accreditation Program (HFAP)
- Community Health Accreditation Program (CHAP)



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# Regulation

Regulation of healthcare facilities and systems is conducted by overlapping federal, state, and local agencies, for example:

Georgia Department of Community Health  
**Healthcare Facility Regulation (HFR)**  
*(formerly ORS)*



# Regulation

Those were just a few of the regulatory bodies for healthcare facilities.

**Who regulates yours?**

# Changing Healthcare Roles During a Disaster

**Six “Cs” of Institutional Threat** must be considered and accounted for in planning:

- **Catastrophic** event at facility
- **Contamination** of facility
- **Communications** disruption
- **Capacity** issues
- **Care-appropriate** expertise
- **Challenge to continuation** of the mission

# Emergency Planning: Issues Impacting Healthcare Organizations

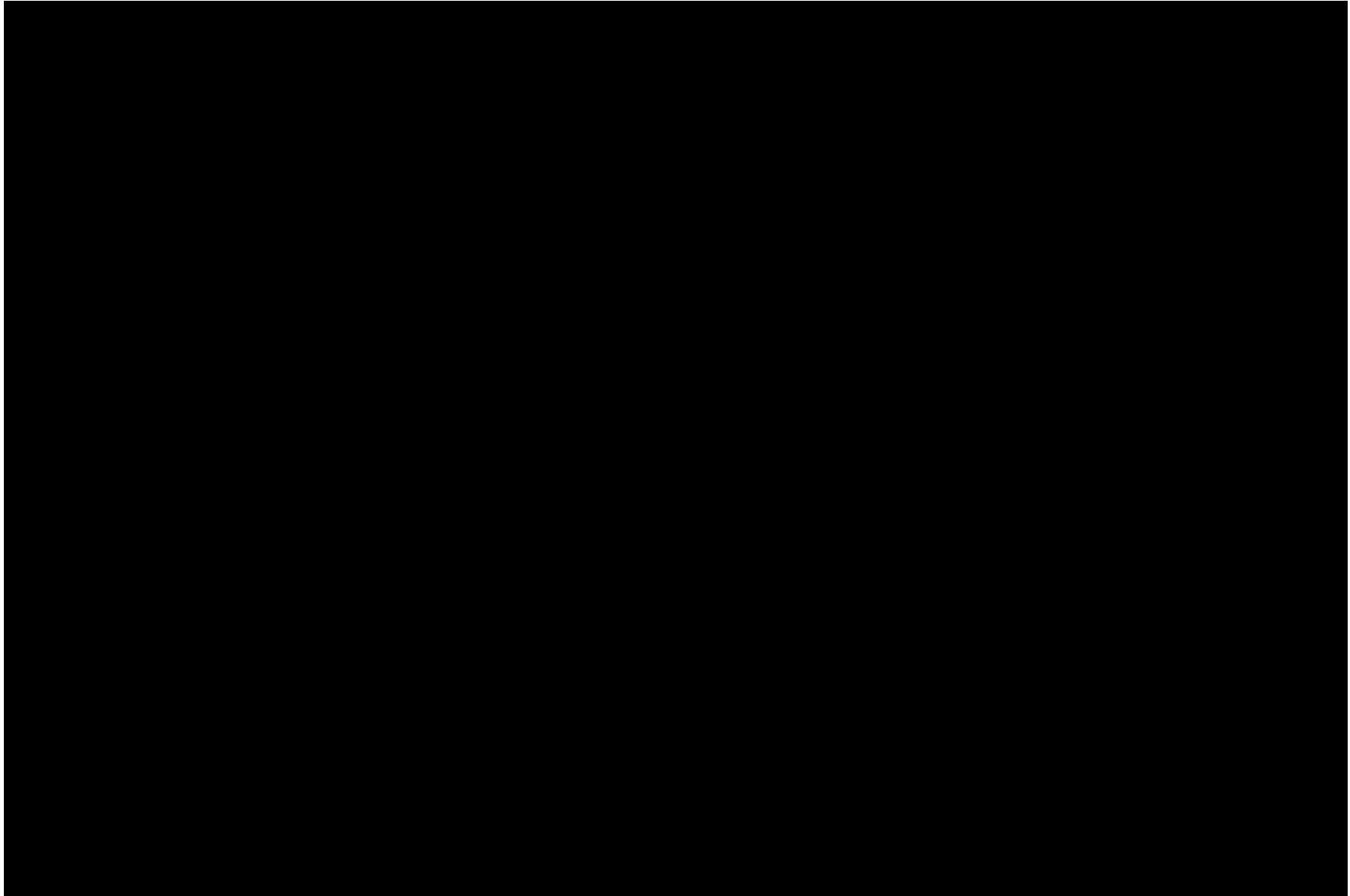
- Surge capacity
- Planning and coordination
- Training
- Protecting the staff and patients
- Limited resources



# Key Components of Healthcare Emergency Planning

- Command post activation
- Command structure delineated
- Department bed availability
- Security
- Contingencies for water, electricity, and transportation
- Mutual Aid Agreements/ Memorandum of Understanding
- Evacuation plans
- Patient management
- Practice, practice, practice





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# Levels of Disaster Planning: WHO/WHERE

- Family Preparedness Planning
- Departmental Level Planning
- Organizational Planning (Emergency Management Committee)
- Local Community Planning (LEPC)
- Regional Planning (RCH), Coordinating Councils, Public Health EPS
- State and Federal Planning efforts (GHA-GDPH)

# Emergency Management Overview: WHO

## The Players:

- Emergency Coordinator
- Emergency Management Committee
- Key internal and external partners
- Facility staff and administrators



# Emergency Management Committee

- Charting a course of action
- Manage the Emergency Management Program
- Political competence
- Staff experience



# Healthcare Disaster Planning: Internal & External Partners

Patients

Community Healthcare Clinics

Long Term Care Facilities

Mental Health

Nursing Homes

Hospitals

Schools

Public Health

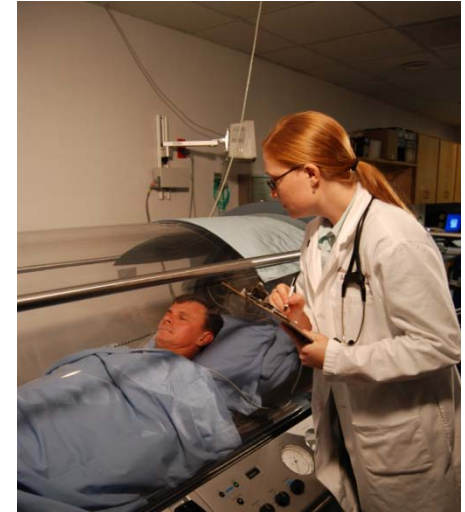
Fire Service

EMS

Law Enforcement

Emergency Management

Volunteer Agencies



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# Healthcare Disaster Planning: Big Wigs

- CEO, CFO, Attorney, Chief of Staff, Chief of Security, Chief Nursing Officer, etc.
- Their buy-in is essential, and thus, so is their integral involvement in the planning process



# EM Overview: The HOW!

Where does planning start?

# Start at Home

- If employees aren't secure at home, they cannot be productive at work
- If families are not accounted for, employees are likely not to show up to work



# Family Preparedness Planning

## Family Plan should include:

- Home inventories
- Escape routes/Evacuation plans (maps)
- Personal packs
- Emergency car kit
- Care for pets
- Family communications
- Special needs (*e.g., Pharmacy info*)



# Departmental Planning

- Call-down plans
- Each department needs to understand its pre-assigned role
- Plans should be discussed and made available to staff

# Then Comes Organizational Planning

Plan details for how the organization should respond as a system:

- Hospital Command Center (HCC) or Emergency Operations Center (EOC)
- Incident Command Systems (ICS)
- Policies, procedures, Emergency Operations Plan (EOP)



# Community Planning

- Local Emergency Planning Committees (LEPCs)
- County Emergency Operations Center
- Integrate healthcare facilities into county Emergency Operations Plans



# Regional Planning

- Regional Coordinating Hospitals (RCH)
- District Public Health
- Coordinating Councils (Nursing Homes)
- Regional Coordinating Community Health Centers (RCCHC)
- Metropolitan Medical Response System (MMRS)
  - Atlanta
  - Columbus

# Statewide Planning with the Georgia Department of Public Health (DPH) in coordination with:

- Public Health Districts
- Regional Coordinating Hospitals (RCHs)
- Georgia Mutual Aid Task Force (MATF)
- Office of Emergency Medical Services (OEMS)
- Georgia Association for Primary Health Care (GAPHC)
- Georgia Health Care Association (GHCA)
- Georgia Hospital Association (GHA)
- Georgia Emergency Management Agency (GEMA)
- Others...
- Understand state plans and know individuals in key agencies and organizations



# Planning: A Cyclical Process

- Orchestrated by the Emergency Coordinator
- Plan is designed by the Emergency Management Committee
- Emergency Operations Plan (EOP) must be based upon a Hazard Vulnerability Analysis (HVA)

# When the Worst Happens: Disaster Follow-Up

All activities performed to mitigate another disaster, including:

- Plan modification
- Policy changes
- Team revisions
- Staff retraining
- Facility modification
- Risk assessment
- Insurance issues



# What Makes a Planner Successful?

- Simplicity
- Flexibility
- Coordination
- Leadership
- Effective communication
- Ongoing education





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Questions?



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# Resources

- **Run, Hide, Fight Video** – Available FREE while supplies last. Contact Houston, TX Emergency Management Agency at 743.884.4500 or <https://www.youtube.com/watch?v=5VcSwejU2D0&list=PLUra6uw6CXK9SNLZeddcLIufDY5OfnMpU>