Request:

[Redacted] asked if ASPR TRACIE had resources related to “hospital resilience,” such as Standard Operating Procedures (SOPs) to prepare for and respond to hurricane and other extreme weather events.

Response:

The ASPR TRACIE team reviewed several existing ASPR TRACIE Topic Collections for materials on hospital resilience, SOPs, Emergency Operation Plans (EOPs), and other related resources. Of particular importance, the ASPR TRACIE team reviewed the Emergency Operations Plans/ Emergency Management Program Topic Collection.

Please note that ASPR TRACIE has several other Topic Collections that can be helpful for this request. A list of comprehensively developed Topic Collections can be found here: https://asprtracie.hhs.gov/technical-resources/topic-collection.

ASPR TRACIE has numerous sample plans and guidance for healthcare preparedness and response, and specialty plans (e.g., burn, active shooter, cybersecurity, mass casualty, infectious disease management, evacuation, crisis standards of care, etc.). Select plans can be found in the ASPR TRACIE Topic Collections and on the Select Healthcare Coalition Resources. Plans, tools, and templates specific to natural hazards (e.g., flooding, hurricanes, etc.) can be found in the ASPR TRACIE Natural Disasters Topic Collection. Additionally, ASPR TRACIE has numerous resources available for facilities seeking compliance with the CMS Emergency Preparedness Rule.

Select materials gathered are provided below. Please contact ASPR TRACIE if you need additional resources or a focus on a specific topic area.

- Section I- Hospital EOPs and Templates
- Section II- Hospital EOP Evaluation Resources
- Section III- Hospital Incident Management
- Section IV- Hospital Continuity of Operations
- Section V- Post-Event Hospital Assessments
- Section VI- Other Related Materials
I. Hospital Emergency Operations Plans and Templates


This website includes links to resources that can help healthcare and hospital systems staff plan for and respond to public health emergencies.


This checklist can be utilized by healthcare emergency planners to help aid in the development of emergency plans.


This document is a template for a hospital Emergency Operations Plan with departmental sections as well as incident-specific annexes. Facility personnel will likely need to add operational detail to this outline.


This webpage links to emergency operations plan templates for: home health; hospice; hospitals; long-term care; and personal home care.


This template is part of the U.S. Department of Veterans Affairs Emergency Management Guidebook, and describes a general strategy for how the operating units in a health care facility will coordinate during emergencies. It identifies various “key activities” (tasks common to emergency response) under the functional areas of the Incident Command System.

University of Toledo Medical Center. (2015). University of Toledo Medical Center Emergency Operations Plan.

This is an emergency operations plan for an academic medical center that may be referenced and adapted for use by other facilities.


Healthcare emergency response planners may use the checklists found in this document to inform the development of their Emergency Operations Plans.
II. Hospital EOP Evaluation Resources


This article covers the process of accreditation surveys for larger hospitals, including: emergency management committee meeting, disaster tracer, plan review, and incident command center review.


This detailed checklist assessment can help hospital staff review their emergency management programs.


This interactive tool is designed to help assess and identify potential gaps in a facility's all-hazards emergency plan. The tool is designed for hospital preparedness staff, including planners, administrators, and others.


This presentation covers all of the various emergency management evaluation tools for healthcare entities, surveys determining the most important metrics, and steps forward for developing a more standardized evaluation system in the U.S.

III. Hospital Incident Management

Additional information can also be found in the ASPR TRACIE Incident Management Topic Collection.


This latest version of the HICS guidebook meets the needs of all types of hospitals, regardless of location, size, or patient care capabilities.

This handbook describes the changes to the federal public health and medical response structure since the development of the original MSCC handbook in 2004. The MSCC Management System describes a framework of coordination of public and private entities across six tiers of response, of which tier two is the management of healthcare coalitions (see Chapter 3). This document is considered to be a foundational document for coalition development that describes the response system.

California Emergency Medical Services Authority (EMSA). (2014). Hospital Incident Command System. This website provides access to the Hospital Incident Command System (HICS) 2014 Guidebook, HICS forms and Job Aids.

Institute for Crisis, Disaster, and Risk Management (ICDRM) at the George Washington University (GWU) for the Veterans Health Administration (VHA), US Department of Veterans Affairs (VA). Washington, D.C. (2010). Emergency Management Principles and Practices for Healthcare Systems, 2nd Edition. This document provides a thorough overview of the framework for emergency management of a healthcare system and can be useful to any agency or organization involved with the delivery of healthcare services. The authors explain incident management concepts and how they can be applied in the healthcare system within the broader context of a holistic approach to facility emergency management.


IV. Hospital Continuity of Operations

Additional information can also be found in the ASPR TRACIE COOP/Failure Plan Topic Collection.

California Emergency Medical Services Authority. (n.d.). Incident Planning Guide: Utility Failure. (Accessed 1/2017.) This document includes a series of questions to guide hospitals in planning for utility failures associated with systems such as power, water, heating, ventilation, air conditioning, medical air, vacuum, or medical gases.


This toolkit provides examples for hospitals to follow when developing their continuity plans. It is a companion document to the California Hospital Association’s Hospital Continuity Program Checklist.


This document contains guidance for hospitals to develop continuity of operations plans, and includes a checklist of required elements and a template for an annex to be completed and attached to a hospital's Emergency Operations Plan.


This document was developed by the Emergency Management team at Children’s Hospital Colorado (CHCO) in collaboration with over 200 CHCO managers. It is meant to serve as a resource for healthcare facilities as they prepare to develop Continuity of Operations (COOP) plans. It draws from the lessons learned during the execution and evaluation of events at CHCO and other healthcare facilities. This template was written for an Emergency Manager with intermediate understanding of emergency management planning and operational knowledge. It is CHCO’s version of a Business Impact Analysis. (The name was changed to be more reflective of the data being collected.)


This is a continuity of operations plan template that facilities may adapt for their use.


This on-line toolkit can help healthcare facility planners learn more about implementing best practices in climate resilience. It is based on a framework composed of the following five elements: Climate Risks and Community Vulnerability Assessment; Land Use, Building Design, and Regulatory Context; Infrastructure Protection and Resilience Planning; Essential Clinical Care Service Delivery Planning; and Environmental Protection and Ecosystem Adaptations.


This fact sheet summarizes steps a healthcare facility can take to ensure communication during incident response when normal technologies fail.

This guide includes an overview of healthcare continuity of operations planning, customizable templates, and other related resources. It includes links to information on continuity planning, online courses, and other COOP resources.

University of Texas, Health Science Center at Houston. (2007). *Business Continuity Plan – Infrastructure (Support Services).*

This plan describes actions and decision-making capabilities for the 30 day post-event time frame and encourages pre-event strategies to reduce or eliminate the impacts of emergencies at the local operational level.


This checklist provides hospital emergency planners with guidance on preparing to withstand the effects of a storm. Actions to be taken 72 hours, 48 hours, and 24 hours prior to the storm is included for the following departments: Administrative, Clinical Laboratory, Clinical Services, Facilities, Food and Nutrition, IT/MIS, Pharmacy, Materials Management, Respiratory Care, and Safety and Security.

V. Post-Event Hospital Assessments


This HICS form is to be used to determine the status (functional, partially functional, nonfunctional) of a healthcare facility after an emergency event.

Centers for Disease Control and Prevention. (n.d.). *Checklist for Infection Control Concerns when Reopening Healthcare Facilities Closed Due to Extensive Water and Wind Damage.*

This checklist provides guidance for completing building and life safety inspections prior to restoration work, and guidance for infection control review of facilities to be done before the hospital can reopen. Attachment A includes a site specific checklist for selected areas of the facility (e.g., laboratory, pharmacy, etc.).

This document helps hospitals prepare to manage recovery from all types of events. Recovery planning benchmarks are included starting on page 34 to help hospitals independently assess their recovery capabilities. The benchmarks are drawn from a variety of sources including the ASPR Healthcare Preparedness and Response Capabilities, Joint Commission Hospital Accreditation Standards, the NDRF, and lessons learned from both recovery-focused exercises and real-world disasters. The document also includes questions to consider during recovery planning starting on page 38.


This checklist is meant to be used by a CEO or Hospital Administrator within 24 hours after the impact of a natural or man-made disaster. Its objective is to determine the immediate level of safety and functionality of the hospital. The facility is assessed in three segments: structural, non-structural, and functional capacity.


Hospital staff can utilize this facility recovery checklist to check for potential issues in the facility after a disaster.


This document provides a step-by-step guide for hospitals to follow prior to reopening. It includes five primary steps with action items under each.


This guide is designed to help organize the initial assessment of a hospital after an evacuation/closure due to an emergency event. The guide is divided into 11 sections, each with its own team and assessment assignment: Administration, Facilities, Security and Fire Safety, Information Technology and Communications, Biomedical Engineering, Medical, Ancillary Services, Materials Management, Building and Grounds Maintenance/ Environmental Services, and Support Services.

VI. Other Relevant Resources


The Centers for Medicare & Medicaid Services issued the Emergency Preparedness Requirements for Medicare and Medicaid Participating Providers and Suppliers Final Rule to establish consistency for healthcare providers participating in Medicare and Medicaid, increase patient safety during emergencies, and establish a more coordinated
response to natural and human-caused disasters. This document provides links to numerous related resources applicable to a variety of providers and suppliers.


This Centers for Disease Control and Prevention website provides links to planning resources for healthcare facilities and specific types of emergencies.


This article is a result of a literature review that focused on six elements related to weapons of mass destruction incidents that must be addressed in hospital disaster plans: incident command, hospital security, patient surge, decontamination, mental health consequences, and communications.


This crosswalk was created by (YNHHS-CEPDR), in collaboration with a number of national subject matter experts. Emergency and disaster related program, policy, communication, training and exercise elements of regulatory and accreditation standards were mapped to the CMS Emergency Preparedness Conditions of Participation. Every effort was made to ensure that the mapped regulations and accreditation standards matched as closely as possible. However, this document should be used only as a resource for reviewing and updating healthcare emergency preparedness plans and does not replace existing federal, local, or association guidance.