

POLICY

Emergency Preparedness Program Plan

This Policy is Applicable to the following Spectrum Health sites:

Big Rapids, Continuing Care, Corporate, Gerber, Ludington, Outpatient/Physician Practices, Pennock, Priority Health, Reed City, SH GR Hospitals, SHMG, United/Kelsey, Zeeland

| | |
|----------------------------------|---|
| Applicability Limited to: | All Spectrum Health Entities |
| Reference #: | 21495 |
| Version #: | 3 |
| Effective Date: | Not Approved Yet |
| Functional Area: | Administrative Operations, Emergency Preparedness |
| Department Area: | Disaster |

1. Purpose

To support the mission and vision of Spectrum Health by using the Emergency Preparedness Department's ("Emergency Preparedness") comprehensive approach to identifying risks and mobilizing an effective response and planning process to protect Spectrum Health assets; promote the continuing safety of patients/residents, visitors, and personnel; and, to provide supportive leadership through the [System Command Center](#) structure while coordinating and standardizing the System's response and recovery to catastrophic incidents.

The Emergency Preparedness staff will analyze the areas of risk and vulnerability; develop mitigation and response plans; develop a comprehensive education program; manage the incident based on incident command principles through the System Command Center structure; and, develop and implement a business continuity strategy to minimize the organizational impact integrating the response throughout the System.

The Emergency Preparedness Program provides a framework to promote proactive risk and opportunity identification, analysis, evaluation, and treatment. This includes loss control and risk strategies that minimize adverse effect of loss and enhances opportunities within the operational, clinical, safety, human capital, reputational, strategic, financial, regulatory, technological, and hazard domains of the organization.

2. Policy

2.1. Program Description

2.1.1. The SH - Delivery System Emergency Management Plan is designed to support all Spectrum Health entities with all areas of planning (mitigation, preparedness, response, recovery) ensuring an appropriate timely response and return to normal business operations which will effectively enhance the organization's mission: To improve health, inspire hope, and save lives.

2.1.2. The Emergency Preparedness Program will utilize staff with incident management expertise to manage all incidents utilizing the System Command Center structure, as structured and staffed by Emergency Preparedness staff ("Emergency Preparedness"). The System Command Center serves as the central coordination and communication center for any

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emergency incident that may threaten to disrupt normal operations of a Spectrum Health entity or any preplanned event that will require an organizational response (“Incident”).

- 2.1.3. The Incident Commander receives input and support from entity/corporate executive leadership through the [Executive Liaison](#) who sits in the command center structure. The authority to manage and direct Spectrum Health’s response to an emergency incident is delegated by Spectrum Health to the Executive Liaison who manages the incident collaboratively with the [Incident Commander](#) and command center staff. Specific roles and responsibilities of the System Command Center, the Executive Liaison and the Incident Commander are described below in Section 2.2.6.

2.2. Program Organization and Responsibility

- 2.2.1. The authority and accountability for the establishment, support, and evaluation of the Emergency Preparedness program shall be vested in the governing body and the highest ranking leader of each entity, provided that each entity’s Emergency Preparedness program shall be established and implemented consistent with this policy and other applicable policies.
- 2.2.2. The responsibilities of the entity Emergency Preparedness Specialists include but are not limited to:
 - 2.2.2.1. Coordination and implementation of the emergency preparedness standards appropriate to the entity to facilitate a safe environment for the patients/residents, staff, and visitors.
 - 2.2.2.2. Coordinate education and exercises within the entity to ensure a coordinated response during a disaster incident and to meet accreditation standards.
 - 2.2.2.3. Facilitate all program development and education in collaboration with the System emergency preparedness team maintaining system consistency.
 - 2.2.2.4. Complete an annual entity hazard and vulnerability assessment to determine its planning priorities.
 - 2.2.2.5. Complete an annual review of all emergency plans.
 - 2.2.2.6. Develop a business continuity plan to support the return of business operations decreasing the financial risk to the organization and ensuring safe patient care is maintained.
 - 2.2.2.7. Function in the entity Incident Commander role (within the defined system command center structure described below in Section 2.2.6) in the local incident command structure to ensure successful incident management occurs for any disaster incident within their entities of responsibility.
 - 2.2.2.8. Support the System incident command structure when managing a disaster incident to ensure appropriate use of resources and a collaborative system response.
- 2.2.3. Emergency Preparedness leadership will be responsible for the coordination, oversight, consultation, and direction of all emergency preparedness programs and responses for all Spectrum Health entities.
- 2.2.4. Emergency Preparedness leadership will have the authority to review all documents and other information relevant to emergency preparedness activities.
- 2.2.5. Primary responsibilities for the System Emergency Preparedness leadership include, but are not limited to:
 - 2.2.5.1. Function in the System Incident Commander role (within the defined system command center structure described below in Section 2.2.6) to ensure successful incident management occurs for any disaster incident throughout any Spectrum Health entity.
 - 2.2.5.2. Provide leadership and facilitation of resources for emergency preparedness program management within all Spectrum Health entities.

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- 2.2.5.3. Engage in regular and collaborative communication with each entity emergency preparedness specialist.
 - 2.2.5.4. Establish system-wide policies and standards for integration into the System Emergency Preparedness program.
 - 2.2.5.5. Report on a periodic, as needed basis, to the System Board of Directors and entity governing boards.
 - 2.2.5.6. Periodically review and/or revise the System Emergency Preparedness Program in light of changes in the System’s needs supporting the System vision.
- 2.2.6. Once activated by the Incident Commander in collaboration with the executive/administrator on call, the primary responsibilities of the System Command Center and the Incident Commander include, but are not limited to:
- 2.2.6.1. Make recommendations to the Executive Liaison regarding the management of all unplanned Incident responses as well as planned events that would benefit from the command center structure, of any size or type, by establishing a clear chain of command for decision-making and consistent communication to the organization and community;
 - 2.2.6.2. Allow personnel from various agencies or departments to be integrated into a common structure that can effectively address issues and to delegate responsibilities;
 - 2.2.6.3. Provide needed logistical and administrative support to operational personnel;
 - 2.2.6.4. Ensure key response functions are covered while eliminating duplication of work.
- 2.2.7. The Incident Commander (IC) is the only position always activated in the System Command Center. The Incident Commander is responsible for the execution and implementation of decisions made by the Executive Liaison regarding the management of the incident within the organization. Consistent with direction from the Executive Liaison or as previously authorized pursuant to applicable policies, procedures or protocols, the Incident Commander directs all of the activities within the command center, sets the operational periods, and devises the strategies and priorities to address the objectives that are communicated in the Incident Action Plan. If the Executive Liaison is not immediately available and an emergent situation exists, the Incident Commander may direct and authorize a total facility evacuation if warranted.

3. Policy Development and Approval

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Approver:

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4. Keywords

EP, emergency preparedness, management, business continuity, BCP, SHS, system, enterprise

Definitions

Executive Liaison: Assigned to the delivery system executive on call for the System Command Center and the administrator on call for the regional entities. This role functions as the incident contact person in the command center for the entity executive team. The [SH - Executive Liaison job action sheet](#) participates in decision making within the command center structure. The executive liaison may transition his/her role to an executive with subject matter expertise relevant to a particular Incident.

Incident Commander on Call: Currently there are two people that hold the system incident commander position. They are the Director and Manager, Emergency Preparedness.

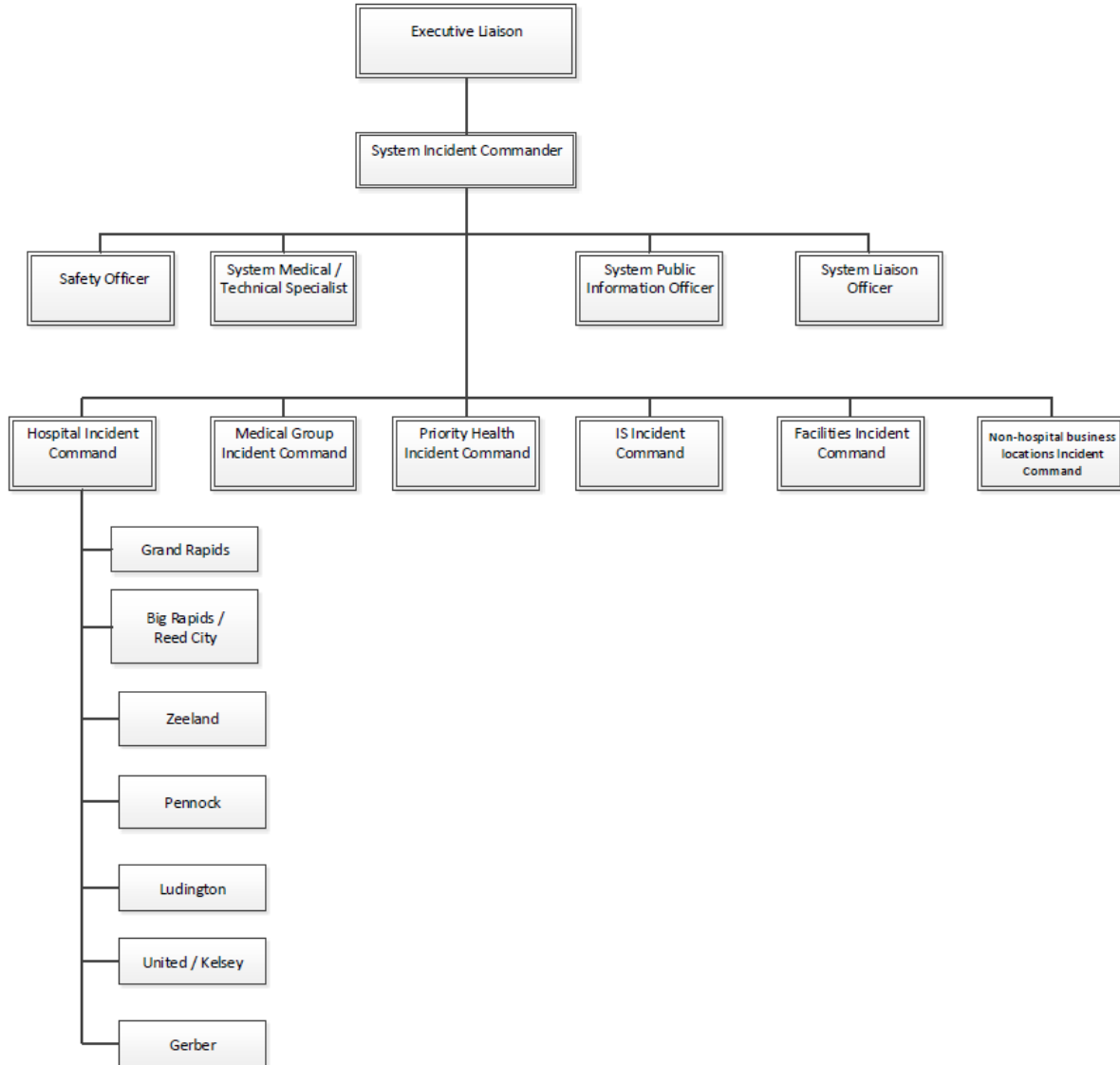
Incident Commander: Assigned to the first person on site to manage the incident and transitions to persons educated specifically to assume this role upon their arrival to the system / local command center (40 hours of incident management education).

Under the direction of the executive liaison, the incident commander organizes and directs the command center giving overall strategic direction for incident management and support activities, including emergency response and recovery.

Liaison Officer: Function as the incident contact person in the command center for representatives from other agencies.

Public Information Officer: Serve as the conduit for information to internal and external stakeholders, including staff, visitors and families, and the news media, as approved by the incident commander.

System Command Center Organizational Chart



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EXECUTIVE LIAISON JOB ACTION SHEET

Mission: Function as the incident contact person in the System Command Center for the Spectrum Health executive team. Participates in decision making discussions within the System Command Center.

| Immediate (Operational Period 0-2 Hours) | Time | Initial |
|---|-------------|----------------|
| Upon arrival to the SCC, reports to and receives briefing from the Incident Commander. | | |
| Read this entire Job Action Sheet and review incident management team chart (HICS Form 207). | | |
| Brief executive team members on current situation and incident objectives; develop response strategy and tactics; outline action plan and designate time for next briefing. | | |
| Establish communication with other hospitals executives within the Entities affected. Report current hospital / system status. | | |
| Participate in all briefings with command and general staff to gain insight, share pertinent information, and collaborates with the incident commander in decision making . | | |
| If appropriate, request one or more recorders as needed from the Operations Section Chief, if activated, to perform all necessary documentation. | | |
| Document all key activities, actions, and decisions in an Operational Log (HICS Form 214) on a continual basis. | | |
| Document all communications (internal and external) in eICS under the Event Log tab | | |

| Intermediate (Operational Period 2-12 Hours) | Time | Initial |
|--|-------------|----------------|
| Attend all command briefings and Incident Action Planning meetings to gather and share incident and hospital/facility information. Contribute with inter-hospital information and response activities and provide Liaison goals to the Incident Action Plan. | | |
| Obtain Hospital Casualty/Fatality Report (HICS Form 259) from the Public Information Officer and Planning Section Chief and if appropriate report the following to the executive team: <ul style="list-style-type: none"> • Number of casualties received and types of injuries treated. • Current patient capacity (census) | | |

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| Intermediate (Operational Period 2-12 Hours) | Time | Initial |
|---|-------------|----------------|
| <ul style="list-style-type: none"> • Number of patients hospitalized, discharged home, or transferred to other facilities. • Number of hospital fatalities. • Individual casualty data: name or physical description, sex, age, address, seriousness of injury or condition. | | |
| Respond to requests and issues from incident management team members regarding inter-organization (e.g., other hospitals, governmental entities, response partners) problems. | | |
| Report any special information obtained (e.g., identification of toxic chemical, decontamination or any special emergency condition) to appropriate personnel in SCC. | | |
| Continue to document all actions and observations in eICS on the Event Log | | |

| Extended (Operational Period Beyond 12 Hours) | Time | Initial |
|---|-------------|----------------|
| Update executives on the supply status and potential mobilization of supplies from other entities | | |
| Prepare and maintain records and reports as appropriate. | | |
| Ensure your physical readiness through proper nutrition, water intake, rest, and stress management techniques. | | |
| Upon shift change, brief your replacement on the status of all ongoing operations, issues, and other relevant incident information. | | |

| Demobilization/System Recovery | Time | Initial |
|--|-------------|----------------|
| As needs for Liaison team staff decrease, return staff to their normal jobs and combine or deactivate positions in a phased manner. | | |
| Upon deactivation of your position, brief the Incident Commander on current problems, outstanding issues, and follow-up requirements. | | |
| Participate in after-action debriefings and document observations and recommendations for improvements for possible inclusion in the After-Action Report. Topics include: <ul style="list-style-type: none"> • Accomplishments and issues | | |

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| Demobilization/System Recovery | Time | Initial |
|---|-------------|----------------|
| <ul style="list-style-type: none"> • Review of pertinent position descriptions and operational checklists • Recommendations for procedure changes | | |
| Participate in stress management and after-action debriefings. Participate in other briefings and meetings as required. | | |

| Documents/Tools |
|--|
| <ul style="list-style-type: none"> • eICS • Incident Action Plan • HICS Form 207 – Incident Management Team Chart • HICS Form 213 – Incident Message Form • HICS Form 214 – Operational Log • HICS Form 259 – Hospital Casualty/Fatality Report • Hospital emergency operations plan • Hospital organization chart • Hospital telephone directory • Radio/satellite phone • Municipal organization chart and contact numbers • County organization chart and contact numbers |

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