Environment of Care
Emergency Preparedness
Safety
Purpose

• Provide a basic overview/review of
  – Trinitas’ Programs
    • Environment of Care
    • Emergency Preparedness
    • Culture of Safety
  – Emergency Incidents
  – Basics of Incident Management
    • The Incident Command System (ICS)
    • National Incident Management System (NIMS)
    • Hospital Incident Command System (HICS)
    • Emergency Operations Center (EOC)
  – Program Resources
  – How You Fit In
People to Know

Mr. Philip Solomon
Safety Officer

Mr. Gary Horan
President & CEO
“Culture of Safety”

- Culture is defined as: a way of life, the customs, and beliefs habits of a group of people at a particular time.

**OUR GOAL**

Develop, maintain, and practice activities that lead to the formation of habits in everything we do to promote a safe Environment of Care by:

- Preventing incidents and reducing risks that may cause harm to patients, visitors, and staff.
- Reporting EOC safety risks / concerns to the Safety Officer.
- Promoting safe work habits through repetition.
- Observing and correcting improper behaviors.
Promoting a Culture of Safety

Be aware of Your Clinical Environment

- Listen for patient calls
- Responding to clinical alarms
- Proper patient identification
- Follow all therapeutic procedures
- Check expiration dates
- Avoid Reliance on Memory
- Handwashing – Use of PPE !!!
- HIPAA – protect patient records
- Anticipate the unexpected

Be aware of your Physical Environment

- Wet floors » Slips, trips, & falls
- Needlestick Precautions.
- Blocked halls, fire doors and exit stairs.
- Doors propped open.
- Stained Ceiling Tiles.
- Be familiar with Emergency Procedures.
- Wear your ID at all times. Not at waist – up high where it can be easily seen
Emergency Preparedness Planning – An All Hazards Approach

- Internal
- External
- Natural Disasters
- Technological Disasters

- Fire/Explosion
- Hazardous Materials Incident
- Floods and Flash Floods
- Hurricanes and Tornadoes
- Severe Weather
- Earthquakes
- Technological Emergencies
- Domestic Terrorism
- Radiological Incident
Types of Incidents

- “Routine Emergencies”
  - Codes Blue, Red, Etc.
- Common Larger Incidents
  - Power Outages
  - Flooding
  - Snow Storms
- Major Incidents
  - Mass Casualty Incidents
  - Contaminated Patients
  - Influx of Infectious Disease Patients
Emergency Procedures

- Quick reference guide located in each department
- Know location
- Don’t wait for an emergency — review often.
- Text on Intranet
Code Triage

• Code Triage – informs all departments and employees to activate their plans in response to a situation impacting the hospital. e.g. patients on their way from a disaster scene, impending severe weather.

• Code Triage may be activated for an internal or external event / disaster.
Operational Response Levels

- **Level 1 – Normal Operations**
  - Under Level 1 there are no significant known impacts to TRMC
  - Typical during day-to-day operations

- **Level 2 – Enhanced Operations**
  - A situation that has potential to effect operations has been identified
  - Communication between Emergency Management and leadership is enhanced
  - Departments should review emergency plans, staffing, and resource needs
  - May be thought of as the “heightened risk” period

- **Level 3 – Limited Activation**
  - The EOC or another command area is activated with limited staffing as determined by the Administrative Supervisor or Incident Commander
  - Briefings are held as needed and situation reports are typically issued
  - Status for an emergency of lower impact, or slower operational periods for a protracted event, and latter stages / demobilization
  - A Code Triage would typically be called for a Level 3 operational status

- **Level 4 – Full EOC Activation**
  - Hospital Incident Command (HICS) is implemented
  - The EOC is fully operational and staffed
  - Operational status during the height of an emergency
  - Regular briefings are held and regular situation reports issued
  - A Code Triage is called for a Level 4 operational status
Incident Command System

The incident command system (ICS) is a standardized approach to the management, and coordination of emergency response; providing a common hierarchy so responders from multiple agencies can be effective in managing them.

- **Five management functions**
  - Command
  - Planning
  - Operations
  - Logistics
  - Finance/Administration
ICS Management Functions

• Command
  – The Incident Commander sets the objectives. Devises strategies, tactics, and priorities and maintains overall responsibility for managing the incident

• Operations
  – Conducts the tactical operations, carries out the plan using defined objectives, directs all needed resources

• Planning
  – Collects and evaluates information for decision support, maintains resource status, prepares documents such as the Incident Action Plan, and maintains documentation for incident reports

• Logistics
  Provides support, resources, and other essential services to meet the operational objectives

• Finance / Administration
  Monitor costs related to incident, accounting, time recording, cost analyses, procurement & payment of invoices and prepares claim documentation.
NIMS - HICS

• National Incident Management System
  – Reinforces basic ICS concepts
  – Mandates use of ICS (NIMS)
  – HICS is an allowable implementation of ICS for healthcare

• Hospital Incident Command System
  – A standard, yet customized approach to ICS specifically for hospitals
  – Position titles, tasks, forms, job action sheets, and vests specific to healthcare
Emergency Operations Center (EOC)

• The location where the incident is managed
• Incident Commander and critical staff typically located here
• Communications (landline & cellular phones, public safety, hospital & amateur radios, Mutualink, video conferencing)
• Computers and video display (recordkeeping, incident support)
• The hospital’s primary EOC is the Board Room on the first floor of Williamson Street Campus Main Building
Resources

– People – You
– Recall
– Notification (Dialogic Communicator)

PLEASE UPDATE YOUR DIALOGIC PROFILE IF YOUR CONTACT INFORMATION, ESPECIALLY YOUR CELLULAR CARRIER, HAS CHANGED. THE FORM IS AVAILABLE ON THE INTRANET

– Make Plans (Take Care of Those Important to You)
– Be Able to Come In – Keep Hospital ID with you
– Labor Pools
  • Cafeteria (General)
  • Nursing Office (Nursing Staff)
Resources

• Equipment and Supplies
  – Personal Protective Equipment
  – Mass Decontamination System
  – Influx of Patients - Disaster
    • Casualty Shelters, cots, generators, lights, portable A/C and Heat, water filtration

• Stored
  – Shed at Emergency Department
    • Primarily Decontamination & Patient Surge
  – Storage Containers
  – Trailers
How Can You Help

• **Environment of Care**
  – Know Codes
  – Know Basic Information on Key Staff

• **Culture of Safety**
  – Look for Hazards
  – Report Hazards
  – Work Safely

• **Emergency Preparedness**
  – Know Your Job
  – Think About How it Can Change During Incidents
  – Participate in Training, Drills, and Exercises
  – Respond When Required