TEXAS TECH UNIVERSITY
HEALTH SCIENCES CENTER

Texas Tech Physicians of Lubbock

Emergency Management Plan

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Texas Tech Physicians of Lubbock
Emergency Management Plan

Overview

Purpose
This document is the Texas Tech Physicians of Lubbock (TTPL) Emergency Management Plan Addendum to the Texas Tech University Health Sciences Center (TTUHSC) Institutional Emergency Operations Plan (HSC OP 76.01). This document addresses the policy, plans, procedures, and authority for responding to emergency situations impacting TTPL. Each TTPL department is expected to develop and maintain a plan specific to their departmental operations which complement the overall TTPL Plan as delineated herein.

Emergency Preparedness
It is the policy of TTPL to provide a framework for response to an emergency or disaster impacting the clinical practice areas. This framework will guide staff in managing the event safely and assure rapid recovery to normal operating conditions. An emergency or disaster may be internal, external, naturally occurring or man-made.

TTPL faculty, staff, students, contract employees, and volunteers should have a working knowledge of emergency preparedness relative to their department/work assignment. They will be expected to follow this plan in the event of an emergency.

In accordance with the standards of The Joint Commission (TJC), an emergency management exercise or drill will be conducted at least annually.

Goals and Objectives
Emergency Management goals include the following:
- Provide a logical and flexible chain of command to ensure continuity of command and control during an emergency/disaster.
- Establish an efficient communication system.
- Provide maximum safety and protection for all patients, visitors, faculty, staff, volunteers, students and contract employees.
- Minimize damage or loss of property.
- Respond appropriately and quickly, and when necessary, integrate TTPL emergency operations with those of TTUHSC and/or University Medical Center (UMC) in situations where support is needed.
- Ensure recovery and restoration of all normal services as quickly as possible following the emergency/disaster.

Components

Written documentation for emergency management for TTPL consists of three components:


3. Clinical Departmental Emergency Management Plans are available as specified below.

Additionally, the Bioterrorism Readiness Plan, SOM Policy 2.04 is available at http://www.ttuhsc.edu/som/clinic/policies/ACPolicy2.04.pdf

**Departmental Plans**

Departmental plans are developed and maintained by each department to address employee responsibilities during an emergency/disaster including methods for protecting people and property.

Departmental plans should include, but are not limited to the following:

- The means to contact key faculty and staff (call list).
- Identification of resources potentially available to support TTUHSC and/or UMC (i.e. staff members by position, number of exam rooms, oxygen cylinders, etc.).
- Procedure for the orderly shutdown of departmental processes.
- Process for restoring departmental services following an emergency/disaster (Continuity of Operations Plan).
- Capacity and use of departmental telephone intercom system.

All departments should maintain access to the TTUHSC Emergency Management Plan, TTPL Emergency Management Plan and their respective departmental emergency management plans. Copies of department-specific emergency management plans will be maintained in each department, the Office of the Dean, the office of the TTUHSC Emergency Management Coordinator (Emergency Operations Center), and the office of Performance Improvement (PI). Departmental leadership should review these plans with all faculty, staff and volunteers annually to define specific roles or desired responses during an emergency.

**Prevention / Mitigation/ Hazard Vulnerability Assessment**

TTPL will complete an annual Hazard Vulnerability Assessment (HVA) to identify potential risks to the organization. The prioritized risks define the required actions to be taken by the organization in an attempt to prevent and mitigate against an emergency/disaster. The HVA and actions will be reviewed by the TTPL Environment of Care (EOC) Committee.

Prevention activities may include but are not limited to:

- maintenance of security cameras;
- automatic locking mechanisms;
- utilization of on-site security and peace officers;
- activities by on-site fire marshals;
- communication systems to disseminate information to all visitors, personnel, and students during and after business hours;
- annual review and revision (as needed) of all EOC plans;
- New Employee Orientation (NEO) and required annual safety training for all faculty and staff; and
- regular tracking of: urgent call response times by security, exposures to faculty, residents and staff by Infection Control, device related incidents and unplanned outage incidents.

Mitigation activities may include but are not limited to:
- quarterly multidisciplinary EOC Committee meetings
- annual review of all EOC plans
- scheduled disaster preparedness drills
- maintenance of fire safety equipment
- updates to emergency maps and exit routes
- aggressive air quality surveillance
- implementation of electronic medical record software

Response

Incident Command System

In the event emergency response is required, TTPL will employ the Incident Command System (ICS) model to manage an emergency/disaster.

The ICS model is based on five major management functions:
- Command/Control;
- Operations;
- Planning/Intelligence;
- Logistics; and
- Finance/Administration.

For small-scale incidents, the Incident Commander and an appointed assistant may manage all activities.

SOM Incident Command Activation and Termination

The Dean of the School of Medicine (SOM) or the CEO of TTPL will serve as the Incident Commander (IC) and individual responsible for activation and termination of the SOM Emergency Management Plan. In the absence of the Dean and CEO, IC responsibilities should be assumed by the next available staff member in the following order:

1. Assistant to the Dean
2. Trained Clinical Department Administrator
3. Chair, Medical Practice Income Plan (MPIP)

The SOM Incident Command Team should report to the BA121J (Emergency Operations Center) immediately upon notification of activation of the Emergency Management Plan.
The Incident Command Team consists of:
- Dean, SOM or designee
- CEO, MPIP or designee
- Assistant to the Dean
- Chair, Medical Practice Income Plan (MPIP)
- Chief Medical Officer
- Chief Operations Officer
- TTUHSC Emergency Management Coordinator/Co-Coordinator
- Director, Nursing Services and Infection Prevention and Control
- Institutional Infection Control/Employee Health Director
- Director, Performance Improvement

External Emergency Management Coordination

TTPL is not assigned an independent role in the community response plan. However, TTPL will coordinate emergency response based on the communicated needs of TTUHSC and/or UMC by providing medical staff, support staff and facilities as requested. TTPL administration will be contacted via the UMC disaster paging system call down which will alert TTPL and TTUHSC Emergency Management leadership of anticipated needs.

Internal Emergency Management Coordination

Upon notification of an emergency/disaster during business hours, TTPL administration will report to the BA121J. The Director of Nursing Services, Director of Institutional Infection Control/Employee Health (as indicated), or Director of PI, will immediately respond to the designated Incident Command Center for TTUHSC or UMC to act as a liaison for communication and support between TTUHSC/UMC and TTPL. TTPL will initiate the appropriate response specific to the incident.

In the event an emergency/disaster occurs after business hours, on weekends or holidays, TTUHSC/UMC will immediately communicate physician and staffing needs to the CEO of TTPL who will then communicate with the TTPL Departmental Chairs, Administrators and the TTUHSC Emergency Management Coordinator.

Activation of the Emergency Management Plan will be communicated to each clinical department via a call down list and electronic mail per the Departmental Plan. If telephones and/or computers are unavailable, the overhead intercom system and runners will be utilized. The TTUHSC Emergency Management Coordinator is responsible for notifying appropriate TTUHSC leadership of the TTPL Emergency Plan Activation.

TTPL departmental leadership should report to 2B152, the TTPL Emergency Referral Center. The Chief Operations Officer, or designee, will provide appropriate communication from the Incident Command Center to departmental leadership at this location.

Departmental leadership will then activate Departmental Emergency Management Plans appropriate to the type of emergency/disaster based on direction from the TTPL Incident Command Center. Decisions regarding which clinics would require closure, evacuation,
and/or cancellation of appointments will be based on the type, magnitude and extent of the emergency/disaster. Staff will respond to a patient’s immediate care and safety needs as applicable and notify and evacuate patients in a controlled manner. All patients will be directed or assisted to the appropriate exits.

The Texas Tech Police Department (TTPD) will appropriately secure the facility during an emergency/disaster. The TTUHSC Emergency Management Coordinator will communicate security needs to the TTPD Chief of Police as necessary. The TTPD will follow their departmental emergency policies and procedures.

TTPL will coordinate with TTUHSC/UMC if additional supplies and/or resources are needed. UMC will provide TTPL with a two way radio to assist in communications between the two facilities. The radio will be available in the UMC IC Center.

Any volunteer or community practitioners should be directed to the UMC IC Center for verification of credentials and assignment. All staff must have name badges or identification as a TTUHSC or UMC employee.

Recovery

Recovery will be developed and coordinated through the ICS based on the type, magnitude and extent of the disaster. Prioritized actions to restore the facility, communication, clinical services and other essential functions following an emergency/disaster will be implemented to include:

- actions designed to assist patients, students, staff, faculty, volunteers and contract workers in the healing process;
- measures for social, environmental and economic restoration; and
- development of initiatives to mitigate the effects of future incidents.

The TTPL PI Department will prepare an after action report which will describe staff, faculty and student participation, areas identified during the emergency/disaster that need improvement, and recommended corrective action. A report summary will be forwarded to the EOC Committee and the Incident Commander for review and recommendations.
Texas Tech Physicians of Lubbock Emergency Management Plan
Flow Chart of Initial Response and Communication
(During business hours)

**HipLink notification from UMC**
(B. Magers (Practice CEO), B. McGregor (Executive Associate Dean, Chief of Staff), A. Parker (Sr. Director of Nursing), J. Vierkant (Director Performance Improvement), V. Means (Director Safety Services), M. Kennon (Fire Marshal), M. Hamilton (Fire Marshal), N. Hines (Director TTUHSC Infection Control), M. Croyle (Executive Director Communications and Marketing))

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**Report to “Situation Room” (BA121J)**
A. Parker and M. Kennon to report to UMC Emergency Operation Center

**Notify back up Incident Commander if needed:**
Paul Fowler 743-1830 x225 or 319-3221 (cell)

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**Stat Alert “FYI” page to**
All Physicians, Administrators, Nurse Managers, PSS Supervisors and Directors:
Mass Casualty Disaster involving (general event). Details to follow- have staff on stand-by.
(All Administrators, Nurse Managers and PSS Supervisors alert staff via call list)

Once notified that TTPL will be receiving patients:

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**PI and N. Hines report to Pavilion to set up triage**
**Stat Alert page with specifics:**
(Departments needed) be prepared to receive walking wounded patients. If you are a runner respond to pavilion lobby.

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**Stat Alert page to all recipients:**
Walking wounded patients will arrive in approx (number) minutes.

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**Stat alert page to all recipients:**
Walking wounded patients arrived.

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**Stat Alert pages continue to communicate with clinics regarding status of disaster response/needs**