

# Emergency Management Session

## Joint Commission Participants

Clinical surveyor and/or Life Safety surveyor

## Organization Participants

Participants include leaders and other individuals familiar with all aspects of the Emergency Management (EM) program within your hospital. Participants may include the following EM multidisciplinary team members (as available):

- EM program lead
- Senior leadership
- Nursing leadership
- Medical staff
- Pharmacy
- Infection prevention and control
- Facilities engineering
- Safety & security
- Ancillary staff
- Information technology

## Logistics

The suggested duration of the Emergency Management session is approximately 60 minutes. In preparation for the EM session, the surveyor will evaluate written documentation of the following and make certain that the documents have been updated and reviewed at least every two years:

- Emergency management program
- Hazard vulnerability analysis
- Emergency operation plan and policies and procedures
- Communications plan
- Continuity of operations & recovery plan
- Education and training program
- Testing program
- Program evaluation (after-action/improvement plans)
- Unified and integrated EM program (if applicable)
- Transplant program (if applicable)

## Objective

To provide consistent and systematic review of the hospital's emergency management program, the application and use of the emergency operations plan and policies and procedures during an emergency (real or simulated), and to assess the hospital's degree of compliance with relevant emergency management chapter standards and applicable law and regulation.

## Overview

The surveyor(s) initiates discussion about the hospital's recent emergency management activities that have occurred in the past 12–36 months that is inclusive of all the hospital settings, services, and programs. The EM session begins with introductions of leadership and other EM multidisciplinary team members and the surveyor will ask that those attending briefly describe their role(s) in the emergency management program. The EM session is broken into four distinct discussion topics and the hospital should be prepared to discuss the following topics.

## Part 1: “Actual” emergencies or disaster incidents

The hospital describes what “real” events impacted them and how they utilized their risk assessment, emergency operations plan, policies and procedures, and the six critical areas to prepare for these events.

Be prepared to discuss:

- Recent emergencies or disaster incidents that have occurred in the past 12/24/36 months in which the emergency operations plan was activated
- The impacts the recent events had on the hospital
- How the recent events were identified, and risk prioritized as part of the hazard vulnerability analysis
- The communication methods that were used to notify staff, relevant authorities, and community partners of the recent events
- How the hospital collaborated with their community partners during the recent events
- How communications were maintained, including alternative communication methods used during recent events
- How staffing was managed to meet patient care needs and if any additional staffing (such as volunteers, etc.) was used during the recent events
- How patient care was impacted and how the hospital continued to provide services to meet those needs during the recent events, including at-risk patients
- Implementation of any safety and security measures that were required during the recent events
- How resources and supplies were managed during the recent events and how additional supplies were obtained.
- How the hospital can sustain operations up to 96-hours based on-hand resources
- If any of the hospital’s utility systems were impacted and how they were maintained or provided for during the recent events. What alternative means have been established to continue to provide for essential or critical utility systems (water, power, etc.)

**Note:** Review of emergency and standby power systems are evaluated by the LSC surveyor during documentation review and building tour.

## Part 2: Emergency exercises

As part of planning and preparedness, the hospital describes what emergency exercises they recently conducted and should be based on past experiences, known risks/hazards, recent changes to their emergency operations plan, policies or procedures. These exercises should have included evaluation of one or more of the six critical areas that were used to assess responses.

Be prepared to discuss:

- One annual operations-based exercise (either a full-scale, community-based or a functional, facility-based exercise) that was conducted (or participated in), **and**
- One other annual exercise of choice, either an operations-based or discussion-based exercise (tabletop, seminar, etc.) that was conducted (or participated in)
- Why these exercises were selected and how these exercises stressed (or fully tested) the emergency operations plan and response procedures and how staff and management were involved
- The exercises that were conducted at the off-site facility locations

### **Part 3: Training and education**

The hospital describes what education and training they provided to their staff, volunteers, physicians, etc. in the past 12–36 months.

Be prepared to discuss:

- The types of emergency preparedness training that the hospital provided (for example, classes, webinars, self-study modules, conferences) and how you validated staff knowledge of emergency response procedures
- If the hospital has determined a need for any additional staff education or training because of recent emergency event or exercises. If so, what education or training was or will be provided
- Education and training that was provided to staff at off-site facility locations

### **Part 4: Evaluation, After-action and improvement plans, and review**

The hospital describes the evaluation process, lessons learned, and actions taken to improve the program.

Be prepared to discuss:

- The after-action reports (AARs) include evaluations that include any gaps in the plan that were identified
- The lessons learned and what was identified as opportunities for improvement as a result of recent events and/or exercises
- The multidisciplinary team's efforts to incorporate lessons learned to review, revise, or update the EM program, including HVA, EOP, policies and procedures, communications plan, etc.
- Senior leaders' involvement in the EM program and their support for needed changes and program improvements

### **For hospitals that participate in their health care system's unified and integrated emergency management program**

In addition to the above, be prepared to discuss:

- The hospital's participation in the development of the unified and integrated emergency management program, emergency operations plan, policies and procedures, communication plan, education, training, emergency exercises
- How your hospital considers its unique circumstances, patient population, and services offered
- Your hospital's capabilities to actively use the unified and integrated emergency management program and its compliance with the program
- The hospital-specific community-based and facility-based risk assessments

### **For hospitals only that use Joint Commission accreditation for deemed status purposes and has one or more transplant programs**

Be prepared to discuss:

- Involvement of the transplant program representative in the development and maintenance of the hospital's EM program
- How the hospital develops and maintains mutually agreed upon protocols that address the duties and responsibilities of the hospital, each transplant program, and the organ procurement organization (OPO) for the designated service area where the hospital is

situated, unless the hospital has been granted a waiver to work with another OPO, during an emergency

**After the EM session has concluded the surveyor(s) will continue relevant discussions and review of emergency management-related activities that include the following:**

- During tracer activity, asking staff about any orientation or training they have received in emergency preparedness roles or responsibilities, and their involvement in emergency management exercises, and/or responses to recent actual emergencies or disaster incidents
- During the competency and credentialing/privileging activities, reviewing staff files to verify completion of initial and ongoing EM-related education and training