

# EMERGENCY PREPAREDNESS GUIDE



Compliments of:

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Disasters come in many forms, and preparation is key. Here is a checklist of important actions you should take to protect yourself, your family, and your practice - essential items you will need to get through a natural disaster and it's aftermath.

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# FIRE PREVENTION & SAFEGUARDING CHECKLIST FOR YOUR PRACTICE



## Prevention Measures

- Follow manufacturers' recommendations for maximum load for surge protectors, power strips and adapters.
- Replace frayed power cords; never run them under rugs or carpeting.
- Unplug appliances and other equipment not in use at the end of the day and over the weekend.
- Store hazardous materials according to manufacturers' instructions and OSHA regulations.
- Don't prop fire doors open or block exits.
- Don't allow paper and other trash to accumulate outside of garbage or recycling receptacles.
- Never store this paper or trash near hot equipment, electrical outlets or designated smoking areas.
- Don't permit employees to burn candles, scented oils, etc.
- Test alarms and check extinguisher charges each month
- Fire proof cabinets for medical records.
- All electronic data backed-up securely off site.

## Fire Extinguishers

**OSHA** requires that all employees be trained to use fire extinguishers. Training is required upon employment and at least annually thereafter. It is recommended the training session cover how to determine when a fire is too big to handle; what type of extinguisher to use; and the PASS system of early-stage firefighting.

- All fire extinguishers are mounted on a wall and properly marked.
- All vehicles carry at least one ABC-rated extinguisher.
- All employees know the location of each fire extinguisher.
- Before using an extinguisher, all employees are trained and familiar with the PASS method of firefighting:
  - P**—Pull the pin on the extinguisher
  - A**—Aim at the base of the fire
  - S**—Squeeze the handle
  - S**—Sweep at the fire, moving from side to side
- If a fire cannot be extinguished using one full extinguisher, evacuate the site and let the fire department handle the situation.
- Each fire extinguisher will be inspected monthly to make sure it is in its designated location and has not been tampered with or actuated.
- Each fire extinguisher will be clearly visible with nothing obstructing or obscuring it from view.
- All fire extinguishers should be examined at least yearly and/or recharged or repaired to ensure operability and safety. A tag must be attached to show the maintenance or recharge date and the signature or initials of the person performing the service.

## Surgical Fire Risk Reduction Recommendations

- Conduct a fire risk assessment at the beginning of each procedure. The highest risk procedures involve an ignition source, delivery of supplemental oxygen, and the operation of the ignition source near the oxygen.
- Use supplemental oxygen safely.
  - Evaluate the need for supplemental oxygen for each patient.
  - If supplemental oxygen is necessary, particularly for surgery in the head, neck, or upper chest area:
    - Deliver the minimum concentration of oxygen needed to maintain adequate oxygen saturation for your patient.
    - Use a closed oxygen delivery system such as an endotracheal tube or laryngeal mask whenever possible, especially if high concentrations of supplemental oxygen (greater than 30 percent) are being delivered.
    - Take additional precautions to exclude oxygen from the field if using an open delivery system.
- Use alcohol-based skin preparation agents safely.
  - Prevent alcohol-based antiseptics from pooling during skin preparation.
  - Remove alcohol-soaked materials from the prep area.
  - Allow adequate drying time, as prescribed in the labeling, for the specific product.
  - Ensure the skin is dry before draping the patient and beginning surgery.
- Use devices and other surgical equipment safely.
  - Consider alternatives to using an ignition source for surgery of the head, neck, and upper chest if high concentrations of supplemental oxygen (greater than 30 percent) are being delivered. If an ignition source must be used, know that it is safer to do so after allowing time for the oxygen concentration to decrease.
  - When not in use, place ignition sources, such as ESUs and electrocautery devices, in a holster and not on the patient or drapes.
  - Understand that surgical drapes and other fuel sources can ignite easily and burn in an oxygen-enriched environment, even if the products are described as "flame-resistant."
- Encourage communication among members of your surgical team.
  - Ensure the anesthesia professional delivering the gases is communicating with the surgeon controlling the ignition source and the clinician applying the skin preparation agent.
- Plan how to manage a surgical fire. For example, understand how to extinguish a fire burning on a patient, develop evacuation procedures, conduct fire drills, and keep saline handy to put out a fire.



# PERSONAL DISASTER PREPARATION & PLANNING CHECKLIST

- Listen to a NOAA Weather Radio for critical information from the National Weather Service (NWS).
- Check your disaster supplies and replace or restock as needed.
- Bring in anything that can be picked up by the wind (bicycles, lawn furniture).
- Close windows, doors and hurricane shutters or board up all windows and doors with plywood.
- Turn the refrigerator and freezer to the coldest setting and keep them closed as much as possible.
- Freeze bottles of water (empty a little first) and fill coolers
- Turn off propane tanks and unplug small appliances.
- Fill your car's gas tank.
- Fill your extra cans for generators or to plan for outages.
- Fill your bathtub and have a bucket near by so you can have use of your toilet afterwards.
- Plan and practice an evacuation plan to minimize confusion and fear during the event. Always have a meeting place.
- Learn about your community's hurricane response plan. Plan routes to local shelters.
- Evacuate if advised by authorities. Remember your evacuation route might be the same as everyone else's, pack accordingly and plan your gas.
- Standard homeowners insurance doesn't cover flooding, make sure you have protection from the floods associated with hurricanes, tropical storms, heavy rains and other conditions.

## Supplies

- Water—min. 3-day supply; one gallon per person per day
- Food—min. 3-day supply of non-perishable, easy-to-prepare food
- Flashlight
- Battery-powered or hand-crank radio
- Extra batteries
- First aid kit
- Medications (7-day supply) and medical items
- Multi-purpose tool
- Sanitation and personal hygiene items
- Copies of personal documents (medication list and pertinent medical information, proof of address, deed/lease to home, passports, birth certificates, insurance policies)
- Cell phone with chargers and extra batteries
- Family and emergency contact information
- Extra cash
- Baby supplies (bottles, formula, baby food, diapers)
- Pet supplies (collar, leash, ID, food, carrier, bowl)
- Tools/supplies for securing your home
- Extra set of car keys and house keys
- Extra clothing, hat and sturdy shoes
- Insect repellent and sunscreen
- Camera for photos of damage
- Duct Tape and Masking Tape
- Matches and Candles (last resort)
- Charcoal or Gas Grill
- Disposable Eating Utensils
- Hand Operated Can Opener
- Rope
- Whistle or Air Horn
- Fire Extinguisher
- Tarp(s)
- Rain gear
- Garbage Bags



## After the Storm

- Continue listening to a Radio or the local news for the latest updates, even after the hurricane or tropical storm has ended.
- If you evacuated, return home only when officials say it is safe.
- Drive only if necessary and avoid flooded roads and washed-out bridges.
- Keep away from loose or dangling power lines and report them immediately to the power company.
- Stay out of any building that has water around it.
- Inspect your home for damage. Take pictures of damage, both of the building and its contents, for insurance purposes.
- Use flashlights in the dark. Do NOT use candles.
- Avoid drinking or preparing food with tap water until you are sure it's not contaminated.
- Check refrigerated food for spoilage. If in doubt, throw it out.
- Wear protective clothing and be cautious when cleaning up to avoid injury.
- Watch animals closely and keep them under your direct control.
- Use the telephone only for emergency calls.
- An intersection with no lights should be treated as a four-way stop. Red flashing means Stop, yellow is proceed with caution.



# DISASTER PLANNING & RECOVERY CHECKLIST FOR YOUR PRACTICE

The disaster recovery plan is a required implementation, defined within the HIPAA Contingency Plan standard in the Administrative Safeguards section of the HIPAA Security Rule:

Standard: Contingency plan. Establish (and implement as needed) policies and procedures for responding to an emergency or other occurrence (for example, fire, vandalism, system failure, and natural disaster) that damages systems that contain electronic protected health information. Additionally, the HIPAA Security Rule provides specifics regarding the standard for “Contingency Planning,” which effectively includes the following:

- Data backup plan
- Disaster recovery plan
- Emergency mode operation plan
- Testing and revision procedures
- Applications and data criticality analysis

A HIPAA-compliant disaster recovery plan must state how operations will be conducted in an emergency and which workforce members are responsible for carrying out those operations.

The plan must also explain how data will be moved without violating HIPAA standards for privacy and security. It must also explain how confidential data and safeguards for that data will be restored. Although HIPAA doesn't specify exactly how to do this, it does note that failure to adequately recover from a disaster could lead to noncompliance. Failure to comply exposes officers of the organization to repercussions, such as fines or jail time.

Avoid compromising risk management practices during recovery procedures. Establish these policies in tandem with recovery plan and operations. Utilizing a checklist is an efficient format and should provide direction before, during and after a business interruption.



## Formulate a Plan

- Secure and maintain off-site encrypted data storage.
- Prepare an itemized inventory of all equipment and supplies. Note serial numbers.
- Photograph or videotape the facility and all equipment and supplies.

- Develop an emergency action plan (EAP) as required by OSHA standards. The written plan should include procedures for evacuation for employees who remain or return to critical operations prior to evacuation, an accounting of all employees, rescue and medical duties for those employees responsible for same, a means of reporting fires and other emergencies, names and job titles of persons who can be contacted for further information about the plan.
- Maintain a current listing of insurance companies, policy numbers, and phone numbers.
- Maintain a cash reserve to facilitate recovery operations.
- Verify sufficient credit and access to creditors.
- Determine bill paying capability if practice expenses are paid online.
- Establish a policy to clarify if and how employee salaries will be paid during interruption.
- Safeguard all insurance policies and important, original documents and business contracts.
- Prepare a listing of all patients, delineating those who are inactive from those currently under care and treatment.
- After recovery, update your disaster plan and replenish emergency supplies, if necessary.

## Immediate Action

- Secure practice facilities to prevent further damage or loss.
- Notify landlord or facility staff.
- Secure all patient records before evacuation, ideally in water resistant and fire proof cabinets.
- Identify temporary utility services such as generator(s), phone service, and cable/internet.
- Take those records of patients in the midst of diagnostic workup or undergoing complicated medical treatment.
- Prepare a listing of all outstanding diagnostic studies and consultations to ensure follow-up as soon as possible.
- Remove any valuables. Turn off electrical and water sources.
- Unplug all electronic equipment from the wall and the device.
- Wrap all electronic equipment in plastic bags and store off the ground, at least 10 feet away from windows.

## Operating Profile

- Determine impact to normal operating profile for all practice venues.
- Establish interim operating hours in tandem with recovery measures.
- Notify insurance carrier for business interruption coverage.
- Maintain record of all business interruption-related losses and expenses.

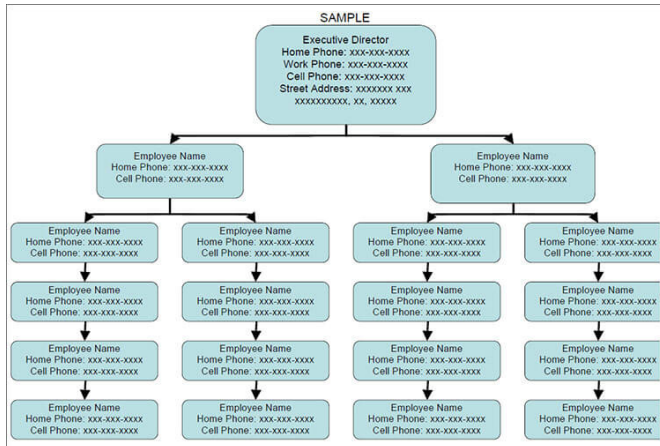




# DISASTER PLANNING & RECOVERY CHECKLIST FOR YOUR PRACTICE

## Communication

- Distribute staff contact information for home, cell and other phone contacts.
- Implement staff calling tree.



- Determine realistic return to work timeframe(s) for staff.
- Notify external vendors/business associates of practice interruption with targeted resumption of operation date.
- Record temporary or newly-established contact information, including new or temporary staff.
- Implement staff briefings at the beginning and end of each day until recovery is complete.
- Establish communication channel for patients, if necessary.
- Establish patient telephone triage procedures.
- Utilize temporary phone and fax services, if necessary. Request that all transmissions be sent under a confidential cover page.

## Licensing

- Ensure that all licenses remain current – obtain duplicate validations for DEA, state medical licenses, business licenses, CME requirements.
- Record federal employer numbers and tax information.
- Notify CPA, bookkeeper, and TPA. Obtain duplicate validation information.
- Notify workers' compensation carrier, if applicable.
- Notify OSHA – temporary practice requirements and procedures for compliance.
- Notify CLIA – temporary practice requirements and procedures for compliance.
- Contact state medical board for guidance.
- HIPAA – document attempts at compliance and reason(s) for non-compliance.

## Managed Care

- Notify all managed care companies (HMO, PPO, MCO) if necessary for operational changes and billing disruption

procedures. Obtain reconciliation of outstanding account receivables.

- Notify Medicare/Medicaid for business recovery operation procedures and compliance with newly enacted practice operations.

## Answering Service

- Notify answering service with daily scripts pertaining to business operations.
- Functioning answering service - out-of-state if necessary.
- Implement temporary hard-line answering service via phone company services or by answering machine.
- Modify staff procedures to include temporary communication duties, as necessary.

## Fee Schedule and Coding/Billing

- Determine interruption to all payment operations, including automated systems.
- Implement back-up records to facilitate recovery operations.
- Document agreements reached with business associates for compliance purposes during recovery process.

## Collection Services

- Establish temporary collection policy in tandem with recovery stages.
- Instruct collection service from suspense to resumption of collection policy.

## Hospital Privileges

- Notify hospitals and on-call facilities of changes to business operations.
- Provide hospitals with temporary contact information.

## Americans with Disability Act (ADA)

- Ensure that temporary recovery operations and newly-established operations are compliant with ADA requirements. Document efforts to comply when full compliance is not possible.

## Staffing

- Do not compromise staff credentialing procedures during shortage periods. At a minimum, obtain informal background and reference verifications. Formalize when return to normal operations occurs.

## Medical Forms

- Obtain replacement supplies or templates for forms and documentation materials.
- Patient information forms
- H&P form
- Consent forms





# DISASTER PLANNING & RECOVERY CHECKLIST FOR YOUR PRACTICE

- Medication log
- Charts & graphs
- Prescription pads and forms
- Patient instruction forms
- ICD-9 coding templates
- Internal directives

## Equipment and Supplies

- Prepare listing of all equipment and supplies, if affected.
- Notify vendors for equipment replacement procedures.
- Photograph or video record documentation damage or loss.
- Establish off-site facility for obtaining services otherwise performed in the office.
- Clarify patient billing procedures and cost factors during temporary usage.
- Contact out-of-state vendors for replacement and/or lease options, if necessary.
- Re-establish as soon as possible, resuscitation kits, oxygen supplies, Ambu bags and other CPR supplies.

## Biohazards

- Initiate temporary and alternative storage site(s).
- Notify alarm and security service providers.
- Notify biohazard and waste management service provider(s).

## Computer Systems

- Contact all computer service vendors to assure integrity and recovery.
- Document the type and extent of lost data.
- Implement temporary controls to ensure HIPAA compliance.
- Initiate back-up system. Test back up systems and data periodically.
- Establish uniform measures for temporary variances in all input functions and subsequent conversion.
- Verify insurance coverage for costs incurred for lost/replaced software and hardware.
- Evaluate applicable warranties.
- Prepare a list of all patient charts affected.
- Document data loss in individual and newly-created patient charts.

## Laboratory Equipment

- Determine loss to all laboratory services provided.
- Initiate temporary external services.
- Consider all manufacturer warranties and service plans.
- Secure instruction material off-site, if necessary.

## External Laboratory and Diagnostic Services

- Determine temporary operations and measures necessary to minimize interruption of services during recovery operations.

- Identify, if possible, all outstanding external diagnostic testing. Recall patients. Re-evaluate all patients and query all patients regarding outstanding labs and diagnostic results. Determine billing compensation and vendor procedures for repeat studies. Consider out-of-state labs and shipping vendors.
- Initiate all temporary services in tandem with insurer provider payment provisions and temporary billing procedures.

## Posted Notices

- Keep all patients advised. Communicate as much as possible - post a notice of changes to and resumption in normal practice operations.

## Medical Records

- All electronic data should be stored securely off site.
- Determine loss or damage to patient records and filing systems.
- Attempt to restore all damaged charts.
- Notify state medical board for specific guidance pertaining to lost or damaged patient records.
- Document all efforts at restoring and protecting existing records.
- Reconstruct all lost charts on next patient contact.
- Notify insurance company for restoration services and/or claim loss procedures.
- Re-establish filing system.
- Re-establish chart/folder system.
- Initiate temporary storage measures, if possible.
- Obtain legal guidance for patient notification during and subsequent to recovery operation and efforts.
- Apply same measures to electronic records as paper in terms of integrity and recovery of data.
- Contemporaneously date and initial all late entries and duplicate information in context of recovery efforts.
- Create a list of all patient charts damaged or lost.

## Waste Disposal

- Initiate temporary waste disposal measures, if necessary.
- Contact local authorities regarding toxic and bio-hazardous waste disposal.
- Examine waste disposal service contracts.

## Bioterrorism

- Adhere to local bioterrorism response plan in conjunction with DOH, CDC, CHD.
- Train staff to distinguish between biological, chemical, nuclear, and blast event conditions.
- Develop triage measures of contaminated patients/staff to contain exposure.
- Determine who will clean contaminated facilities.
- Determine if workers' compensation coverage covers affected employees.



# DISASTER PLANNING & RECOVERY CHECKLIST FOR YOUR PRACTICE

## Insurance Coverage

- Safeguard all insurance policies.
- Ensure that all property and casualty insurance policies are up-to-date and that coverage types and limits are adequate.
- Determine if there is insurance coverage for business interruption losses.
- Determine if tangible, personal property and tangible facilities are covered for flood loss.
- Take copies of all original insurance policies and agent contact information.
- Clarify if insurance coverage is based on actual cash value or replacement cost.
- Notify property management, if applicable, and exchange current contact information.
- Post contact information at the facility, with answering service, and online, if available. Notify all hospitals and on-call providers.
- Photocopy all important documents, diplomas, certificates, and licenses.
- Create an electronic copy and a back-up source of all important hard copies, documents, and lists.

## Business Supplies and Equipment

- Make a list of all damaged/lost supplies and equipment.
- Notify all applicable insurance carriers for claim procedures.
- Notify business associates and vendors – examine all contracts and service agreements.
- Make a list of all reference materials such as phone books, medical journals, texts, manuals, instructions, contracts, service agreement, PDR, and electronic reference sources and equipment.

## Business Office

- Desks and chairs
- Side chairs
- Wastebaskets
- Filing cabinets and shelves
- Computers and software
- Printers
- Photocopier
- Dictation machine
- Answering machine
- Bookkeeping equipment
- Fireproof safe for cash and checks
- Secretarial supplies
- Fire extinguisher
- Clocks
- Telephones
- Intercom system
- Security alarm/video camera
- Batteries
- \_\_\_\_\_

## Instruments

- Wall-mounted mercury sphygmomanometers
- Stethoscope(s)
- Wall mounted otoscope/ophthalmoscope
- Flashlight or light units
- Tongue blades/container
- Reflex hammer
- Tuning forks
- Cerumen remover
- Syringe/plastic bulb
- Disposable vaginal specula/light source
- Disposable sigmoidoscope/light source
- Anoscopes
- Suction set
- Surgical instruments
- Electrocardiogram
- Thermometers
- Cotton-tipped applicators
- Emesis basin
- Glucometer
- \_\_\_\_\_

## Laboratory Equipment

- Microscope
- Centrifuge (hemotocrit/urine)
- Hematocrit capillary tubes, sealer
- WBC chambers/pipettes
- Sedimentation set
- Incubator
- Urinometer/dipsticks
- Test tubes and racks
- Microscope slides/cover slips
- Bunsen burner/alcohol lamp
- Gram-stain reagents
- 10% KOH
- Saline
- Refrigerator
- Wax pencils
- Urine culture sets
- Laboratory timer
- Blood drawing equipment
- Strep screen kit
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## Stationery

- Letterhead
- Envelopes
- Note pads
- Prescription pads
- Business cards
- Claim forms
- Registration forms





# DISASTER PLANNING & RECOVERY CHECKLIST FOR YOUR PRACTICE

- Consent forms
- School/back-to-work slips
- Laboratory slips
- Appointment calendar
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## Reception Room

- Upholstered armchairs
- Side tables
- Lamps
- Magazine covers
- Magazines (non-medical)
- Books (non-medical)
- Magazine wall racks
- Plants
- Mirrors
- Paintings
- Children's area
- Television/VCR/stereo system
- Artwork
- Medical literature (pamphlets in various languages specific to area and practice)
- Water cooler
- Printed signs and placards
- \_\_\_\_\_

## Examination Room

- Examination table and stool
- Waiting chairs or sofa
- Eye chart
- Wall cabinet
- Physician's lamp
- Clothes hangers or rack
- Mirror
- Screen or curtains
- Scale
- Artwork
- Weight scale
- \_\_\_\_\_

## Consultation Room

- Executive desk and chair
- Side chairs (3)
- Bookcase
- Credenza
- Lamps
- Wastebasket
- Dictation machine
- Sharps container
- Biohazards container
- \_\_\_\_\_

## Supplies

- Cloth gowns
- Sheets-paper/fabric
- Assorted syringes/needles
- Assorted tapes
- Assorted gauze pads
- Iodine pads
- Lubricating jelly
- Examination gloves
- Sterile gloves
- Topical skin freeze
- Hemostats
- Soap dispenser
- Band-aids
- Alcohol swabs
- \_\_\_\_\_

## Patient Comfort Items

- Facial tissues
- Sanitary napkins
- Aspirin/acetaminophen
- Paper cups
- \_\_\_\_\_

## Medication

- Xylocaine
- Oxygen tank
- Morphine
- Diphenhydramine
- Dextrose 50 percent
- IV set-up
- Resuscitation kit
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## Other

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# POST-DISASTER RECOVERY CHECKLIST FOR YOUR PRACTICE

Below is a checklist of issues to consider in the event a practice is severely damaged or destroyed. The list is not all-encompassing, but may provide an overall guide in the event a catastrophic disaster occurs

- Contact employees regarding the extent of the disaster and what action they should take in the short-term. The physicians within the practice and/or the office manager should notify all employees regarding whether the practice will open and to ensure employees can be notified about future actions.
- Secure all business and medical records.
- In the event of loss of records requiring compliance with HIPAA breach notification, you will need to notify each patient, place an ad in the paper and notify the government within 1 year, as well as notify your malpractice insurance carrier of this loss. More details on what to do in the event of a loss of records can be found here:  
  
<http://www.hhs.gov/ocr/privacy/hipaa/administrative/breachnotificationrule/index.html>
- Contact the fire department and property owner for a general assessment of the damage. If it appears that the damage is not significant enough to cause a major disruption to your business, employees should be notified of this. If, however, the damage is such that the practice may have to relocate for a significant amount of time, or permanently, take the appropriate actions.
- Reroute mail and phone calls. The mail should be picked up daily. A recorded message should be made available by your phone service provider until a temporary phone line can be established. Contact your phone service provider for options.
- Contact insurance carrier. Give them an initial damage assessment. Ask how quickly it can have an assessor sent to the location for a full assessment of the damage to the building and facilities. It is important that such an assessment occur as quickly as possible. The practice should request that the property damage assessment be videotaped to ensure all damage is recorded. Provide any list or records available of equipment, medical supplies, and any other data that might be available to determine the value of the practice.
- Keep an accounting of all damage-related costs, be sure to retain all receipts. Such costs might include:
  - Mileage driven by employees
  - Long-distance phone calls
  - Equipment
  - Mailing
  - Leasing equipment

- Contact accountant and bank to reconstruct financial records. Contact billing service if one is used.
- Conduct salvage operations. Keep damaged goods on site until seen by an insurance adjuster. Any items or equipment that can be saved should be removed after being seen and documented by an insurance adjuster. If it is believed damaged property can be used again, it should be protected from further damage while remaining on the premises. Take pictures and or record everything to help determine loss at a later point.
- Call a meeting of Key Employees once the extent of the damage is known and the insurance company has been notified. A suggested list of topics that may be discussed at the meeting:
  - Damage assessment
  - Status of employees
  - Medical records access
  - Financial resources
  - Information processing
  - Office space needs — temporary/permanent
  - Immediate equipment needs
- Obtain new or temporary office space if needed.
- Equipment needs for temporary office space should be addressed. Determine what equipment will be needed, both in the short-term and the long-term in the event the office equipment is damaged or destroyed.
- Contact patients. Once the extent of the damage and priorities are determined, the practice's patients should be contacted. If needed, contact other medical providers to find suitable alternatives for the care of your patients.



