



Disaster Preparation and Emergency Preparedness Planning

Am I ready for the inevitable?





Objectives & Program Intent

- Discuss the role of the pharmacist in emergency preparedness
- Define and discuss the elements of an emergency response
- Define and discuss the creation of an emergency preparedness plan
- Discuss the role of patient and caregiver education in preparing for a disaster
- Discuss the role of technology in emergency preparedness
- Discuss the components of a business continuity plan



The Inevitable Happens

 Hurricanes, floods, earthquakes, pandemic, extreme ice and snow are just some of the natural events that we as healthcare providers must have a prepared response plan in place.



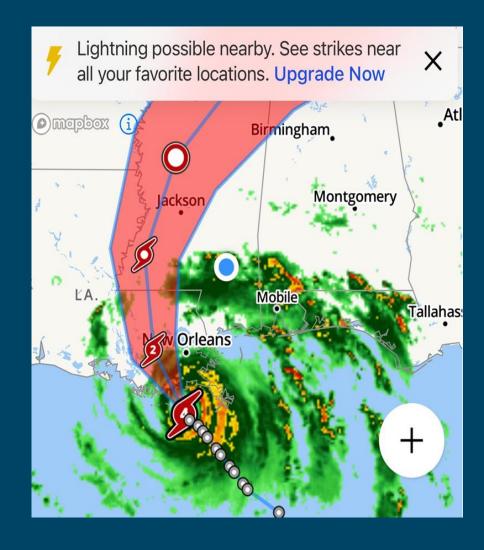




And while the inevitable is sometimes difficult to plan for precisely, having a plan in place to address a likely occurrence could save lives.













Disaster Types

Natural	Human Caused- Intentional	Human Caused-Unintentional
Weather related (eg, hurricane, tornado, severe storms, flooding)	Active shooter	Technology (eg, bridge collapse, dam failure, plane crash, industrial accident)
Geological (eg, earthquake, volcano)	Terrorism (eg, chemical, biological radiologic, nuclear explosive, technological ^a)	Civil disturbance (eg, protest, riots)
Wildfires	Disease outbreaks	
Disease outbreaks/ epidemics/pandemics		

^a Includes computer hacking, identity theft, and credit card cloning



Disaster Terminology

Term	Definition
Declared disaster areas	Areas designated by state/federal authorities as those that have been adversely affected by a natural or man-made disaster and require extraordinary measures to provide adequate, safe, and effective health care for the affected population
Emergency prescription drug order	A standing prescription drug order that allows pharmacists to dispense designated prescription drugs during a public health emergency
Public health emergency	An imminent threat or occurrence of an illness or health condition caused by terrorism, bioterrorism, epidemic or pandemic disease, novel and highly fatal infectious agent or biological toxin, or natural or manmade disaster, that poses a substantial risk of a significant number of fatalities or incidents of permanent or long-term disability that is beyond the capacity of local government or non-governmental organizations to resolve
State of emergency	A governmental declaration (usually issued as a result of a public health emergency) that may suspend certain functions of government, alert citizens to alter their behaviors, and/or direct government agencies to implement emergency preparedness plans



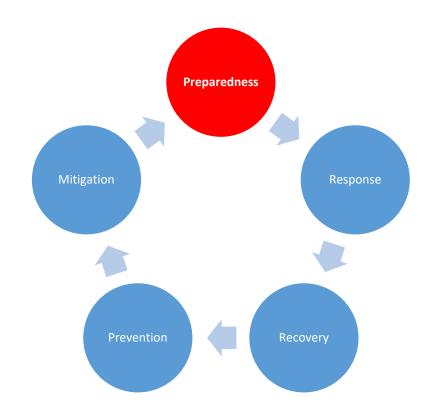
- Preparedness
- Response
- Recovery
- Prevention
- Mitigation





Preparedness

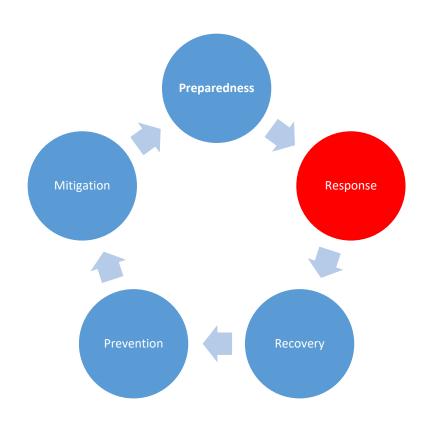
- The primary objective of this phase of the disaster response is vulnerability reduction.
- Long before the event, risks are identified and defined/ preventative measures are attempted/ and response plans are developed.





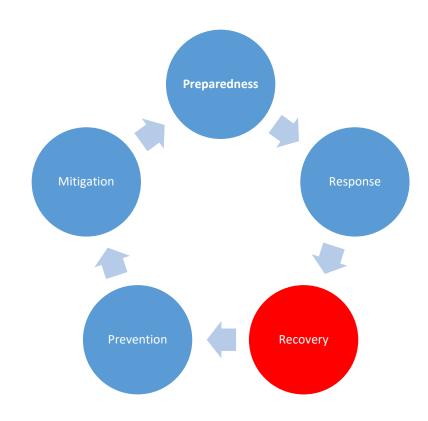
Response

- Actions taken immediately before, during or directly after an emergency to save lives and property.
- Become familiar with local and federal disaster management plans as it will be called upon to be the first line of care during these situations.



Recovery

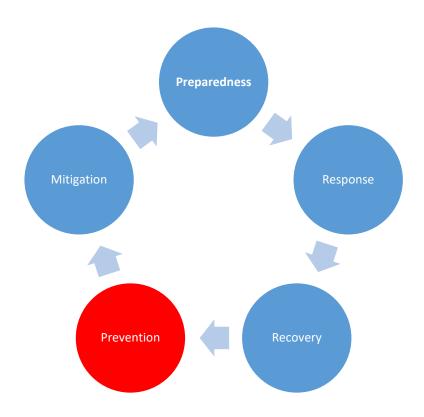
- The recovery process should start immediately to restore function as quickly as possible.
- In this phase, the affected infrastructure must be rebuilt, and efforts made to reduce future risks.





Prevention

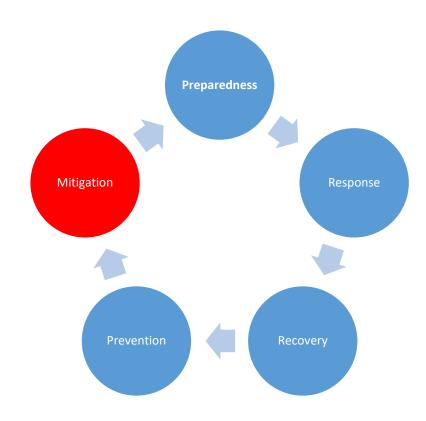
- Efforts that minimize the destruction or damage when an emergency occurs
- Such examples are infection control efforts during an epidemic, moving inventory in anticipation of storm





Mitigation

- Actions that take place to limit extent of damage already done after a disaster strikes
- Prevention and Mitigation often are combined as they are closely aligned



Creation of an Emergency Preparedness Plan

- Identify the most likely hazards
- Prepare a business Impact Analysis
- Create communication cadence
- Plan for the staff and patients
- Preserve physical assets



Defining Competencies and Training Requirements

- Individual roles and responsibilities;
- Threats, hazards, and protective actions;
- Notification, warning, and communications procedures;
- Means for contacting family members in an emergency;
- Evacuation, shelter, and accountability procedures;
- Location and use of common emergency equipment;
- Who is authorized to perform emergency shutdown procedures (if any);
- Methods for preventing unauthorized access to the site.



Role of the Pharmacist in Emergency Preparedness

- Defining competencies and training requirements
- Creation of Emergency Operational Plan
- Securing safety of employees
- Securing drugs and supplies
- Communicating with patients and caregivers



- Disaster Response Team
- Risk Assessment
 - Internal
 - External
- Communication
 - Local FFMA
 - Staff members
 - Patient
- SOPs

EMERGENCY PREPAREDNESS PLAN

APPROVED BY: Governing Body ORIGINAL APPROVAL DATE: 08/15/2018 DATE(S) REVISED: ACHC STANDARD: DRX7-4A

MEETING PATIENT ONGOING NEEDS FOLLOWING A DISASTER OR EMERGENCY

Disasters and emergencies that justify implementation of the Emergency Preparedness Plan include tornadoes with widespread destruction, earthquakes, electrical blackouts, floods, and other emergencies that may cause an interruption of services.

It is the policy of SAMPLE Pharmacy to establish and maintain open communication with the local office of FEMA. Our staff should be informed as to the local provisions from the local FEMA office for the emergency planning. This will include monthly updates if necessary and at least once a year in-service to the staff on what these provisions will encompass.

Each patient will receive a Patient Handout with emergency planning and a list of SAMPLE Pharmacy Emergency Contact Telephone Numbers.

The emergency preparedness plan includes procedures to manage both internal and external emergencies. This plan will be evaluated and updated annually. All staff will be educated regarding the plan during orientation, annually and as needed. All patients will be provided with the Patient Emergency Preparedness Plan in their Patient Handbook that is included with the first shipment/delivery.

Disaster Response Team:

The Disaster Response Team assumes the overall responsibility for the planning/preparedness, mitigation, response and recovery of any emergency affecting a pharmacy facility. The team members include:

- Pharmacist in Charge · Compliance Officer
- PI Coordinator
- Office Manager

PROCEDURE:

Internal Emergencies

Internal emergencies are those listed below that may interrupt normal operations of the facility. They include but are not limited to:

- Power outages
- · Fire and/or Bomb threat
- · Facility damage or destruction
- Other

Power Outages

In the event that power is interrupted during normal business hours, the phone calls will automatically be forwarded to the answering service. The answering service will relay all messages to the on-call cellular phone, as instructed. The APC will maintain the telephone system for a short duration, maximum 2 hours. We will utilize two analog phones for both incoming/outgoing calls.





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Responsibilities of the Disaster Response Team

- The Disaster Response Team will meet prior to the start of severe weather season to review, coordinate and delegate the implementation of our Emergency Preparedness Plan.
- The Disaster Response Team assumes the overall responsibility for the readiness of the facility in the event of a major storm and is responsible for the safety of the employees as well as the property.
- The Disaster Response Team assumes responsibility for the reinstatement of the facility to a full and serviceable condition.



- Risk Assessment
 - Assess likelihood
 - Impact
- Document those risks and impacts
- Business continuity

The following	ng descri	ptors sho	ould be used w	hen asses	sing the	e LIKELI	HOOD	of a potential risk eve
	5		4	3		2		1
Descriptor	Probab	ole	Possible	Unlike	ły	Rare		Negligible
occurrence	More li to occur th		Reasonable chance of occurring	Unlike	ly to	Will on occur in circums	rare	Will only occur in exceptional circumstances
	>50%	- 1	>5%	>0.5%		>0.05%		>0.005%
	>1 in 2 chance		1 in 20 >1 in 2 chance		2000		000	>1 in 20,000 chance
The follo	owing de	scriptors 4	should be use		ssessing	g the IMP	ACT of	a potential risk event 1
	hic	Major	Mode	erate	1	Minor		Insignificant
Catastrop	-	ained loss	Some disrup		Short t	tion of	which	ption in a service does not impact on the y of patient care or the





Risk Assessment

- Document likelihood
- Document impact
- List recovery/response
- Flexibility

Risk Event	Pandemic			
Risk Description	A disease epidemic occurs when there are more cases of that disease			
	than normal, i.e., COVID-19. A pandemic is a worldwide epidemic of a			
	disease. An influenza pandemic may occur when a new influenza virus			
	appears against which the human population has no immunity. If a			
	pandemic were to occur today, we could expect the virus to spread			
	rapidly due to the interconnected nature of the world and the high level			
	of global travel.			
Likelihood	5			
Impact	Moderate			
Recovery/Response	☐ Establish policies and practices, such as flexible worksites			
	(telecommuting) and flexible work hours (staggered shifts),			
	Advise personnel to be aware of any signs of fever or other influenza-like illness before reporting to work each day. If symptoms appear, personnel should notify their supervisor and stay home. Personnel who are ill should not travel. Provide appropriate PPE (gloves, masks, etc.) and alcohol-based hand sanitizers within the workplace. Ensure that adequate supplies of these items are maintained. Place hand sanitizers in multiple locations within the workplace, including entrances to the workplace, break rooms, restrooms, and conference rooms. Clean surfaces and items that are more likely to have frequent hand contact. Clean commonly touched surfaces such as workstations, countertops, doorknobs and light switches. As necessary, conduct active screenings of personnel when they arrive at work. Ask all personnel about any symptoms they may have such as fever, cough, runny nose, muscle aches, or sore throat during the previous 24-hour period. Any personnel who have flu-like symptoms should be asked to go home.			
	Close workspace to all non-essential personnel. Order antiviral treatment for Key Staff/High Impact staff			
	members, when available. Cancel all non-essential face-to-face meetings. Alternative			
	options include scheduling meetings via conference calls or			
	internet-based meetings			





Communication

- Staff phone tree
- Alternative methods if cell towers affected
- Designate staff responsibilities
- Create "staff huddle" when implemented





Patient Communication

- Prioritize patients based on patient need and risk level
- Update emergency contacts for patients
- Educate staff on questions to ask of patients
- State law requirements

Risk Level	Patient Categories
High Risk	
Moderate Risk	
Low Risk	



- Standard Operating Procedures (SOPs)
 - Immediate emergencies
 - Less than 24 hours notice
 - Impending emergencies

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SOPs

- A list of personnel and their responsibilities
- Pharmaceutical stockpile management instructions
- Alternative methods of communication (eg., cell phone, fax, internet)
- Up-to-date and accurate contact lists of employees and affiliates
- Lists of suppliers and manufacturers, their contact information, and account number in written form
- Recommendations for timing pharmacy computer backups
- Recommendations for fire extinguisher and smoke detector installation
- List of protective equipment and steps for personal protection (eg., required/recommended immunizations, measures for infection control)
- Safety checks for the well-being and mental health of staff
- All SOPs should include mandates for periodic testing including emergency drills that follow accurate time frames
- Changes based on lessons learned for QI

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References

- 1. National hurricane preparedness. National Weather Service. https://www.weather.gov/wrn/ hurricane-preparedness
- 2. Disaster preparedness and recovery plan SBA. https://www.sba.gov/document/support--disasterpreparedness- recovery-plan
- 3. Healthcare coalition recovery plan template. HHS. https://files.asprtracie.hhs.gov/documents/aspr-tracie-hccrecovery-plan-template.pdf
- 4. Hazard identification and risk assessment. Federal Emergency Management Administration. https://www.fema.gov/hazard-identification-and-risk-assessment
- 5. Federal recovery programs for healthcare organizations. HHS. July 2019. https://files.asprtracie.hhs.gov/ documents/asprtracie-federal-recovery-programs-for-healthcare-organizations- final.pdf
- Tips for retaining and caring for staff after a disaster. HHS. https://files. asprtracie.hhs.gov/documents/tips-for-retainingand-caring-for-staff after- disaster.pdf
- 7. Bell, C., and Daniel, S. (2014). **Pharmacy Leader's Role in Hospital Emergency Preparedness Planning.** Hospital Pharmacy. 49(4): 398–404.
- 8. Von Waldner T, Taylor D, Truong HA. Chapter 1: Public Health Preparedness and Response: Overview of Disasters and Emergencies. In: *Disasters and Emergencies*. A *Planning and Response Guide for Pharmacy Professionals*. American Pharmacists Association; 2022.
- 9. National Association of Boards of Pharmacy. Emergency Disaster Preparedness and Response Planning: A Guide for Boards of Pharmacy. November 2006.







Thank you

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