

TITLE	Severe Weather Policy						
Original Date	7/18/2018	Review Date	5/29/2020	Approve Date	6/4/2020	Effective Date	6/4/2020

POLICY

It is the policy of the Singing River Health System to meet the needs of our community during periods of inclement weather.

PURPOSE/OBJECTIVE

The purpose of this policy is to guide staff and occupants actions in reaction or preparation of severe weather. Also, it contains plans for staff during periods of inclement weather and other events that prevent employees from being able to safely travel between home and work.

SCOPE

The Severe Weather Plan pertains to Singing River Health System including Hospital and Business Occupancies.

RESPONSIBILITY

Emergency Management Committee

DEFINITION

Tornado – A violently rotating column of air touching the ground, usually attached to the base of a thunderstorm.

Tornado Watch – conditions are favorable for a tornado to develop.

Tornado Warning – a tornado has been sighted and immediate action should be taken for protection.

Tropical Storm – tropical weather system whose winds are greater than 38 miles per hour but less than 74 miles per hour.

Tropical Storm Watch – is issued when a tropical storm poses a possible threat, generally within 48 hours.

Tropical Storm Warning – is issued when a tropical storm are expected in 36 hours or less.

Hurricane – tropical weather system whose winds exceed 74 miles per hour.

Hurricane Watch – hurricane conditions are expected within 48 hours.

Hurricane Warning – hurricane conditions are expected within 36 hours.

Facility Lockdown – when selected employees are required to remain on the premises during on and off duty hours to ensure essential services are provided to the community. During periods of Facility Lockdown, ingress and egress will be limited.

PROCEDURE

Communication

Information used to update employees on system operations, will be on SRHS intranet (Bridge), SRHS Internet (www.singingriverhealthsystem.com), and the toll-free number (1-866-353-0439). Employees and physicians will receive text alerts by providing their Emergency Communication Information via Sundry.

Employees away from work during an event must also utilize these communication tools.

Severe Weather

I. Tornado

a. Receipt of Information

- i. Information of a tornado warning is received from the Jackson County Emergency Management Agency or other credible agency. Jackson County Emergency Management texts can be received by signing up on the Jackson County Emergency Management website.
- ii. Hospital: If the tornado is in the area or moving toward either hospital the following overhead announcement will be made at the direction of the Patient Care Supervisor, Administrator, director, emergency manager on the premises:

“Facility Alert – Tornado Warning – for local area including (Ocean Springs/Singing River) Hospital - please remain in the building until the “All Clear” is announced.” Repeat 3 times.

“Facility Alert – All Clear” Repeat 3 times. Announced when Tornado Warning conditions are no longer imminent and the Severe Weather Plan is discontinued.

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- iii. Business Occupancies: Employees learning of Tornado Warning for area or moving toward SRHS Business Occupancy should inform manager on premises immediately. Manager should communicate and organize movement of employees and guests to interior locations away from exterior walls and windows and refrain from exiting the building until storm has passed. Business Occupancies will communicate all clear to occupants.
 - b. Staff Responsibilities
 - i. How to respond to a tornado warning in your area
 - 1. Hospital: Employees should remain alert to weather conditions during this time. Normal duties may be continued. Stay inside and caution guests to remain inside until the “All Clear” is announced.
 - 2. Business Occupancy: Employees and guests should move to interior locations away from exterior walls and windows and refrain from exiting the building until storm has passed.
 - ii. Reporting Impact of a tornado in your area
 - 1. Reporting of any injury, property damage, etc. caused by the storm should be reported to the appropriate manager/director as soon as practical.
 - iii. Hospital Incident Command System (HICS) staff
 - 1. Sr. Leader/Administrator will initiate HICS when normal operations are impacted by the storm.
 - iv. End of event
 - 1. When the “All Clear” is announced employees will resume normal duties. Affected locations may not resume normal operations for a longer period of time.
- II. Hurricane
 - a. Communication
 - i. When hurricane conditions are expected in 72 hours an administrator or designee will assume the role of Incident Commander (IC), activate the appropriate HICS positions and the Severe Weather Plan.
 - ii. The Incident Commander, when appropriate, will communicate information to employees at 72, 48, 24 and 12 hours from landfall by use of one or more of the following mass messaging systems; texts, emails, communication from supervisor, overhead page and website updates.
 - iii. The Incident Commander will designate responsible person(s) to ensure all business occupancies receive communications.
 - b. Staff Responsibilities
 - i. How to respond when hurricane conditions are expected in 72 hours:
 - 1. All: Employees should make preparations for home and family in the event Facility Lockdown procedures are implemented requiring critical clinical, ancillary and support service employees to stay at the hospital for the duration of the hurricane.
 - 2. Hospital: Essential services and essential support services should check supply levels and adjust as necessary. Review Hurricane Checklist. Managers of these services should begin work to establish minimal staffing requirements should Facility Lockdown procedures be activated. When assignments are complete this should be communicated to employees.
 - 3. Business Occupancy: General state of readiness. Begin planning for possible shutdown of services.
 - ii. How to respond when hurricane conditions are expected in 48 hours:
 - 1. Hospital: Essential services and essential support services supply level adjustments should be complete or plan in place to become current in 24 hours. Managers of these services should complete work to establish minimal staffing requirements are assigned should Facility Lockdown procedures be activated. When assignments are complete this should be communicated to employees.
 - 2. Business Occupancy: General state of readiness. Materials needed to cover and protect computers and other high value equipment should be obtained. Continue planning for possible shutdown of services.

May not be current policy once printed.



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- iii. How to respond when hurricane conditions are expected in 24 hours:
 - 1. Incident Commander: Communicate, if conditions require, Facility Lockdown procedures to be implemented during the storm.
 - 2. Hospital: Essential services and essential support services employees directed by their manager or department staffing plan will report to their respective on duty locations at the effective time of the Facility Lockdown procedures. If Facility Lockdown procedures are not implemented, employees should continue to work as scheduled unless otherwise directed by manager.
 - 3. Business Occupancy: Closed and unoccupied as directed by the Incident Commander.
- iv. The Hospital Incident Command System (HICS) command staff will initially consider the following objectives:
 - 1. Ensure the safety of patients, staff, and visitors.
 - 2. Communicate operational plans and plan changes to all employees and physicians as soon as possible.
 - 3. Communicate preparation plans to responsible departments in advance of storm.
 - 4. Receive information on storm damages, initiate actions to secure.
 - 5. Return to normal operations as quickly as possible.
- v. End of event: When the “All Clear” is announced employees will resume normal duties. Affected locations may not resume normal operations for a longer period of time
- c. Hurricane Plan Checklist – See Appendix A

Facility Lockdown

- I. Incident Commander (IC) Decision to Initiate and End
 - a. Upon learning of conditions that would make travel between hospital(s) and home impassable or unsafe for employees, IC may elect to implement Facility Lockdown procedures. IC will make the decision of when Facility Lockdown procedures will be discontinued.
 - b. When Facility Lockdown procedures appear unnecessary, the IC may also offer, but not require, on-site sleeping arrangement for off-duty employees scheduled to work whose travel routes may be more apt to flooding or other conditions making roads impassable.
- II. Hospital
 - a. When Facility Lockdown procedures are implemented, it will be communicated to employees using one or more of the mass messaging systems, including texts, emails, communication from supervisor, or website updates
 - b. Staff Responsibilities
 - i. Prior to Facility Lockdown Procedures
 - 1. Employees must be knowledgeable of their departments Facility Lockdown staffing procedure. The staffing procedure may consist of the following as directed by the manager, depending on the department AND the expected event severity/category and duration:
 - a. **As Scheduled** – work through periods of Facility Lockdown procedures if coincides with regular schedule, or
 - b. **Team A/B/Recovery** – Teams assigned to cover staffing needs during period of Facility Lockdown procedures.
 - c. **Support Services** – may be required to work through periods of Facility Lockdown procedures unless otherwise directed by their manager.
 - ii. What to Bring if you are reporting for Facility/Critical Component Lockdown Procedures
 - 1. Staff are required to bring all necessary personal items, including linens, needed to house in the facility during lockdown.
 - iii. Effective Time of Facility Lockdown Procedures
 - 1. Employees must report to their department and their department manager or designee at the effective time upon their arrival, which must be prior to implementation of the Facility/Critical Component Lockdown procedures.

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- iv. Entrance/Exit points during Facilities Lockdown Procedures
 - 1. In the event Facilities Lockdown procedures are implemented, designated entrance/exit points and responsibility for staffing registration stations near these points will be as follows:
 - a. Patient/Visitor Entrance Registration
 - i. SRH - West Outpatient Entrance
 - ii. OSH - Outpatient Registration Entrance
 - b. Employee Entrance Registration
 - i. SRH - Ground Floor South East entry near Campus Police
 - ii. OSH – South West Entrance near Loading Dock and After Hours Entrance adjacent to the ER Entrance
 - c. The Physician Registration Station
 - i. SRH - Ground Floor by the Medical Records Department
 - ii. OSH – The West Physician’s Entrance
 - 2. The IC/Designee will assign staff to man entry points
 - 3. Identification during Facility Lockdown Procedures
 - a. Patient – Patient ID Wristband
 - b. Visitor – Colored wristband issued at sign in.
 - c. Employees – SRHS issued ID Badge
 - d. Physicians – SRHS issued ID Badge
 - 4. Termination of Facility Lockdown Procedures
 - a. Once Facility Lockdown Procedures are terminated by the IC, employees will be notified via one or more of the communication processes described above.
 - b. Off duty employees may leave the premises and return home at this time.
 - c. On duty employees may leave at the end of the current shift.
- c. Facility Use
 - i. Off Duty Sleep Areas
 - 1. Off Duty Sleep Areas will be determined and communicated at time of event.
 - ii. Off Duty Non-Sleep Areas
 - 1. Areas available to off duty staff will be determined at the time of the event.
 - iii.
- III. Business Occupancies
 - a. Business Occupancies will discontinue operations during periods where Facility Lockdown procedures are implemented, unless directed otherwise by the IC.

DOCUMENTATION

Activation of the Severe Weather Plan should initiate the use of the HICS and applicable forms.

HICS 214 – Activity Log

HICS 252 – Section Personnel Time Sheet

HICS 253 – Volunteer Registration

HICS 254 – Disaster Victim / Patient Tracking

Visitor Log

REGULATORY BASIS/REFERENCE DOCUMENTS

DNV NIAHO

CMS Appendix Z



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DOCUMENT CONTROL

OWNER (Department)	Emergency Management Committee
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REVIEWER(S) REQUIRED

- | | |
|---|--|
| <input type="checkbox"/> Anesthesia | <input type="checkbox"/> Medical Staff |
| <input type="checkbox"/> Accreditation | <input type="checkbox"/> Nursing: Emergency Room |
| <input type="checkbox"/> Behavioral Health | <input type="checkbox"/> Nursing: ICU-PCU |
| <input type="checkbox"/> Biomedical | <input type="checkbox"/> Nursing: Medical-Surgical |
| <input type="checkbox"/> Campus Police | <input type="checkbox"/> Oncology |
| <input type="checkbox"/> Cardiac Cath Lab | <input type="checkbox"/> Patient Access |
| <input type="checkbox"/> Clinics | <input type="checkbox"/> Patient Resource Management |
| <input type="checkbox"/> Clinical Data Management | <input type="checkbox"/> Pharmacy |
| <input type="checkbox"/> Compliance | <input type="checkbox"/> Physical Environment |
| <input type="checkbox"/> Education | <input type="checkbox"/> Quality |
| <input type="checkbox"/> Environmental Services | <input type="checkbox"/> Radiology |
| <input type="checkbox"/> Facilities | <input type="checkbox"/> Recovery |
| <input type="checkbox"/> Finance | <input type="checkbox"/> Rehabilitation Services |
| <input type="checkbox"/> Food Services | <input type="checkbox"/> Respiratory |
| <input type="checkbox"/> Hemodialysis | <input type="checkbox"/> Risk Management |
| <input type="checkbox"/> Hospice of Light | <input type="checkbox"/> Sterile Processing |
| <input type="checkbox"/> Human Resources | <input type="checkbox"/> Stroke |
| <input type="checkbox"/> Infection Prevention | <input type="checkbox"/> Surgery |
| <input type="checkbox"/> Information Services | <input type="checkbox"/> Trauma |
| <input type="checkbox"/> Laboratory | <input type="checkbox"/> Transportation |
| <input type="checkbox"/> Marketing | <input type="checkbox"/> Vascular Access |
| <input type="checkbox"/> Materials Management | <input type="checkbox"/> Women's and Children's |

APPROVER(S) REQUIRED

- | | |
|--|--|
| <input type="checkbox"/> Accreditation | <input type="checkbox"/> Department of Emergency |
| <input type="checkbox"/> Board of Trustees | <input type="checkbox"/> Department of Critical Care |
| <input type="checkbox"/> Compliance | <input type="checkbox"/> Department of Medicine |
| <input type="checkbox"/> Infection Prevention | <input type="checkbox"/> Department of Obstetrics |
| <input checked="" type="checkbox"/> Physical Environment (via email) | <input type="checkbox"/> Department of Behavioral Health |
| <input type="checkbox"/> Risk Management | <input type="checkbox"/> Department of Radiology |
| <input type="checkbox"/> Other _____ | <input type="checkbox"/> Department of Surgery |
| <input type="checkbox"/> Policy Oversight Committee | |

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APPENDIX A

Hurricane Plan Checklist

Administration

	Establish Email and Text Groups to send updates
	Communicate with Trustees and Supervisors
	Establish call in schedule and conference call number for group discussion
	Investigate response to storm of local healthcare systems
	Communicate decision to lockdown or not based on what is best for patients, visitors, employees and community
	Communicate impacting decisions to Physician Partners and their office managers.
	Communicate early that employee family members including pets will not be sheltered at the hospital
	Round and communicate response plan reasoning and educate to Severe Weather plan/Facility Lockdown Plan
	Email updates to include employee hotline number, employees to be paid (or not) if sheltering at hospital, attendance expectations/consequences, shelters/special needs shelter locations and curfews
	Facility Lockdown will be contingent upon review of the following: <ol style="list-style-type: none"> 1. Expect Hurricane force winds of greater than Category 1 (sustained winds of 74-95 mph) for Jackson County. 2. Timing of expected Hurricane force winds in relation to shift change schedule. 3. Duration hurricane force winds are expected to be present. 4. Surge height and rain totals expected to cause widespread flooding and road closures.

Directors/Managers

	Email Administrator of each hospital of your location
	Round and communicate response plan reasoning and educate to Severe Weather plan/Facility Lockdown Plan.
	Communicate the point of entrance/exit plan per the facility lockdown plan.

Nursing

	Support Nursing Supervisor/assign assistant as needed
	Conserve Linen/supplies
	Cross over as conditions necessitate

Surgical Services

	Proactively discuss surgical schedule and capabilities
	Conserve Linen/supplies
	Cross over as conditions necessitate

Medical Staff

	Ensure availability of exempt Medical Staff employees to staff Physician Entry Point in the event of Facility Lockdown at SRH/OSH.
	Contact and update all specialties, ensure current email

Patient Access

	Ensure availability of exempt Patient Access employees to staff Patient/Visitor Entry Point in the event of Facility Lockdown at SRH/OSH.
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Ancillary Services

	Radiology - Establish Radiologist coverage
	Radiology - Verify IT support for PACS
	Radiology - Check supply levels for each modality
	Radiology - Check linen levels and communicate conservation plan

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Facilities Support

Send out email or text to update management group asap after each storm update from the local Emergency Management services to include: ____ Storm Travel Speed, ____ expected storm surge, ____ expected wind speed, ____ expected rainfall, ____ to ____ expected arrival/departure of hurricane conditions
Check Generators/Supplies/Fuel
Check Hospital exterior/roof tops for loose equipment/materials
Check clinics for loose equipment/materials

Campus Police

Add coverage for lobbies and waiting rooms
Assign monitor at 36 hours from landfall for all points of ingress and egress
Utilize volunteers from non-clinical areas
Meet with Nursing Supervisor, Key Medical Staff and Admissions to discuss judicious hospital stance on entry

Information Services

Ensure Epic and Phones covered
Ensure initiation of full system back up protocol.
Ensure computer access availability at Facility Lockdown Entry points.

Public Communications

Update Website
Prepare press communication, to include hospitals are not shelters, along with shelter locations
Send email to Home Health Agencies and admitting medical staff: Hospital will not accept patients sent inappropriately for admission due to limited staffing.

Human Resources

Get list of all Managers to Executive team and Nursing Supervisor
Update Hotline
Send out timekeeper form/information on electronic method
Ensure availability of exempt HR employees to staff Employee Entry Point in the event of Facility Lockdown at SRH/OSH.

Environmental Services

Make sure all rooms clean and available
Check Supply and Linen levels
Have compactors emptied

Transportation

Develop plan based on expected situation
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Clinic Operations

Open as soon as possible after storm recovery
