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EMERGENCY PREPAREDNESS FOR LEADERSHIP

- *What's your Role ?*

2025 V.1

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- *"As leaders of the largest workforce in hospital or healthcare facility, it is important that leaders be central in a crisis management situation. Although it may not always be apparent, a leader's skills and behaviors are a large determinant of how a situation will evolve and eventually be resolved."*
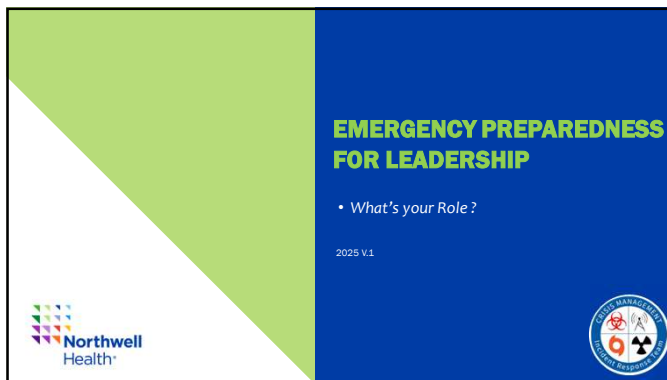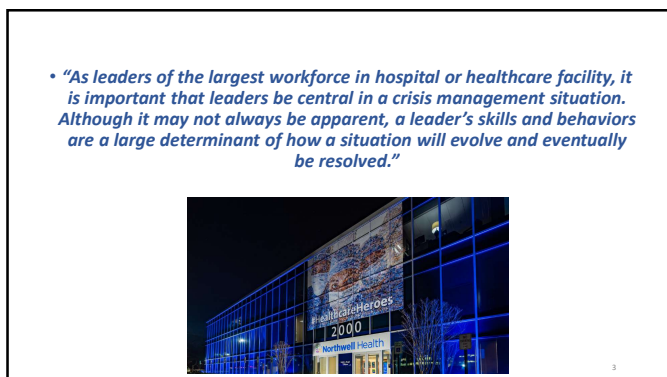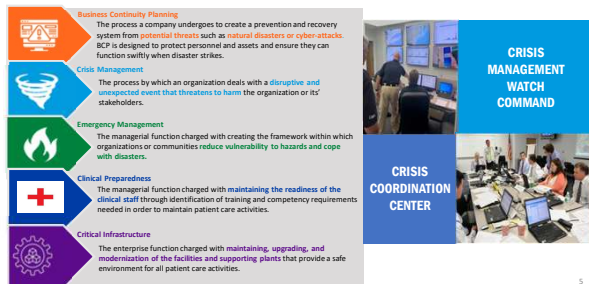
Today's Learning Objectives:

- Discuss emergency management terms and concepts

- Assess the threats we face today in healthcare

- Understand the regulatory requirements (NYS DOH, CMS, Joint Commission, OSHA) involving emergency management

- Review the Northwell Incident Command System (NICS)

- Discuss your role in a disaster activation

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Northwell Health Crisis Management

Modernizing our emergency management program, going from paper preparedness to operational readiness takes disaster preparedness and crisis awareness to be a part of daily decision making.

Business Continuity Planning
The process a company undergoes to create a prevention and recovery system from potential threats such as natural disasters or cyber-attacks. BCP is designed to protect personnel and assets and ensure they can function swiftly when disaster strikes.

Crisis Management
The process by which an organization deals with a disruptive and unexpected event that threatens to harm the organization or its' stakeholders.

Emergency Management
The managerial function charged with creating the framework within which organizations or communities reduce vulnerability to hazards and cope with disasters.

Clinical Preparedness
The managerial function charged with maintaining the readiness of the clinical staff through identification of training and competency requirements needed in order to maintain patient care activities.

Critical Infrastructure
The enterprise function charged with maintaining, upgrading, and modernization of the facilities and supporting plants that provide a safe environment for all patient care activities.

CRISIS MANAGEMENT WATCH COMMAND

CRISIS COORDINATION CENTER

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Emergency Management Terminology Review

- **Emergency** - a serious, unexpected, and often dangerous situation requiring immediate action

- **Disaster** - a sudden event, such as an accident or a natural catastrophe, that causes great damage or loss of life.

- **Crisis** - a time of intense difficulty, trouble, or danger.

- **Incident** - An unplanned occurrence, natural or human-caused, that requires a response to protect life or property.

- **Event** - a planned public or social occasion

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Emergency Management Terminology Review

- **Emergency Operations Plan** – this plan details what the facility or agency will **DO** during a disaster.
- **Departmental Emergency Operations Plan (DEOPs)** - unit specific plan that assigns responsibility to team members for carrying out specific actions at projected times and places in an emergency that exceeds the capability or routine responsibility of the unit.
- **Business Continuity Plan** – this plan outlines the ability of the entity to carry out their normal activities and essential functions after unplanned events have occurred.
- **Continuity of Operations Plan** – this plan outlines the organizational continuance for what they deem as mission essential services.
- **Disaster Recovery** - an organization's method of regaining access and functionality to its IT infrastructure after events like a natural disaster, cyberattack, or even business disruptions.

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Emergency Management Goal: *Organizational Resilience*

- To be highly reliable during times of stress; the ability to deliver critical operations in the face of disruption

- The goal of Healthcare emergency management is to *reduce the loss of life* and property and protect our institutions from natural, technological, and man-made hazards by leading and supporting healthcare facilities in a comprehensive management program of preparedness, response, containment, mitigation, and recovery.

- The capacity of institutions, and populations to prepare for and *effectively respond to crises*; maintain core functions when a crisis hits.

Source: Boeriu, Cristian. (2018). Hospital Resilience: A Recent Concept in Disaster Preparedness. The Journal of Critical Care Medicine. 4. 81-82. 10.2478/jccm-2018-0016.

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Understanding Emergency Management Terminology

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- •What are threats we face in healthcare today ?

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Today's focus: Disasters

- A disaster is a sudden event or occurrence of a **natural catastrophe**, **technological accident**, or **human caused event** that has resulted in **severe property damage**, **deaths**, and/or **multiple injuries**.

- **Disasters can:**

- ▪ Occur **within** a facility or **exterior** to the facility

- ▪ Have the potential to overwhelm the **resources** of an institution

- ▪ **Persist** for hours, days or months

- ▪ Produce **large numbers of victims** (Mass Casualty Incident - MCI)

11   Source: Federal Emergency Management Agency (FEMA)

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Defining Internal & External Disasters

Internal Disasters are any event that occur **within** the walls of a facility and has disrupted the operations of hospital or its ability to provide services, such as:

Fire

Haz Mat Spill

Cyber Incidents

Power Outage

External Disasters are any event that occur at locations **separate** from a facility and may have the ability to disrupt hospital operations, such as:
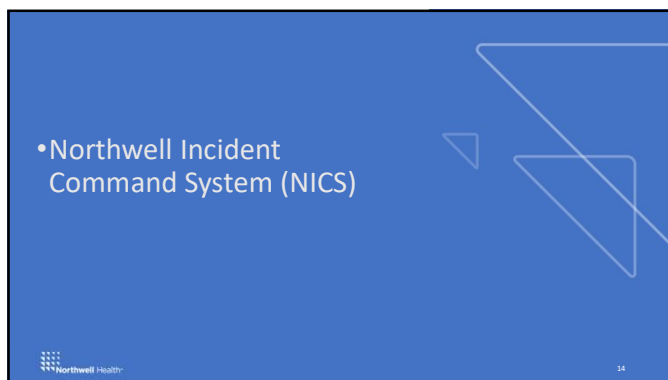
Plane Crash

Epidemics Pandemics

Auto Accident

Weather events

Keep in Mind: A disasters can be both internal and external _simultaneously_. For example, a natural disaster that causes mass casualties as well as damage to the hospital's structure.
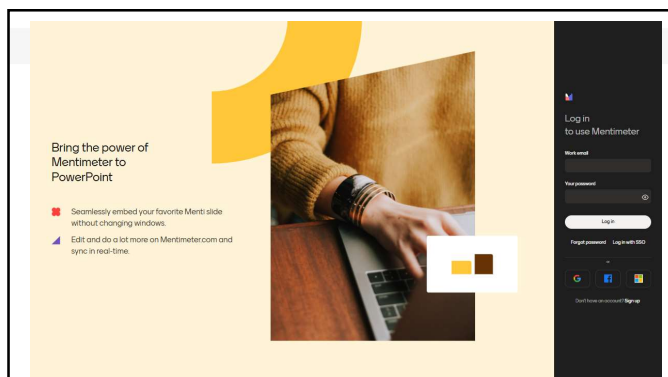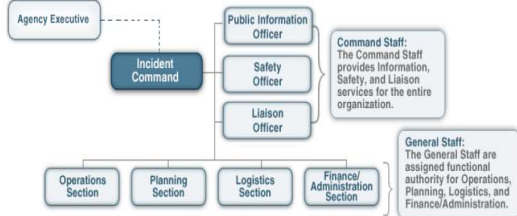
Source: https://www.ncbi.nlm.nih.gov/books/NBK537042/

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What are the threats we face locally in healthcare ?

Cyber Sabotage & Crimes

Mass Causality Incidents (MCI) / Weapons of Mass Destruction
❖ Chemical
❖ Biological
❖ Radiological
❖ Nuclear
❖ Explosive

Hazardous Materials Incidents (accidents)

Active Shooters / Hostile Incidents /Mass demonstrations

Natural Disasters
❖ Hurricane
❖ Flooding
❖ Ice Storms

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Note: This is not a comprehensive list.

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- Northwell Incident Command System (NICS)

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Incident Command System Table of Organization

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Lessons Learned Response to Recent Disasters

- *"Leaders experienced considerable challenges in responding to this disaster due to limited prior disaster experience, training, and education…Leaders had to adapt to rapidly changing unpredictable events and circumstances."*

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Incident Recognition and Activation

- Know your facility's Emergency Operations Plan (EOP) process for identification and activation
- Know whom you call when a "What if" scenario occurs in your unit
  - Emergency Management Coordinator
  - Security
  - Facilities
  - Environmental
  - Materials Management

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Northwell Activation Matrix (Emergency Event Classification Matrix)

- **Level 4 Activation:**
- Enhanced Monitoring for an incident that has the **potential** for producing low impact to operations/services. External resources are not needed.

- **Level 3 Activation:**
- Activation/Escalation for an incident with a **minor** impact to operations and resources. Command center open, minimal staffing.
-

- **Level 2 Activation:**
- Activated for an incident with a **moderate to large** impact to operations. Resources have been exceeded. Full command activation.
-

- **Level 1 Activation:**
- Activated for an incident with **significant** impact to operations, including the potential for long duration. Resources have been exhausted. External resources needed. Full command center activation.

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NICS BREAKOUT SESSION

- GIVE ASSIGNMENTS TO EACH TABLE. COMMAND, FINANCE, LOGISTICS,OPERATIONS, PLANNING. (CFLOP)

- USE THE VIDEO ON THE NEXT SLIDE.

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You are the Manager on duty when….

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QUESTIONS

- What are the respective responsibilities for each section?
- What level HICS is appropriate?
- Who is responsible for the objectives?
- Create two or three objectives.
- Briefly describe closeout-after action, transfer of command, demobilization as a group.

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- Regulatory Review

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CMS Conditions of Participation

- In 2019, CMS updated its final rule and published its State Manuals and training materials on the Emergency Preparedness rules
- Focus:
  - Strategies the facility has put in place to address the needs of at risk or vulnerable patient populations;
  - Services the facility would be able to provide during an emergency;
  - How the facility plans to *continue operations* during an emergency;
  - Delegations of authority and succession plans;
  - Staff education and training.

CMS
CENTERS FOR MEDICARE & MEDICAID SERVICES

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Joint Commission

- 2022 changes to the Emergency Management and Leadership standards include:
  - *New* written plans for:
    - Emergency Management Program
    - **Continuity of Operations** (identification of mission essential functions, impact analysis, delegation of authority, succession planning)
    - Emergency response staffing
    - Disaster Recovery
  - Organizational support (hospital leadership participation)
  - EM Committee
  - Staff Education and Training

The Joint Commission

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NYS Surge and Flex Adopted Elements

- *"The 'Surge and Flex' system is designed to create a single, coordinated statewide public healthcare system to prevent a disaster from overwhelming any one hospital in the state"*

- At the Commissioner's direction, which shall be incremental and geographically targeted
  - Increased Bed Capacity –require Hospitals to increase by up to 50%
  - Non-Essential Elective Procedures - postpone up to 100% of non-essential elective procedures

- Emergency Operations Plans updated and exercised annually

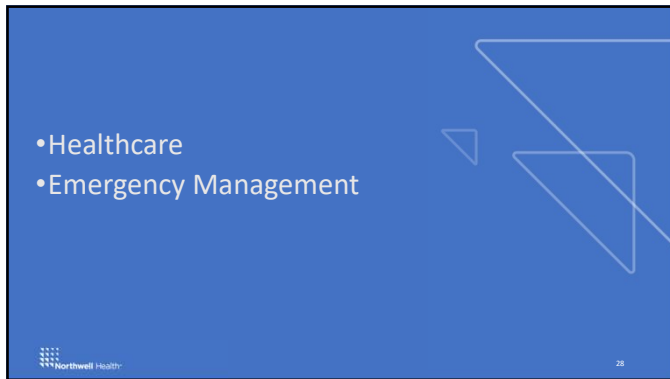- Inventory Mandates for Medical Supplies and PPE

NEW YORK STATE OF OPPORTUNITY. | Department of Health

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WHY ARE WE DOING THIS?

- **CMS** and **Joint commission requires you** to use an incident management system to manage disasters then they required you to train your employees to be able to perform in a role they are expected to play during an incident.
- -**Joint Commission** also requires you to comply with rules, laws, and standards set by local "authorities having jurisdiction " over your facility. **NYS has authority over hospitals and has established thru Executive Law Article 2B that requires the use of the incident command system during all state declared disasters, public health emergencies and any locally declared disasters.** Further NYS has fully adopted the NIMS requirements which includes the mandatory adoption of the use of ICS AND its standard principles and practices.
- -**NIMS states that all entities that receive federal money** (grants, reimbursement, under contract, etc.) are required to manage disasters with the standards, principles and practices of the ICS AND staff are required to be trained to the level and role they are expected to play
- -**OSHA** requires the use of ICS to manage all haz mat spills
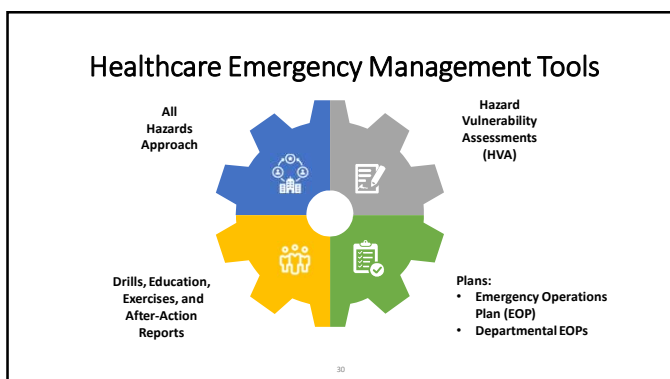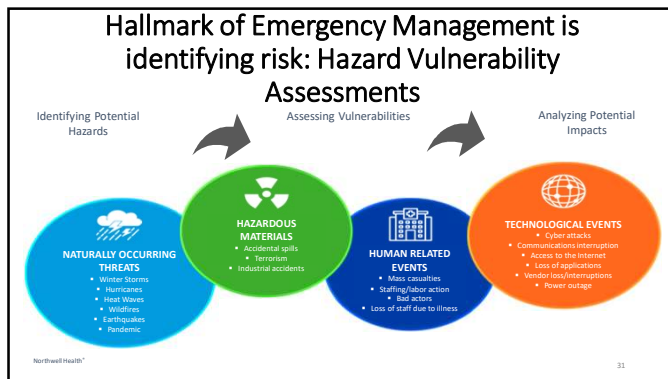- -**NFPA 1600** also as a consensus standard **recommends** the use of ICS to manage all disasters in businesses

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Healthcare
Emergency Management

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Healthcare Emergency Management

- The **function of** Emergency Management is to **lead** and **support** healthcare facilities in a comprehensive management program of **preparedness**, **response**, **containment**, **mitigation**, and **recovery**.

Protect life and **reduce loss** of life

Protect the **facility** and **property** from hazards

React to the **needs of the community**

Continue to **provide services** to our patients

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Healthcare Emergency Management Tools

All Hazards Approach

Hazard Vulnerability Assessments (HVA)

Drills, Education, Exercises, and After-Action Reports

Plans:
- **Emergency Operations Plan (EOP)**
- **Departmental EOPs**

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Hallmark of Emergency Management is identifying risk: Hazard Vulnerability Assessments

Identifying Potential Hazards → Assessing Vulnerabilities → Analyzing Potential Impacts

NATURALLY OCCURRING THREATS
- Winter Storms
- Hurricanes
- Heat Waves
- Wildfires
- Earthquakes
- Pandemic

HAZARDOUS MATERIALS
- Accidental spills
- Terrorism
- Industrial accidents

HUMAN RELATED EVENTS
- Mass casualties
- Staffing/labor action
- Bad actors
- Loss of staff due to illness

TECHNOLOGICAL EVENTS
- Cyber attacks
- Communications interruption
- Access to the Internet
- Loss of applications
- Vendor loss/interruptions
- Power outage

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Identify the hazards and risk at the Unit Level...
What if scenarios...:

- Rapid Response for a patient
- Flood in the unit
- HVAC doesn't work
- Spill in the unit
- Multiple Staff are unable to work
- Loss of phones
- Loss of internet
- Loss of the EMR
- Your biomedical equipment doesn't work
- Violence in the unit (active shooter, fight, weapon)
- Fire in a patient room
- What if you had to evacuate all the patients from your unit

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Partners Involved in Disaster Planning

- Law Enforcement
- Fire Service
- Emergency Medical Services (EMS)
- Public Works/ Utility Companies
- Mental Health Resources
- Shelter and Relief Agencies
- State and Federal Resources
- (NDMS, DMAT)

- Hospital Coalitions
- Medical Reserve Corps
- Disaster Medical Assistance Teams
- Disaster Mortuary Teams
- Veterinary Medical Assistance Teams
- Nongovernmental Agencies (NGO)
- Volunteers

PSEG American Red Cross Northwell Health

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Leadership During Crisis Management Incidents

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The Leader Role in Crisis Management

- *"Our changing world is filled with volatility, uncertainty, complexities, and ambiguities (VUCAs).*

-

- *The VUCA concept constantly reminds us of the dynamic state of the world and everything around us. Volatility is the speed of change…Uncertainty represents the unpredictability of every situation….Understanding and embracing the complexity instead of fighting against it can help best prepare nurse leaders for their role in crises…*

- *Ambiguity is the lack of clarity. A VUCA world requires brave, courageous, assured, agile and bold leadership."*

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Emergency Preparedness

Role	Core Competencies Unit Level / Facility Level /Hospital Operations EOC Surge Areas / Alternate care Sites	
Preparedness	Review unit's Departmental Emergency Operations Plan (DEOPS), locate Downtime forms binder, Downtime computer Staff participation in Emergency Management training / exercises Monthly 'Resiliency Rounds'	
Response	• Maintain the "C's" calm confident caring communication	
Recovery	• Return to 'Normalcy' Coordinate unit re-occupancy • Back load documentation when necessary (EMR Downtime) • Track all expenditures, overtime, agency use • Debrief with staff for opportunities to improve or, any lessons learned	

Leaders, with other executives, are expected to take charge and make critical time-sensitive decisions for the organization when disasters occur. They should review actions taken during previous unanticipated situations to determine what measures were successful and what improvements are needed."

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Contact Us with Questions!

Visit our Website: https://www.northwellcrisismanagement.com/
Email us with Questions: CrisisManagement@northwell.edu

https://www.fema.gov/disaster   https://www.fema.gov/pdf/plan/glo.pdf

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Thank You

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July 22, 2025

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