

UNIVERSITY OF TOLEDO

SUBJECT: EMERGENCY PREPAREDNESS DRILLS

Procedure No: EP-08-006

PROCEDURE STATEMENT

Emergency preparedness drills will be conducted on a regular basis at the University of Toledo and at all associated clinics.

PURPOSE OF PROCEDURE

To ensure that all employees know how to respond to a variety of emergency situations in a safe, consistent manner; to ensure that the University of Toledo meets the requirements of Joint Commission standard EM.03.01.03, other national standards and regulations, and internal requirements for emergency preparedness drills.

PROCEDURE

HEALTH SCIENCE CAMPUS

Emergency preparedness/evacuation drills will be conducted at least twice in each calendar year in the main Hospital.

Emergency preparedness drills will be done as required by EM.03.01.03.

Emergency preparedness drills may be conducted in the form of tabletop and/or functional exercises. At least one drill per year will involve the hospital receiving simulated or real patients.

Emergency preparedness drills will be conducted annually in the Biocontainment Facility as required by the CDC and USDA.

Real events can be substituted for exercises as long as they meet the requirements set in this procedure.

Emergency preparedness drills will usually assess employee knowledge and response in one of the following scenarios, or in an area set forth in the Hazard Vulnerability Assessment.

- Disaster Exercise/Drill - activation of Hospital Incident Command System (HICS) (All Hazard Command Structure)
- NBC (Nuclear, Biological, Chemical incident)
- Epidemic/Pandemic
- Active Shooter
- Missing Admitted Adult Patient
- Missing Child
- Mass Casualty Incident
- Loss of Electrical Power
- Severe Weather
- Code Yellow

MAIN CAMPUS

Emergency preparedness drills will be conducted on a regular basis in conjunction with UT Police in the following areas and by special request.

- Residence Halls
- High risk research areas (R1)

EVACUATION

The evacuation component of all emergency preparedness drills will be timed when appropriate to assess how long it takes to safely implement evacuation of a particular location.

Any deficiencies or problems noticed by UT Police during the routine evacuation drill will be written on the University of Toledo Drill Sheet Assessment Form, and brought to the immediate attention of the supervisor or building manager for follow-up, correction or education as needed to resolve the issue.

EVALUATION

All evaluations will examine the six critical areas for emergency drills and document accordingly as follows:

1. Patient Management
2. Communication
3. Resource Mobilization and Allocation
4. Safety / Security
5. Utility Management
6. Staff Responsibilities

For larger, more complex drills, an evaluator and/or controller will be assigned with a checklist to review critical aspects of the drill.

- This evaluation/critique will be reviewed and discussed at an After Action Meeting (hotwash) and assignments will be made to individuals for specific actions that must be taken during the recovery portion of the drill.
- Planned exercise scenarios are to be realistic and related to the priority emergencies identified in the Hazard Vulnerability Analysis.
- Clinical related drills are critiqued with the input of administration, clinical and support staff.
- Improvements instituted after drills should be tested to ensure the planned changes are effective.
- Emergency Preparedness Task Force is responsible for planning and evaluation of drills and for instituting changes. (The Task Force shall be composed of a multidisciplinary group from both clinical and non-clinical departments, and administrative leadership.) All disciplines will have input.
- Items changed during the previous drill will be re-evaluated to ensure the changes to the plan were effective. (When improvements cannot be made by the next scheduled drill, interim changes will be put in place and be evaluated accordingly.)
- Emergency Preparedness Exercises/Drills strengths and weaknesses will be reported to the Emergency Preparedness Task Force of the Safety & Health Committee.

Source: Safety & Health Committee

Effective Date: 4/1/99

Review/Revision Date: 3/16/02
4/30/03
2/2/05
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