



Hospital Evacuation Toolkit

Background

- Hospitals are required to have medical surge and evacuation plans
- Hospital evacuation can be conducted in various ways – horizontal or vertical, full or partial, inside or outside of the facility/system
- Hospitals have triggers to base their decisions with primary focus on patient safety
- Evacuations may be triggered because of a critical infrastructure failure or impending failure, damage to the facility or accessibility issues

Purpose: The purpose of this checklist is to guide hospital leaders and command staff with ensuring their facility evacuation plans are inclusive of critical decision points from initiation of an evacuation, throughout the operational phase of evacuation and into the recovery after executing an evacuation. This document not only provides a checklist of action items to consider, it also includes recommended key players to involve in developing the plan, exercising/testing the plan and their possible role during an actual response.

Regulatory Compliance

- The Joint Commission – EM.02.02.11, EP3
- CMS Emergency Preparedness Rule - Policies & Procedures based on an emergency plan that incorporates the “*safe evacuation from the hospital*”
- Hospital Preparedness Program (HPP) Grant requirement – each healthcare coalition must conduct a coalition surge test (CST) based on a low/no notice event scenario, working towards evacuating 20% of a regions’ acute care patient population

Hospital Evacuation Plan Checklist

The table below includes a column of suggested considerations, reference materials and stakeholders that may provide valuable input to the evacuation planning protocols unique to Louisiana hospitals. These are considered suggestions only and are to be utilized and incorporated as needed and at the discretion of facilities.

Initial Decision Making & Incident Management	
Assessment of Initial Priorities Following notification of a threat and/or disaster event, does your plan specify:	Louisiana Hospitals References, Considerations, & Stakeholders
<input type="checkbox"/> How a threat assessment is being performed?	Hazard Vulnerability Assessment
<input type="checkbox"/> Who is assessing critical infrastructure and key resources?	Facilities Manager, Unit Manager
<input type="checkbox"/> How to automatically conduct & submit unit-level and/or damage reports to hospital leadership?	Internal notification systems
<input type="checkbox"/> The trigger for units to submit damage reports?	
<input type="checkbox"/> Who is compiling the damage reports and how long it will take?	Facilities Manager, Unit Manager, ICS staff
<input type="checkbox"/> How long it will take to perform an assessment of the hospital's operational capabilities?	
Establishment of Incident Command Structure Does your plan specify:	Louisiana Hospitals References, Considerations, & Stakeholders
<input type="checkbox"/> How you will rapidly compile, verify, and share information/reports?	Internal notification systems or protocols ; ICS staff
<input type="checkbox"/> When you will need your first Incident Action Plan (IAP) to be completed?	HICS forms 200, 215A
Determination of Evacuation Trigger Points and Type of Evacuation Does your plan specify:	
<input type="checkbox"/> Specific trigger points that you will use to decide whether to evacuate?	Evacuation Plan, Incident Commander (IC)
<input type="checkbox"/> Formalized "pre-evacuation" stages with defined actions?	Evacuation Plan Protocols and Checklists
<input type="checkbox"/> Any alternatives to evacuation that you can use?	Facilities Manager, IC, Situation dependent
<input type="checkbox"/> Distinct type of evacuation? (staging, partial/entire unit, partial/entire building, vertical or horizontal etc.)	Facilities Manager, Unit Manager, Situation dependent
Authority to Make Evacuation Decisions Does your plan specify:	
<input type="checkbox"/> If the staff or any other designated personnel have the authority to completely vacate an adjacent (unaffected) unit in case of a possible immediate life threat (i.e. Fire) if they perceive an impending threat?	Unit Manager, Facilities Manager
<input type="checkbox"/> A predefined location to evacuate to?	Evacuation Plan Protocols and Checklists
<input type="checkbox"/> If multiple units are to evacuate, prioritization and assignment of available alternative space or sites?	Facilities Manager, Unit Manager, IC

<input type="checkbox"/> Someone on-site 24/7 who has the authority to order a partial or full evacuation?	House Supervisor, IC
<input type="checkbox"/> Input/influence outside agencies will have on hospital decisions? (LDH, regional ESF8 coordinators, local fire, etc.)	LDH Health Standards, OSHA, JC regulations, Pre-identify impact of regulatory bodies on response and recovery operations, ESF8 partners, regional Healthcare Coalition partner (Hospital, Public Health and EMS Designated Regional Coordinators)
Contact with Local public Safety Incident Command System(s), Surrounding Communities, & Other Response Partners Does your plan specify:	Louisiana Hospitals References, Considerations, & Stakeholders
<input type="checkbox"/> Mechanisms to use in sending/receiving information from local public safety and regional health and medical response partners?	ESF8 Portal, LERN Notification Hospital & Administrative Designated Regional Coordinators (DRCs)
<input type="checkbox"/> Types of information needed from local public safety or ESF 8 regional health and medical response partners?	Pre-identify Essential Elements of Information
<input type="checkbox"/> Other partners with whom you are to communicate with? How you will communicate with them?	LERN, EMS DRC, Hospital DRC, other local first responders (e.g. law enforcement, fire, parish OEP)
<input type="checkbox"/> What specific information needed from other response partners?	Pre-identify Essential Elements of Information
<input type="checkbox"/> What information is needed to share with other response partners?	Pre-identify Essential Elements of Information

Evacuation Operations	
Primary Operational Objectives in Conducting a Rapid Response Hospital Evacuation Does your plan specify:	Louisiana Hospitals References, Considerations, & Stakeholders
<input type="checkbox"/> Your primary operational objective?	HICS forms 202, 255, Life safety, patient tracking HICS command staff
<input type="checkbox"/> How these objectives are communicated to staff?	Assess communications capability and consider pre-scripting plain language messaging
<input type="checkbox"/> Which section of your IC structure is primarily responsible for each objective?	HICS forms 204 & 207
Hospital Departments Involved in the Operation	
<input type="checkbox"/> The respective roles of hospital departments involved in evacuation operations?	Evacuation Plan, Pre-identify organization and assignment of responsibilities
<input type="checkbox"/> Roles for departments not directly involved in evacuation?	Ancillary staff, labs or outpatient staff

Roles of Partner Agencies	Louisiana Hospitals References, Considerations, & Stakeholders
<input type="checkbox"/> The operational support your partner agencies can be expected to offer?	Conduct tabletop exercise to identify external response partners
<input type="checkbox"/> The specific resources available to you from your partner agencies?	After Action Reports, Meet with external partners to vet potential resources, Fire, Law Enforcement, DRC network
<input type="checkbox"/> How soon the external assets will be expected to be available?	
Primary Methods of Communication	
<input type="checkbox"/> Your Primary methods of internal and external communication?	COOP plan, Emergency Operations Plan
<input type="checkbox"/> How you will communicate the evacuation decision to staff, patients & families?	Consider pre-scripting plain language messages
<input type="checkbox"/> How will you communicate change to the plan as they occur?	
Establishment of Appropriate Security	
<input type="checkbox"/> Priorities for hospital security at initiation of evacuation operations?	Meet with external partners, Local Law Enforcement, Fire
<input type="checkbox"/> Are there adequate resources to maintain security at all operational sites?	
<input type="checkbox"/> Additional options for security and crowd control other than local law enforcement?	
<input type="checkbox"/> How these resources will be accessed and who has authority over them?	
<input type="checkbox"/> How this will be coordinated and supervised?	
<input type="checkbox"/> How traffic will be managed?	
<input type="checkbox"/> If discharge/egress routes will be segregated from transfer departures? (Include alternate routes for both)	
<input type="checkbox"/> How to maintain security for special patient populations? Including infants, children, psychiatric patients and prisoners	
Triage and/or Prioritization for Evacuation	Louisiana Hospitals References, Considerations, & Stakeholders
<input type="checkbox"/> Standards for triage within the institution? Are they known to providers?	
<input type="checkbox"/> If units should perform and report a manual patient census prior to evacuation?	ESF8 portal Bed Poll, Hospital DRC, Unit Manager, IC
<input type="checkbox"/> How and to whom should the census report be provided?	ESF8 portal-Bed Poll,
<input type="checkbox"/> How evacuation triage is prioritized: acuity, mobility status, location of the unit within the hospital, availability of a known transfer destination – or some combination?	ESF8 portal-At Risk Registry
<input type="checkbox"/> Who will be tasked with making triage decisions? Have they received formal training on the evacuation plan or triage standards?	Identify triage training needs once roles and responsibilities are identified, Nurse leaders, unit managers, staff nurses
<input type="checkbox"/> How triage and information will be compiled and incorporated into IAPs?	

<input type="checkbox"/> Mechanism to allow for re-triage and resuscitation if necessary if patients deteriorate during or while waiting for evacuation?	
<input type="checkbox"/> How triage will change if elevators are not operational?	ECMO patients and ICU patients during power outage
<input type="checkbox"/> How patients on specific types of medical equipment are prioritized for evacuation?	ECMO machines, balloon pumps, vents and anything with a limited battery
<input type="checkbox"/> How you will compile a list of available assets by quantity and location? (oxygen, IV pumps, suction machines, etc.)	Planning section chief or Materials Management staff
<input type="checkbox"/> How patients are prepared for transfer?	Develop patient packaging protocol, Physician and nurse leaders, pharmacy, unit managers, staff nurses, materials manager
<input type="checkbox"/> If patients receive a supply of needed medications for the next 8-12 hours to support during transfer?	Physician and nurse leaders, pharmacy, unit managers, staff nurses, materials manager
<input type="checkbox"/> Patient medical and medication records and instructions for EMS or receiving facilities for next 8-12 hours?	Include in patient packaging protocol
Patient Tracking System (including patient records)	
<input type="checkbox"/> Multiple check-in/check-out data collection points throughout the evacuation process?	
<input type="checkbox"/> How check-in/check-out data are collected and centrally reported?	
<input type="checkbox"/> How tracking information will be available to patient's treating clinicians – sending and receiving?	
<input type="checkbox"/> How tracking information will be available to patient's family?	At Risk Registry, public search function
<input type="checkbox"/> Are there redundant mechanisms for patient tracking? (i.e. power or internet failure)	HICS form 260, Develop paper based back up system for tracking patients, Core planning team (e.g. physician and nurse leaders, pharmacy, unit managers, staff nurses, materials manager, unit clerk)
<input type="checkbox"/> Who is responsible for compiling and securing patient records?	
<input type="checkbox"/> If/how the patient tracking system integrates into current EMS patient tracking tools?	
Patient Destination Planning	
<input type="checkbox"/> How transfer beds will be identified and secured for evacuated patients?	Louisiana ESF8 Health and Medical Preparedness and Response Network Coalition, LERN, EMS DRC, Hospital DRC, facility IC staff, etc.
<input type="checkbox"/> Who will carry out the task of finding beds, apart and separate from patient tracking activities?	
<input type="checkbox"/> How point-to-point communication will occur between hospitals and with whom?	
<input type="checkbox"/> Redundancies in knowing the patient's destination?	At Risk Registry, paper-based tracking system

<input type="checkbox"/> Is there a preference for hospitals within your system or region when determining patient destinations?	
<input type="checkbox"/> Measures in place to identify hospital transfers for special populations – i.e. burn, NICU and other specialty services?	Unit leaders, unit clerk, IC staff
<input type="checkbox"/> The role of healthcare coalition leads in destination planning - Hospital and EMS Designated Regional Coordinators (DRCs) and Public Health Emergency Response Coordinators (PHERCs)	HCC Response Plan, Consider socializing hospital evacuation plan with HCC partners, participate in a coalition surge test
<input type="checkbox"/> How the hospital IC structure will coordinate and communicate with relevant external agencies?	
Patient Staging (Assembly Point)	
<input type="checkbox"/> Pre-identified staging areas for all/majority of patients external to the facility?	
<input type="checkbox"/> Are staging areas usable year-round? Are there exposure issues if outdoor?	
<input type="checkbox"/> Is there emergency power at these staging sites to support medical equipment?	HCC Response Plan, Collaborate with HCC partners to identify and fill resource requests
<input type="checkbox"/> A resuscitation area or route to support a patient who decompensates during transfer?	
<input type="checkbox"/> How patients will receive ongoing care during evacuation (i.e. medications, fluids, etc.)	
<input type="checkbox"/> Special measures are in place for acute or critically ill patients?	
<input type="checkbox"/> Special measures are in place for pediatric and neonatal patients?	
Patient Discharge	
<input type="checkbox"/> How staff oversee the process of discharge?	Include Case Management or Social Workers;
<input type="checkbox"/> Where patients will be assembled while awaiting family/transport after discharge?	
<input type="checkbox"/> A mechanism to discharge patients who simply leave the hospital during an evacuation and how these patients are noted?	
Patient Movement and Support	
<input type="checkbox"/> Who will carry out the physical movement of patients from the care units to assembly points or egress routes?	How can ancillary staff be used to support various aspects of patient movement?
<input type="checkbox"/> Mechanism in place for patient movement if the elevators are not operational?	Stair Chairs, back-up generators for elevator(s); Fire Department and Law Enforcement
<input type="checkbox"/> How is patient mobility level assessed and who decides if ambulatory levels can be modified during an emergency?	
<input type="checkbox"/> Do you own stair transport equipment? Where is it stored and who retrieves it?	Consider exclusions e.g. ECMO patients
<input type="checkbox"/> Is staff trained to “package” patient medical equipment for stair transports?	
<input type="checkbox"/> How long will full stair evacuations take?	Collaborate with law enforcement and fire departments
<input type="checkbox"/> How will prioritization and communication with different floors for evacuation take place?	

<input type="checkbox"/> Estimation of transit time for patient from original bed to destination? And if the patient supplies/medication will last for the longest estimated transit time?	
<input type="checkbox"/> Where will EMS meet the patients – outside the facility or will they come to the unit?	If no-notice event, may need to meet EMS to hand-off patient to save time
<input type="checkbox"/> How EMS knows the destination of the patient?	Patient Tracking Cell/Patient Tracking Coordinator(s) in communication with EMS Liaison/EMS DRC
<input type="checkbox"/> If hospital medical staff is to accompany certain patients and how they will return to the main campus?	Collaborate with HCC partners to identify and fill resource requests
<input type="checkbox"/> Is hospital medical staff able to practice at other hospitals?	Hospital policies on volunteers
Resources Needed for Evacuation Operations	
<input type="checkbox"/> Additional equipment required?	
<input type="checkbox"/> How resources are tracked and located as they are used?	
<input type="checkbox"/> Who is managing the labor pool and assessing the labor needs?	
<input type="checkbox"/> Identification of staff capable of performing heavy physical labor?	
<input type="checkbox"/> Methods for addressing staff mobility issues?	
<input type="checkbox"/> Methods of patient transport that will be utilized to execute transfers?	
<input type="checkbox"/> With whom you are coordinating regarding the transport of patients?	
<input type="checkbox"/> Roles other agencies will play in the hospital evacuation? How they will be coordinated?	
<input type="checkbox"/> Do outside agencies have adequate resources to assist?	
<input type="checkbox"/> Support outside agencies can offer?	
<input type="checkbox"/> Does your organization have enough resources?	
<input type="checkbox"/> What Mutual Aid Agreements are in place to support this kind of operation?	
<input type="checkbox"/> How patient and staff safety will be monitored during operations?	
<input type="checkbox"/> Who stays behind to secure the hospital? Shift change if this is prolonged?	
<input type="checkbox"/> A checklist of items to be secured during/after evacuation? (i.e. pharmacy, utilities, etc.)	

Recovery	
Recovery Objectives	Louisiana Hospitals References, Considerations, & Stakeholders
Does your plan specify:	
<input type="checkbox"/> Your recovery priorities and who determines these priorities?	Administration, Incident Command staff
Process of Reopening the Facility	
<input type="checkbox"/> Who has the authority to reopen the facility and who is involved in the process?	LDH Health Standards, OPH Sanitarian, State Fire Marshal
<input type="checkbox"/> Defined triggers for reopening?	COOP plan, LDH Health Standards, OPH Sanitarian, State Fire Marshal
<input type="checkbox"/> The process used to appraise the status of the hospital and what functions that must be in place before returning?	
<input type="checkbox"/> The resources needed for the re-entry process?	
<input type="checkbox"/> If it is possible to return to the hospital before the facility is fully operational?	
<input type="checkbox"/> The security considerations that should be factored into the decision to reopen?	Safety of staff, local law enforcement as back up security may be limited depending on event and impacts to community
<input type="checkbox"/> If there are enough resources/personnel to assist in the recovery?	
Communication During Recovery	
<input type="checkbox"/> Who you are communicating with at this point in time?	Designated Regional Coordinators (DRCs)
<input type="checkbox"/> How hospital staff will be notified about the reopening?	Internal communications systems
<input type="checkbox"/> How you will notify the public that the hospital is reopened for business?	
<input type="checkbox"/> What role partner agencies will play in repopulating the hospital facility?	May be different depending on long-term vs. short-term, vertical vs. horizontal, and other impacts to community