

DEPARTMENTAL RESPONSIBILITIES

ADMINISTRATION

- A. President or VP will serve as Incident Commander
- B. VP will serve as Section Chief if activated
- C. Medical Staff Coordinator will serve as Credentialing Unit Leader

ADMITTING, PBX

- A. Coordinator will serve as Patient Registration Unit Leader and will check with Medical Care Branch Director for briefing and completing HICS Job Action Sheet.
- B. Provide additional support to PBX – (1).
- C. Provide two recorders for the Emergent area (All Emergency Rooms). The recorder will be responsible for retrieving admitting pads and pencils and disaster tags from the Emergency Department.
- D. The Admitting Office is also responsible for coordinating admissions with the Emergency Department Clerk.
- E. The PBX operator will route all calls regarding patients to the Patient Information Center (Administrative Suite ext. 8174).
- F. Set up E#'s to be used for victims upon arrival.
- G. Waveware "All Call" to NICU and Respiratory Care – "Code Yellow or Orange".

AMBULATORY CARE CLINICS

- A. The Clinics will receive Non-Urgent patients that are sent from the Emergency Department.
- B. One Clinic RN will obtain expectant drug box from pharmacy and set up expectant area on 3rd Floor Clinic.
- C. 2nd Floor Clinic (or OPS) may be used as holding area for admissions as designated by ICC.

BIOMED

- A. The Manager will serve as the Medical Devices Unit.

CENTRAL SERVICES

- A. Deliver disaster equipment / supplies from the designated disaster storage area in MOB, Primary Care, or Cafeteria storage areas when requested and assist with the setup in disaster treatment areas as requested.
- B. The D elevator may be used in distribution of supplies.
- C. Order additional supplies from storeroom and sterilize as necessary.
- D. Collect all reusable supplies and process when feasible.
- E. Record all phone requests for supplies.

CHILD LIFE

- A. Director of Child Life or designee will serve as Family Care Unit Leader and set-up area in Cafeteria for children waiting on family to arrive for discharge. Notify Incident Command at 8119 when area is ready to receive patients.
- B. Send one Child Life Specialist to Non-Urgent Treatment Area (Clinic).

CHILDREN'S PEDIATRIC GROUP

- A. The emergency room physicians on duty will be notified by the Medical Director of the Emergency Department (or designee) of their patient care responsibilities during the disaster. They should continue to care and make dispositions on all patients currently in the Emergency Department. The Medical Director of the Emergency Department under the direction of Vice President for Medical Services will determine the need to call in additional physicians.
- B. The inpatient physician(s) on duty should remain on the floor and proceed with patient assessments for potential discharge and for continued forward movement of patients. The Medical Director of the Inpatient Service (or designee) under the direction of the Vice President for Medical Services will notify physicians of any additional duties and will determine the need to call in additional inpatient physicians.
- C. The Fast Track physician(s) should continue to care for and make dispositions on all patients in the Fast Track. Any further disaster responsibilities will be determined by the Medical Director of the Emergency Department (or designee).

COMMUNITY RELATIONS

- A. Director or Associate Director of Public Relations will report to Incident Command Center (Administration) and serve as Public Information Officer.
- B. If media representatives arrive, assist them as appropriate in the Plaza Conference Room 1, Koppel Plaza, Community Relations staff (1). Notify Incident Command at 8119 when area is ready to receive media.
- C. Associate Director Guest Relations will serve as Unit Leader for Claims/Complaints.

CREDIT, COLLECTIONS AND BILLING

- A. The Director of the Business Office will serve as Business Function Relocation Unit Leader, if necessary.
- B. Provide two transporters who will report to Security to pick up radios and then to the Emergent area (Emergency Department) until their service is needed.
- C. Provide one transporter to pick up radio and report to urgent area Fast Track until service needed.

DEVELOPMENT

The Director of Development, or designee, shall ensure proper traffic control at the Main Entrance of the Koppel Plaza and allow only authorized persons to enter the building. Personnel reporting for duty will enter the building. Personnel reporting for duty will enter through this entrance only and must be prepared to show hospital photo name badges.

EDUCATION

Director of Education reports to the Administrative Suite and serves as the Situation Unit Leader. Medical Staff Coordinator area is set up as the Patient Information Center. Patient Tracking and Bed Tracking information is accessed on the computer via ER Tracker and Meditech Order Entry. If computer is down, information will be sent via fax or runner. Notify Incident Command at 8119 upon arrival. Notify Red Cross of victims' names when available.

EMERGENCY DEPARTMENT

- A. The nurse in charge will:
1. Ensure prompt notification of Nursing Administration.
 2. In collaboration with the physician on duty, assess patients currently in the department to determine which can be discharged and which may need to remain for definitive care.
 3. Ensure the directional signs are posted and assign staff to establish the Triage area (Ambulance Entrance).
 4. Ensure that disaster tags are brought to the Nurses Station.
 5. Ensure that a staff member familiar with radio operation is assigned to the Emergency Department Communication Center.
 6. Ensure that a Unit Secretary is assigned to each Pod.
 7. Check all ED areas that they are staffed (Triage, Emergent, Urgent).
 8. Notifies Staff Deployment/Personnel Tracking of any staffing needs at ext. 8138 or ext. 8261.
 9. Assign someone responsible for sending patient information to the patient information center if ER tracker is down.

ENGINEERING / MAINTENANCE

Upon notification of disaster, Engineering / Maintenance staff will:

- A. Director will report to ICC and serve as The Safety Officer.
- B. Lock all outside entrances except the Main Entrance to the Koppel Plaza and Ambulance entrances and Main Hospital Entrance.
- C. Assist in providing security surveillance.
- D. Assist in providing crowd control.
- E. The Engineering Manager or designee will serve as The Infrastructure Branch Manager if activated.
- F. An Engineering Tech II will serve as Facilities Unit Leader if Logistics Section is activated.

ENVIRONMENTAL SERVICES

- A. The Director will serve as the ES Unit Leader and receive a briefing from the Infrastructure Branch Manager.
- B. Housekeepers will report to their assigned nursing stations for further instructions.
- C. Environmental Services will deliver linen to the Emergency Department (they do not need to stay).
- D. Two Housekeepers will be assigned to the Emergent area to clean and disinfect rooms in preparation for the next patient. They will maintain a "notification board" indicating room readiness.

FINANCIAL SERVICES

VP Finance or Contoller will report to ICC and serve as the Finance Section Chief. The Payroll Manager, Account Manager, General Accountant will receive a briefing from The Chief if their section is activated.

FLOAT / RESOURCE STAFF

Remain in assigned area or report to Staff Deployment Center in Nursing Administration Department. For Code Orange – Report to DECON area. Resource RN will report to Emergent Area.

FOOD AND NUTRITION SERVICES

- A. The Director will serve as The Food Services Unit Leader. The Administrative Dietician will serve as Staff Food and Water Unit Leader if Logistics Section is activated.
- B. Food and Nutrition Services will be responsible for providing beverages and food for employees and patients' families.
- C. The Director shall also assign two employees to report to the Triage area (Ambulance Entrance) as transporters. The transporters will pick up radios at the Security desk.

HEALTH INFORMATION MANAGEMENT

- A. The Director of Medical Records or designee will serve as The Records Preservation Unit Leader if activated.
- B. Two (2) employees will report to the Emergency Department to serve as recorders, one (1) in the Urgent area - Fast Track and one (1) in Non-Urgent area (Clinic).
- C. Recorders will distribute patient tag information copies to the Patient Information Center in Administration. Use numbers to designate unidentified victims, i.e. Jane Doe A, Jane Doe B – Z, then Jane Doe AA – ZZ if needed.

HOME HEALTH

- A. Home Health staff will report to the Home Health office or via telephone to the Coordinator or Director.

HUMAN RESOURCES / PERSONNEL

- A. The Employee Health Coordinator or Nurse will serve as The Employee Health Unit Leader if activated. Vice President for Human Resources will report to ICC and serve as Director of the Support Branch for employees.
- B. Employment Coordinator will report to decontamination area if Code Orange is called.
- C. Send one representative to the Staff Deployment Center (Nursing Administration) to assist as needed with the assignment of staff. Bring employee rolodex.
- D. Provide assistance to Department Directors in locating personnel.
- E. The Compensation and Benefits Manager or Employment Coordinator will serve as The Labor Pool and Credentialing Unit Leader if activated.

INFECTION CONTROL

The Director will serve as The Pandemic Flu Coordinator.

INFORMATION SYSTEMS MANAGEMENT

- A. The Director will serve as The Business Continuity Branch Director if this branch is activated under operations.
- B. The Telecommunications Manager will serve as The Communications Unit Leader if branch is activated.
- C. A Systems Analyst will serve as the IS Unit Leader if Service Branch is activated.
- D. Prepare for possible downtime procedure. Send (1) IS employee to Decon area (Code Orange).

LABORATORY

- A. Upon notification of disaster, a list of available blood products shall be made and called or faxed to the Emergency Department Communication Center (8236).
- B. One Phlebotomist shall report to the Emergent area (Emergency Department) and one shall report to urgent area Fast Track.
- C. All non-critical lab results will be tubed or faxed to ED. Do not call results unless critical.

MATERIALS MANAGEMENT / PURCHASING

- A. The Director will serve as The Support Branch Manager if the Logistics Section Branch is activated. Dispense supplies to appropriate areas as requested.
- B. The Inventory Clerk will serve as The Supply Unit Leader if the Support Branch is activated.
- C. The Purchasing Manager will serve as The Material Tracking Manager when the Resource Unit is activated.

NEUROLOGY LAB

- A. The Director will serve as The Clinical Support Services Unit Leader and receive a briefing from The Medical Care Branch Director.
- B. Send (1) Tech to Decon area (Code Orange).

MARKETING / PHYSICIAN SERVICES

- A. Staff member reports to Cafeteria for family care responsibilities.

NICU

- A. One NICU RN will report to the non-urgent area (Clinic). ANM will report to DECON area for Code Orange.
- B. One NICU PCA will report to Decontamination (Code Orange).
- C. Follow the Discharge Plan previously outlined in Nursing Unit, C & D, utilizing neonatologists as discharge physicians.
- D. One NICU clinician will report to Emergent area (Emergency Department).
- E. The Transport Tech will serve as The Transportation Unit Leader if Support Branch is activated.
- F. One LPN or RN will report to Discharge Holding Area (Cafeteria). LPN or RN is responsible to review Discharge Plan from the chart with parent/legal guardian when they arrive to pick up the patient. Verify the parent's identity by checking chart with personal identification.
- G. One NICU Unit Secretary will report to the Fast Track (Urgent Area).

NURSING ADMINISTRATION

When notification of disaster is received, the Nursing Director of Critical Care Services or Nursing Coordinator will notify Administration and then report to the Communication Center (Emergency Room). The following information should be relayed to Administration:

- A. Type of disaster.
- B. Location.
- C. Number of casualties.
- D. Types of casualties.
- E. Estimated time of arrival.

The Nursing Coordinator will serve as Incident Commander until relieved of this responsibility. The following information must be compiled and forwarded to the Emergency Department:

- A. Availability of beds.
- B. Blood products, derivatives and volume expanders.
- C. Types of care we will be unable to provide (i.e., OB/GYN, psychiatry).

When a Code Yellow or Orange is announced, the Director of Critical Care will report to the ICC and will ensure that each treatment area is properly staffed and functioning. (See Staffing Guide for Disaster).

- A. The Director of Support Services will serve as The Resource Unit Leader.
- B. The Nursing Secretary will report to Nursing Administration to set up the Staff Deployment Center/Personnel Tracker.
- C. The Director of Medical Services will report to Decontamination area or as an alternate for CC Director.
- D. The Director of Surgical Services will report to the Surgical Suite.
- E. The EMSC will report to ICC to serve as The Liaison Officer.

NURSING UNITS - Second, Third, Fourth (IPS) & OPS

ALL UNITS – print census for tracking patients.

- A. The Nurse Manager or ANM will serve as The Unit Leader and receive a briefing from The Medical Care Branch Director. The nurse in charge on each unit will assign personnel to prepare one stretcher (obtain from PACU if necessary) with IV pole, 2 sheets and 2 blankets as well as one wheelchair to be taken to the Triage area (Ambulance Entrance).
- B. One RN from 2nd, 4th will report to the Urgent Area (EDII) and will bring a stethoscope. Two RN's from 3rd will report to Emergent area (Emergency Department).
- C. **The nurse in charge will:** a) assess those patients currently admitted to their unit; b) develop a list of those patients who could be discharged should the need arise (2nd, 3rd, and 4th may use Meditech census); OPS may use the Surgery schedule to compile discharge list. Note on the list "Home Health Needs" if applicable.
***Send copies of the discharge list with parent/guardian names to:**
 - Discharge Holding Area (Cafeteria)
 - Admitting Department
 - Patient Information Center (Administrative Suite)**and return one copy to the unit.**
- D. Outpatient Surgery will prepare for receiving stable pre-op patients as a holding area.
- E. Unit Transporters may be deployed to ED.
- F. Discharged patients will be accompanied by nursing personnel to the Discharge Holding Area (Cafeteria); the patient's chart will be handed to an employee working in the Discharge Holding Area.

- G. As soon as patients are discharged, their families, if present, are to be notified by the nursing unit of the discharge due to a community disaster. Patient families not present at the time a disaster is declared will be contacted by the Patient Information Center and instructed to come immediately to the Cafeteria to pick up the patient.

PACU

The nurse in charge will:

1. Evaluate PACU staffing and assist with airway management in ED, if directed.
2. Prepare for possible PICU overflow to PACU.

PERSONNEL - (See Human Resources) page 4

PHARMACY

- A. The Director will serve as The Staging Manager if activated. Inventory volume expanders (Dextran, Ringers, NS) and call totals to the Emergency Department (8133).
- B. Provide Clinic RN with Expectant Medication Tackle Box (Controlled drugs, needles, syringes).
- C. Re-supply all Omnicell cabinets as requested. Take exchange crash cart to ED as requested.
- D. Provide MARK I Kits to DECON if requested.

PSYCHOLOGIST(S)

- A. The Psychologist(s) will assist with mental health/staff needs of families/patients.

PICU

- A. Nurse Manager will remain in PICU.
- B. The nurse in charge will evaluate patients for potential discharge or transfer (may use census list) to clinical areas; orders will be obtained from the Critical Care Specialist or their designee.
- C. Follow routine procedures including notification of parents if not in attendance.
- D. Send copies of discharge list and/or transfer to:
 - Admitting Office
 - Discharge area (Cafeteria)
 - Patient Information Center (Administrative Suite)
- E. One PICU RN and one Primary Transport RN will report to the Emergent area (Emergency Department).
- F. Critical Care Nurse Practitioner will report to Emergency area (Emergency Department).
- G. PACU beds may be used for PICU overflow.

QUALITY MANAGEMENT

- A. Director or Coordinator serves as The Documentation Unit Leader. Receive briefing from Planning Section Chief. Complete required forms.

RADIOLOGY

- A. RN's in department will notify Personnel Deployment at ext. 8138 of their location.
- B. Two Technologists- will report immediately to the Emergent area (Emergency Department).

- C. One portable x-ray machine will be taken to the Emergent area (Emergency Department) and one portable will remain in Surgery.
- D. Appropriate Nuclear Medicine personnel will be notified in the event of suspected radioactive contamination.

RNs – not assigned to a unit: Report to Personnel Deployment – Lactation Consultants, CNS, Educators, Employee Health nurses.

RESPIRATORY CARE

- A. The Director will serve as the alternate Staging Manager if necessary.
- B. Assemble the decontamination tent if necessary, then report back to the Emergency Department to provide respiratory care to incoming patients.
- C. Inventory Emergency Department respiratory supplies such as portable oxygen tanks and make arrangements for more to be brought to the Emergency Department or delivered to the hospital if needed.
- D. Respiratory Coordinator to inquire as to ventilator availability for incoming patients, and to arrange for rental equipment if needed.
- E. Respiratory Coordinator is to arrange for the call in of off-duty Respiratory personnel if needed and also to insure that the Respiratory Department Director has been notified of the Code Yellow or Orange status.
- F. Assist the ED staff in assessing and managing airway needs.

SECURITY

The Disaster Security Force consists of:

- A. Security officers
- B. Engineering personnel
- C. Director of Development
- D. Controller

The Knoxville Police Department, if called, will assist in traffic control outside the building.

Upon notification of a Code Yellow or Orange all outside entrances, except the Emergency Department, Main Hospital Entrance, and Main Entrance into Koppel Plaza will be locked by Engineering/Security staff. A Security officer will be assigned if possible. Security will free all elevators. Security will provide additional radios for transporters or other staff to pick up.

SERVICE EXCELLENCE

The Manager of Service Excellence will report to the Patient Information Center (Administrative Suite) for patient tracking and bed tracking.

SOCIAL WORK / PASTORAL CARE

- A. The Director of Social Work or designee will establish the area for families in search of their children in the Meschendorf Conference Room. Notify Incident Command upon arrival.
- B. The Director of Pastoral Care or designee will report to the Library to provide support to families of casualties (deaths). Notify Incident Command upon arrival.

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- C. Two Social Workers to report to Library to assist with families of victims.
- D. Two Social Workers to report to ED, (1) to the Emergent Area and (1) to Urgent Area.
- E. Remaining social workers and chaplains will report to the Staff Deployment Center in Nursing Administration.

STUDENT NURSES:

May transport non-critical patients or assist in transporting critical patients.

SUBSPECIALIST OFFICES:

Prepare to discharge or reschedule patients as directed by ICC.

VOLUNTEER SERVICES

Volunteers assigned to the clinical units shall report to their respective stations and await further instructions.

- A. The Director of Volunteer Services and Resources will report to the Meschendorf Conference Room.
- B. Volunteer Service personnel will report to Staff Deployment (1), and to the Cafeteria (2).

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