

To prepare your agency for severely inclement weather, consider taking the following steps, which were provided by Holy Redeemer HomeCare and Hospice in Meadowbrook, Pa. (*See related story in the Feb. 3, 2013 issue of Home Health Line*).

EMERGENCY MANAGEMENT POLICY-SAMPLE

1. Once the decision has been made to implement the emergency management plan, the Director of Nursing / Administrator or designee will initiate the email/phone communication tree. Personnel are to listen to the organization voicemail and read e-mail for organization instructions.

Updates. Additionally, as able, personnel are to report to the office or alternate site if the office building is not accessible and normal communication systems are not working. All routine visits will be suspended or cancelled and patients will be seen in order of priority needs.
2. Alternate roles and responsibilities of personnel during emergencies, including who they report to in the organization's command structure and when activated, the command structure of the region or county, will be identified for the potential emergencies identified in the hazard vulnerability analysis.
3. Following the initiation of the email/phone communication tree, all available and qualified personnel will be mobilized to perform identified services.
4. The Supervisors/Manager or designee(s) will assign category classifications for all current patients.
5. The Supervisors/Managers or designee(s) will assign all available, qualified personnel to care for triaged patients first. Patients who do not receive scheduled care will be notified by phone as soon as possible.
6. In the event of a prolonged emergency situation, the Director of Nursing/Administrator or designee will:
 - A. Determine staffing availability and limitations including assistance available from external staffing agencies.
 - B. Identify those patients who could be discharged from home care earlier than anticipated.
 - C. Determine course of action based on above information.
 - D. Identify patients with continuing care needs.
 - E. Contact other area home care organizations to determine degree to which they may accept new patients if the decision is made to transfer.
 - F. Notify attending physicians regarding recommendations for continued care for patients on caseloads.
 - G. Make transfer or discharge arrangements as indicated, notifying patients and family/caregivers as appropriate.
 - H. In prolonged emergency situations, the organization will retain only those patients for which it can safely and adequately provide care.
7. Safety of patients and organization personnel will take priority in all emergency situations.
 - A. Weather and road conditions will be monitored via local weather reports and state patrol reports.
 - B. Natural or community disasters will be monitored via the Emergency Broadcasting System, Ham Radio, reports from local, regional and state authorities, reports from other local health care facilities in the event there is no telephone communication.
 - C. In the event the office building is determined to be unsafe, the Executive Director or designee will communicate the location via email/phone to which all employees are to report for work.