



Greater New York Hospital Association

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Kenneth E. Raske, President

October
Twenty-Six
2006

ML-246

TO: Chief Executive Officers
FROM: Kenneth E. Raske, President
RE: Recovery Checklist for Hospitals After a Disaster

Working in conjunction with its Emergency Preparedness Coordinating Council, GNYHA has prepared the attached document, "Recovery Checklist for Hospitals After a Disaster." The document is intended to provide a checklist of potential issues for a facility to review after a disaster and is intended to be for internal facility use only. Facilities may choose to use all or part of this document when assessing their operations after a disaster.

This document was supported by a grant from the Federal Health Resources and Services Administration to the New York City Department of Health and Mental Hygiene which awarded funding to the Greater New York Hospital Association. It is based upon documents developed by the Federal Centers for Medicare & Medicaid Services and the Joint Commission on Accreditation of Healthcare Organizations.

If you have any questions, please contact Doris R. Varlese at GNYHA.

cc (via e-mail): Emergency Preparedness Coordinating Council
Compliance Workgroup
Directors, Risk Management
Disaster Committee Chairs
Emergency Department Administrators
Emergency Medicine Chairs
Legal Affairs Committee
Pre-hospital Care Directors
Directors, Engineering/Facilities Management
Directors, Safety
Directors, Security

Recovery Checklist for Hospitals After a Disaster *

This document is intended to provide a checklist of potential issues for a facility to review after a disaster and is not to be construed as recommendations. It is intended to assist facilities in maintaining a safe environment of care. Facilities may choose to use all or part of this document when assessing their operations.

| ISSUE | ACTION ITEMS | YES/NO Initials |
|------------------------------------|--|--------------------|
| Access | 1. Safe access and egress is assured to/from buildings for people and supply deliveries. | |
| | 2. Safe access and egress is assured for ambulances. | |
| <i>Comments:</i> _____ _____ | | |
| Building(s) | 1. Building(s), or parts of building(s) in use, have been declared safe for their intended use by appropriate governmental/regulatory agencies for fire; environment (water and air quality); engineering (Life Safety Code, structural and electrical integrity, environmental controls, medical gas system); etc., as appropriate, prior to their use. | |
| | 2. Community fire fighting services available. | |
| | 3. Appropriate plan for pest control and/or containment. | |
| | 4. Adequate staff and resources to maintain facilities (buildings and facility equipment) currently in use. | |
| | 5. Adequate environmental control systems in place. | |
| <i>Comments:</i> _____ _____ | | |
| Communication: Internal | 1. Adequate call system enabling patients to summon staff for assistance. | |
| | 2. Functional system in place for internal communication with all operational areas of the hospital, including radio system. | |
| | 3. Emergency call system functional to summon assistance to a specific area (e.g., cardiac arrest, fire or security emergency). | |
| | 4. Functional fire alarm system for receiving manual (pull station) or automatic (e.g., smoke/heat detectors, waterflow, etc.) inputs and issuing appropriate automatic outputs (visual and audible annunciators, elevator recall, HVAC shutdown, signal to fire department or central station alarm monitoring service, etc.). | |

* This document was prepared by the Greater New York Hospital Association, based upon checklists developed by the Federal Centers for Medicare & Medicaid Services and the Joint Commission on Accreditation of Healthcare Organizations. This document was supported by Grant Number U3RHSO4301 from the Federal Health Resources and Services Administration (HRSA) to the New York City Department of Health and Mental Hygiene. Its contents are solely the responsibility of the authors and do not necessarily represent the official views of HRSA. This document is for individual facility use only and is entitled to confidentiality protections afforded under relevant State quality assurance and related laws and regulations.

October 26, 2006

| ISSUE | ACTION ITEMS | YES/NO Initials |
|--|---|--------------------|
| Communication: Internal (Continued) | 5. Notification to emergency department and other appropriate departments if scope of services of hospital has been reduced. | |
| | 6. Notification to staff of any alternate means of communications that may be used. | |
| | 7. Notification to staff of what is operational, what is not operational, and what alternate means of communications are in place. | |
| <i>Comments:</i> _____ _____ | | |
| Communication Systems: External | 1. Communication system (including emergency radios) functional to summon outside assistance for police, fire department, and other community resources. | |
| | 2. Communication system functional to coordinate patient care services with other health care facilities (i.e., transfers, diagnostic testing, receipt of x-ray or laboratory results). | |
| | 3. Functional communication system for timely receipt of test results for laboratory testing conducted offsite. | |
| | 4. Notification to relevant agencies (e.g., EMS) regarding facility status and process for continuing to update relevant agencies as facility status changes. | |
| <i>Comments:</i> _____ _____ | | |
| Dialysis | 1. Water supply meets requirements. | |
| | 2. Other system components functional. | |
| <i>Comments:</i> _____ _____ | | |
| Dietary | 1. Adequate facilities, personnel, and supplies onsite or arrangements to meet the nutritional needs of patients (and personnel as necessary). | |
| | 2. Adequate equipment and facilities, including refrigeration, for storage of foods and dietary supplies. | |
| | 3. Adequate storage for all prepared food to ensure appropriate temperature and sanitation. | |
| | 4. Food approved for re-use by appropriate governmental agencies if applicable. | |
| <i>Comments:</i> _____ _____ | | |

| ISSUE | ACTION ITEMS | YES/NO Initials |
|--|--|--------------------|
| Electrical Systems | 1. Vaults <ul style="list-style-type: none"> • Main switchboard operational. • Utilities transfer switches operational. | |
| | 2. Distribution Panels <ul style="list-style-type: none"> • Fuses operational. • Breakers operational. | |
| | 3. Transformers reviewed. | |
| | 4. Emergency generators, backup batteries, and fuel available for any location where patients are incapable of self-preservation, as well as other critical areas. Transfer switches in working order. Sufficient fuel for generators. | |
| | 5. Test equipment for confirming voltage and amperage. | |
| <i>Comments:</i> _____ _____ | | |
| Emergency Department | 1. Onsite functional and staffed inpatient services (inpatient nursing care units, laboratory services, x-ray services), appropriate and adequate supplies, equipment, and staff prior to reopening a hospital emergency department. | |
| <i>Comments:</i> _____ _____ | | |
| Emergency Preparedness and Management | 1. Disaster plan in place for timely evacuation of patients to a safe location for internal or external disasters. | |
| | 2. Disaster plan is adequate to address the safety of patients and/or staff. | |
| | 3. Mechanisms in place that assure safe patient evacuation can be conducted. | |
| | 4. The hospital should be enabled to address subsequent emergency situations, indicating the establishment of a functional all hazards command structure and the replenishment of emergency supplies and other equipment. | |
| | 5. Command center available to function. | |
| | 6. Staff notified of any changes to existing plan or creation of interim plan. | |
| <i>Comments:</i> _____ _____ | | |

| ISSUE | ACTION ITEMS | YES/NO Initials |
|------------------------------------|--|--------------------|
| Equipment and Supplies | 1. Equipment and supplies located inside flooded or damaged buildings, whether submerged under water, exposed to temperature extremes, smoke, or fumes, etc., or not, are approved for re-use by appropriate governmental agency prior to use. Approved equipment identified. | |
| | 2. Adequate equipment and supplies onsite (including oxygen) for planned services. | |
| | 3. Equipment is inspected and cleared for patient use prior to use. | |
| | 4. Mechanism in place for replenishing supplies. | |
| | 5. Ability to maintain patient care equipment that is in use. | |
| | 6. Ability to provide medical gases in a safe manner, indicating the presence of materials such as: compressors/ dryers, a piping system, vacuum piping and pumps, anesthetizing gases, controls, and alarms. | |
| | 7. Flashlights and batteries (including radio and ventilator batteries) available. | |
| <i>Comments:</i> _____ _____ | | |
| Facilities/ Engineering | 1. Cooling Plant <ul style="list-style-type: none"> • Chiller/DX/absorption unit operational. • Pumps operational. • Valves and controls operational. • Cooling towers operational. • Fan coil units operational. | |
| | 2. Heating Plant <ul style="list-style-type: none"> • Boiler system operational. • Support systems (feedwater pumps, diesel tank, etc.) operational. • Heating system (converters, valves, etc) operational. • Process steam (sterilizers, general building systems, etc.) operational. • Diesel tank re-filled. • Diesel vendor operational. | |
| | 3. Distribution System <ul style="list-style-type: none"> • Ductwork, including functional smoke detection/alarm capability and dampers, operational. • Piping operational. • Valves and controls, including functional emergency fan shutdown tied into fire alarm system and emergency smoke purge capability, operational. • Risers operational. • Filtration operational. • Negative pressure (ability to maintain CDC-compliant air exchanges) operational. | |

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|---|--|--------------------|
| | 4. Treatment Chemicals <ul style="list-style-type: none"> • Water treatment • Boiler treatment | |
| <i>Comments:</i> _____ _____ | | |
| | | |
| Infection Control | 1. Procedures in place to prevent, identify, and contain infections and communicable diseases. | |
| | 2. Procedures and mechanisms in place to isolate and prevent contamination from any unused portions of hospital. | |
| | 3. Adequate personnel and resources to maintain a sanitary environment. | |
| | 4. Process in place to segregate until discarded previously contaminated supplies, medications etc., prior to reopening of facility. | |
| <i>Comments:</i> _____ _____ | | |
| | | |
| Information Technology/Medical Records | 1. Ensure that all usual internal and external systems, backup systems, clinical systems, medical information systems, and patient registration systems are functional, or there is an alternate method for capturing the information. | |
| | 2. System in place to maintain a medical record for each patient served. | |
| | 3. Storage space to ensure security and maintain integrity of medical records (i.e., protection from fire, environmental hazards, unauthorized access). | |
| | 4. System in place to ensure medical records are readily accessible and promptly retrievable when needed. | |
| <i>Comments:</i> _____ _____ | | |
| | | |
| Laboratory | 1. Capability to perform emergency laboratory tests (e.g., hematology, chemistry, blood banking) onsite, and to document, disseminate and provide for retrieval of results. | |
| | 2. Laboratory services available onsite or by arrangements to meet the needs of patients. | |
| | 3. Communication system in place to assure timely notification to caregivers of critical test results. | |
| <i>Comments:</i> _____ _____ | | |

| ISSUE | ACTION ITEMS | YES/NO Initials |
|---------------------------------|---|--------------------|
| Management | 1. Resources and capability to deliver services assured by management prior to initiation of services. | |
| | 2. Management staff onsite to ensure the health and safety of patients and staff. | |
| | 3. Adequate resources, personnel and supplies onsite to meet the needs of patients (inpatient and/or outpatient) for the services offered. | |
| | 4. Adequate arrangements for care and services of individuals whose condition exceeds the capability of the hospital have been established. | |
| | 5. All initial services and each expansion of services approved by applicable government authorities prior to location being used and initiation of services. | |
| <i>Comments:</i> _____ _____ | | |
| Morgue | 1. Adequate arrangements for storage and management of deceased individuals. | |
| | <i>Comments:</i> _____ _____ | |
| Personnel | 1. Adequate types and numbers of personnel onsite for services. | |
| | 2. Adequate retention plan to maintain personnel (e.g., transportation, meals and lodging, laundry, etc.). | |
| | 3. Health care staff comply with State licensure requirements. | |
| <i>Comments:</i> _____ _____ | | |
| Pharmacy | 1. Adequate facilities, equipment, supplies, and appropriate staff to meet the pharmaceutical needs of patients. | |
| | 2. Adequate equipment and facilities, including refrigeration for storage of drugs and biologicals. | |
| | 3. Remove any unsafe/damaged medications from pharmacy and patients. | |
| <i>Comments:</i> _____ _____ | | |
| Radiology | 1. Radiology services (all situation-appropriate modalities, plain radiographs, CT, MRI, angiography and other special/interventional procedures, etc.) available onsite or by arrangements to meet the need of patients. | |
| | 2. Mechanisms for real-time interpretation and documentation, storage of new studies, access to old studies. | |

| ISSUE | ACTION ITEMS | YES/NO Initials |
|---|---|--------------------|
| | 3. Communication system in place to assure timely notification to caregivers of critical test results. | |
| <i>Comments:</i> _____ _____ | | |
| Security | 1. A system of security in place to ensure the safety of patients, visitors, and staff, including access control, securing sensitive areas, protection of staff and property from crowds, processing identification cards, locks, and keys. | |
| | 2. Outside law enforcement personnel conferred with regarding appropriate facility security, if necessary. | |
| <i>Comments:</i> _____ _____ | | |
| Sterile Procedures Support Systems | 1. Support systems for sterile procedures (steam, gas, cold) are functional. | |
| <i>Comments:</i> _____ _____ | | |
| Surgical Services | 1. Meet all State and Federal requirements prior to offering services. | |
| | 2. Surgical services offered must be in accordance with acceptable standards of practice. | |
| <i>Comments:</i> _____ _____ | | |
| Vendors | 1. Ensure all vendors are operational and supplies are available. | |
| <i>Comments:</i> _____ _____ | | |
| Waste Management | 1. System in place for trash handling (e.g., conveyors, compactors, etc.) and removal (solid and liquid). | |
| | 2. System in place for regulated medical and hazardous waste storage and removal. | |
| <i>Comments:</i> _____ _____ | | |

| ISSUE | ACTION ITEMS | YES/NO Initials |
|---------------------------------|---|--------------------|
| Water Systems | 1. Potable water for drinking, bathing, dietary service, and for all planned patient services. | |
| | 2. Distribution pumps operational. | |
| | 3. Water towers/tanks operational. | |
| | 4. Sewer Systems <ul style="list-style-type: none"> • Sanitary • Storm | |
| | 5. Fire suppression (fire pumps, sprinkler risers and lines, standpipes, and waterflow detection/alarm capability) operational. | |
| <i>Comments:</i> _____ _____ | | |