

 <p style="text-align: center;">County of Sacramento Department of Health Services Division of Primary Health Policy and Procedure</p>	Policy Issuer (Unit/Program)	Clinic Services
	Policy Number	06-10
	Effective Date	12-18-17
	Revision Date	DRAFT REVISION 07-14-18
Title: Emergency Training and Response		Functional Area: Safety
Approved By: Pamela Gandy-Rosemond, MSN, RN, CCHP, Acting Deputy Director		

Policy:

Sacramento County Health Center (SCHC) staff shall prepare and effectively respond to emergencies and critical incidents through the appropriate use of resources. The Health Center responds to emergency situations with the goal of preserving life, protecting the organization’s property, and restoring operations as quickly as possible.

This policy applies to all staff, patients, and visitors.

Definitions:

- A. An emergency is an urgent and unexpected event that poses an immediate risk to health, life, property, or the environment and requires an immediate response. The defining characteristic of an emergency event or situation is that usual resources are overwhelmed or have the potential to be overwhelmed.
 - 1. Emergencies may be a specific event with a clear beginning, end, and recovery process, or a situation that develops over time and where the implications are gradual, rather than immediate.
- B. Emergency management is the coordination of an emergency response and management of recovery. The goal of emergency management is to minimize physical and psychological impacts on all parties and to minimize damage to assets, operations, reputation, and staff productivity.
- C. A community-based exercise is a type of full-scale exercise and is operations-based. It involves multiple County departments to integrate operational elements involved in the response to a disaster event.
- D. A facility-based exercise is emergency management planning specific to the SCHC site.
- E. A table-top exercise is discussion-based and involves senior SCHC staff and key personnel. The exercise is centered on a hypothetical emergency scenario and is used to assess plans, policies and procedures without deploying resources.

Procedures:

A. Emergency Management Plan (EMP)

- 1. The Health Center maintains an Emergency Management Plan (EMP) that addresses emergencies and critical incidences. The EMP includes actions to follow for various disaster and emergency situations.
- 2. All staff have access to the EMP binders, which are located at the nurse’s station in Adult Primary Care Clinic, Pediatrics and Adolescent Clinic, and Refugee Health

Clinic, at the front counter in Pharmacy, at the Clerical Supervisor’s desk, and in the Administration office.

B. Training and Testing

1. A Clinic Manager is designated as the Training Coordinator and has a responsibility to ensure that training and documentation meet these policies.
2. Staff emergency preparedness training is conducted annually. Staff will also be trained as the EMP is updated.
3. Level of training each staff person completes every year is based on their designated role during an emergency (i.e. core topics for all, additional targeted topics for key response staff).
4. Health Center staff will participate in two annual exercises.
 - a. One must be a full-scale exercise that is either community-based or facility-based.
 - b. The other must be either another full-scale individual facility based exercise or a tabletop exercise.
 - c. In the event that the Health Center experiences an actual emergency requiring activation of the EMP, the facility is exempt from conducting a full-scale exercise for 1 year following the event.
5. All exercise responses are analyzed. Areas of improvement are identified and updates to the EMP are proposed if needed.
6. Additional information is included in EMP section 1.4: Training and section 1.5: Testing

C. Hazards and Response

1. The Health Center identifies, prevents, and manages disaster and emergency situations until the arrival of appropriate emergency services.
2. The EMP provides instruction for a range of emergency situations that may occur on the premises. See table below:

Situation	EMP Response Instruction
Patient surge	Section 2.6.10
Fire	Section 2.6.11
Flooding	Section 2.6.12
Bomb threat	Section 2.6.13
Earthquake	Section 2.6.14
Active shooter	Section 2.6.15
Severe storm	Section 2.6.16
Extreme heat	Section 2.6.17
Power outage	Section 2.6.18
Hazardous air or chemical release	Section 2.6.19
Civil disturbance or neighborhood violence	Section 2.6.20

3. Key management staff are assigned specific roles by the Health Program Manager in the event of an emergency as outlined in Annex A and B of the EMP.

D. Plan Maintenance

1. The EMP is reviewed on an annual basis. Any updates must be reviewed and approved by the Co-Applicant Board prior to implementation.
2. The Health Center will conduct a Hazard Vulnerability Assessment (HVA) annually to help ensure the clinic's emergency management program is up-to-date with current threats to the facility and community.
3. Additional information is included in EMP section 2.5.2: Plan Development and Maintenance.

References:

[PP-CS 03-03 Incident Reporting](#)
[Sacramento Ready – Emergency Plans](#)
[HRSA Policy Information Notice 2007-15](#)
[HRSA Policy Information Notice 2007-16](#)
[Centers for Medicare & Medicaid Services](#)

Attachments:

[Sacramento County FQHC Emergency Management Plan](#)

Contact:

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Co-Applicant Board Approval Date: