

# Hospitals and Community Emergency Response – What You Need to Know

Per OSHA Publication 3152

The following is a checklist for evaluating your hospital's plans and preparations for dealing with a hazardous materials emergency. This checklist is based on the published Federal OSHA requirements.

YES	NO	UNK	ELEMENT
1. Preplanning: prior to an actual emergency the hospital has . . .			
			Prepared a comprehensive Emergency Response or Emergency Operations Plan
			The ERP/EOP has been distributed and discussed with all employees who have roles in the plan.
			Shared the hospital plan with local emergency planners and coordinated with their plan
2. Plan Elements: The EOP/ERP contains the following items . . .			
			Schedules and scope of activity for pre-emergency drills for testing the plan.
			Addresses unified incident command with local responders
			Lines of authority and communication between the incident site and hospital personnel.
			Information needs to/from the incident site
			Designates the hospital decontamination team
			Identifies the location and operation of the decontamination process
			Describes how the hospital will access information on the hazards and treatment protocols for hazardous materials.
			Establishes the methods, procedures, and protocols for preventing the hospital from becoming contaminated.
			Identified the methodology of determining if the hospital has been contaminated and/or for monitoring air quality during the event.
			Delineates actions and alternatives in the event the hospital ER becomes contaminated.
			Contains plans for treating non-contaminated and routine emergency patients during the decontamination operation.
			Designates who, how, and when PPE will be used based on routes of exposure, extent of contact, and assigned tasks.

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			Method of preventing contamination of hospital ventilation system.
			Process for and requirements to conduct a post-event critique of the hospital's emergency response.
2a. Hospitals Designated by the LEPC: Must have the following additional components . . .			
			A definition of the hospital's role in community response by working with other local agencies.
			The incident command coordination plan, policies, procedures.
			Training requirements by position, anticipated action, and responsibility for all hospital employees who are expected to respond and assist in hazardous materials incidents.
			A database compiled by the LEPC containing information on chemicals used or stored in the community and that have been reported to the LEPC.
3. Training Employees: The following are training requirements for employees expected to assist with hazardous materials emergencies . . .			
			Training must be based on probable incidents and the worst-case scenario.
			Medical personnel who will be involved in patient decontamination must be trained to the First Responder Operations level per 29CFR 1910.120(q)(6)
			Training for Operations level emphasizes use of PPE and decontamination procedures
			The training includes a minium of 8 hours of training and/or demonstrated competencies.
			An annual refresher is provided.
			The hospital certifies that the employees are trained to safely perform their duties and responsibilities.
			The training is either developed to address specific issues within the hospital or covers these issues subsequent to the personnel attending a standard First Responder operations Level course.
			The decontamination procedures and PPE selection is completed by persons with adequate training above the Operations level (but do not need to be trained to the Technician level.)
			All ER clinical staff personnel and any employee who might be exposed to hazardous materials during a response should (1) be familiar with the hospital response plan, (2) trained to use appropriate PPE, (3) trained to the Awareness level, (4) required to participate in scheduled drills or exercises.
			Staff who may need to enter the decontamination area to monitor or treat the victim are identified and designated Skilled Support Personnel;

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			An outline of the briefing requirements for Skilled Support Personnel prior to entering the decontamination area, including PPE, hazards, and duties.
			Housekeeping, laundry and other employees who may be required to assist in clean up must be identified and trained according to 29 CFR 1910.120(q)(11)
3a. Performing Emergency Drills: The hospital is required to conduct emergency drills or exercises . . .			
			As a part of "Pre-emergency planning"
			To evaluate compliance with HAZWOPER.
			As a requirement of SARA Title III as part of the local contingency plan
			As a requirement of 29 CFR 1910.120 for hazardous waste sites
			As a requirement of JCAHO (2X per year.)
			Drills/exercises may be used to fulfill dual/multiple requirements.
3b. Documenting Training: Training must be documented by . . .			
			Written and signed attendance records.
			Providing a certificate of training for the employee.
			Documenting training in the employee's personnel records.
			There is a training plan for employee's who are designated to respond to hazardous materials incidents within the hospital ERP.
3c. Defining Roles: The plan must delineate and define the roles of employees, including . . .			
			Who will be in charge of directing the response and communications.
			Who is in charge of directing training.
			An evacuation plan in the event of contamination of the hospital.
			Identification of PPE including type, quantity, location, and use.
			The method of conducting critiques and follow-ups of drills and actual emergencies.
4. Responding to Emergencies: The part of the plan that describes how the hospital will actually respond when a hazardous materials incident occurs, and which contains the following . . .			
			The selection of PPE for the type of chemical and the activities of the responder.
			Command and coordination details, who will be in charge, incident command structure, roles and responsibilities
			Method of identifying the hazardous materials and appropriate treatment, decontamination, and protective actions.

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5. PPE Selection: The method by which the hospital personnel will select the appropriate PPE for the emergency, with details on . . .			
			The source of information used in making the selection of PPE.
			The training, maintenance, and medical evaluation requirements for using various PPE.
			Procedure for maintaining records of training, fit-testing, and maintaining PPE.
			Application of the OSHA respiratory protection standard 29 CFR 1910.134.
6. Patient Decontamination: The steps taken once an emergency occurs, with sections to address . . .			
			How the hospital will be notified of the nature, scope, and other pertinent information about the event.
			A detailed physical plan for a decontamination site.
			How non-contaminated areas and persons will be protected from contamination.
			Notification of the hospital response team; how they will be notified and information transferred.
			Relocation of potentially exposed persons away from the decontamination area.
			Plans for weather or other events that would make the primary decontamination areas unusable.
			Direction and control of arriving patients, including self-presenting and "worried well."
			Record keeping methodology for patients and victims.
			Notification of family and next-of-kin
			Handling of contaminated deceased victims.
			Monitoring and controlling air circulation and ventilation.
			Use of instruments to identify possible contamination.

*This information is provided courtesy of Response Planning Concepts, Lyons, Illinois to assist hospital managers in assessing their hazardous materials plans for OSHA compliance issues. It should be noted that this checklist is both generic and general, and may not address all possible issues. Compliance with this checklist cannot guarantee OSHA compliance. RPC can provide consulting and plan review assistance for hospitals. Contact us through our web site at [www.fireworksconsulting.com](http://www.fireworksconsulting.com)*