


Name of Policy: <u>Disaster</u> Policy Number: 3364-132-07 Department: Patient Access Approving Officer: Chief Operations Officer Responsible Agent: Director, Patient Access Scope: The University of Toledo Medical Center Patient Access Department	 Effective Date: July 1, 2022 Initial Effective Date: November 9, 1977
<input type="checkbox"/> New policy proposal <input type="checkbox"/> Major revision of existing policy	<input type="checkbox"/> Minor/technical revision of existing policy <input checked="" type="checkbox"/> Reaffirmation of existing policy

(A) Policy statement

A disaster is a natural or human-caused event that significantly disrupts the environment of care, significantly disrupts care, treatment, and services, or that results in sudden, significantly changed or increased demands for the Medical Center’s services. When an event is deemed a disaster at the University of Toledo Medical Center, the need for additional resources will be determined as outlined in the University of Toledo Medical Center Emergency Operations Plan.¹

(B) Purpose of policy

This policy establishes a protocol for Patient Access to follow in the event of a disaster involving or calling upon additional resources at the University of Toledo Medical Center.

(C) Policy

- I. In the event of a disaster, the University of Toledo Medical Center will utilize the Hospital Incident Command System (HICS) to coordinate essential services and assign basic responsibilities during disaster response.
- II. Staff will not abandon the premises without permission from their direct Manager.
 - a. During a disaster situation, all Hospital personnel and designated Medical Center personnel are considered essential to the operation of the hospital and must report for emergency duty when needed and/or contacted.
- III. The Manager will not excuse patient access personnel until otherwise directed by the Patient Access Director.
- IV. The Patient Access Director will update the Patient Access Management team after coordinating and taking instruction from the Incident Commander.

¹ Refer to the Emergency Operations Plan (EOP). #EP-08-009.

- (D) Procedure
- I. Determining Registration Needs
 - a. The Patient Access Director will be contacted or will contact the Incident Commander to make the determination of how many personnel will be needed from the Patient Access Department.
 - b. The Patient Access Director will coordinate efforts to both retain needed staff and call in additional resources as directed by the Incident Commander.
 - c. The Patient Access Director will notify the Incident Commander/Command Center of how many staff members are coming in.
 - II. Determining Scope of Registration Needs
 - a. The Patient Access Director will determine location of Registration needs with the Incident Commander/Command Center to include, but not limited to:
 - i. The Emergency Department
 - ii. Points of entry for victims of disaster
 - iii. Points of care for victims of disaster
 - III. Registration of Disaster Patients: Treat & Release
 - a. Disaster Patients being treated will be registered in the ADT (Admission, Discharge, Transfer) system for level of service being administered. Follow all departmental Standard Operating Procedures.
 - b. If the ADT system is down, follow the ADT System Failure Policy.²
 - c. Staff will utilize the Ohio Patient Tracking System (<https://ohio.surgenet.org>) to register all patients arriving from incident. Patient status will be updated as patients are discharged or transferred to alternate facilities. This platform shall also be utilized to monitor the potential for receipt of additional patients.
 - IV. Registration of Disaster patients: Admissions to the Hospital
 - a. Disaster Patients being admitted to the Hospital will be registered in the ADT system as they are in the normal course of care.
 - b. Patients will be registered by the Patient Access department.
 - c. Staff will assign the patient a Disaster Tag number. This tag number will be noted within the ADT system.
 - d. Staff will complete the registration with available family, EMS run sheet or other available documents.
 - e. Staff will assist the patient and/or patient representative with completing all required documents.
 - V. Release of Information

In the event of a disaster, refer all inquiries regarding disaster victims to the Office of Communication: (419)383-4255.

² Refer to the ADT System Failure by Patient Access. Policy # 3364-132-08.

3364-132-07

Disaster

Approved by:	Review/Revision Date:
<p><u>/s/</u> _____ <u>06/23/2022</u> Date Laura Kern Director, Patient Access</p> <p><u>/s/</u> _____ <u>06/23/2022</u> Date Chris Stesney-Ridenour Chief Operations Officer</p> <p><i>Review/Revision Completed By: Laura Kern</i></p> <p><i>Patient Financial Services</i></p>	7/17/81 10/4/84 2/12/87 3/15/88 5/2/89 4/1/93 8/29/96 9/10/99 10/01/07 10/01/12 4/1/16 07/01/19 07/01/22
	Next Review Date: 07/01/2025
Policies Superseded by This Policy:	

It is the responsibility of the reader to verify with the responsible agent that this is the most current version of the policy.