I. PURPOSE

The purpose of this plan is to assign responsibilities and plan actions to be taken primarily by ECU Physicians (ECUP), individuals and departments at the Brody School of Medicine in order to reduce the vulnerabilities of people and property to adverse weather and other disasters and to establish capabilities for responding effectively to the actual occurrence of a disaster in a manner consistent with the mission of ECU Physicians.

II. POLICY STATEMENT

The Brody School of Medicine is a component of the Division of Health Sciences of East Carolina University and is located adjacent to Vidant Medical Center in west Greenville. ECU Physicians is the clinical enterprise of the Brody School of Medicine, with over 20 different ambulatory clinical sites and in-patient services at Vidant Medical Center.

The university is exposed to many hazards, some of which have the potential to disrupt the campus and/or local community, cause damage and create casualties.

Severe winter storms are a threat to the university with cold, ice, snow and wind in all forms and combinations. The months from June to November constitute the hurricane season. The greatest amount of hurricane damage normally occurs during the months of August, September and October. There are other potential hazards including tornadoes, flooding, transportation accidents and pandemic flu. Since weather emergencies constitute the vast majority of cases requiring emergency preparedness, this plan focuses primarily on adverse weather. However, the steps and process apply to other disasters as well. Refer to the pandemic flu plan for specifics related to the clinical practice during a pandemic.

III. DEFINITIONS

Emergency Employees as defined by ECU Human Resources in PRR Adverse Weather/Conditions and Emergency Closings: An employee who is required to report for and remain at work during an emergency because his or her position has been designated by the University as critical to University operations during emergencies is an Emergency Employee. Emergency employees may not be needed for all emergencies, and the department head has the authority to designate the emergency employees who are most needed for the particular emergency. This designation is applicable to all employees.

IV. SCOPE

General:

All decisions concerning the discontinuation of any university function, cancellation of classes, or cessation of operations, rest with the Chancellor or his designee. The decision to open clinical areas for ECUP will be made separate from the decision to open other offices at ECU. Patient care sites for ECU Physicians typically remain operational as much as
possible and clinical faculty and staff designated by their department as emergency employees will support clinical operations during emergencies.

This plan does not apply to the Leo Jenkins Cancer Services; the center has a specific plan for inclement weather. Decisions regarding operations will be made and communicated by Leo Jenkins Cancer Services (LJCS) Administration and available via a LJCS Weather Hotline, as well as the LJCS website.

The ECUP Adverse Weather Coordinator chairs the Adverse Weather Team (defined in section VI. below) and works in close collaboration with the University’s Emergency Coordinator (University Incident Commander), the Pitt County Disaster Team and Vidant Medical Center’s Executive Emergency Incident Commander.

At the onset of an emergency situation, the ECU Emergency Coordinator (Senior Level Official of the University) shall proclaim a state of emergency. The University has designated key administrators to form an Emergency Management Team to direct university operations. This team will staff the Emergency Operations Center (EOC) and will be responsible for making critical decisions and providing overall direction and goals to the University units responding to the emergency or conducting recovery operations. Termination of a state of emergency shall be declared under the authority by which it was declared.

Phases of Comprehensive Emergency Services:
Each section or department responsible for supporting this plan is expected to plan and respond to an emergency situation in the following general sequence:

PREPAREDNESS/IMMEDIATE: Preparatory activities, programs and systems are undertaken prior to an emergency and are used to support and enhance response to an emergency or disaster.

RESPONSE/INTERMEDIATE: Response activities and programs are designed to address the immediate effects of the onset of an emergency or disaster and help to reduce casualties, damage and to speed recovery. Response activities include direction and control, warning, evacuation, mass casualty care and other similar operations.

RECOVERY/EXTENDED: Recovery activities involve restoring systems to normal. Short-term recovery actions are taken to assess damage and return vital systems to minimum operating standards; long-term recovery actions may continue for an indefinite period.

V. ORGANIZATION AND ASSIGNMENT OF RESPONSIBILITIES

Under the ECUP Emergency Operations Plan, the ECU Physicians Medical Director is responsible for directing activities related to the Brody School of Medicine including:

- Providing care for patients of ECU Physicians
- Providing back-up for medical services needed in the Student Health Services, vulnerable population shelter and/or Vidant Medical Center, if requested
- Providing medical support to people housed in temporary shelters
- Providing health advisories to the ECU Emergency Management Team
Providing input and assistance to control communicable diseases transmission
Providing emergency medical supplies and equipment as needed for care of patients
Providing assistance to preserve and protect the academic, research and clinical resources of the Brody School of Medicine
Provide counseling and support for students and staff who may have suffered trauma or losses as a result of the incident

ECUP is responsible for coordinating medical and nursing support and use of ECU Physicians or BSOM facilities with the Vidant Medical Center Command Center.

Leadership of the Brody School of Medicine is responsible for coordinating the management of patient care through ECU Physicians, including, as conditions warrant, cancellation and rescheduling of appointments, and staffing for extended hours clinics to address patients’ urgent care needs. In the event of snow, the following areas are considered high priority for staffing to facilitate patient care: Family Medicine Center, Pediatric Outpatient Center, Firetower Medical Office, and Nephrology Clinic. Vidant Medical Center and ECU will provide snow removal for Vidant Medical Center and ECU properties and will be requested to give open patient sites priority. Contractors will be dispatched to leased sites for snow removal.

VI. DIRECTION AND CONTROL

The ECU Physicians’ Adverse Weather TEAM, under the direction of the ECUP Adverse Weather COORDINATOR, is responsible for coordinating the implementation of the Adverse Weather/Disaster Operations Plan. Decisions regarding ECU Physicians clinical employee work schedules, patient care appointments, and clinical hours of operation will be made by the Adverse Weather Team in conjunction with ECU and Vidant Medical Center.

The overall direction and control of ECUP emergency activities as Adverse Weather/Disaster Coordinator is vested with the ECU Physicians Medical Director or his/her designee. The individuals listed below constitute the BSOM Adverse Weather Team. Others may be added as deemed necessary.

- The line of succession for the Adverse Weather/Disaster Coordinator for the ECU Physicians proceeds from the Vice Dean/Medical Director and then to those listed in order below:
  - Administrator for ECU Physicians
  - Director of Nursing Services
  - Executive Director of ECU Physicians

While the Adverse Weather Team member on duty may change due to working shifts, the Adverse Weather/Disaster Coordinator will retain authority for the duration of the event.

ECU Physicians Adverse Weather Center

Purpose: The purpose of the ECU Physicians Adverse Weather Center (AWC) is to serve as a focal area for the Adverse Weather Team (AWT) to facilitate coordination of activities for ECU Physicians, dissemination of information and deployment of resources during weather and other
emergencies. The AWC will work in collaboration with the University’s Incident Command Center and the Vidant Medical Center Executive Emergency Incident Command Center.

**Location:** The ECU Physicians Adverse Weather Center will be located in Brody AD43. Direct line telephones for the University and Vidant Medical Center are available as well as network capabilities. Word processing, copying and faxing equipment are also available.

For less severe weather situations, the ECU Physicians Administration office will serve as a clearinghouse for information. Telephone coverage will be available during business hours at 744-1882.

**Authority:** The Vice Dean/ECUP Medical Director or designated Adverse Weather/Disaster Coordinator is responsible for activation of the Adverse Weather Center (AWC). The line of succession for accountability of the plan is as follows:

- Vice Dean/Medical Director
- Administrator for ECU Physicians
- Director of Nursing Services
- Executive Director of ECU Physicians

Once the decision is made to activate the AWC, at least one member of the Adverse Weather Team above or their designee will be stationed in the Adverse Weather Center at all times until the decision to close the AWC is made. The Associate Vice Chancellor of Human Resources or designee will also be available to coordinate dissemination of information for faculty and staff.

**Support Staff:**
Support personnel from the Offices of Vice Dean and ECU Physicians Administration designated as emergency employees will be scheduled by the Adverse Weather Coordinator to work shifts (a minimum of 2 per shift) to handle all support needs. A list of emergency employees and appropriate contact information will be maintained and periodically updated by the departments. The assignment for support personnel will include:

- Maintaining telephone lines
- Answering telephones
- Maintaining communication list with current phone numbers and physician and administrator on-call contact information
- Maintaining logs of employees working and other data
- Coordinating updated news releases and voice messages with ECU News and Information
- Distributing information to various sites
- Performing other duties as needed

**Timeframes:**
In the event of an impending event (i.e.: hurricane) the Adverse Weather Team (AWT) will convene 72 hours in advance of the event whenever possible. The AWT will establish an implementation schedule and perform necessary functions to ensure that all necessary resources are available and updated. The Adverse Weather Center will be activated 48 hours in advance of an impending emergency, or immediately upon notification of an emergency expected in less than 48 hours. The AWC will remain activated until disbanded by the ranking AWT member. The key responsibilities of the AWT include, but are not limited to, the following:
Preparedness
- Update Adverse Weather/Disaster Operations Plan
- Update Departmental Contact Information
- Update Departmental Hurricane Procedures
- Update and Review Emergency Operations and Roles with Staff

72 to 24 Hours Prior
- Convene Adverse Weather Team
- Activate Adverse Weather Center
- Monitor forecasts and weather information
- Prepare messages for notification of staff
- Attend University emergency briefings
- Determine clinic status and report on potential cancellation plans

24 to 12 Hours Prior
- Report status of special events schedule
- Decide and report on clinical operations
- Establish communication with Vidant Medical Center command center
- Back up critical data
- Prepare for clinical operations and patient care
- Establish Conference Bridge for Adverse Weather Team
- Decide and report on clinical operations
- Notify emergency employees of schedule and responsibilities

VII. PLAN DEVELOPMENT AND MAINTENANCE

ECU Physicians will review and update this plan on a biennial basis. A debriefing will be held after every activation of the plan, and the plan will be revised as needed.

VIII. PROCEDURE
Mission/Function Areas

All Departments must establish emergency employee lists for their respective areas and designate personnel responsible for responding as directed when adverse weather emergency or other disaster is called. Each Department must maintain and regularly update telephone call trees. Each Clinical Department should pre-determine critical or emergency functions and provide ECU Human Resources Employee Relations with a list of positions designated as such. Emergency employee lists and telephone call trees must be readily accessible to the emergency plan administrators.

A. Clinical
   Responsible Person(s): Medical Director (Dr. Nicholas Benson or designee)

   Mission: ECU Physicians Administration’s mission during disaster operations is to facilitate clinical operations and patient care in the ECU Physicians to include:
1. **Patient Access Services**  
*Responsible Person(s): Director of Patient Access Services or designee (Ms. Linda Sawyer)*

Serve as liaison to the clinical departments to:
- Coordinate activities with the Contact Center.
- Provide clinic support for disaster site to register and make follow up appointments, if needed, for any patient seen during a disaster.
- Call patients to cancel appointments for all of the practice if closed during operational hours.
- Ensure that all phone lines in clinical sites have been transferred appropriately to the Contact Center/answering service and provide information to the answering service of status at all times – this should be a management function only.
- Provide information to employees regarding reporting to work.
- Provide information regarding clinic schedule based on phase of emergency.

2. **Disaster Response Team**  
*Responsible Person(s): Medical Director or designee(s), such as Clinical Director of FMC (Dr. Jason Foltz) and/or Pediatrics (Dr. Roytesa Savage)*

- Coordinate patient care activities in the event adverse weather or other disaster requires the consolidation of services.
- Assess readiness of the Family Medicine Center (FMC) to provide clinical care (availability of physicians and extenders, residents, staff and nurses).
- Coordinate with the Departments of Internal Medicine and Pediatrics to provide MDs from each department to work, as well as nursing and office staff.
- Assess readiness of FMC building and other sites planning patient care activities.
- Meet with providers and nursing staff from these areas.
- Nephrology will make every effort to open as soon as possible to accommodate their dialysis patient care needs.
- In cases of prolonged disasters, maintain an on-call list of specialists to be called for patient care needs in the FMC.

3. **Vidant Medical Center Liaison**  
*Responsible Person(s): Director of Nursing (Ms. Martha Dartt or designee)*

- Serve as communication liaison between Vidant Medical Center, County Disaster Command Center and ECU BSOM.
- Facilitate identification and availability of clinical faculty for designated functions (Infectious disease/surveillance, shelter coverage, etc).
- Facilitate use of possible patient care sites if needed by Vidant Medical Center in event that Vidant Medical Center building/spaces are not usable or have met maximum capacity. Use of Brody facilities would only be in extreme circumstances.

B. **Administration**  
*Responsible Persons(s): BSOM Vice Dean (Dr. Nicholas Benson) or ECU Physicians Executive Director (Mr. Brian Jowers) or designee*
Mission: To support the combined disaster operations of the ECU Brody School of Medicine and ECU Physicians.

1. Coordinate with ECU Administration
   Responsible Person(s): ECUP Medical Director (Dr. Nicholas Benson) or designated BSOM Administration & Finance Disaster Team Member
   - Communicate ECU Physicians plans for clinics (open, delayed or closed).
   - Communicate all pertinent information regarding ECU Physicians or Medical Center in a timely manner.
   - Receive communications from ECU Administration and relay to all appropriate BSOM Adverse Weather/Disaster Team Members.

2. Coordinate with ECU Facilities Services
   Responsible Person(s): Administrator of ECU Physicians (Mrs. Carolyn Erwin) or designee
   - Communicate ECU Physicians operational plans in a timely manner.
   - Facilitate use of Brody 2W38, 40 and 50 or appropriate location for sleeping quarters for essential employees, which involves communication and coordination with ECU Police and Housekeeping.

3. Coordinate with ECU Police
   Responsible Person(s): Sgt. Ike Hill, ECU Police or designee, or any Disaster Team Member
   - Ensure on-duty Police Lt. participates in (Medical Center Disaster Team) AWC meetings.
   - Coordinate as needed during and after event.
   - Ensure continuous walk-through during hurricane to check for wind/water damage.
   - Ensure sufficient staff to provide sign-in areas at Brody front and loading dock entrances. (This applies only in the event that faculty/staff, other than the team members, report to work.)
   - Coordinate with One Card Office any opening changes for automatic door locks.

4. Coordinate with ECU Housekeeping
   Responsible Person(s): Mr. Carl Thorell or Mr. Chris Etheredge
   - Identify housekeeping department coordinator responsible for managing services for the duration of the emergency.
   - Ensure that there will be adequate personnel to perform housekeeping services during adverse weather/disaster.
   - Facilitate/assist obtaining necessary supplies for housekeeping to maintain services.
5. **Coordinate with Medical Storeroom for Support Services/ Materials**  
*Responsible Person(s): Mr. Tony Roebuck, or any BSOM Administration & Finance Disaster Team Member*

- The Medical Storeroom coordinates the issuance of medical supplies and materials for the duration of the emergency.

6. **Telephone Communications Support**  
*Responsible Person(s): Network Analyst (Patrick Clark) after notification from Medical Director*

- Establish Conference Bridge for Adverse Weather Team.
- Activate telephone lines in Brody AD43.
- Move telephone instruments to AD43.
- Identify lines and users.

7. **Disaster Radio Communications Support**  
*Responsible Person(s): Telecommunications Technicians (Mr. Michael Hines and Mr. James Walston)*

- Ensure operational nature of radios.
- Provide instructions to appropriate BSOM Disaster Team Members.
- Time permitting, conduct brief orientation for users on use of radio.

8. **Contact Center**  
*Responsible Person(s): BSOM Contact Center Manager (Ms. Mary Schiller)*

- Serve as a critical communication support link with the AWT and AWC and function as the primary communication hub for ECUP during adverse weather and disaster situations.
- Maintain phone directory for ECU Physician clinical departments and staff.
- Maintain physician on-call schedules.
- Serve as physician answering service.
- Process routine and standard communication during adverse weather or disaster operations.
- Use severe weather codes to communicate ECU Physicians operational status to patients and clinical employees.
- Serve as resource to AWT.
- Serve as repository for current departmental telephone rosters.
- Coordinate physician availability and assignments with the AWC.
- Serve as a repository for sign-in or call-in for staff and faculty in the facility.
- Assist Patient Access Services and serve as a resource to verify and/or cancel patient appointments as needed.
- Assist with establishing telephone hotline relating operational status for use by ECU Physicians clinical employees.
C. **Information Systems**  
*Responsible Person(s): CIO (Mr. Don Sweet) or designee*

Mission: The disaster (hurricane) preparedness plan is designed to:
- Ensure the protection and functional integrity of the Brody School of Medicine’s information systems, including servers, network components, clinical applications and databases and electronic mail.
- Provide clinical software applications support to ECU Physicians clinics when those clinics are operational during a storm-related disaster.
- Provide information to faculty/staff-level computer users to help them protect their computers and related devices during a storm-related disaster.

Other tasks to be done prior to or during a storm-related disaster include:
- Ensure the data center (UPS) and generators have been tested and are functioning should the data center lose power. Call Facilities Services if there is a problem.
- Ensure that critical systems are appropriately backed up and the backup data is maintained in an offsite location.
- Ensure the ITCS Operations Center will have adequate staffing through the duration of the event.
- Ensure that the ITCS support contact call lists have been updated and prepared to be engaged as needed to restore IT services.
- Ensure that the ITCS Disaster Recovery Plan has been updated and ready to be engaged if needed.
- Coordinate with Medical Director staff, e.g., Patient Access Services, for provision of clinical software support, encounter forms, etc. in a timely manner.
- Provide e-mail instructions regarding storm preparation to all computer users in the BSOM.
- Ensure that all computers to be used in the AWC are network-capable and enabled to function with email and Internet connectivity.

D. **Communications**

1. **ECU News Bureau**  
*Responsible person(s): Executive Director of Communication, Public Affairs and Marketing or designee (Ms. Mary Schulken or designee)*

Mission: The primary area of responsibility is news media communications with a secondary mission of support for employees, patients and students.

Immediate Actions:
- Meet with disaster team to learn organizational posture and particularly ECU Physicians operational status regarding patient appointments. Coordinate with ECU News and Information Services.
- Post ECU Physicians operational status on campus website.
- Increase awareness of existence of adverse weather communication tools to employees and students.
- Respond to media inquiries regarding organizational preparation for severe weather.
- Have at least one staff member available at all times and other staff members on standby if needed.

Extended Actions:
- Update messages carried by various communications tools as appropriate (Channel 99, television and radio stations).
- Respond to news media inquiries regarding status of victims and the activities of the organization in response to the emergency.

2. Student, Employee and Faculty Communication

Responsible person(s): Associate Vice Chancellor for Human Resources or designee (Ms. Melissa Bard)

Mission: The primary areas of responsibility are: 1) personnel policy interpretation for faculty and staff and 2) communications for staff, faculty, and students. Immediate Actions:
- Coordinate with ECU News Bureau. Communicate University operational status to staff, faculty and students via supervisors, hotline and Internet.
- Monitor ECU Physicians operational status on campus website.
- Assist with establishing telephone hotline relating operational status for use by employees and students.
- Increase awareness of existence of adverse weather communication tools to faculty, staff and students.

Extended Actions:
- Monitor and update messages carried by various communications tools as appropriate.

IX. REFERENCES

ECU’s emergency preparedness information http://www.ecu.edu/cs-admin/oehs/emergency/Emergencyprocedures.cfm.
ECU Prospective Health Plan for H1N1 Surge in all Outpatient Facilities at ECU Physicians:

Level A  We commit to maintaining the current level of service for urgent care/rapid access for our patient population while continuing to meet the on-going need for chronic care and on-going treatment for our patients.  We will institute an e-mail or other routine mechanism of communication among clinical directors to monitor the demand for care and capacity to supply with existing staff and the current ECU Extended Hours Clinics and Rapid Access Clinics.

Level B  If either staff availability or patient demand increases to the point where maintaining usual service levels are difficult/impaired, our goal will be to maintain the current level of essential services in critical areas.  The primary care clinics will defer non-urgent non-critical services until flu demands subside.  This decision will be made by the clinic director and communicated to the clinic staff as well as to the ECU Physicians Medical Director.

Level C  If the situation worsens, our contingency plan includes a provision to eliminate/close and consolidate some clinics and/or to designate a single centralized flu-care center for our patients.  This measure will be implemented when the balance between patient demand and staff availability cannot be maintained within the staffing pool of the individual primary care departments.  A consolidated interdepartmental plan for segregating sick/well care, will be implemented.  This “sick” clinic may be operated for extended hours, or for daytime care or both.  This decision will be made by the Medical Director of ECU Physicians, in consultation with the clinic directors of the primary care specialties.  The consolidated clinic will be advertised widely to patients and staff, including the Call Center and Marketing.

*ECU Physicians declines to designate a specific numerical trigger related to numbers of flu patients seen.  To maintain maximum operational flexibility and responsiveness, our preferred approach is continued monitoring and feedback from clinical directors.  A consistent, practice-wide response is ensured with this approach.