

# HURRICANE PREPAREDNESS MANUAL

## SUBJECT: MANAGERIAL STAFF RESPONSIBILITIES AND DUTIES

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### **POLICY:**

The managerial staff (Medical Director, Clinic Manager, FTM, Social Worker, Dietician, etc.) are expected to perform leadership roles in initiating, coordinating, and managing the facility's emergency operations before and after a hurricane. Managerial staff must be very familiar with all aspects of the facility's hurricane plan and must be prepared to commit to maximum possible flexibility regarding their availability and working schedule during the emergency periods before and after the hurricane.

### **PROCEDURES:**

1. Managerial staff will confer when a hurricane is reported in the news to evaluate the threat and decide when to initiate the facility's emergency scheduling and preparation procedures.
2. Designated managerial staff are required to have current emergency contact information on all facility employees immediately accessible at all times during the hurricane season. This is vital, in the event emergency dialysis scheduling must be initiated. It is also desirable that emergency contact information on the facility's patients be kept by a member of the management team. Experience has shown that the warning period before the arrival of a hurricane could be as short as 24 hours and any time saved in initiating emergency dialysis scheduling can result in more patients receiving treatment.
3. Members of the management team will be assigned responsibility for various aspects of the facility's hurricane preparation procedures, consistent with their normal functional responsibilities. For example, the C/N and CM are responsible for scheduling of staff and patients. Administrative Assistant/Secretary are responsible for storage and safeguards of facility records, etc. To the extent possible, these responsibilities are designated in writing, in advance, of an actual hurricane threat and are incorporated into the facility's hurricane plan.
4. Members of the managerial team must also be assigned the responsibility for maintaining emergency contact or resource information, which might be needed after the hurricane for resuming facility operations. Copies of this information should be safeguarded at a secondary location by the CM and FTM should the facility be damaged beyond accessibility and alternative arrangements are necessary for care of the facility's patients.
5. All managerial staff should make personal hurricane preparedness plans well in advance of an actual hurricane threat, because they will be involved in the facility's preparation procedures in the period immediately prior to the arrival of the hurricane. Managerial staff should maintain adequate emergency supplies, such as water, canned foods, radio and spare batteries, candles, etc., in their homes during the entire hurricane season so they do not have to worry about these items at the last minute.

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6. After the hurricane the managerial team should establish communications as soon as possible (see “Staff Directory” section) to assess each other’s circumstances and to evaluate the requirements for resuming facility operations.
7. Members of the team should be assigned to inspect the facility for physical damage or operational capability so that the appropriate post-hurricane plans and procedures can be initiated.
8. Plans for resuming facility operations based on various facility circumstances should be developed as part of the facility’s hurricane preparedness plan, and should be assigned in advance to managerial staff. However, all members of the managerial team should be aware of all possible plans, and be prepared to assume responsibilities beyond those originally assigned, since some members of the team could be unavailable due to personal circumstances or problems.
9. All members of the managerial team should be aware of and have copies of the FMQA Hurricane Plan in the event that hurricane damage is so extensive that area-wide relief plans must be implemented.

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1. “Clinic Manager” will contact “Charge Nurses” and will begin the pre-hurricane patient and staff schedule.
2. “Charge Nurses” will contact staff.
3. “Social Worker” and “Unit Secretary” will contact patients for pre- hurricane abbreviated treatments.
4. “Dietitian” and “Unit Secretary” will make (3) copies each of last flow sheet, medication list and most current H & P to be distributed as follows:
  - 1) Give copy to patients with instructions to keep with them.
  - 2) Give copy to Medical Director for Command Center.
  - 3) Give copy to Clinic Manager to be removed from clinic at time of lock-down.
5. “Unit Secretary” and “Social Worker” will answer phones and help set up transportation for patients.
6. “Designated Staff Members” will take action in putting away patient’s medical charts, business records and safe guarding the computerized data as well as the computer hardware in billing office.
7. “Technical Manager” and “Designated Staff” will be responsible for updating the inventory reports to make sure we have enough supplies/medications.
8. “Technical Manager” and “Designated Staff” will be responsible for packing medical supplies for evacuation.
9. “Technical Manager” will contact our water and generator vendors to assure water quality/generator readiness and will coordinate safeguarding of the dialysis unit.
10. “PD Nurse” will be responsible for contacting P.D. patients and checking P.D. supplies.
11. “Medical Director” will do triage on patients.
12. “Clinic Manager” and “Designated RN” will coordinate hospital acute services.
13. All staff will assist in initiating emergency dialysis to all dialysis patients and safeguarding the unit before the storm is scheduled to hit.
14. C/N, CM, SW and Dietician will round on patients during last minute dialysis treatments to answer any last minute questions.