



The Emergency Plan

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Physicians don't have to look far back to remember an emergency, whether a severe local blizzard or a national crisis like the attacks of September eleven. Since that day, the health-care world has changed its outlook on disaster preparedness, and doctors now have a heightened awareness of the urgency of the issue. Still, most of us have not taken adequate measures to prepare our practices for an emergency.

Polls have shown that nearly three-quarters of the American public are concerned that there may be another terrorist attack. Yet nearly two-thirds of the population have made no emergency plans. That's one of many reasons why it's important for you to develop an emergency plan for your own practice.

Just having a plan will increase your staff's confidence during an emergency, and knowing that you have such a plan will also reassure your patients. Interestingly, the public's confidence in the healthcare system has waned in this respect. In 2002, over half the population thought the system was equipped to respond to a chemical, biological, or terrorist attack; but that figure declined to just 28 percent only two years later. An even lower percentage of people thought that the healthcare system would be prepared for a pandemic flu situation. But the good news, confirmed by research, is that, while they no longer seem to trust the health-care system, they still trust their doctors.

An emergency plan takes time, energy, and money, but it proves invaluable when a disaster actually strikes. It pays to recognize from the outset that no matter how good your plan may be, it's never going to be perfect—because the disaster is never going to happen the way you expect. As one expert says, “The only certainty is uncertainty.”

How do you get started? A good first step is to start thinking about the kinds of threats that are specific to your particular area. Is your area earthquake prone? Are you near a chemical plant? Is your town susceptible to wildfires? Are you in a hurricane zone, or do you experience a lot of severe winter storms? Obviously, a plan that works in a Florida hurricane is not going to work in a Colorado snowstorm.

In starting your plan, the first basic questions you need to ask yourself are these: In an emergency, where do my staff and I go? What do my staff and I do? And how do my staff and I do it?

Once those basics have been addressed, your emergency plan should consider every conceivable situation in which you and your staff might find yourselves during an emergency. What will your staff do if Internet access and telephones are down, or if there is a power failure? How will the staff deal with patients who are already waiting in the office? What happens if you need to evacuate your building? And if the office is destroyed or not accessible, how will your staff access patient records? If you are expected to report in an emergency to a local hospital, who is going to replace you at your office? Do you have personal protective equipment on hand in your office, and does your staff know how to access and use it? In

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case of an unusual outbreak, how will you handle patients to make sure they are dealt with in an appropriate order?

Depending on the size of your community, you can also contact your area's emergency preparedness managers in the local fire department or health department. Most community hospitals have some sort of preparedness plan for disasters, including pandemic flu, bioterrorism, or a mass casualty incident. Physicians should take time to become familiar with their hospitals' surge capacity plan, in particular.

For doctors who don't feel comfortable diving into an emergency preparedness plan on their own, one expert recommends joining with other physicians in a group practice or at a hospital or local medical society, to work on plans for handling an emergency as a group. This group approach can add valuable flexibility to the plan.

Another solution is to delegate the emergency planning to a risk management consulting firm. These firms help practices on a wide range of projects, from a simple fire safety plan to a full-blown disaster plan, complete with training and drills. Time savings is the main reason physicians outsource their emergency planning, but it can also be a great relief to spare your staff the heavy paperwork involved.

However you choose to do it, having an emergency preparedness plan is an excellent way to ensure and extend your practice's healthcare.

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