



## **Hospital Procedures for Receiving Evacuated Patients in the *At-Risk Registry***

- This document is intended to be used by hospitals to track patients received from a hospital evacuation during a hurricane or similar scenario.
- The attached hospital evacuation decision flowchart provides some key context and triggers for evacuation decisions and processes followed by hospitals and DRCs.

### **State/Regional Supported Patient Movement Expectations**


1. DRCs will contact hospitals through routine communications channels to inquire about capability to surge.
2. After verbal/text confirmation that patient(s) can be accepted, DRC will assign patient(s) to facility in the ARR.
3. Receiving facility will login to the ARR when patient arrives, and they should see all patients assigned to them – see attached screenshots.
  - a. Using the “Edit Patient Locations” screen, find the patient received and select the corresponding check box to the far left.
  - b. Double-click the *Location* field and select “At Destination Hospital”.
  - c. Click “Post” at the far right of the screen.
4. Do this for each patient that arrives at the facility from the evacuation.

### **System Level and Specialty Patient Movement**

Hospitals receiving patients directly from another facility should follow the same steps to receive the assigned patient, starting with Step 3 above. Internal movement of patients within systems and specialty patient movement, such as NICU or burn evacuation, may not be coordinated through the DRC, however they should still follow the same steps.

Step 1

Verify the correct event  
Select “Edit Patient Locations”



**WATCHPOINT**  
AtRisk Registry

Edit Patient Locations

2023 April Patient Movement Exercise

-- Select a Re

-- Choose Action --

**Patient Actions**  
Patients  
Patients (Expanded)  
**Edit Patient Locations**  
Edit Patient Flight Info  
Edit Patient Demographics  
Edit Patient Respiratory Status  
Local MCI Patient Tracking  
Patient Location Summary  
Edit NICU Patient Status  
Edit Patient Reception

**EMS Actions**  
EMS Patient Movement

**Hospital Actions**  
Hospital Status

**Download / Upload**  
Download Patient Template

Bulk Edit

group results.

Last Name	First Name	Orig. Hospital ID
A Test	Patient 3	00003333
A Test	Patient	00001111
A Test	Patient 2	000002222

## Step 2

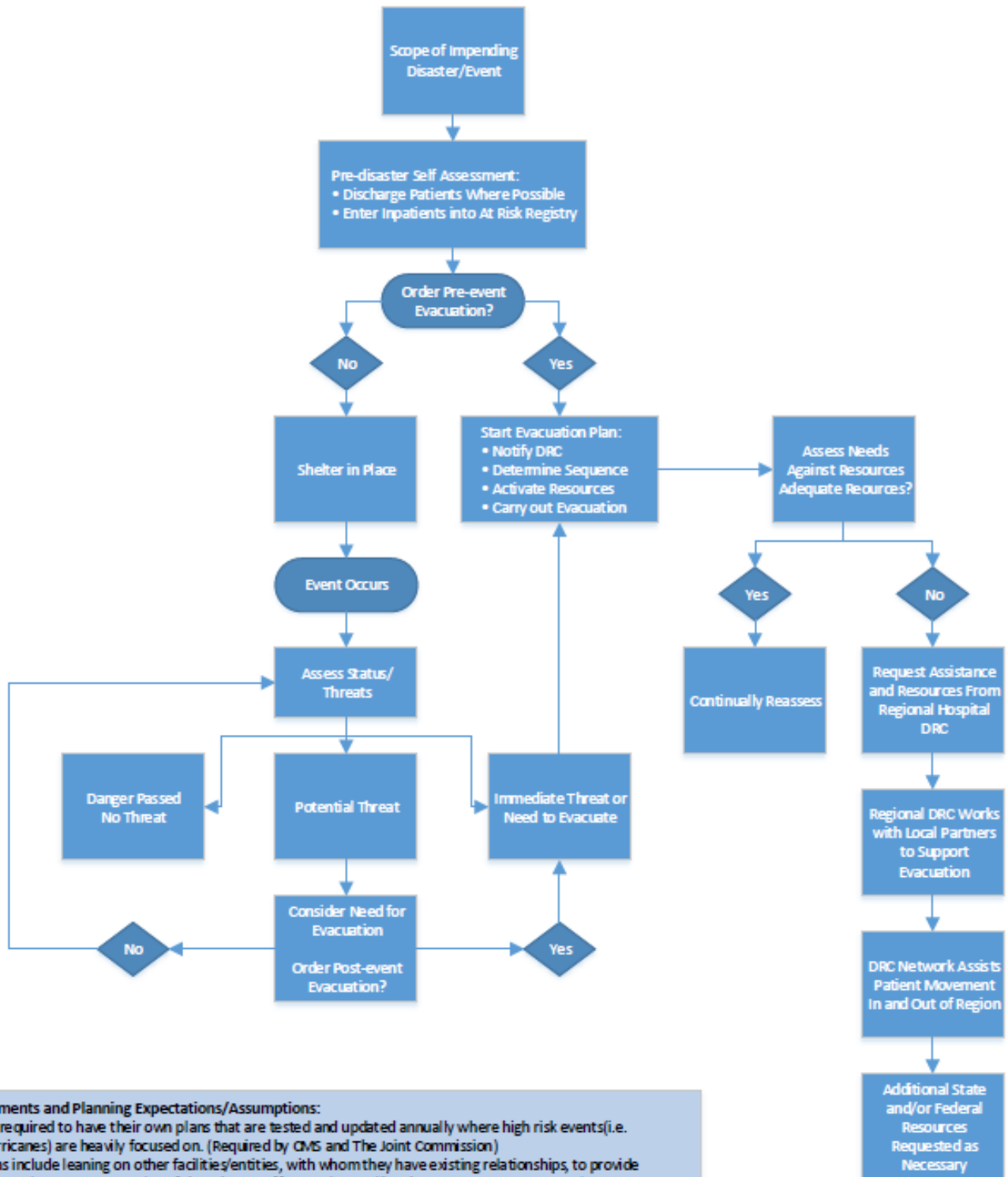
Double click the location field for the arrived patient, select "At Destination Hospital"

Originating Hospi	Location	Last Name	Firs
Acadian Medical Center	At Originating Hos ▼	A Test	Patient 3
Acadian Medical Center	Departed for AMP	A Test	Pa
Acadian Medical Center	At AMP	A Test	Pa
Acadian Medical Center	On Plane	A Test	Pa
Acadian Medical Center	Returned to Hospital	A Test	Pa
Acadian Medical Center	Arrived at FCC	A Test	Pa
Acadian Medical Center	At Destination Hospital	A Test	Pa
Acadian Medical Center	At Originating Hospital	A Test	Pa
Acadian Medical Center	In Private Transit	A Test	Pa
Acadian Medical Center	Done	A Test	Pa
Acadian Medical Center	Whereabouts Unknown	A Test	Pa
Acadian Medical Center	Ready for Pickup	A Test	Pa
Acadian Medical Center	State EMS Requested	A Test	Pa
Acadian Medical Center	State EMS Assigned	A Test	Pa
Acadian Medical Center	State EMS Arrived	A Test	Pa

Scroll to the far right, select "Post"

<< < 1 > >		
Dest. Hospital #	Dest. Hospital	
Pointe Coupee Ge ▼	Pointe Coupee General Hospital	Post Cancel
15092	Pointe Coupee General Hospital	Edit Delete
15092	Pointe Coupee General Hospital	Edit Delete

## Facility Advanced Warning Evacuation Decisions



### Legal Requirements and Planning Expectations/Assumptions:

- Hospital are required to have their own plans that are tested and updated annually where high risk events (i.e. Hurricanes) are heavily focused on. (Required by CMS and The Joint Commission)
- Hospital plans include leaning on other facilities/entities, with whom they have existing relationships, to provide support in an emergency (ex. If they share staff or services, utilize the same EHR systems, etc.).
- Hospitals have existing contracts and plans to respond to disasters and will implement those contracts or plans before requesting assistance from the region or state. These plans include contracts for EMS/Transportation, supplies & resources to shelter in place (SIP), and pre-determined locations for patient evacuation.
- State requires hospitals to notify the Hospital Designated Regional Coordinator (DRC) if they intend to evacuate. Hospitals will request additional resources if their plans or resources are not adequate. Each region has at minimum 1 Hospital DRC and 1 EMS DRC to represent state health and medical response or Emergency Support Function 8 (ESF-8). The Hospital and EMS DRCs will assist with securing resources from local or state partners.
- Hospitals and regional plans account for leveraging facilities outside of impacted areas to not place the burden on nearby facilities they may be experiencing similar impacts or surges in patients – many times it is unknown how many sick or injured patients may self-present following a storm when 911 may be down.