



## Oklahoma State University

<b>Title: Emergency Mode Operation Plan</b>	<b>Policy #: SEC-06.03</b>
<b>Category: HIPAA Compliance</b>	<b>Authority: 45 CFR § HIPAA SECTION: 164.308(a)(7)(ii)(C)</b>
<b>Standard: Contingency Plan</b>	<b>Responsibility: Health Care Components</b>
<b>Effective Date: 4/20/2005</b>	<b>Pages: Page 1 of 3</b>
<b>Approved By: OSU Legal Counsel</b>	<b>Revised: 7/1/2013</b>

### PURPOSE:

Identify Emergency Mode Operation plans for clinic systems

### POLICY:

OSU will establish (and implement as needed) procedures to enable continuation of critical business processes for protection of the security of electronic protected health information while operating in emergency mode. §164.308(a)(7)(ii)(C)

During an interruption of electronic services, either by forces of nature or system failures, the OSU clinic systems will continue business using Emergency Mode Operations.

### PROCEDURE:

- I. **Emergency Notification:** The Medical Director, Director of Clinic Financial Services, I.T., Director of Physical Plant, Security and corresponding Department Chairs should be notified immediately of the interruption of services and expected restoration of those services.
- II. Procedure for operations during an emergency
  - A. Total Facility Power Outage
    1. Patient Care: The goal is to provide an environment that allows both completion of required exam treatment, appropriate triage as needed, safe dismissal for later follow-up as appropriate, and communication with those patients scheduled for later in the day.
    2. Patient Check-in: The Patient Financial Counselors will manually write the patients demographics on the patient's feeslip at the arrival time of their scheduled appointment.
      - a. First name, middle initial and last name
      - b. Date of birth
      - c. Address
      - d. Phone Number(s)
      - e. Social Security Number – if provided
      - f. Insurance company information – if provided



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3. Notification of patient arrival to nursing staff if telephone is operable.
  - a. Call nurse station when feeslip is manually completed
4. Notification of patient arrival to nursing staff without telephone service.
  - a. Manually walk the feeslip to nurse station
  - b. Use of walkie-talkies or cell phones shared between front desk and nurse stations
5. Patient schedules printed the day before
6. Emergency Lighting
  - a. OSU clinics have an emergency lighting system to help illuminate portions of the treatment areas.
  - b. Each clinic has been provided flashlights to use for guiding patients.
7. Procedures in Progress
  - a. Patient undergoing a procedure (pap smear, minor surgical procedure, etc) should be completed where needed using emergency lighting, or if able to be terminated, done so with assurance to the patient for completion later. (Example – suturing would generally be completed, while a pap smear would be halted, allowing the patient to get dressed and make certain it was scheduled for a later date or when power resumed.)
8. General Evacuation
  - a. Using flashlights and emergency lighting, the nursing staff will direct the patients from the treatment area to the general reception area.
  - b. Patients are counseled by the Nursing and Scheduling staff about the visit. If an extended time of power outage is expected, patients should be rescheduled using written paper documentation.
  - c. Short power outages would serve only as a disruption and at its conclusion patient care would resume as usual.
9. Scheduled Appointments



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- a. If an extended time is expected, the Scheduler would attempt to notify patient in advance and suggest that they reschedule. Cellular phones would/may need to be used by the staff.
10. Medication/Reagents: A power outage will put at risk medication and reagents that are temperature sensitive.
    - a. OSU CHS MM004 Policy and Procedure covers the storage and monitoring of medications
    - b. OSU CHS L001 Policy and Procedure covers the storage and monitoring of laboratory reagents
  11. Power Outage Checklist :
    - a. Direct all patients and employees to the general check-in area where outdoor lighting is available
    - b. Check the treatment areas, rooms, to be sure everyone was evacuated
    - c. Turn off all computers in the clinic system
    - d. All lights and equipment are to be turned off to reduce the immediate electrical load on the power grid when power is restored
    - e. Refrigerated medications and laboratory reagents are to be placed in a cooler and transported to another facility where power is functioning normally
- B. Primary Practice Management Computer Failure: Patient care continues uninterrupted utilizing paper documentation. Refer to Policy SEC 12.02 Emergency Access for further guidance.
  - C. Primary Electronic Medical Records Failure: Patient care continues uninterrupted utilizing paper documents. Refer to Policy SEC 12.02 Emergency Access for further guidance.
  - D. For additional information, refer to the CHS Emergency Operations Procedures in the CHS contingency and business continuity plans.