Hurricane Preparedness Plan
(This Plan implements the hurricane portion of Munroe Regional Medical Center’s Emergency Management Plan, Chapter VIII, Number 11.)

Approved

Date

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Hurricane Preparedness Plan
Revision 5
8/23/2012
Munroe Regional Medical Center
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Committed Dates
April – Review and revise the Hurricane Preparedness Plan, as needed – Safety Officer
May - Training on Hurricane Preparedness Plan – Safety Officer
June 1st – Update condition of facilities documentation – Risk Management Director
June 1st – Complete Director’s Checklist (At. 31)
June 1st – Complete Exemption Form (At. 29)
June 1st – Complete Childcare/Dependant Care Needs Form (At 13)
June 1st – Complete Hurricane Pre-season Associate Checklist (At. 32)
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I. PURPOSE:
It is the intent of this plan to give the CEO, INCIDENT COMMANDER, Administrator on Call or designee, Hospital Vice Presidents, other management and staff a guideline to use in preparing Munroe Regional Medical Center (MRMC) and TimberRidge Emergency Center (TREC) to continue to carry out their health care mission:

- Protect our patients, staff and visitors.
- Maintain quality care for our patients.
- Protect property and assets.
- Prioritize tasks to be performed utilizing available resources and personnel.
- Assure self-sufficiency before the storm strikes to operate for at least 72 hours after the storm passes.
- Resume normal operations quickly.

(Other outlying facilities with one exception are closed during hurricanes. See definition of Hospital.)

II. DEFINITIONS:

HOSPITAL: Use of the word “hospital” in this plan is intended to cover the primary health care facilities, MUNROE and TIMBERRIDGE. (Other outlying facilities will prepare for the storm per their checklists. These facilities (with the exception of MIS) in the Magnolia Center will be closed for the storm period commencing during the Hurricane Watch.)

HURRICANE: Tropical cyclone in which winds reach constant speeds of 74 miles per hour and/or dangerous high tides and waves.

HURRICANE ALERT: Issued when a storm poses a possible threat to an area where the landfall probability at 48-72 hours in advance of a hurricane is 10% or higher; or when issued by the National Hurricane Center.

HURRICANE WATCH: Issued when there is threat of hurricane conditions within 24 hours to 36 hours. Safety precautions requiring more than 18 to 24 hours should be initiated.

HURRICANE WARNING: Issued when hurricane conditions are expected within 24 hours or less.

HURRICANE SEASON: June 1\textsuperscript{st} through November 30\textsuperscript{th}.

HURRICANE DISASTER POTENTIAL SCALE: An experimental effort by the National Weather Service to give public safety officials a continuing assessment of the potential for wind and storm surge damage from a hurricane after it reaches a point where it could threaten coastal populations.
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Category One Storm: Winds of 74 to 95 mph. Damage primarily to shrubbery, trees, foliage and unanchored mobile homes. No real damage to other structures. Some damage to poorly constructed signs; storm surge 4 to 5 feet above normal. Low lying coastal roads inundated, minor pier damage, some small craft in exposed anchorage torn from moorings.

Category Two Storm: Winds of 96 to 110 mph. Considerable damage to shrubbery and tree foliage, some trees blown down. Major damage to exposed mobile homes. Extensive damage to poorly constructed signs. Some damage to roofing materials of buildings; some window and door damage.

Category Three Storm: Winds of 111 to 130. Foliage torn from trees, large trees blown down. Practically all poorly constructed signs blown down. Some damage to roofing materials of buildings; some windows and doors damaged. Some structural damage to small buildings. Mobile homes destroyed; storm surge 9 to 12 feet above normal. Serious flooding at coast and many smaller structures near coast destroyed; larger structures near coast damaged by battering waves and floating debris. Low lying escape routes inland cut by rising water 3 to 5 hours before hurricane eye arrives. Flat terrain 5 feet or less above sea level flooded inland.

Category Four Storm: Winds of 131 to 155 mph. Shrubs and trees blown down and all signs down; extensive damage to roofing material, windows and floors. Complete destruction of mobile homes; storm surge 13 to 18 feet above sea level, floods inland. Major damage to lower floors of structure near shore due to flooding and battering by waves and floating debris. Low lying escape routes inland cut by rising water 3 to 5 hours before hurricane eye arrives. Major erosion of beaches.

Category Five Storm: Winds greater than 155 mph. Shrubs and trees down, considerable damage to roofs of buildings, all signs down. Very severe and extensive damage to windows and doors. Complete failure of roofs on may residences and industrial buildings. Extensive shattering of glass in windows and doors. Complete destruction of mobile homes; storm surge greater than 16 feet above normal. Major damage to lower floors of all structures less than 15 feet above sea level within 500 yards of shore. Low lying escape routes inland cut by rising water 3 to 5 hours before hurricane eye arrives.

TROPICAL STORM: A tropical cyclone in which the maximum sustained surface wind speed (using the U.S. 1-minute average) ranges from 39mph to 73 mph.

TROPICAL STORM WARNING: A warning that sustained winds within the range of 39 mph to 73 mph associated with a tropical cyclone are expected in a specified coastal area within 24 hours of less.
III. DEFINITIONS OF ROLES AND RESPONSIBILITIES:

RISK MANAGEMENT DIRECTOR/LIAISON: Monitors tropical depressions from the National Weather Service Hurricane Center and communicates Hurricane Alert, Watch and Warning advisories to Safety & Hospital Administration. Provides liaison communications with the County Emergency Operations Center before, during and after the storm.

CEO/INCIDENT COMMANDER/ADMINISTRATOR ON CALL: Upon receipt of a Hurricane Alert, Watch or Warning, ascertains the threat and may initiate the Hurricane Plan.

VICE PRESIDENTS: Upon receipt of a Hurricane Alert, Watch or Warning from the CEO/INCIDENT COMMANDER/EOC, implement Hurricane Plan Checklists (See Attachment 3.).

SAFETY OFFICER: Facilitates implementation of this “Plan” to assure safety of our patients, visitors, staff and facilities. This position also heads the Damage Documentation Teams for both Team A and Team B.

DAMAGE DOCUMENTATION TEAMS: Damage Documentation Teams will be integral to both Team A and Team B. The Teams’ duties include documenting, videoing, and photographing all damage or damaging causing situations before non-emergency repairs or clean-up is started. Actions of this team do not pre-empt repairs that are made to mitigate an emergency situation or one that will cause further damage if remaining unchecked. The Damage Documentation Team will affix a tag at each area surveyed noting time, date and person completing the survey. (See V., C-12 for example team.)

FEMA COORDINATOR: This position, designated by the IC on Team B, is the chief spokes person with FEMA representatives and coordinates the efforts of the hurricane damage repair Project Managers.

CRITICAL ASSOCIATE: A critical associate is an individual, designated by supervision, who performs essential functions during hurricane emergency situations before, during or after the storm. (Typically these are management, patient care staff, housekeeping, communications, facilities, food and nutritional services.)

All critical associates will be assigned to either Team A or Team B. Associates who do not provide direct patient care and whose departmental functions can be halted until the emergency situation is over will be deployed to the Labor Pool.
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All associates who are not initially assigned to either Team A or Team B are expected to avail themselves after the storm to be assigned to Team B functions. (Typically these associates have approved exemptions from participation. See Attachment 29 for the Exemption form.)

It is the expectation of the Hospital that all associates will prepare themselves to be available in emergency situations. If home evacuation is necessary, evacuation will be to approved shelters; associates are not to leave town unless given permission by their director to do so. (See Attachment 1 for Approved Shelters) The Hospital reserves the right to cancel leave and will not accept call-ins during emergency situations. (If an associate evacuates, they are expected to communicate their location, status and contact method to the Hospital as soon as possible after the storm.)

TEAM A: Team A consists of those personnel who will remain on-site during the storm from activation until the All-Clear is given and relieved by Team B. Team A consists of staff for 2-each, 12-hour shifts. (Shift start times are 0700 & 1900.) (See VII, A. for staffing of EOC for TimberRidge.)

TEAM B: Team B consists of those personnel who will relieve Team A and participate in the Recovery Phase or normal operations as assigned.

PROJECT MANAGERS: During the Recovery period, the INCIDENT COMMANDER may assign a project manager to each job/task identified from the data provided by the Damage Assessment Officer. This position will be responsible for tracking all work; documenting details of each effort using verbiage, videos, and pictures; obtaining competitive quotations via Materials Management; and tracking all time, materials, and costs associated with the project.

(Other management positions assigned to hurricane teams have similar or same responsibilities as dictated by normal operations.)

IV. MAIN OBJECTIVES OF THE HURRICANE PREPAREDNESS PLAN:
A. Protect Munroe Regional Medical Center’s patients, staff and visitors.
B. Maintain quality care for patients.
C. Protect property and assets.
D. Prioritize tasks to be performed utilizing available resources and personnel.
E. Assure self-sufficiency before the storm strikes to operate for at least 72 hours after the storm passes.
F. Resume normal operations quickly.
V. ACTIONS/RESPONSES:
Upon announcement of a Hurricane ALERT, WATCH or WARNING, Department Managers will immediately implement/commence/complete their respective Hurricane Plan Checklists. The Incident Commander will issue a Code Brown, disaster code used to announce a hurricane, to formally enter the Emergency Management Plan. A Hurricane Watch or Warning issued by the National Hurricane Center will supersede the hospital’s “Alert Status.”

A. Hurricane Alert – Entering the Emergency Management Plan
1. The CEO/INCIDENT COMMANDER/Administrator on Call will announce a Hurricane ALERT upon initiation of Hurricane ALERT by the National Weather Service Hurricane Center in Miami for the Marion County area. The Incident Commander will announce a 1 if/when the forecasted track indicates that Ocala/Marion County falls within the probability cone.
2. The INCIDENT COMMANDER will notify Vice Presidents and the Chief of the Medical Staff that the Emergency Management Plan has been entered and to begin preparations using the Hurricane Preparedness Plan, their standard preparation checklists, and/or the checklist in Attachment 3.
3. The INCIDENT COMMANDER will schedule a Readiness Briefing with all vice presidents and directors to assure readiness using the format in Attachment 28 – Incident Commander’s Checklist.
4. Information will then be passed on to all Department Directors to commence any hurricane preparedness activities that will take 48 or more hours to complete.
5. Departments will begin preparing for the storm which will entail:
   - All units and departments will begin Checklists (Unit specific checklists from Attachment 3 – Generic Checklist)
   - Verify availability of supplies with vendors
   - Verify phone numbers and addresses of staff, etc.
   - Low cost and time consuming tasks should be started in all Departments
   - The Incident Commander will ensure that pre-hurricane photo and video histories have been updated using designated hospital personnel or a department. (Risk Management will normally have completed this task before July of each year.)
   - Activate internal communication plans for associates and patients. Internal communication will contain standardized verbiage and date/time markings and will be transmitted emails, faxes, Teletalk line 402-5333, briefings, beeper messages and cascade of information. See Attachments 16 and 18.
   - Activate computer/Electronic Equipment Protection measures
   - Activate Labor Pool preparations
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- Prepare staffing plans and transmit them to People Services.
- As soon as possible, dismiss Team B for 24 hours to prepare their houses and properties for the storm. Team A will continue with storm preparations.

6. If landfall probabilities remain the same, the INCIDENT COMMANDER may upgrade the Alert status to Watch after analyzing the current hurricane position and probability charts published by the National Weather Service (NWS).

B. Hurricane Watch

1. The INCIDENT COMMANDER will announce a Hurricane WATCH upon announcement initiated by the Hurricane Center if not already in a Watch.
2. Departments will:
   - Complete low cost and time consuming tasks
   - Start all other tasks that take longer than 24 hours to finish
3. Facilities will secure the physical plant, i.e., clear entire campus and building roofs of all debris, secure linens and scrubs per Checklist
4. Materials Management will expedite all shipments and stocking supplemental supplies, i.e., fuel, food, water, waste disposal apparatus, plywood, tarps, flashlights, batteries, etc.
5. Implement Team A/Team B assignments at the beginning of the Hurricane Watch period.
6. Team A personnel will be dismissed to prepare their homes and property for the storm and report back per instructions. (Reporting to work instructions or schedule will have been given at VP-Directors Briefing.) Team B personnel will continue storm preparations at the hospital.
7. Ensure that all possible discharges are being completed without delay as they are ordered. (This task will continue as long as feasible. The discharged person’s travel safety must be a primary consideration as the storm approaches.)
8. PIO will compose and issue a “Letter to Patients” that describes hospital preparations and procedures during and after storm. (See Attachment 7.)
9. People Services will verify staffing plans including the management assigned to Teams A and B. Unit Managers and Department Directors will inform Team A associates that upon issuance of a Hurricane WARNING they are to report to the Hospital per staffing plans in accordance to the Readiness Briefing. Inform associates that telephone communications may be out at the time of the Hurricane WARNING announcement; therefore, they should not rely on telephone notification to report to work.
### Hurricane Preparedness Plan

**Alternate sources of information include the Teletalk line and radio & TV announcements by the following stations:**

<table>
<thead>
<tr>
<th>Radio Station</th>
<th>Contact</th>
<th>Email</th>
<th>Fax</th>
</tr>
</thead>
<tbody>
<tr>
<td>K-Country 93.7 FM</td>
<td>Jim Robertson</td>
<td><a href="mailto:ncfmrbob@earthlink.net">ncfmrbob@earthlink.net</a></td>
<td>(352) 622-7822</td>
</tr>
<tr>
<td>WIND-FM 92.5 &amp; 95.5 FM</td>
<td>Kevin Davis</td>
<td><a href="mailto:crash@windfm.com">crash@windfm.com</a></td>
<td>(352) 622-1900</td>
</tr>
<tr>
<td>WSKY 97.3 FM</td>
<td>TJ Hart</td>
<td><a href="mailto:tjhart@entercom.com">tjhart@entercom.com</a></td>
<td>(352) 351-0229</td>
</tr>
<tr>
<td>WKTK 98.5 FM</td>
<td>Greg Ryan</td>
<td><a href="mailto:gryan@entercom.com">gryan@entercom.com</a></td>
<td>(352) 351-0229</td>
</tr>
</tbody>
</table>

**TV Stations**

<p>| | | | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>WCJB TV-20</td>
<td>Bob Williams</td>
<td><a href="mailto:gryan@entercom.com">gryan@entercom.com</a></td>
<td>(352) 371-0747</td>
</tr>
<tr>
<td>WESH Channel 2</td>
<td>Newsdesk</td>
<td><a href="mailto:desk@wesh.com">desk@wesh.com</a></td>
<td>(407) 539-7948</td>
</tr>
</tbody>
</table>

All stations will be asked to carry Hospital announcements.

10. Review and activate cost capture plan from entry to exit of event for possible reimbursement. Refer to the Emergency Management Plan, Form Section, VI-29, #23 – Procurement Summary Report or Attachment #20 in this plan.

### C. Hurricane Warning through Storm Duration

1. Upon announcement of a Hurricane WARNING issued by the Hurricane Center, the CEO (INCIDENT COMMANDER) or designee will direct all Vice Presidents to ensure completion of the final stages of their respective Hurricane Plan Checklists. All Vice Presidents shall notify their respective areas to fully activate their Hurricane Plan Checklist. Each Department will assign duties to their personnel.

2. Make final adjustments to staffing plans as necessary due to changes in patient volume or other conditions and send update to People Services.

3. **Team A will relieve Team B and Exempted Personnel.** Based upon the specific circumstances of the hurricane, Team A (both 12-hour shifts) will complete personal hurricane preparations and report back to the hospital prepared to work during the hurricane. Communications for Team A reporting will depend on their availability and may include: standard telephone, local radio stations, or Teletalk line. In any case, Team A personnel must report for duty in time for Team B to exit and have some time to complete final preparation of their homes and property.

4. MUNROE will send 2-persons to represent MUNROE and TIMBERRIDGE and ORMC hospitals at the County Emergency Operations Center. A bed report should be sent to the County EOC, ESF Emergency Medical …, as soon as possible after it opens. (See **Attachment 33, Additional Comments section**.)

5. Visitors will be asked to leave the Hospital premises. (See **Attachment 7** for sample scripting.)

6. Management will finalize and secure all reserve equipment and supplies to be used during the storm and the immediate 72 hours after the storm.

7. Hurricane staffing plans will be activated.

8. All eligible patients will be discharged.
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9. All elective surgeries and outpatient procedures will be cancelled and patients scheduled for elective surgeries will be discharged. (See Attachment 7 for sample scripting for cancellation of procedures.)

10. Security will lock all entrances except for the ED and 2-North entrances. Lifetime associates will be posted at the entrances to control access and provide identification bands for authorized persons (non-employees). (See Section VII, H, I, W and Attachment 24)

11. Persons seeking shelter at the hospital will be redirected to an official hurricane shelter. Security will handle this communication and will have a current shelter roster available. (See Attachment 1.)

12. People Services will activate overnight accommodation plans for associates and families as appropriate. (See Section VII, P. and Attachments 12 & 34.)

13. The Safety Officer, an Engineering associate, Infection Control associate, and assigned Education associate will constitute the Damage Documentation Team (DDT) during the storm. A Facilities person will be assigned to TIMBERRIDGE to perform DDT functions. Duties include documenting, photographing and/or videoing all damage or damage causing situations before non-emergency repairs or clean-up is commenced. Anyone finding additional damage or observing increased damage in areas already surveyed by the Damage Documentation Team will call the EOC or INCIDENT COMMANDER directly and report it. Repairs except to mitigate emergency situations will not commence until the DDT resurveys the area.


D. Post Hurricane – ALL CLEAR

1. After the Hurricane, upon announcement of ALL CLEAR by the INCIDENT COMMANDER, critical associates who worked during the hurricane (TEAM A) will be relieved by staff designated to work after the hurricane (TEAM B). Associates who will be working after the hurricane will report for duty after the ALL CLEAR is announced. Team A will remain on duty until replacements arrive.

2. Associates working after the storm has passed (TEAM B) will not wait to be called or wait for the beginning of their regular shift but instead come to work after the ALL CLEAR announcement is made by the INCIDENT COMMANDER and when the wind is < 30 MPH. (In order to relieve Team A as soon as possible, working a partial shift may be required.)

3. Team A is expected to report back to work on their regularly scheduled shifts after 24-hours OFF, unless instructed otherwise.

4. Report to the State ESF-8 and County EOC using form in Attachment 33, using FAX, voice, & digital.
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E. Recovery Phase

1. The EOC will remain open and function as the operations hub for recovery efforts.

2. The Team B-INCIDENT COMMANDER (Recovery Phase of operations) will receive a full update on the situation upon relieving the Team A-INCIDENT COMMANDER.

3. The INCIDENT COMMANDER will begin scheduled briefings with Team B EOC management to ensure command and control over all recovery efforts is maintained.

4. A “Recovery Planning Group” may need to be established utilizing current or contracted assets according to the extent of damage and repair needs.

5. All associates not on Team A or Team B are expected to report to work on their regular scheduled shift unless instructed otherwise due to recovery needs. **Shifts may need to be changed to accommodate the situation.**

6. **Non-emergency repairs and/or clean-up of specific areas will not commence until surveyed by the Damage Documentation Team.**

7. **If deemed necessary or helpful by the Damage Assessment Officer,** the Safety Officer, Infection Control, an Engineering associate, and assigned Education personnel will continue Damage Documentation Team (DDT) efforts during the Recovery Phase. Duties include documenting and photographing all damage or damage causing situations before repairs or clean-up is commenced. Anyone finding damage or observing increased damage in areas already surveyed by the Damage Documentation Team will call the EOC or INCIDENT COMMANDER directly and report it. **Non-emergency repairs, if started, will cease until the DDT resurveys the area.** (Damage documentation data from Team A will be given to the Team B - INCIDENT COMMANDER before leaving the facility after the storm. Data may need to be added later to the so-far identified issues. The TIMBERRIDGE DDT person will turnover data to the person in-charge of the building before leaving.)

8. The INCIDENT COMMANDER will coordinate all necessary external aid with the County EOC even when covered by the Emergency Management Plan. **(Attachment 30 - Communications may be helpful.)**

9. The INCIDENT COMMANDER will give an assessment updates of the damage and hospital status to the ESF position at the County EOC and request a FEMA project person if necessary.

10. The INCIDENT COMMANDER may designate a Project Manager to manage each repair and clean-up project/effort. All internal and external time and materials used will be captured for each project using specific assigned cost codes. All contractors must provide detailed invoices that delineate all time, materials and actions. FEMA requires a tremendous amount of detail before allocating reimbursement monies.

11. A schedule will be developed for the Recovery Phase as soon as possible and a “critical path” listing/chart put together.

12. The PIO will prepare a form letter authorizing contractors and other workers to enter the disaster area.

The INCIDENT COMMANDER will exit the Emergency Plan when the hospital is no longer dependent on emergency measures to sustain operations. (Immediate emergency measures that have been well established should be viewed as “temporary” versus “emergency” in making this decision. This decision should be discussed with the County EOC and/or State, if the determination is difficult, questionable, or not obvious.)

VI **PRE-HURRICANE PLANNING:**

A. **Staff Involvement/Familiarization**

The Safety Officer will oversee the development and implementation of a Hurricane Plan orientation program. This program will be presented to Leadership in a yearly update normally in the month of May.

1. Department Directors/Managers are responsible for ensuring that their associates are familiar with their department plans.
2. Department Directors/Managers are responsible for developing and implementing specific Department Hurricane Plans including staffing before, during and after a storm, work and rest schedules.
3. Staffing Plans will designate a 2-shift rotation (12-hours each, 0700 & 1900) for Team A. (Suggested patient care staffing for Team B is normal patient ratio plus 10% for after storm patient surge.) **Both Team A shifts** will report for duty when this portion of the Plan is activated and remain on-site until the Incident Commander gives the All-Clear AND they are relieved by Team B.

B. **Medical Staff Preparation**

The Senior VP, Medical Affairs/CQO is responsible for preparing a list of physicians who will be present during the storm.

1. At least one physician from each medical field is recommended. Physician’s family members will be accommodated.
2. The Senior VP, Medical Affairs/CQO is responsible for ensuring that physicians are familiar with the Hurricane Plan.

C. **Insurance Policy and Documentation – Risk Management Department**

- Insurance policies are reviewed annually by the Risk Management Department. During the year, insurance policies are monitored as appropriate for changes in coverage by insurance companies. If necessary, or in the event of exclusion, alternative means of risk transfer are pursued to maintain adequate insurance coverage.
- “As is” conditions of all facilities and grounds will be documented or updated during the month of May - prior to the start of hurricane season on June 1st.
D. Liability Issues
Any reported injury to anyone on-site will be duly investigated by Security according to established policy. All personnel will remain in the Hospital until an ALL CLEAR is called.

E. Backup Records
Department Directors are responsible for ensuring that proper backup records are kept. It is recommended that a separate set of backup records be kept at an alternative storage area. Computer systems are especially vulnerable and must be backed up in advance prior to fluctuations in electrical power that can occur during severe weather. The MIS Department will ensure essential electronic records associated with the net are backed up.

F. Computers and Down-Time
- If computer systems are not operational, all Departments are to handle actions manually using “down time forms”.
- Computer protection information is in Attachment 6.
- EOC Email Box information is in Attachment 10.

G. Public Service Coordination
1. The Director of Risk Management/Liaison Officer will assure that the Hospital remains in communication with various public service organizations, especially the Marion County EOC. (See Attachment 30 – Communications.)
2. Fire /EMS: The Emergency Department will have direct communications with Fire/EMS service via MEDCOM radio located in the E.D. Information obtained by the Emergency Department will be relayed to the EOC.

The INCIDENT COMMANDER or designee is responsible for coordinating the transportation of patients to other health care facilities if the need to evacuate occurs. External transportation arrangements will be contracted through Materials Management. Transportation providers must be qualified to transport acute care patients. (i.e. EMSA & Marion County Fire Rescue.)

H. Mutual Aid/ Transfer Agreements
Munroe Regional Medical Center has entered into VHA SE mutual aid/transfer agreements. Other memorandums of understanding are contained in the Emergency Management Plan. Normally coastal hospitals will evacuate inland to facilities such as MUNROE. However, if off-site power is interrupted for an extended length of time and/or the building receives substantial damage, MUNROE may be forced to evacuate patients to another facility listed in the VHA SE agreement. Note: Keep in mind that most hospitals do not have adequate emergency power to support air conditioning systems and are vulnerable to having a “sick building” if they have suffered loss of off-site power for any length of time. Shands in Gainesville may have continuous power due to the close proximity of a commercial power plant. (See Attachment 2 for the VHA SE agreement letter.)
Requirements for transfer: In the event that patient transfers become necessary, adequate professional/licensed staff, medical supplies, patients medical records and treatment plans, linens, nonperishable food, two gallons of bottled water per patient and any other items that are known to be needed prior to transfer are the responsibility of the transferring facility as per applicable agreement. Supplies are to be brought with all patients accepted from other hospitals/healthcare providers.

I. Supplies
1. Each Department Director is responsible for providing a list of supplies needed prior to final Hurricane Checklist implementation. This information will be entered into the vendor computer to insure automatic issue of the required items when requested by the Director of Materials Management. (See Attachment 9 for vendor/distributor listing.)
2. The Materials Management Department will make space available to store extra supplies during the hurricane emergency in a secure, protected, and dry area.
3. Engineering must have on hand prior to the final stages of a hurricane WARNING, enough supplies to handle any expected emergencies during the height of the storm and immediately after.
4. At the time of Hurricane WARNING status, Environmental Services must have enough linen and appropriate dumpsters to handle both biomedical and non-biomedical wastes on hand. Additional linen (minimum 4 days supply on hand) will be ordered in order to have the appropriate level of linen available for the hurricane season. Other supplies will include wet-vacs and materials to mitigate water damage in multiple areas due to building rain leakage or flooding. (Clean linen will not be used to mitigate leakage or flooding.)

VII. PROCEDURES DURING THE HURRICANE

A. Munroe Regional Medical Center’s EMERGENCY OPERATIONS CENTER
A schedule of briefings will be established by the INCIDENT COMMANDER. (See Attachment 21 for the briefing outline.) The hospital Emergency Operations Center (EOC), located in the Dining Room Conference Room, will be staffed per this plan in order to evaluate the situation as it progresses, initiate protective actions, assign personnel and volunteers to essential tasks, and assure communication with the County EOC, police, civil defense, and news media and other health care facilities as necessary. (The associate lounge in the Emergency Department area will serve as a backup hospital EOC.)
1. The EOC is responsible for the Coordination of Medical and Support staff. Ultimate decision making relating to facility operation will be made by the INCIDENT COMMANDER (CEO or designee).
2. Additional functions are:
   A. Control Space for people and supplies
Munroe Regional Medical Center
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- **Patient Related**: Chief Nursing Officer (CNO) or designee will coordinate all placements of patients.
- **Non-patient Related**: Placement of associates not actively working and who are not able to stay in their Departments and the families of associates will be coordinated by the Vice President of People Services or designee. This will include sleeping and nonworking areas.
- **Supplemental Hurricane supplies**: Not stored in Departments will be controlled by the Materials Management Department.

B. Damage control and repair will be coordinated by the Director of Facilities or designees.
C. Damage assessment and documentation will be coordinated by the Safety Officer.

3. The Emergency Operations Center will be staffed as follows:

- **During the Hurricane (Team A)**

  Munroe Regional Medical Center

  - *(Team A Goal: To provide sufficient command, control and leadership prior to and during critical storm situation to complete the mission described in the purpose of this plan.)*
  - Executive Staff – as designated
  - Director Facilities & Appointed Staff
  - Director Nursing (2)
  - Director Ancillary Department (2)
  - Safety Officer (Damage Documentation Team* & Technical Advisor)
  - Director of Risk Management
  - Lead Respiratory Therapist Assigned to ICU
  - Director Food & Nutrition or Designee
  - Chaplain
  - Secretary (2) – 1 from Patient Care and 1 from Administration
  - Representatives from hospital tenants – i.e. Kindred
  - HAM Radio Operator (2) (Volunteers – Marion County Emergency Radio Team (MERT)). MRMC will serve as the communications hub for all hospitals.

  TimberRidge Emergency Center

  The following additional staff will be assigned to TIMBERRIDGE’s Team A:
  - Damage Documentation Team member (Facilities person)
  - HAM Radio Operator (2) (Volunteers – Marion County Emergency Radio Team).

  County Emergency Operations Center

  - MUNROE will send 2-persons to represent MUNROE and TIMBERRIDGE and ORMC hospitals at the County Emergency Operations Center. These persons will take an 800 MHz portable radio and serve as a communications link to the MUNROE EOC and others as necessary. These personnel may split shifts with ORMC associates.
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All routine Hospital Departments will be open for patient care needs (Pharmacy, Lab, Radiology, etc).

*The Damage Documentation Team will include the Safety Officer, Infection Control associate, Facilities associate, and others.

Team A **and** Team B EOC staff will bring to the hospital:
- Personal Medications
- Money
- Sleeping items – pillow, linens, or sleeping bag
- Towels & Soap
- Change of Clothing for 3 days
- Flashlight
- Snacks
- Water – 1 gallon

Team “B” EOC staff will report to the hospital Emergency Operations Center when wind is less that 30 MPH and it is safe to travel.

**After the Hurricane (Suggested Team B)**
*(Team B Goal: To provide sufficient command, control and leadership through the recovery phase and resume to normal operations)*
- Incident Commander
- Executive Staff – as designated
- Facilities Staff – as designated
- Directors Nursing – as designated
- Director Auxiliary -as designated-
- FEMA Coordinator – as designated
- Safety Officer – as designated (Damage Documentation Team & Technical Advisor)
- Director of Risk Management – as designated
- Chaplain
- Secretary (2) – as designated
- Representatives from hospital tenants – i.e. Kindred
- Employee Health Nurse – as designated
- HAM Radio Operator (2 from MERT) (If conditions warrant, this function will continue.)

TimberRidge Emergency Center – According to conditions:
- The following additional staff may be assigned to TIMBERRIDGE’s Team B:
  - Damage Documentation Team member
  - HAM Radio Operators (2 from MERT)

County Emergency Operations Center (If conditions warrant, this function will continue.)
Munroe Regional Medical Center
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- MRMC will send at least one person to represent MUNROE and TIMBERRIDGE at the County Emergency Operations Center. This person will serve as a communications link to the MUNROE EOC. This person should take an 800 MHz portable radio and charger with them to establish a direct radio communications link.

4. The Communications Department will maintain at least two phone lines specific for disaster emergencies. At least one will be available for incoming calls in the Emergency Operations Center. Another phone line will be utilized for damage control reports, to be given as they occur.

5. The EOC will be setup at least 24 hours before storm and all communications equipment checked. Facilities will notify the Emergency Preparedness Coordinator or Safety Officer about the results of the communications check.

6. Department Directors and Managers are responsible for assuring that all damage is communicated immediately to Facilities and then to the EOC or Safety Officer for documenting and photographing purposes as it occurs. This includes flooding, leaks, and breakage.

4. Backup communication methods are vital, therefore assure that alternatives are near-by in a ready or stand-by mode. (See Attachment 30 – Communications.)

B. MARION COUNTY EMERGENCY OPERATIONS CENTER

The MUNROE representative at the County EOC is the primary communications link for immediate updates on the countywide storm situation, for requesting aid or services from the State, for requesting aid or services from the Federal Government, and for linking the hospital with FEMA. The following is a summary of primary actions upon arrival at the County EOC (CEOC):

- Establish both telephone and 800 MHz radio communication with the Liaison Officer position/designee at the MUNROE EOC. Use the “Hospital-Group” channel for radio communication if other not prescribed.

- Obtain a copy of the opened shelters and FAX it to the EOC.

- Determine who is doing what in the CEOC and introduce yourselves.

- Ensure that the following is communicated to the appropriate representatives in the CEOC:
  - MUNROE, TIMBERRIDGE, ORMC, and WEST MARION are treatment facilities and not shelters.
  - Our personnel who will be traveling before and after the storm will be identified by badges and need to be granted free passage to and from their assigned facilities.

- Ensure that you know how to request assistance for the following:
  - Disaster Medical Assistance Teams – Supplement ED including MDs after the storm. (ESF 8)
  - National Guard – Assist Security. (ESF 13 & 16)
  - FEMA – Provides a representative to help with damage assessment and claims and other services. (May be multiple ESFs or single accountability.)
C. Media Control/Media Control Area
The VP, Community Development/PIO or designee is in charge of media control.
- The PIO prepares and disseminate continuous and timely disaster update information to the news media. Information may include: condition of hospital, number of victims treated or being treated, the nature of the injuries, and other patient conditions.
- The PIO coordinates information regarding activities of the Hospital with official outside agencies and provides information to outside media callers who have the need to know. The PIO is authorized to obtain information pertinent to the disaster from the Hospital Departments and staff members for the express purpose of public information.
- Any members of the press who will stay in the facility must be cleared by the IC/EOC.
- The PIO prepares internal and external communications to associates and others from initiation of this plan through completion of the recovery phase. This includes reviewing the Teletalk messages before they are sent. (See Attachments 7, 16 and 18 for internal communications.)

D. Associates/Staffing
Team A
1. In order to avoid needless, excessive telephone use during a Hurricane threat, a list of staff available to work during or after a hurricane will be completed by each Department Manager at the beginning of the hurricane season and verified at the beginning of the Hurricane ALERT by each department.
2. Departments having no specific hurricane preparation or patient care duties shall be assigned to the Labor Pool. People Services will manage the Labor Pool and assure that the Labor Pool has correct staffing for both Teams A & B at the Hospital and at TimberRidge Emergency Center. (Utilize Attachment 15 if staffing is needed from the Labor Pool to assure continued services during the hurricane.)
3. It is essential that all personnel keep/remain informed of the status of the Hurricane by radio or television in order to know when to arrive at the Hospital after the storm has passed. The following radio stations will be used to announce hospital status information:
4. Upon the announcement of a Hurricane WARNING, personnel who will be working on TEAM A during the hurricane should immediately complete their preparation at home and report for duty at the hospital while driving is still safe. They will remain on duty until replacements (TEAM B) arrive. Associates should bring:
   - Hospital identification
   - Pillows and linens
   - Personal care items, medications, and change of clothes (3 day supply)
   - Water and snacks
5. Associates who will be working after the Hurricane will report for duty after the ALL CLEAR is announced by the INCIDENT COMMANDER. Team A will
remain on duty until replacements arrive and they have been released by their unit/department managers. Associates scheduled to work after the storm should not wait to be called by the hospital or for the beginning of their regular shift. **ALL CLEAR** information will be available on the Teletalk Line (402-5333) and the following radio & TV stations:

<table>
<thead>
<tr>
<th>Radio Station</th>
<th>Contact</th>
<th>Email</th>
<th>Fax</th>
</tr>
</thead>
<tbody>
<tr>
<td>K-Country 93.7 FM</td>
<td>Jim Robertson</td>
<td><a href="mailto:ncfmrobob@earthlink.net">ncfmrobob@earthlink.net</a></td>
<td>(352) 622-7822</td>
</tr>
<tr>
<td>WIND-FM 92.5 &amp; 95.5 FM</td>
<td>Kevin Davis</td>
<td><a href="mailto:crash@windfm.com">crash@windfm.com</a></td>
<td>(352) 622-1900</td>
</tr>
<tr>
<td>WSKY 97.3 FM</td>
<td>TJ Hart</td>
<td><a href="mailto:lhart@entercom.com">lhart@entercom.com</a></td>
<td>(352) 351-0229</td>
</tr>
<tr>
<td>WKTK 98.5 FM</td>
<td>Greg Ryan</td>
<td><a href="mailto:gryan@entercom.com">gryan@entercom.com</a></td>
<td>(352) 351-0229</td>
</tr>
</tbody>
</table>

**TV Stations**
- WCJB TV-20          | Bob Williams       | gryan@entercom.com             | (352) 371-0747 |
- WESH Channel 2      | Newsdesk           | desk@wesh.com                  | (407) 539-7948 |

6. Team A associates are to report for assignment according to departmental/unit plans upon arrival and checkout before leaving the Hospital. People Services will coordinate the check-in and check out process to maintain an inventory of associates by Department and shift. Associates are not to leave their assigned area unless permission is granted by their Supervisor.

7. Team A associates will be given time to make arrangements for the protection of their families and or personal property before reporting to the hospital. If approved by the Department Director, family members will be allowed to stay in the hospital during the hurricane.

8. **All hospital associates are required to park in the associate parking garage to insure the greatest safety for their vehicles.**

9. Department Directors/Nurse Managers are responsible for communicating to staff that the best place for members will be in an approved hurricane shelter. **Final decision concerning family members being at the hospital during this emergency period rests solely with the Department Director.** No pets will be permitted.

15. Manpower Utilization (See Attachment 14 for staffing rules and expectations. See Attachment 12 for Pay Rules).
   a. **Associate Dispatch Procedure**
      The Johnson Lobby will serve as the Labor Pool Dispatch center for manpower needs other than nursing. Each Department will be responsible for determining which of their associates and how many are available. They will communicate this information to the VP of People Services and will give updates as necessary. If manpower needs cannot be met by the department’s own associates, the Labor Pool will assign available personnel to the areas with the greatest manpower need.

   b. **Call Back Procedures**
      Each Department will update its call-back list regularly to assure the availability of current information on its personnel. A call-back list should consider the following:
      - Traveling time to Hospital, depending on associate’s address
      - Skill levels of various associates
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- Associates regular shift

Note: Pyramid formation phone lists works well in Departments with large numbers of Personnel. Call-back procedures will include provisions for clocking in/out and reporting mechanisms upon arrival and departure. Call-back procedures will be implemented by the department Director or designee.

c. Relief of Staff
Each Department will determine when relief staff is needed.

d. Child Care/Family Shelter Arrangements for Associates
   A listing of approved public shelters is in Attachment 1. See Attachment 13 for Child Care/Dependant Needs details.

E. Physicians
1. On-duty physicians will be given access/housing with the hospital during the storm At hurricane ALERT status, the Medical Staff Coordinator will obtain the necessary identification tags from People Services. The identification tags will be distributed to the physicians when they arrive at the hospital after the hurricane WARNING is announced.
2. Parking space will be limited to one parking space. Other vehicles may not be stored on campus (no RV’s, boats, etc.). Families shall bring bottled water, pillows and linen, snacks, personal medications and any additional supplies required. Hospital linen will be issued to patients only.
3. Valuables should NOT be brought to the hospital; Munroe Regional Medical Center will not be responsible for loss of personal property.
4. No pets will be permitted.

F. Patients and Their Families
1. Patients will be discharged by their physicians as indicated prior to Hurricane conditions and will be admitted as indicated.
2. One family member per patient will be allowed to stay in the hospital during the storm. Patients’ families shall bring bottled water and any additional supplies required.
3. Hospital linen will be limited to patient use only.
4. Parking space will be limited to one parking space. Other vehicles may not be stored on campus (no RV’s, boats, etc.).
5. No pets will be permitted.
6. Depending on the situation, patients may have to be moved from the rooms and into the interior hallways BUT ONLY AFTER THE INCIDENT COMMANDER OR DESIGNEE HAS AUTHORIZED THIS IN CONJUNCTION WITH THE CNO.

G. Pregnant Women
Nursing staff will be provided for those Obstetrical patients meeting “In Patient” criteria who have admission orders from their obstetrical provider. For those obstetrical patients who do not meet “In Patient” criteria, Munroe Regional cannot
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provide staff or space as a shelter. These patients will be advised to go to a
community “special needs” shelter.

H. Non-Hospital Related Public
• In the event of a disaster, the hospital will **not** function as a shelter.
• Prior to the storm, a list of shelters provided by the Marion County Office of
  Emergency Management will be available from the EOC for those attempting to
  seek shelter at the hospital. **A listing of approved shelters is in Attachment 1.**
• It may become necessary as the storm intensifies to grant shelter to passers by
  with approval of the hospital CEO/INCIDENT COMMANDER or designee.
• Additionally, it must be noted that the hospital will inevitably attract those
  seeking shelter during the aftermath of the storm. These individuals are subject to
  the same policy and will not be permitted to stay.

I. Identification
  **Associates:** Regular hospital identification must be worn
  **Physicians and Board Members:** Regular hospital identification must be worn
  **Patients:** Existing patient identification bands must be worn
  **Volunteers:** Regular hospital identification must be worn.
  **Approved Visitors:** Hospital identification bands must be worn

Hospital identification will be required to obtain meals in the hospital dining
room. The Security Department with the assistance of Lifetime associates will
coordinate and enforce all aspects of the identification policy. All associates will
be vigilant and assist by reporting suspicious individuals or behavior to the
Security Department. All individuals staying on property are subject to the
policies of the Munroe Regional Medical Center (i.e., smoke-free policy, etc.).
(See VII, W, below and Attachment 22 for additional information.)

J. Space Management/Identification
• In an effort to utilize available space and staffing efficiently, non-critical patients
  will be consolidated as much as possible, all non-essential units/ services will be
closed. Patients scheduled for elective surgery will be discharged. The Vice
President of Nursing or designee(s) will be responsible for implementing and
coordinating this action. This should take place only after Hurricane Warning has
been announced and the Hospital INCIDENT COMMANDER has
implemented/entered the Hurricane Preparedness Plan.
• Plans will take into account patients that will be transferred from other
  hospital/health care facilities. See Attachment 2 for VHA SE letters of agreement.
• Admitting will provide patient census information to the EOC at all briefings and
  upon demand.
• **If the hospital exceeds its licensed operating capacity,** the Agency for Health
  Care Administration (AHCA) (Region 3) must be notified at telephone number
  (386) 418-5314, FAX (386) 418-5301 or 418-5300; Central Office at (850) 487-
K. Water

In the event that water from the main water supply is contaminated:

- Limited drinking water will be provided to patient care units.
- If water is interrupted:
  - Toilet Flushing: This can be done by pouring one gallon of water into the toilet; **only non-potable (non-drinking) water is to be used for flushing toilets.** Water may be obtained from the Life-Time swimming pool and any other source. (The cross-tie with the 6” irrigation well has not been tested but may reduce the distance for moving water to bucket flush and possibly provide direct service to toilets on lower floors.)
  - In the event toilets cannot be flushed, toilets can be red-bagged and the red bags disposed of in the normal manner.
  - Food and Nutritional Services will assure there is adequate drinking water for the facility as well as adequate water for cooking. Anticipate drinking water is calculated based on a quart of water per person per day.

L. Power and Lighting

In the event of power failure, the emergency generators will start and provide power. Three to five days of generator fuel will be kept on hand. **There will be NO air conditioning under emergency conditions. Laboratory and radiology services will be negatively impacted by this loss of off-site power.** There will be air movement in critical patient care areas. Windows are not to be opened as air movement will be impacted.

- All staff MUST REFRAIN from connecting unnecessary electrical appliances to emergency power outlets or receptacles.
- Battery operated lamps and flashlights are to be kept in all Departments. Spare flashlights and batteries will be kept in the Materials Management Department.
- Non-essential circuits/optional loads on emergency power may be subject to load-shedding to conserve fuel. (The following loads will not be shed: life safety branch loads, critical branch loads serving critical care areas, medical air compressors, medical–surgical vacuum pumps, pressure maintenance (jockey) pump(s) for water-based fire protection systems, generator fuel pumps, or other generator accessories.) If systems will not function (such as air handlers), this information will be immediately communicated to the Emergency Operations Center.
- The Engineering Department will maintain a list of alternate generator suppliers located in the Master Plan, Section A, No. 4

M. Fuel

- The hospital will have its diesel fuel and propane tanks topped off. Alternate
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fuel sources will be identified (and documented in the Facilities Department’s plans) in case fuel pumps fail or water intrusion contaminates the fuel tanks.

- Estimates as to how long fuel may last at actual load capacity with the generators in operation will be calculated at least 2-times per day (burn rate and when burn-out will occur) and reported to the EOC during briefings. Be prepared to be on emergency generator power for up to seven days.
- The hospital will be on a priority list for additional fuel when roads are cleared.
- If the hospital is unable to obtain fuel or supplies are predicted to be inadequate, then the Liaison Officer will contact the Marion County EOC (ESF) and request that the Medical Center be put into the Tracker System for fuel.

N. Oxygen
The Respiratory Care Department will be responsible for providing regulators for portable O₂ tanks for the patient care areas. Patient care management will be responsible for ensuring they have an adequate supply of FULL O₂ tanks in their areas. Each department should anticipate the need for alternate O₂ supplies in case the main oxygen system fails. Upon a “Hurricane Watch” a call will be placed to all Department Managers to check their oxygen tanks and for those that are not FULL, to have them replaced through Central Supply. Ensure that all tanks are stored correctly to prevent damage, breakage or to prevent the tanks from becoming missiles.

O. Communications
The Communications Department is responsible for communications systems before, during and after the hurricane. Backup systems agreements will be made in writing prior to hurricane season with Sprint and Nextel to insure priority service will be available when required to restore any and all communications systems. The specific Department Plan shall include these written agreements.

The EOC and all patient care areas shall have at least one backup telephone in their area in case system failure. The Communications Department Plan shall indicate how these telephones will be identified and shall provide listings of all key areas and the corresponding telephone numbers. In the event all telephone service is interrupted, the following alternatives are available.

- Coin Operated Telephones are located in the hospital and may be operational during and after the storm.
- Cellular phones may be provided through written agreement with local companies. These telephones, when available, should be distributed as directed by the EOC.
- Each Department/Area should assign at least one person responsible for courier (runner) duties.
- Establish computer with printer in the EOC (MIS).
- HAM, 800 MHz portables, and other radios.
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P. Food Supplies/Re-Supplies

- Food and Nutritional Services (FNS) will provide meals according to the following priority: patients, associates and physicians, emergency workers and public.
- FNS will continue to provide meals to patients according to the normal meal schedule. Modification of menus may be necessary dependent upon available utilities and supplies. If the normal potable water system is not available, FNS will distribute containerized drinking water to each unit that has patients. All nourishments on the unit must be utilized for patients only. Once a hurricane warning has been issued, no other nourishments will be delivered to the patient care units until the ALL CLEAR notice is given. **Consumption of patient food by employees is considered theft.**
- The Dining Room will provide service during normal operating hours, as able, dependent upon utilities, staffing and supplies. Employees and emergency workers will be expected to pay for meals unless the Incident Commander designates meals as free. Once the Incident Commander makes this designation, the hospital will provide 3 meals to associates, physicians and emergency workers per day. Snacks should be brought from home. During the time that meals are at no cost to employees, physicians and emergency workers, a free meal will be defined as: an entrée, starch, vegetable and a fountain drink. This meal may change at the discretion of the FNS Captain and the Incident Commander. All other items must be purchased. Any previously posted menu will become exempt and menus will be planned according to food, supply and utility availability.
- Director Level and above will be expected to pay for food during the emergency.

Q. Sleeping Quarters - Associates

The Staff Support Team will arrange sleeping quarters for associates. An attempt will be made to pre-designate areas and limit public access to minimize noise.

After the CEO/IC has made the "Hurricane Alert” Announcement, the staff support team will assess the organization and determine available locations throughout the Medical Center for sleeping as well as determining all available showers for use. Space designated for associates sleeping may have to be moved during the storm.

Sleeping locations will primarily be scheduled in either 7a-7p or 7p-7a shifts (i.e. if the associate is scheduled to work 7a-7p their assigned sleep location & time will be from 7p-7a). Once the sleep time has ended, it is the associate’s responsibility to
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remove and store their linens from their beds/mattresses for use for the following shift. (In Navy terms this is “hot bunking”.) The Sleep Assignment form, Attachment 34 may be used as a method for communicating the area to be used for sleeping.

When Team A arrives at the Medical Center via the 2 North entrance, the Staff Support Team member will assign a room for sleeping. If no rooms are available the staff support will provide a mattress and location for the associate’s use.

The hospital will make every attempt to provide to associates either a bed, air mattress, or chair for sleep. (If the associate has a personal mattress, cot or other sleeping device; place your personal identification on your property and bring it to the medical center for your use.) Associates are required to bring in their own linens, (MUNROE linens are for patient use only) blankets, pillows, towels, washcloths, toiletries, medication (supply for 3 days), clothing for 3 days, a gallon of drinking water, and snacks. Please do not bring in any valuables, as the Medical Center will not be responsible for any loss of associate property.

R. Spiritual Services and Counseling

The Chaplain will coordinate spiritual services intermittently before, during and after storm and is always available for counseling.

S. Clothing - Scrubs

Scrub are in limited supply even under normal circumstances. Department Directors/Nurse Unit Managers are responsible for securing scrubs to insure the supply is adequate to meet the work needs until normal operations are resumed.

Associates must come to the hospital in their proper attire and visible identification badges must be worn. Uniform changes and personal articles should also be brought (minimum 3 days supply is required in the event of a Category 4 or 5 storm).

Normal surgical cloth scrub suits will not be used to replace soiled uniforms as these must be reserved for the surgical staff and physicians. Scrubs and linen will be limited and used sparingly. Paper scrub suits may be available as a last resort.

T. General Safety Precautions

1. Stay out of totally glassed-in areas
2. Close all drapes
3. Prior to storm, move as much equipment as possible away from windows
4. Notify Emergency Operations Center of any broken windows or major leaks/damage.
5. Elevators 1 and 2 (The bank of elevators that open facing the back entry to the Emergency Department, the kitchen, and surgical services.) will be available for use but will not be available during high wind periods. Other elevators
May be designated by the EOC for use as well. Staff will avoid elevator use, if possible, during emergency conditions.

U. Waste Disposal
Additional emergency waste containers will be ordered by the Environmental Services Department including enough to handle at least a week’s accumulation of biomedical and regular waste. Biomedical waste containers must be lockable and placed in a controlled area. Follow existing policies outlined in the Biomedical Waste Plan. The Manager of Environmental Services or designee will determine when it is safe to place waste in containers and to find alternate temporary storage areas if needed.

V. Linen
The hospital will have a limited supply of linen during the storm, therefore it will be of the utmost importance to adhere to this Plan. Clean linen must not be “hoarded” by Departments. An extremely conservative approach to linen usage will be followed, i.e., change linens only when necessary. Clean linen will NOT be used to absorb water. Soiled linen may be used for this purpose but only if not contaminated. Associates and visitors are expected to bring their own linen, towels and pillows and are not to use hospital linen. Prior to associates or visitors occupying a room, the clean linen will be returned to the “clean linen” room by Housekeeping staff.

W. Security
1. It will be necessary to lockdown specific entrances to the Facility. The selection for which entrances will be dependent on the direction of travel of the impending storm. This determination will be made based on collaboration of Security, Facilities and Administration. The most likely probability will be the 2-North and ED entrances. Exterior doors not in view of associates will (i.e.; stairwells) stay locked or are on a timed event system except during a fire alarm. Lifetime associates will assigned to monitor all unlocked entrances to stop entry by those who do not have a medical need to be on the premises. Hurricane lockdown monitoring and identification tagging of non-employees - visitors per Section I will be the responsibility of the Director of Lifetime and Rehab. Services or designee. (Identification supplies are located with the Director of Lifetime and Rehab. This will allow Security personnel to remain mobile and move about the hospital to assure the security of both personnel and the facility. Should the need arise, the Ocala Police Department will be contacted for assistance.

2. Valuables cannot be controlled and are the sole responsibility of the holder (owner). The hospital and Security Department are not equipped to provide safekeeping of valuables for associates, family members, physician, and visitors. Therefore, MUNROE will not be responsible for theft or loss of any valuables brought into the hospital. Large amounts of cash will not be needed.
3. Clothing and personal belongings should be secured and controlled by the owners and each area should include a method to monitor these. Unit Managers will assist in controlling their areas. Associates are encouraged to watch over each other’s belongings.

4. All associates must assist in controlling the flow of people throughout the facility and keep the EOC and Security notified of any suspicious people or activities. All associates are expected to be alert to questionable persons or behavior and report these incidents immediately to the Emergency Operations Center.

X. Compensation for Hurricane Duty (See Attachment 12 for details.)
   1. People Services will compensate all associates who are required to remain in the hospital to work during a hurricane. Compensation will be computed on documented hours worked.
   2. Whenever possible, 12 hour work shifts will be implemented because of reduced personnel, increased work load and limited sleeping quarters.
   3. Associates who are requested not to report to work or who are unable to report to work must use PTO or be off without pay.

Y. Damage Reporting and Temporary Repairs During Hurricane
   1. For damage requiring immediate attention beyond your Departments capabilities, Departments should immediately notify Facilities and then the Emergency Operations Center via phone, radio or messenger. After notifying the Emergency Operations Center, fill out a Damaged Property Report or equivalent. These forms will be acquired by Department Directors and Nurse Managers prior to the storm strike.
   2. In the event of window breakage in a patient’s room immediately contact the Engineering Department and then contact the Emergency Operations Center. Mechanisms enabling doors of the room to be locked/secured may be installed. Boarding up broken windows should only be done after winds subside to a safe speed.
   3. Track all damage using Attachment 20.
   4. The Damage Documentation Team will be dispatched from the EOC and survey the area as soon as possible.

VIII. RECOVERY PLAN (RETURN TO NORMAL OPERATIONS)
   A. Recovery Team
      Those associates designated by their Department Directors to work “post Hurricane” will serve as part of the “Recovery Team (Team B).”
      1. The Recovery Team IC will be designated by the CEO/IC (or Director of the Emergency Operations Center during the storm) and will take over the EOC.
      2. Key personnel are listed under Section VII (A)(3), After the Hurricane (Team B).
      3. See Section V (E) Recovery Phase for detailed actions.
B. Emergency Department and Other Medical Assistance

If there appears that there may be a problem with providing services after the storm due to facility damage, staffing issues, influx of patients due to receiving other hospitals’ patients; then the IC may request a Disaster Medical Assistance Team (DMAT) through the County Emergency Operations Center. If a DMAT requested the plan of operation must include where they will work, and how MUNROE will control flow of patients, admissions, discharges and billing. A procedure/policy will be written and approved before implementation with the DMAT leaders input. If needed, request assistance from VHA SE, FHA, NDMS, and others using Memorandums of Agreement/Understanding.

C. Expectations/Requirements for Transfer of Patients from Other Facilities to Munrooe

Requirements for transfer: In the event that patient transfers become necessary, adequate professional/licensed staff, medical supplies, patients medical records and treatment plans, linens, nonperishable food, two gallons of bottled water per patient and any other items that are known to be needed prior to transfer are the responsibility of the transferring facility as per applicable agreement. Supplies are to be brought with all patients accepted from other hospitals/healthcare providers. Evacuated patient medical records should include: History & Physical; list of medications; treatment record; admission orders; and plan of care (optional). Nurses from other hospitals are expected to produce the following to the People Services appointed credentialing person: Acute Care Life Support card; Basic Life Support card; identification; and State of Florida license (optional). (EMS transport – 850-245-4440.)

D. Damage Assessment and Insurance Reporting

All hospital buildings and their hospital owned contents are covered by property damage insurance.

NOTE: Ensure that all damage or areas needing clean-up are documented by the Damage Documentation Team before non-emergency mitigation activities are commenced.

1. Department Directors must notify the INCIDENT COMMANDER, Damage Documentation Team, and Engineering of all damages that result from the hurricane immediately, via Damaged Property Reports or equivalent. These forms should be acquired by Department Directors prior to the storm strike. In addition to the Damaged Property Reports, a list of all damages resulting from the hurricane should be forwarded to the INCIDENT COMMANDER/EOC within 24 hours of the storm’s passing.

2. The Director of Facilities will ensure that the physical plant, entire campus and building roofs are cleared of all debris, etc.

3. In the event of window or door breakage, the Engineering Department should be contacted to install mechanisms enabling doors to be locked or the windows to be boarded up.
4. All hours including volunteer hours must be tracked. Describe work being performed: cleaning floors on 4 South, distributing linens on 5th floor, …

E. Repairs and Priority Utilities Restoration

1. Electricity – The possibility of having up to seven days without City electricity should be covered in the Department Plans. Any load reductions to prolong generator fuel should be carefully planned to include repercussions to communications, fire alarm monitoring, computers and emergency lighting.
   a. The Director of Facilities will make arrangements with City of Ocala Electric Utilities to ensure priority restoration in the event power is temporary interrupted during the storm.
   b. Should the generators be exposed to flooding, tertiary power options need to be investigated, planned and implemented in advance. Each critical area should be identified and all critical leads must be calculated to estimate the total capacities that must be supplied. Hand pumps will be on hand in case fuel tanks are contaminated or the electric pumps fail.

2. Communications
   a. Telephone- Arrangements with EMBARQ to ensure priority restoration in the event that external telephone service is interrupted during the storm will be made by the Communications Manager.
   b. HAM radios are important links to the county and state relief organizations. Two HAM VHF radios and 1-HF radio are installed in the DRCR/EOC supply closet and available for use. The systems provide redundancy with separate antennas and cabling. All have voice capabilities with one VHF being designated primarily for digital communications via SEDAN and the HF having both voice and digital messaging capabilities via WINLINK 2000. TimberRidge EC has HAM VHF voice communications availability that is permanently installed in the manager’s office and a portable 800 MHz. The equipment will be checked by the on-site Ham operators to insure operability.
   c. Internal Communications – a network of Spectralink phones; runners; extra two-way radios (walkie-talkies); and other similar backups are included in the Communications Department Plan. If the telephone switch fails, the Spectralink system will work in house only. If the Spectralink switch fails, the Spectralink system will be inoperable.
   d. Alternatives for Code announcements if the page system is inoperable should be included in each unit/department checklist. (i.e. Code Blue as well as those codes for fire or combative patient).
e. If there is loss of communications and/or electricity where the fire alarm system no longer is operative, alternate fire watch and alert plan will be documented in the Department specific plan.

f. Computer- Alternate plans for all tasks normally completed by the computer will be devised. Hand written requests for Lab, Cardiopulmonary, Radiology and even Facilities Management orders will be planned and ready to be implemented.

g. In the event of total phone system failure, there are several ways to communicate with the outside: The PBX operators have an emergency Nextel phone: 274-5695. All emergency Nextel’s and the phone list will be provided by the Communications Department. The second means of communication is by HAM radio, as described in (b) above. The third way is via UHF radio, consol is located in the ED. The fourth is via 800 MHz radio and the 5th is via HF voice and digital. (See Attachment 30, Communications.)

3. Water
   a. Should there be a water main break, or if the main is contaminated, it may be a week before it is restored, therefore, alternate plans for water will be devised.
   b. Non-potable water will only be used for flushing toilets and all associates MUST BE INFORMED of this policy. The irrigation well may be the primary source of this water.
   c. Bottled water or “purified” water will be available for consumption.

4. Waste
   a. Sewage- Alternate plans for sewage collection and temporary storage of this waste include bagging toilets using red bags. Other methods may have to be devised to accommodate the situation.
   b. Biomedical Waste- Adequate approved containers will be provided for and be on site prior to a hurricane’s arrival. The anticipated time before regular pickups begin are at least one week, therefore the number of an on-site biomedical waste containers needed must be planned in advance by Environmental Services. Location of these containers must be planned with assistance of Infection Control and Security.
   c. Non-Biomedical Waste – The same actions are needed to meet the hospital’s Non-Biomedical Waste needs.

5. Gas
   a. Natural Gas Company service may be interrupted; therefore, use of alternative fuel, should be planned for boilers.
   b. Compressed Gases- Ample stocking of gasses will need to have occurred prior to the storm. Specific agreements shall be in
6. Repairs
   Engineering will have enough supplies on hand to do temporary repairs to
   the facility. Facilities plans will include outside contractors to be On-Call
   after the storm.

F. Patient Transportation Coordination
   The Vice President of Nursing or designee(s) is (are) responsible for
   coordinating transportation for patients who are to be transferred to or
   from other health care facilities. (See C. above and Attachments 8 & 26.)

G. Supply Replenishment - ASAP
   Department Directors will ensure that shipments for restocking their
   supplemental supplies are expedited due to the possibility of another storm
   striking before they are re-supplied if any delays are encountered.
   i.e. Pharmaceuticals, fuel, food, water, waste disposal apparatus, linens,
   scrubs, and other high use supplies must receive priority.

H. Post-Hurricane Associate Assistance
   1. Associates may “cash in” PTO and use this money to provide financial
      assistance to associates whose homes are damaged or destroyed by the
      storm. Financial rules apply to the PTO transactions. Associates may also
      donate food, clothing and shelter. This assistance will be provided
      without expectation of restitution. The Coordinator of this service will be
      designated by the hospital CEO.
   2. Associates or members of the community may make monetary
      contributions for associate assistance as well. These financial
      contributions may be made through the MUNROE Development
      Foundation.
   4. Counseling services will be set-up and overseen by the Chaplain.

I. Critique/Review
   The CEO/INCIDENT COMMANDER will call for a critique/review of
   performance. Input will also be obtained from members of the Medical Staff
   as well as external emergency responders. The plan will be updated as
   necessary to incorporate solutions to problems uncovered.
The following is a list of Marion County school shelters that are PRIMARY shelters during a hurricane or other disaster.

1. Bellevue High School
   10400 SE 36 Avenue
   Belleview, FL
   Special Needs

2. Bellevue Middle School
   10500 SE 36 Ave
   Belleview, FL
   Special Needs/General Population

3. Dunnellon High School
   10055 SW 180th Avenue Road
   Dunnellon, FL 34432
   General Population

4. Forest High School
   5000 SE Maricamp Road
   Ocala, FL 34480
   General Population

5. Ft. McCoy School
   16160 NE Hwy 315
   Ft. McCoy, FL 32134
   General Population

6. Hammond Bowen Elementary
   4397 SW 95th Street
   Ocala, FL 34476
   General Population

7. Horizon Academy at Marion Oaks
   365 Marion Oaks Drive
   Ocala, FL 34473
   General Population

8. Lake Weir High School
   10351 SE Maricamp Road
   Ocala, FL 34472
   General Population

9. Liberty Middle
   4773 SW 95th Street
   Ocala, FL 34476
   General Population

10. Madison Street
    401 NW Martin Luther King Avenue
    Ocala, FL 34475
    General Population
11. North Marion Middle School  
   2085 NW Hwy 329  
   Citra, FL  32113  
   General Population

12. Saddlewood Elementary  
   3700 SW 43 Court  
   Ocala, FL  34474  
   General Population

13. Vanguard High School  
   7 NW 28 Street  
   Ocala, FL  34475  
   General Population/Pet Shelter

14. West Port High  
   3733 SW 80 Avenue  
   Ocala, FL  34481  
   Special Needs/General Population

NOTE: NOT ALL SHELTERS MAY BE OPEN DURING SPECIFIC TIMES. THE MEDIA WILL BE ADVISED WHICH SHELTERS ARE OPEN DURING EACH INCIDENT.
Attachment 2 – Emergency Preparedness Letter of Understanding

EMERGENCY PREPAREDNESS LETTER OF UNDERSTANDING – 2010/2011
VHA Southeast Members listed below agree to assist each other, to the extent possible, by providing available staff and space (a minimum of 20 patient beds for evacuated patients) during an emergency or other event which renders the member hospital uninhabitable or otherwise requires evacuation.

Ratified and approved by the VHA Southeast Board of Directors at the May 8, 2010 Annual Meeting.

<table>
<thead>
<tr>
<th>VHA</th>
<th>Lee Lawrence, President</th>
<th>Bob Grady, VP, Finance &amp; Business Development</th>
<th>Don Bethke, Controller</th>
<th>Steve Marmurek, Sr. Director</th>
</tr>
</thead>
<tbody>
<tr>
<td>VHA Southeast</td>
<td>813-350-8330 (W)</td>
<td>813-391-6161 (C)</td>
<td>813-962-7497 (H)</td>
<td>205-970-2300 (W)</td>
</tr>
<tr>
<td></td>
<td>813-350-8300 (H)</td>
<td></td>
<td>813-732-2605 (C)</td>
<td>813-230-8999 (C)</td>
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<td></td>
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<td>205-969-1563 (H)</td>
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<thead>
<tr>
<th>Novation</th>
<th>Christine Miller, Sr. Clinical Manager</th>
<th>Edwina White, Account Manager</th>
</tr>
</thead>
<tbody>
<tr>
<td>125 E. John Carpenter Frwy. Irving, TX 75062</td>
<td>972-581-5644 (W)</td>
<td>972-830-6874 (W)</td>
</tr>
<tr>
<td></td>
<td>817-301-5313 (C)</td>
<td>817-350-8311 (W)</td>
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<td>Schneider Regional Medical Center, St. Thomas, USVI</td>
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<tr>
<td>Alice Taylor</td>
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<th>ALABAMA</th>
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<tr>
<td>Baptist Health, Montgomery</td>
</tr>
<tr>
<td>Russ Tyner</td>
</tr>
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</table>

| | Baptist Health System- Princeton Baptist |
| | Baptist Health System- Shelby Baptist |
| | Baptist Health System- Walker Baptist |
| | Baptist Health System- Citizens Baptist |
| | Shane Spees | Debbie Ritchie, Kimala Hayes, Robbie Hindman, Nancy Campbell |
| | | 205-783-3368 (W) |
| | | 205-620-8133 (C) |
| | | 205-387-4431 (W) |
| | | 256-761-4539 (W) |

| | Coffee Health Group, Florence |
| | Jody Pigg | Kevin Bowling, Karen Ritter |
| | | 256-768-8354 (W) |
| | | 256-768-9121 (W) |

| | Coosa Valley Medical Center, Sylacauga |
| | Glenn Sisk | Keith Knox |
| | | 256-401-4036 (W) |

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Hurricane Preparedness Plan
Revision 5
8/23/2012
## Hurricane Preparedness Plan

<table>
<thead>
<tr>
<th>Member</th>
<th>Emerg</th>
<th>Teleph</th>
<th>Email</th>
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<tbody>
<tr>
<td><strong>FLORIDA</strong></td>
<td></td>
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</tr>
<tr>
<td>G. H. Baptist Health Care, Pensacola</td>
<td></td>
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</tr>
<tr>
<td>Al Stubblefield</td>
<td>Patrick McGahagan</td>
<td>850-469-5171 (W)</td>
<td><a href="mailto:Patrick.McGahagan@bhcpp.com">Patrick.McGahagan@bhcpp.com</a></td>
</tr>
<tr>
<td>Baptist Health South Florida, Miami</td>
<td></td>
<td></td>
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</tr>
<tr>
<td>Brian Keeley</td>
<td>Jean Arias</td>
<td>786-573-6161 (W)</td>
<td><a href="mailto:JeanAr@baptisthealth.net">JeanAr@baptisthealth.net</a></td>
</tr>
<tr>
<td>Bay Medical Center, Panama City</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Steve Johnson</td>
<td>Rick Smith</td>
<td>850-747-6116 (W)</td>
<td><a href="mailto:rsmith@baymedical.org">rsmith@baymedical.org</a></td>
</tr>
<tr>
<td>Bethesda Healthcare, Boynton Beach</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Robert B. Hill</td>
<td>Gary Ritson</td>
<td>561-737-7733 (W)</td>
<td><a href="mailto:gary.ritson@bethesdahealth.org">gary.ritson@bethesdahealth.org</a></td>
</tr>
<tr>
<td>Boca Raton Comm. Hospital, Boca Raton</td>
<td></td>
<td></td>
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</tr>
<tr>
<td>Jerry Fedele</td>
<td>Charles Williamson</td>
<td>561-955-4044 (W)</td>
<td><a href="mailto:cwilliamson@brch.com">cwilliamson@brch.com</a></td>
</tr>
<tr>
<td>Citrus Memorial Health System, Inverness</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Ryan Beaty</td>
<td>George Mavros</td>
<td>352-344-6547 (W)</td>
<td><a href="mailto:gmavros@citrusmh.org">gmavros@citrusmh.org</a></td>
</tr>
<tr>
<td>Halifax Community Health System, Daytona Beach</td>
<td></td>
<td></td>
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</tr>
<tr>
<td>Jeff Feasel</td>
<td>Kevin Noel</td>
<td>386-238-2275 (W)</td>
<td><a href="mailto:kevin.noel@halifax.org">kevin.noel@halifax.org</a></td>
</tr>
<tr>
<td>Health Central, Ocoee</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Richard Irwin, Jr.</td>
<td>Dan Dilling</td>
<td>407-296-1716 (W)</td>
<td><a href="mailto:dandilling@healthcentral.com">dandilling@healthcentral.com</a></td>
</tr>
<tr>
<td>Health First, Inc., Melbourne</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Michael Means</td>
<td>Jim Kendig</td>
<td>321-434-5224 (W)</td>
<td><a href="mailto:jim.kendig@health-first.org">jim.kendig@health-first.org</a></td>
</tr>
<tr>
<td>Lakeland Regional Medical Center, Lakeland</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Jack Stephens</td>
<td>Timothy Jones</td>
<td>863-687-1179 (W)</td>
<td><a href="mailto:tim.jones@lrmc.com">tim.jones@lrmc.com</a></td>
</tr>
<tr>
<td>Lee Memorial Health System, Ft. Myers</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>James Nathan</td>
<td>Doug Wade</td>
<td>239-334-5238 (W)</td>
<td><a href="mailto:doug.wade@lememorial.org">doug.wade@lememorial.org</a></td>
</tr>
<tr>
<td>Leesburg Regional Medical Ctr, Leesburg</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Lee Huntley</td>
<td>Rod Brown</td>
<td>352-323-5420 (W)</td>
<td><a href="mailto:rbrown@cfalliance.org">rbrown@cfalliance.org</a></td>
</tr>
</tbody>
</table>
# Munroe Regional Medical Center Plan

<table>
<thead>
<tr>
<th>Medical Center</th>
<th>Contact Name</th>
<th>Contact Information</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mayo Clinic</td>
<td>Hilary Mathews</td>
<td>904-953-8130(W/pager) 904-728-6530(C)</td>
</tr>
<tr>
<td>Martin Memorial Medical Center, Stuart</td>
<td>Mark Robitaille</td>
<td>772-223-5945 x3604 (W)</td>
</tr>
<tr>
<td>Munroe Regional Medical Center, Ocala</td>
<td>Steve Purves</td>
<td>352-368-3454 (W) 352-274-2462 (C) 352-351-7200 (24 hr)</td>
</tr>
<tr>
<td>Orlando Health, Orlando</td>
<td>John Hillenmeyer</td>
<td>407-304-6283 (W)</td>
</tr>
<tr>
<td>Parrish Medical Center, Titusville</td>
<td>George Mikitaian</td>
<td>321-268-6120 (w) 321-289-9515 (24 hr)</td>
</tr>
<tr>
<td>Sarasota Memorial Hospital, Sarasota</td>
<td>Gwen MacKenzie</td>
<td>941-917-6888 (W) 941-228-9660 (C) 941-917-2058 (24 hr)</td>
</tr>
<tr>
<td>Tallahassee Memorial HealthCare, Tallahassee</td>
<td>Mark O’Bryant</td>
<td>850-431-2900 (W) 850-431-4983 (24 hr)</td>
</tr>
<tr>
<td>University Community Hospital, Tampa</td>
<td>Norman Stein</td>
<td>813-615-1009 (W) 813-610-5958 (C) 813-971-6000 (24 hr)</td>
</tr>
</tbody>
</table>

Contact Email: snapp.michael@mayo.edu, sandre@mmhs-fla.org, jimmieenderle@mrhs.org, eric.alberts@orlandohealth.com, edwin.loftin@parrishmed.com, Mickey-Watson@smh.com, debbie.carver@tmh.org, joskin@mail.uch.org
Attachment 3 – Generic Checklist

<table>
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<tr>
<th>Completed by:</th>
<th>Checklist Item</th>
</tr>
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<tbody>
<tr>
<td>Initials/Time/Date</td>
<td>Hurricane Alert (Predicted landfall within 48-72 hours)</td>
</tr>
<tr>
<td></td>
<td>Activate portions of the Unit/Department Plan that will take more than 48 hours to complete.</td>
</tr>
<tr>
<td></td>
<td>1. Review Hurricane Preparedness Plan</td>
</tr>
<tr>
<td></td>
<td>2. Check Supplies and Equipment</td>
</tr>
<tr>
<td></td>
<td>3. Verify availability of supplies.</td>
</tr>
<tr>
<td></td>
<td>4. Verify phone numbers and addresses of staff</td>
</tr>
<tr>
<td></td>
<td>5. Set-Up a staffing plan which must be completed before or during the Hurricane Alert phase of the Hurricane Plan. The plan will cover all personnel and be divided into three sections: Team A; Team B; and those personnel with approved exemptions per Attachment 29. (Ensure that “Exemptions” are properly executed with both Manager’s and Director’s approval.)</td>
</tr>
<tr>
<td></td>
<td>- <strong>TEAM A:</strong> Team A consists of those personnel who will remain on-site during the storm from activation until the All-Clear is given and relieved by Team B. Team A consists of staff for <strong>2-each, 12-hour shifts.</strong> Team A should not be over staffed, but should have enough personnel to accommodate an immediate surge after the storm should some Team B associates not able to report for duty.</td>
</tr>
<tr>
<td></td>
<td>- <strong>TEAM B:</strong> Team B consists of those personnel who will relieve Team A and participate in the Recovery Phase or normal operations as assigned. These relief personnel must be notified that they are expected to report for duty without being called-in or other prompting after it is safe to travel. (i.e. winds &lt; 30 mph, roads not blocked, …)</td>
</tr>
<tr>
<td></td>
<td>6. Incident Commander (IC) will announce entry into the Emergency Management Plan by beeper and e-mail, page via Code Brown.</td>
</tr>
<tr>
<td></td>
<td>7. Director/Manager will ensure this portion of Unit Checklist has been completed within 2 hours.</td>
</tr>
<tr>
<td></td>
<td>8. Let the INCIDENT COMMANDER know that the applicable portions of the unit checklist has been completed via telephone or email – Send copy to the EOC (Emergency Operation Center).</td>
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<tr>
<td></td>
<td>9. Our plan for communicating codes if the PA system becomes inoperable is to use runners.</td>
</tr>
<tr>
<td></td>
<td>10. (Dept/Unit specific items)</td>
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<td>11.</td>
</tr>
<tr>
<td></td>
<td>Hurricane Watch (Predicted landfall within 24-36 hours)</td>
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<tr>
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<td>Activate portions of the Unit/Department Plan that will take more than 24-hours to complete.</td>
</tr>
<tr>
<td></td>
<td>12. Verify staffing plan and adjust as necessary.</td>
</tr>
<tr>
<td></td>
<td>13. Ensure that emergency and standard items are available, in needed quantity and operable:</td>
</tr>
<tr>
<td></td>
<td>- ____ Flashlights w/batteries - Unit/Dept</td>
</tr>
<tr>
<td></td>
<td>- ____ Lamps w/batteries - Unit/Dept</td>
</tr>
<tr>
<td></td>
<td>- ____ Toilet paper - Housekeeping</td>
</tr>
<tr>
<td></td>
<td>- ____ Purelle alcohol hand sanitizers - Housekeeping</td>
</tr>
<tr>
<td></td>
<td>- ____ Trash bags - Housekeeping</td>
</tr>
<tr>
<td></td>
<td>- ____ Red bags (Bio) - Housekeeping</td>
</tr>
<tr>
<td></td>
<td>- ____ Portable AM/FM radio – Materials Management</td>
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### Munroe Regional Medical Center

#### Plan

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<th>Completed by:</th>
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<td>Initials/Time/Date</td>
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<table>
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<th>Checklist Item</th>
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<tr>
<td>• ___ Disposable washcloths - Housekeeping</td>
</tr>
<tr>
<td>• ___ Extra Linen - Housekeeping</td>
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<tr>
<td>• ___ Extra Blankets - Housekeeping</td>
</tr>
<tr>
<td>• ___ Have current drinking water plan – Food &amp; Nutrition</td>
</tr>
<tr>
<td>• ___ Have current meal plan - Food &amp; Nutrition</td>
</tr>
<tr>
<td>• ___ E tanks (Oxygen for area with vents) – Central Supply</td>
</tr>
<tr>
<td>• ___ O2 Extension tubing – Respiratory &amp; Materials</td>
</tr>
<tr>
<td>• ___ Forms for use during computer downtime – Unit/Dept specific</td>
</tr>
<tr>
<td>• ___ Triage tags – ED &amp; Emergency Preparedness Trailer</td>
</tr>
</tbody>
</table>

14. Establish sleep and rest areas for associates – (Human Services Director/People Services)

15. Obtain and know the location of extra Biomedical Waste containers – Facilities

16. Potential Discharge Plan all patients – Case Management

17. Let the INCIDENT COMMANDER know that this portion of the unit checklist has been completed via telephone or email – Send copy to EOC (Emergency Operation Center).

18. Identify other department/unit specific items.

19.

20.

### Hurricane Warning (Predicted landfall within < 24 hours)

Fully activate staffing plan. Assure that critical associates make their personal preparations and report back prepared to work during the hurricane at least 4-hours before estimated impact or expected winds are >40 MPH or as designated by INCIDENT COMMANDER.

21. Staffing Plan – Ensure adequate staffing on site during the storm. General Guidance: Use minimal staffing to care for the patients we have and any projections from other hospitals evacuating to MUNROE. Call in extra personnel as necessary before the storm. – (See Team A)

22. If associates from other hospitals are assigned to MUNROE, a brief orientation must be given and documented.

23. Assure communications including backup are available with the INCIDENT COMMANDER.

24. Designate “runner” system for your area.

25. Go over Unit plan with staff.

26. Obtain operable flashlights

27. Ensure that lamps are located at central location in the unit/department

28. Assure staff knows where the emergency equipment and supplies are stored.

29. Activate discharge plan. – Case Management

30. Ask all visitors to leave. One person may remain with the patient during the storm.

31. Director/Manager will communicate to the INCIDENT COMMANDER verification of completion.

32. Fill basins with water for each patient

33. Let the INCIDENT COMMANDER know that this portion of the unit checklist has been completed via telephone or email – Send copy to EOC (Emergency Operation Center).

34. (Unit specific items)

### During the Storm (Team A will be present)
# Munroe Regional Medical Center Plan

<table>
<thead>
<tr>
<th>Completed by: Initials/Time/Date</th>
<th>Checklist Item</th>
</tr>
</thead>
<tbody>
<tr>
<td>35.</td>
<td>Notify the INCIDENT COMMANDER if help is needed, damage or any other extraordinary change occurs.</td>
</tr>
<tr>
<td>36.</td>
<td>Each Dept send the INCIDENT COMMANDER a status update hourly or more often if requested: Status of patients, Status of facilities, Status of supplies or equipment, Any other noteworthy items</td>
</tr>
<tr>
<td>37.</td>
<td>Let the INCIDENT COMMANDER know that this portion of the unit checklist has been completed via telephone or email – Send copy to EOC (Emergency Operation Center).</td>
</tr>
<tr>
<td>38.</td>
<td>(Unit/Dept specific items)</td>
</tr>
</tbody>
</table>

### All Clear (Given by INCIDENT COMMANDER) (Team B to report)
Post hurricane – Make arrangements to return unit to normal operating procedures INCIDENT COMMANDER will evaluate situation and damage to determine any further activation of the Emergency Management Plan, as soon as possible.

| 39. | Assure that the designated relief personnel have reported to work. Notify the INCIDENT COMMANDER. |
| 40. | Reestablish shifts – Account for all associates and man shifts as necessary. Discuss any problems with People Services. |
| 41. | Let the INCIDENT COMMANDER know that this portion of the unit checklist has been completed via telephone or email – Send copy to EOC (Emergency Operation Center). |
| 42. | (Unit specific items) |

### During the Hurricane (Team A) (Expect 24 hours)

The following staff have been designated to be present during the Hurricane. Staff will report to the Incident Commander (IC) at least 2-3 hours prior to winds predicted to be a greater than 25 MPH.

7. The Emergency Operations Center will be staffed as follows: (Note: Assigned designees are acceptable.)

- **During the Hurricane (Team A)**
  
  **(Team A Goal: To provide sufficient command, control and leadership prior to and during critical storm situation to complete the mission described in the purpose of this plan.)**

  - Designated Executive Staff
  - Director Facilities & Appointed Staff
  - Director Nursing (2)
  - Director Ancillary Department (2)
  - Safety Officer (Damage Documentation Team & Technical Advisor)
  - Director of Risk Management
  - Lead Respiratory Therapist Assigned to ICU
  - Director Food & Nutrition or Designee
  - Chaplain
  - Kindred representative
  - Secretary (2)
  - HAM Radio Operator (2)

TimberRidge will have the following additional staff assigned to Team A:

- Damage Documentation Team member (Preferably an RN)
- HAM Radio Operator (2)
Team A and Team B EOC staff will bring to the hospital:

- Personal Medications
- Money
- Sleeping items – pillow, linens, or sleeping bag
- Towels & Soap
- Change of Clothing for 3 days
- Flashlight
- Snacks
- Water
- Cell Phone

Team “B” EOC staff will report to the hospital Emergency Operations Center when wind is less than 30 MPH and it is safe to travel.

- **After the Hurricane (Suggested Team B)**
  **(Team B Goal: To provide sufficient command, control and leadership through the recovery phase and resume to normal operations)**

  The Incident Commander for Team B will modify the staffing plan to meet the needs of the situation. **HEICS criteria allows for tailoring structure to include additions.**

  - Incident Commander
  - Executive Staff – as designated
  - Facilities Staff – as designated
  - Director Nursing (3)
  - Director Auxiliary and-as designated- (2)
  - Safety Officer– as designated (Damage Documentation Team & Technical Advisor)
  - Director of Risk Management – as designated
  - Chaplain
  - Kindred representative
  - Secretary (2)
  - Employee Health Nurse
  - HAM radio operator (2) – (if communications dictate necessity)

All routine Hospital Departments will be open for patient care needs (Pharmacy, Lab, Radiology, etc).
Munroe Regional Medical Center
Plan
Attachment 4 - Suggested Personal Items to Bring if Working During & After the Storm

Personal Medications
Money
Sleeping items – pillow, linens, or sleeping bag
Towels & Soap
Change of Clothing for 3 days
Flashlight
Snacks
Water - 1-gallon
To: Licensed Health Care Providers

First, I want to thank each of you who worked long and hard during the past few weeks to assist during and after Hurricane Charley. Our state was very fortunate to have so many providers committed to protecting those for whom they care. Overall, operations were very smooth considering the magnitude of this storm. In an effort to prepare for the potential impact of another hurricane, please take the time to do the following this week.

Test Emergency Generators

Hospitals and most nursing homes are required to have emergency generators by state law. Other types of providers may also have a generator as part of their emergency plans. If your facility has a generator, please perform the monthly exercising of generators, under load, as required by Article 6.4 of NFPA 110, 1999 Edition, “Standard for Emergency and Standby Power Systems.” Additionally, please verify fuel for generators is at capacity and any contracts with fuel distributors are in place for delivery of fuel if needed for long-term utility power loss.

Review Emergency Management Plans

. Check current emergency management plans to ensure they are up-to-date and take into consideration any lessons learned during Hurricane Charley.
. Check with any vendors you rely on for your plans, such as supply or transportation vendors, to ensure they will honor the agreements.
. Consider a secondary evacuation plan with an alternate location in the event your initial planned location is affected.
. Ensure the receiving facility in the event of evacuation is an appropriate facility licensed to provide equivalent services; a shelter is not considered an appropriate location.
. Ensure staff are aware of the content of the plan and, at a minimum, know where residents will be evacuated, how they will get there (transportation), and important contact numbers.
. Prior to evacuating to another facility, an agreement should be reached as to supplies/resources that will be provided and by whom.

Ensure Sufficient Emergency Supplies

. Check your supply of drinking water in the event of an emergency. If your plan relies upon a contractual arrangement with a service provider, ensure each service provider is able to meet your needs.
. Check your supply of non-perishable food. Make certain your facility meets minimum required supplies of non-perishable food as required by appropriate licensure Regulations.

Review Loss of Power Plans

Ensure an appropriate plan for loss of power before, during, and after a storm, taking into account temperature levels and access to necessary supplies, services and staffing.

Evacuation Reminders

If a receiving facility needs authority to exceed their licensed capacity to accommodate
residents from evacuating facilities, over-capacity approval must be obtained from the Agency for Health Care Administration. Requests must be made in writing to either the local field office or the central licensure office in Tallahassee. Requests should be submitted before the facility is actually over capacity. If this isn't possible due to the nature of the emergency, the request must be submitted as soon as is reasonably possible. Staffing requirements are not waived in an emergency. Understanding there may be extenuating circumstances mitigating a facility's ability to comply, Agency staff can review mitigating factors where appropriate. Facilities must be staffed to meet the needs of the residents. Evacuating facilities must ensure pertinent information travels with the resident to the receiving facility to make certain care needs are met.

Necessary Clearance Prior to Return After Evacuation
When returning to a facility which has been damaged, contact must be made with the Agency prior to residents returning. Hospitals, nursing homes, ambulatory surgery centers, hospices, and intermediate care facilities for the developmentally disabled require Agency approval prior to allowing residents to return. Assisted living facilities and adult family care homes require approval from the local fire authority if substantial renovations were required.

Resources Available
When resources are needed, such as electricity or generators, initial contact should be made with the local/county emergency management entity. However, if you are unable to reach the local entity, the following numbers are operational during emergencies:
Florida Emergency Information Line at (800) 342-3557
Emergency Support Function-8 at (850) 410-1822/ (BOO) 320-0519 (request ESF-8).

If you have additional questions regarding your emergency management plans, please contact your local emergency management entity. If you have questions regarding licensure requirements, please contact the appropriate licensure unit within the Agency's Division of Health Quality Assurance.

'Alan Levine
Secretary
Safeguarding Computer Equipment, PC's, Printers, Scanners, etc.

This excludes Nursing Areas as they have other requirements and procedures.

If you have an office with a window and you will be out during the hurricane please follow these guidelines before you leave:

Unplug the equipment from the power receptacle to prevent power surge damage

Unplug the network (generally a yellow cord) from the receptacle to prevent power surge damage.

If possible, move the equipment as far from the window as possible.

If PC is on the floor, please raise it off the floor at least 1" or place on your desk
Secure a trash bag around the equipment to prevent water damage.

(DO NOT PLACE A TRASH BAG ON EQUIPMENT STILL PLUGGED INTO POWER, IT MAY MELT THE TRASH BAG)

After storm, and it is safe to return, do the reverse of the above.

If you need assistance, please call the helpdesk (5000), we will arrange assistance.

Thank you for your cooperation,

Samuel R. Thonen
9/10/04
Responsibility = PIO

Scripting to Cancel Elective Surgery
“We anticipate that Marion County officials will declare a state of Emergency sometime tomorrow in preparation for Hurricane ______________. Therefore, we are canceling all elective surgery cases scheduled for (insert day/date). Our staff will do all it can to facilitate a re-schedule time of convenience to you and your patient. We will have sufficient staff to accommodate all urgent and emergency cases that may need to be performed on (insert day/date). Thank you for your cooperation.”
-M.Wesolowski/9/10/04

Scripting to Request Visitors to Leave the Hospital
Our hospital is in a Hurricane WARNING emergency condition; therefore, we are asking all visitors to leave to ensure safe travel to your destination.
-S.Robinson/9/10/04

Postings – Include but are not limited to:
- Notices to Associates
- Notices to Visitors
- Safety Postings (i.e. elevator postings)

Letter to Patients
- Expected time of hurricane’s arrival
- Possible damage and protective actions
- Preparations and protective actions that have been taken
- Vulnerability and mitigation plans – Loss of off-site power
- Staffing on site during and after storm
- Assurance that healthcare and ancillary services will continue
- Visitors – policy and expectations if staying – Not a hotel
- Encourage questions
Munroe Regional Medical Center
Plan

Attachment 8 - EOC PIO Contact Information Roster

(Print and add from your attached email Excel file or add the copy of the FAX ESF.
The updated version will be obtained from the County Emergency Operations Center (CEOC) and FAX’ed to the MUNROE EOC by the PIO rep. at the CEOC.)

Listing of State Emergency Support Functions
Main Desk =850-921- 0311, Main FAX = 850-488-7841
(Below: All area code- designator = 850-921- EXT)

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<tr>
<td>ESF 1</td>
<td>Transportation 0227</td>
<td>Steve Huffstutler</td>
<td>Nancy Haydon</td>
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<td>ESF 2</td>
<td>Communications 0232</td>
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<td>ESF 17</td>
<td>Animal Protection and Agriculture 0364</td>
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<td>ESF 18</td>
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<td>ESF 19</td>
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<td>Finance</td>
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Marion County Emergency Operations Center – 622-3205

ESF-TRANSPORTATION
EOC PHONE #369-6832 #369-6821
Marion County Public Schools
Steve Huffstutler
Risk Management Department
Office – (352) 671-6910
Home – (352) 687-1913
Cell Phone – (352) 427-7535
Fax – (352) 671-4100
Steve.Huffstutler@mcseniorservices.org

Marion County Senior Services
Donna Cart
Transport Manager
Office – (352) 620-3519
Home – (352) 629-6214
Cell Phone – (352) 207-8864
Fax – (352) 620-3400
dcart@mcseniorservices.org

ESF-COMMUNICATIONS
EOC PHONE #369-6826
9-1-1 Management Department
Karl Oltz
Office – (352) 671-8460
Home – (352) 624-3161
Cell – (352) 286-7048
Fax – (352) 620-3460
karl.oltz@marioncountyfl.org

Alphonso Gordon
Office-(352)-671-8460
Home-(352)622-8425
Cell-(352) 857-2668Fax-(352) 671-8798
alphonso.gordon@marioncountyfl.org

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Revision 5
8/23/2012
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<th>ESF</th>
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</table>
| ESF- PUBLIC WORKS AND ENGINEERING | City of Ocala Public Works | David Hill  
Office – (352) 351-6740  
Home – (352) 347-4045  
Cell – (352) 266-8210  
Fax – (352) 351-2377  
dhill@ocalafl.org | Jess Knight  
Office – (352) 351-6787  
Home – (352) 347-6910  
Cell – (352) 266-2823  
Fax – (352) 351-6731  
jknight@ocalafl.org |
| ESF- PUBLIC WORKS AND ENGINEERING (Continued) | Marion County Transportation | Mounir Bouyounes  
Office – (352) 671-8686  
Home – (352) 236-1944  
Cell – (352) 239-4051  
Fax – (352) 671-8687  
mounir.bouyounes@marioncountyfl.org | Joe St. Pierre  
Office – (352) 671-8686  
Home – (352) 854-8318  
Cell – (352) 266-0653  
Fax – (352) 671-8687  
joe.stpierre@marioncountyfl.org |
| Florida Department of Transportation | Justin White  
Office – (352) 732-1389  
Personal Cell – (352) 207-3895  
Work Cell – (352) 266-1968  
Fax – (352) 732-1458  
justin.white@dot.state.fl.us | Diego Pagan  
Office – (352) 732-1389  
Home – (352) 622-1470  
Cell – (352) 207-2023  
Fax – (352) 732-1458  
diego.pagan@dot.state.fl.us |
|                     | Dennis Lindsey  
Work – (352) 732-1389  
Home – (352) 351-1820  
Work Cell – (352) 266-1959  
Fax – (352) 732-1458  
dennis.lindsey@dot.state.fl.us | Roy Gamache  
Work- (352) 732-1389  
Work Cell- (352) 362-2604  
Home – (352) 680-1624  
Fax – (352) 732-1458  
Roy.gamache@dot.state.fl.us |
|                     | Gerald Santana  
Work-(352) 732-1389  
Home – (352) 873-7583  
Work Cell – (352) 266-1545  
Fax- (352) 732-1458  
gerald.santanajr@dot.state.fl.us | Charles Wells  
Office – (352) 620-7489  
Home – (352) 861-7418  
Cell – (352) 362-2602  
Fax – (352) 732-1458  
charles.wells@dot.state.fl.us |
| ESF-FIREFIGHTING     | Marion County Fire/Rescue  | Chief M. Stuart McElhaney  
Office – (352) 291-8096 | Chief Dan Azzariti  
Office – (352) 291-8022 |
<table>
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<tr>
<td>EOC PHONE #369-6803</td>
<td>Home – (352) 624-0279 Sprint – (352) 572-5190 Fax – (352) 291-8098 <a href="mailto:stuart.mcelhaney@marioncountyfl.org">stuart.mcelhaney@marioncountyfl.org</a></td>
<td>Sprint – (352) 572-5190 Fax – (352) 291-8098 <a href="mailto:dan.azzariti@marioncountyfl.org">dan.azzariti@marioncountyfl.org</a></td>
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<tr>
<td></td>
<td>Home – (352) 591-3604 Sprint – (352) 572-5026 Fax – (352) 291-8098 <a href="mailto:david.cooper@marioncountyfl.org">david.cooper@marioncountyfl.org</a></td>
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<tr>
<td>ESF- FIREFIGHTING (Continued)</td>
<td>Ocala Fire/Rescue</td>
<td>Chief John Deiorio Office – (352) 629-8513 Home – (352) 245-2102 Nextel – (352) 572-0390 Nextel Code -- 162<em>29660</em>74 Fax – (352) 629-8507 <a href="mailto:jdeiorio@ocalafl.org">jdeiorio@ocalafl.org</a></td>
<td>Chief Dennis Lawson Office – (352) 629-8513 Home – (352) 687-4789 Nextel – (352) 572-0381 Nextel Code -- 162<em>29660</em>65 Fax – (352) 629-8507 <a href="mailto:dlawson@ocalafl.org">dlawson@ocalafl.org</a></td>
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<tr>
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<td>Home – (352) 245-2102 Nextel – (352) 572-0390 Nextel Code -- 162<em>29660</em>74 Fax – (352) 629-8507 <a href="mailto:jdeiorio@ocalafl.org">jdeiorio@ocalafl.org</a></td>
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<td></td>
<td>Chief Bill Mallory Office – (352) 629-8513 Home – (352) 624-2294 Nextel – (352) 572-0391 Nextel Code -- 162<em>29660</em>75 Fax – (352) 629-8507 <a href="mailto:bmallory@ocalafl.org">bmallory@ocalafl.org</a></td>
<td>Chief James Clarkson Office – (352) 629-8513 Home – (352) 347-9442 Nextel – (352) 572-0394 Nextel Code -- 162<em>29660</em>78 Fax – (352) 629-8507 <a href="mailto:jclarkson@ocalafl.org">jclarkson@ocalafl.org</a></td>
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<td>Office – (352) 291-8093 Home – (352) 591-3604 Sprint – (352) 572-5026 Fax – (352) 291-8098 <a href="mailto:david.cooper@marioncountyfl.org">david.cooper@marioncountyfl.org</a></td>
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<tr>
<td>ESF- INFORMATION AND PLANNING</td>
<td>Marion County Division of Emergency Management</td>
<td>Pat Stefanski Office – (352) 369-6736 Home – (352) 625-5433 Cell - (352) 266-9683 Fax – (352) 369-6762 <a href="mailto:pstefanski@marionso.com">pstefanski@marionso.com</a></td>
<td>Linda Henson Office – (352) 368-3583 Home – (352) 390-3165 Cell – (352) 427-3140 Fax – (352) 369-6762 <a href="mailto:lhenson@marionso.com">lhenson@marionso.com</a></td>
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<td></td>
<td>Home – (352) 369-6736 Cell - (352) 266-9683 Fax – (352) 369-6762 <a href="mailto:pstefanski@marionso.com">pstefanski@marionso.com</a></td>
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<td></td>
<td>Office – (352) 368-8444 Home – (352) 347-7641 Pager – (352) 898-6291 Cell – (352) 454-1815 Fax – (352) 671-8451 <a href="mailto:rebecca.jayne@marioncountyfl.org">rebecca.jayne@marioncountyfl.org</a></td>
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<tr>
<td></td>
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Munroe Regional Medical Center

Hurricane Preparedness Plan

Revision 5

8/23/2012
# Munroe Regional Medical Center Plan

## EOC PHONE #369-6806

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<thead>
<tr>
<th>Department</th>
<th>Contact Person</th>
<th>Office</th>
<th>Home</th>
<th>Cell</th>
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<tbody>
<tr>
<td>City of Ocala Purchasing Department</td>
<td>Daryl Muse</td>
<td>(352) 351-6708</td>
<td>(352) 748-5313</td>
<td>(352) 207-6989</td>
<td>(352) 351-6710</td>
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<td></td>
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<td><a href="mailto:dmuse@ocalafl.org">dmuse@ocalafl.org</a></td>
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<td>Jane Hurley</td>
<td>(352) 351-6700</td>
<td>(352) 237-9636</td>
<td>(352) 239-4666</td>
<td>(352) 351-6710</td>
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<td><a href="mailto:jhurley@ocalafl.org">jhurley@ocalafl.org</a></td>
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<tr>
<td>Ray Hamilton</td>
<td></td>
<td>(352) 351-6700</td>
<td>(352) 629-7544</td>
<td>(352) 351-6710</td>
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<td></td>
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<td><a href="mailto:rhamilton@ocalafl.org">rhamilton@ocalafl.org</a></td>
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## ESF-EMERGENCY MEDICAL SERVICES

**Marion County Fire Rescue**

<table>
<thead>
<tr>
<th>EOC PHONE #369-6818</th>
<th>Chief M. Stuart McElhaney</th>
<th>Office</th>
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<td>Chief Shari Hall</td>
<td>Office</td>
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<td>Fax</td>
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<tr>
<td></td>
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<td>(352) 291-8000</td>
<td>(352) 572-5208</td>
<td>(352) 291-8098</td>
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<tr>
<td></td>
<td></td>
<td><a href="mailto:shari.hall@marioncountyfl.org">shari.hall@marioncountyfl.org</a></td>
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**ESF- SEARCH AND RESCUE**

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<tr>
<th>EOC PHONE #369-6808</th>
<th>Chief Bart Walker</th>
<th>Office</th>
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<td>(352) 572-0381</td>
<td>162<em>29660</em>65</td>
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## Marion County Health Department

<table>
<thead>
<tr>
<th>Nathan Grossman, M.D. Director</th>
<th>Theresa Clavier, R.N., Nursing Consultant</th>
</tr>
</thead>
<tbody>
<tr>
<td>Office</td>
<td>(352) 629-0137 ext. 2104</td>
</tr>
<tr>
<td>Home</td>
<td>(352) 622-3377</td>
</tr>
<tr>
<td>Cell</td>
<td>(352) 266-0187</td>
</tr>
<tr>
<td>Fax</td>
<td>(352) 694-1613</td>
</tr>
<tr>
<td><a href="mailto:nathangrossman@doh.state.fl.us">nathangrossman@doh.state.fl.us</a></td>
<td><a href="mailto:theresaclavier@doh.state.fl.us">theresaclavier@doh.state.fl.us</a></td>
</tr>
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</table>

## Captain Dennis Crommiller

| Office | (352) 291-8000 | Home | (352) 236-2835 |
| Sprint | (352) 572-5213 | Pager | (352) 898-6813 |
| Fax | (352) 291-8098 | dennis.crommiller@marioncountyfl.org |
| ESF- HAZARDOUS MATERIALS | Marion County Fire/Rescue | Chief Daniel Kauffman  
Office – (352) 291-8000  
Home – (352) 291-9124  
Sprint – (352) 572-5221  
Pager – (352) 898-6848  
Fax – (352) 291-8098  
daniel.kauffman@marioncountylf.org | Chief Dennis Lawson  
Office – (352) 629-8513  
Home – (352) 687-4789  
Nextel – (352) 572-0381  
Nextel Code – 162*29660*65  
Fax – (352) 629-8507  
dgentry@ocalafl.org |
| --- | --- | --- |
| EOC PHONE #369-6809 | Ocala Fire/Rescue | Chief John Deiorio  
Office – (352) 629-8513  
Home – (352) 245-1111  
Nextel – (352) 572-0390  
Nextel Code – 162*29660*74  
Fax – (352) 629-8507  
jdeiorio@ocalafl.org | Chief James Clarkson  
Office – (352) 629-8513  
Home – (352) 347-9442  
Nextel – (352) 572-0394  
Nextel Code – 162*29660*75  
Fax – (352) 629-8507  
jclarkson@ocalafl.org |
| ESF- FOOD AND WATER  
(Continued) |  | Daniel Dooley  
Office – (352) 622-7744  
Home/cell – (352) 207-1952  
Fax – (352) 620-6820  
ddooley@ocalafl.org | Gwen Dickson  
Office – (352) 368-3573  
Home – (352) 861-6505  
Cell – (352) 572-4626  
Fax – (352) 840-5719  
gdickson@marionso.com |
| EOC PHONE #369-6810 |  | Major Patti Lumpkin  
Office – (352) 368-3547  
Home – (352) 351-1158  
Cell – (352) 572-4625  
Fax – (352) 840-5719  
plumpkin@marionso.com | Paul Baker  
Office – (352) 351-6640  
Home – (352) 867-7985  
Nextel – (352) 572-0360  
Fax – (352) 351-6643  
pbaker@ocalafl.org |
| ESF-ENERGY | Ocala Electric Utility | Randy Hahn  
Office – (352) 351-6620  
Home – (352) 694-9519  
Nextel – (352) 572-0342  
Fax – (352) 401-6961  
rhahn@ocalafl.org | Kevin Price  
Office – (352) 694-8523  
Cell – (352) 817-9597  
Fax – (352) 694-8566  
kevin.price@ppgmail.com |
| EOC PHONE – | Progress Energy | John Pierpoint  
Office – (352) 489-7439 | Barry Bowman, Director  
Office – (352) 237-4107 |
## Munroe Regional Medical Center Plan

<table>
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<tr>
<th>ESF - MILITARY SUPPORT</th>
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<tr>
<td>Dave McCullen</td>
<td></td>
</tr>
<tr>
<td>Office – (352) 237-4107 ext.1299</td>
<td></td>
</tr>
<tr>
<td>Home – (352) 315-4015</td>
<td></td>
</tr>
<tr>
<td>Home Fax – (352) 352-6211</td>
<td></td>
</tr>
<tr>
<td>Nextel – (352) 427-3593</td>
<td></td>
</tr>
<tr>
<td>Fax – (352) 793-3033</td>
<td></td>
</tr>
<tr>
<td><a href="mailto:dave.mccullen@secoenergy.com">dave.mccullen@secoenergy.com</a></td>
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<th>ESF - PUBLIC INFORMATION</th>
<th>Marion County Sheriff’s Office</th>
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<tbody>
<tr>
<td>EOC PHONE #368-3594</td>
<td>Jimmy Pogue</td>
<td></td>
</tr>
<tr>
<td>#368-3598</td>
<td>Office – (352) 368-3594</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Home – (352) 629-3774</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Cell – (352) 266-7048</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Fax – (352) 369-6744</td>
<td></td>
</tr>
<tr>
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<td><a href="mailto:ipogue@marionso.com">ipogue@marionso.com</a></td>
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<th>City of Ocala</th>
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<tbody>
<tr>
<td>Sonny Allen</td>
<td></td>
</tr>
<tr>
<td>Office – (352) 629-8401</td>
<td></td>
</tr>
<tr>
<td>Home – (352) 694-6295</td>
<td></td>
</tr>
<tr>
<td>Cell – (352) 572-0324</td>
<td></td>
</tr>
<tr>
<td>Fax – (352) 629-8391</td>
<td></td>
</tr>
<tr>
<td><a href="mailto:sallen@ocalafl.org">sallen@ocalafl.org</a></td>
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<tr>
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<tr>
<td>Marion County B.C.C. Public Affairs</td>
<td>Peveeta Persaud</td>
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<tr>
<td>EOC PHONE #369-6815 #369-6827</td>
<td>Office (352)291-8064</td>
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<tr>
<td></td>
<td>Cell – (352) 572-5191</td>
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<tr>
<td></td>
<td>Heather Danenhower</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Office – (352) 438-2310</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Cell – (352) 789-1734</td>
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<tr>
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<td><a href="mailto:heather.danenhower@marioncountyfl.org">heather.danenhower@marioncountyfl.org</a></td>
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<tr>
<td>Wendell Rora</td>
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</tr>
<tr>
<td>Office – (352) 629-8513</td>
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<tr>
<td>Home – (407) 245-9752</td>
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<tr>
<td>Cell – (352) 572-0382</td>
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</tr>
<tr>
<td>Fax – (352) 629-8507</td>
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<tr>
<td><a href="mailto:wrora@ocalafl.org">wrora@ocalafl.org</a></td>
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<tbody>
<tr>
<td>Brenda Gibson</td>
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</tr>
<tr>
<td>Office – (352) 671-6113</td>
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</tr>
<tr>
<td>Home – (352) 288-9353</td>
<td></td>
</tr>
<tr>
<td>Cell – (352) 274-4300</td>
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<tr>
<td>Fax – (352) 732-6291</td>
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<tr>
<td>Charles Fuhs</td>
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<tr>
<td>Office – (352) 671-2870</td>
<td></td>
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<tr>
<td>Home – (352) 671-2976</td>
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<tr>
<td>Cell – (352) 286-9249</td>
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<td>Gary Linn</td>
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<tr>
<td>Pager (352) 898-1990</td>
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<tr>
<td>Home – (352) 347-8217</td>
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<td>Jan Schuler</td>
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<tr>
<td>Office – (352) 732-9696</td>
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<tr>
<td>Home – (352) 259-0966</td>
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Progress Energy #369-6812
|  |
|----------------|---|
| Home – (352) 727-515-6612 |  |
| Cell -- (352) 727-515-6612 |  |
| john.pierpont@pgnmail.com |  |

EOC PHONE – SECO #369-6823
|  |
|----------------|---|
| SECO Electric |  |
| Dave McCullen |  |
| Office – (352) 237-4107 ext.1299 |  |
| Home – (352) 315-4015 |  |
| Home Fax – (352) 352-6211 |  |
| Nextel – (352) 427-3593 |  |
| Fax – (352) 793-3033 |  |
| dave.mccullen@secoenergy.com |  |

ESF - MILITARY SUPPORT
|  |
|----------------|---|
| Marion County Emergency Management |  |
| Susan Livoti |  |
| Office – (352) 368-3598 |  |
| Home – (352) 690-6893 |  |
| Cell – (352) 572-1759 |  |
| Fax – (352) 369-6744 |  |
| slivoti@marionso.com |  |

ESF - PUBLIC INFORMATION
|  |
|----------------|---|
| Marion County Sheriff’s Office |  |
| Sonny Allen |  |
| Office – (352) 629-8401 |  |
| Home – (352) 694-6295 |  |
| Cell – (352) 572-0324 |  |
| Fax – (352) 629-8391 |  |
| sallen@ocalafl.org |  |

ESF - PUBLIC INFORMATION (Continued)
|  |
|----------------|---|
| Marion County Fire Rescue County Public Information Manager |  |
| Barry Britton |  |
| Office – (352) 629-8513 |  |
| Home – (407) 245-9752 |  |
| Cell – (352) 572-0388 |  |
| Fax – (352) 629-8507 |  |
| bbritton@ocalafl.org |  |

ESF - MARION COUNTY VOLUNTEER SERVICES
|  |
|----------------|---|
| Salvation Army |  |
| Brenda Gibson |  |
| Office – (352) 671-6113 |  |
| Home – (352) 288-9353 |  |
| Cell – (352) 274-4300 |  |
| Fax – (352) 732-6291 |  |

ESF - MARION COUNTY VOLUNTEER SERVICES
|  |
|----------------|---|
| Salvation Army |  |
| Brenda Gibson |  |
| Office – (352) 671-6113 |  |
| Home – (352) 288-9353 |  |
| Cell – (352) 274-4300 |  |
| Fax – (352) 732-6291 |  |

ESF - MARION COUNTY VOLUNTEER SERVICES
|  |
|----------------|---|
| Salvation Army |  |
| Brenda Gibson |  |
| Office – (352) 671-6113 |  |
| Home – (352) 288-9353 |  |
| Cell – (352) 274-4300 |  |
| Fax – (352) 732-6291 |  |

ESF - MARION COUNTY VOLUNTEER SERVICES
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|----------------|---|
| Salvation Army |  |
| Brenda Gibson |  |
| Office – (352) 671-6113 |  |
| Home – (352) 288-9353 |  |
| Cell – (352) 274-4300 |  |
| Fax – (352) 732-6291 |  |</p>
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<th>ESF-LAW ENFORCEMENT/SECURITY</th>
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<th>Captain Tom Trammell</th>
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<td>Office – (352) 620-3606</td>
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<td>Home – (352) 867-7269</td>
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<td>Cell – (352) 572-4629</td>
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<td><a href="mailto:ttrammell@marionso.com">ttrammell@marionso.com</a></td>
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<tr>
<th>ESF-LAW ENFORCEMENT/SECURITY</th>
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<th>Lieutenant Bill Sowder</th>
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<td>Office – (352) 732-8181</td>
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<tr>
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<td></td>
<td>Home – (352) 245-8103</td>
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<th>Captain Fred Duryea</th>
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<tr>
<td></td>
<td>Office – (352) 369-7189</td>
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<td>Home – (352) 237-8911</td>
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<td>Cell – (352) 427-2806</td>
<td>Cell – (352) 427-6759</td>
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<td>Fax – (352) 369-7223</td>
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<tr>
<td></td>
<td><a href="mailto:fduryea@ocalapd.org">fduryea@ocalapd.org</a></td>
<td><a href="mailto:dyonce@ocalapd.org">dyonce@ocalapd.org</a></td>
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<table>
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<tr>
<th>Captain Lester Revels</th>
<th>Office – (352) 369-7189</th>
<th>Lt. Dennis Yonce</th>
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<tr>
<td></td>
<td>Home – (352) 236-5098</td>
<td>Office – (352) 401-6905</td>
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<td><a href="mailto:dyonce@ocalapd.org">dyonce@ocalapd.org</a></td>
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### Animal Protection

**EOC PHONE #369-6816**

<table>
<thead>
<tr>
<th>Enforcement</th>
<th>Sammie Luckey, Sr., Director</th>
</tr>
</thead>
<tbody>
<tr>
<td>Office</td>
<td>(352) 671-8900</td>
</tr>
<tr>
<td>Home</td>
<td>(352) 620-2623</td>
</tr>
<tr>
<td>Mobile</td>
<td>(352) 239-4078</td>
</tr>
<tr>
<td>Pager</td>
<td>(352) 898-1052</td>
</tr>
<tr>
<td>Fax</td>
<td>(352) 671-8903</td>
</tr>
<tr>
<td>Email</td>
<td><a href="mailto:smmie.luckey@marioncountyfl.org">smmie.luckey@marioncountyfl.org</a></td>
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**EOC PHONE #369-6816**

<table>
<thead>
<tr>
<th>Secondary Contact #1</th>
<th>Jeff Ball, Code Officer</th>
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<tbody>
<tr>
<td>Office</td>
<td>(352) 671-8900</td>
</tr>
<tr>
<td>Home</td>
<td>(352) 629-3435</td>
</tr>
<tr>
<td>Mobile</td>
<td>(352) 239-4122</td>
</tr>
<tr>
<td>Pager</td>
<td>(352) 898-6730</td>
</tr>
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<td>Fax</td>
<td>(352) 671-8903</td>
</tr>
<tr>
<td>Email</td>
<td><a href="mailto:jeff.ball@marioncountyfl.org">jeff.ball@marioncountyfl.org</a></td>
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<tr>
<th>Secondary Contact #2</th>
<th>Ron Henry, Animal Cruelty C.O.</th>
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<tbody>
<tr>
<td>Office</td>
<td>(352) 671-8900</td>
</tr>
<tr>
<td>Home</td>
<td>(352) 840-0143</td>
</tr>
<tr>
<td>Mobile</td>
<td>(352) 239-2262</td>
</tr>
<tr>
<td>Pager</td>
<td>(352) 898-5906</td>
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<tr>
<td>Fax</td>
<td>(352) 671-8903</td>
</tr>
<tr>
<td>Email</td>
<td><a href="mailto:Ron.henry@marioncountyfl.org">Ron.henry@marioncountyfl.org</a></td>
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<tr>
<th>Secondary Contact #3</th>
<th>Leginia Best, Code Officer</th>
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<tbody>
<tr>
<td>Office</td>
<td>(352) 671-8900</td>
</tr>
<tr>
<td>Home</td>
<td>(352) 732-6029</td>
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<tr>
<td>Mobile</td>
<td>(352) 239-3318</td>
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<td>Pager</td>
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<tr>
<td>Fax</td>
<td>(352) 671-8903</td>
</tr>
<tr>
<td>Email</td>
<td><a href="mailto:Leginia.best@marioncountyfl.org">Leginia.best@marioncountyfl.org</a></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Secondary Contact #4</th>
<th>Dennis Underwood, Animal Control Field Supervisor</th>
</tr>
</thead>
<tbody>
<tr>
<td>Office</td>
<td>(352) 671-8900</td>
</tr>
<tr>
<td>Home</td>
<td>(352) 481-3410</td>
</tr>
<tr>
<td>Mobile</td>
<td>(352) 239-0703</td>
</tr>
<tr>
<td>Pager</td>
<td>(352) 898-9743</td>
</tr>
<tr>
<td>Fax</td>
<td>(352) 671-8903</td>
</tr>
</tbody>
</table>

**Marion County Animal Center**

<table>
<thead>
<tr>
<th>Primary Contact #1</th>
<th>Jill Lancon, Animal Ctr Act. Dir.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Office</td>
<td>(352) 671-8709</td>
</tr>
<tr>
<td>Home</td>
<td>(352) 746-0073</td>
</tr>
<tr>
<td>Mobile</td>
<td>(352) 812-6395</td>
</tr>
<tr>
<td>Pager</td>
<td>(352) 898-1056</td>
</tr>
<tr>
<td>Fax</td>
<td>(352) 671-8717</td>
</tr>
<tr>
<td>Email</td>
<td><a href="mailto:Jill.lancon@marioncountyfl.org">Jill.lancon@marioncountyfl.org</a></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Secondary Contact #1</th>
<th>Stephanie Kash</th>
</tr>
</thead>
<tbody>
<tr>
<td>Office</td>
<td>(352) 671-8707</td>
</tr>
<tr>
<td>Home</td>
<td>(352) 687-1103</td>
</tr>
<tr>
<td>Mobile</td>
<td>(352) 208-9977</td>
</tr>
<tr>
<td>Fax</td>
<td>(352) 671-8717</td>
</tr>
<tr>
<td>Email</td>
<td><a href="mailto:Stephanie.kash@marioncountyfl.org">Stephanie.kash@marioncountyfl.org</a></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Secondary Contact #2</th>
<th>Tina Boileau, Staff Assistant II</th>
</tr>
</thead>
<tbody>
<tr>
<td>Office</td>
<td>(352) 671-8702</td>
</tr>
<tr>
<td>Home</td>
<td>(352) 245-5266</td>
</tr>
<tr>
<td>Mobile</td>
<td>(352) 239-4936</td>
</tr>
<tr>
<td>Pager</td>
<td>(352) 898-3642</td>
</tr>
<tr>
<td>Fax</td>
<td>(352) 671-8717</td>
</tr>
<tr>
<td>Email</td>
<td><a href="mailto:Tina.boileau@marioncountyfl.org">Tina.boileau@marioncountyfl.org</a></td>
</tr>
</tbody>
</table>

### ESF-Business and Industry

**EOC PHONE #369-6823**

<table>
<thead>
<tr>
<th>Chamber of Commerce</th>
<th>Jaye Baillie</th>
</tr>
</thead>
<tbody>
<tr>
<td>Office</td>
<td>(352) 629-8051 ext 223</td>
</tr>
<tr>
<td>Cell</td>
<td>(352) 207-2392</td>
</tr>
<tr>
<td>Fax</td>
<td>(352) 629-7651</td>
</tr>
</tbody>
</table>

| Tamara Fleischhaker | Office-(352)629-8051 ext 228 |
|---------------------| Home & Cell- (478)338-5688 |
| Fax                 | (352) 629-7651 |

### ESF-Damage Assessment

**City of Ocala Building Department**

<table>
<thead>
<tr>
<th>Dave Brummet</th>
<th>Office -- (352) 629-8421</th>
</tr>
</thead>
<tbody>
<tr>
<td>Home</td>
<td>(352) 245-5401</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Ron Rowe</th>
<th>Office -- (352) 629-8421</th>
</tr>
</thead>
<tbody>
<tr>
<td>Home</td>
<td>(352) 629-4437</td>
</tr>
<tr>
<td>ESF - DAMAGE ASSESSMENT (Continued)</td>
<td>Marion County Property Appraiser</td>
</tr>
<tr>
<td>------------------------------------</td>
<td>---------------------------------</td>
</tr>
<tr>
<td></td>
<td>Diane Penfold (Office - (352) 368-8380, Home - (352) 694-7719, Cell - (352) 804-4917, Fax - (352) 368-8336)</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>ESF - FINANCE</th>
<th>City of Ocala Finance Department</th>
<th>Clerk of Circuit Court</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>David R. Ellspermann (Office – (352) 620-3910, Home – (352) 694-4782, Cell – (352) 425-1251, Fax – (352) 620-3300)</td>
</tr>
</tbody>
</table>


G/EM/SEC/MYDOC/PH#
# Munroe Regional Medical Center Plan

## Attachment 9 - Materials Management Disaster Vendor Phone List

<table>
<thead>
<tr>
<th>Vendor</th>
<th>Phone Number</th>
<th>Contact Person</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hospira</td>
<td>813-778-6140</td>
<td>Julia Passarelli</td>
</tr>
<tr>
<td></td>
<td>813-416-0968 (Cell)</td>
<td></td>
</tr>
<tr>
<td>Shands at AGH</td>
<td>352-372-4321 until June 1</td>
<td>Switchboard</td>
</tr>
<tr>
<td></td>
<td>352-733-0111 after June 1</td>
<td>Switchboard</td>
</tr>
<tr>
<td>Cardinal Health</td>
<td>Medical Products and Services</td>
<td>800-964-5227</td>
</tr>
<tr>
<td></td>
<td>Ambulatory Care</td>
<td>888-444-5440</td>
</tr>
<tr>
<td></td>
<td>Baxter IV</td>
<td>888-229-0001</td>
</tr>
<tr>
<td></td>
<td>Winnie West (Ocala)</td>
<td>352-690-6720</td>
</tr>
<tr>
<td></td>
<td>Tampa Distribution Center</td>
<td>813-972-1564</td>
</tr>
<tr>
<td></td>
<td>24/7 Answering Service</td>
<td>888-455-8298</td>
</tr>
<tr>
<td></td>
<td>Paul Williams</td>
<td>813-632-7202</td>
</tr>
<tr>
<td></td>
<td>Tim Brown</td>
<td>813-632-7239</td>
</tr>
<tr>
<td></td>
<td>Tim Thornton</td>
<td>813-632-7244</td>
</tr>
<tr>
<td>DePuy</td>
<td>Russ Moore</td>
<td>804-3577 Cell</td>
</tr>
<tr>
<td>ORMC</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Ocala Regional</td>
<td>401-1000</td>
<td>Switchboard</td>
</tr>
<tr>
<td></td>
<td>401-1136</td>
<td>Purchasing</td>
</tr>
<tr>
<td></td>
<td>401-1180</td>
<td>Surgery</td>
</tr>
<tr>
<td>Owens &amp; Minor</td>
<td>800-859-1060</td>
<td>Customer Service</td>
</tr>
<tr>
<td>SALES TEAM</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>386-235-3452</td>
<td>Cell</td>
</tr>
<tr>
<td></td>
<td>386-756-9120</td>
<td>Home</td>
</tr>
<tr>
<td></td>
<td>229-560-1405</td>
<td>Cell</td>
</tr>
<tr>
<td></td>
<td>904-739-8929</td>
<td>Home</td>
</tr>
<tr>
<td></td>
<td>904-612-7891</td>
<td>Cell</td>
</tr>
<tr>
<td></td>
<td>912-443-9042</td>
<td>Home</td>
</tr>
<tr>
<td></td>
<td>912-656-0180</td>
<td>Cell</td>
</tr>
<tr>
<td>Robert Taylor</td>
<td>904-683-3733</td>
<td>General Manager</td>
</tr>
<tr>
<td></td>
<td>904-613-5056</td>
<td>(Home)</td>
</tr>
<tr>
<td></td>
<td>904-695-9042</td>
<td>(Cell)</td>
</tr>
<tr>
<td>Vic Tolbert</td>
<td>805-894-3066</td>
<td>Area VP—N FL</td>
</tr>
<tr>
<td></td>
<td>805-766-4951</td>
<td>(Home)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>(Cell)</td>
</tr>
</tbody>
</table>
Munroe Regional Medical Center
Plan

Candy Ringca Office Manager  904-642-2955 (Home)
904-294-3497 (Cell)

Joel Rodriguez Shipping Sup  904-291-3069 (Home)
904-208-1938 (Cell)

Shane White Warehouse Mgr.  904-724-5316 (Home)
904-254-5394 (Cell)

BioMet Mike Hill 407-331-5551 (Cell)
727-460-1236 (Cell)

Colonial Paper Stephen Haines 427-8455 (Cell)
622-2044 (Home)
Bruce Whitson 207-8456 (Cell)
David Tuck 207-8202 (Cell)

Philips Medical Dane Kelley 352-346-5592
Richard Faulkenberry 704-957-8456

Intermed (BioMed) Contact Switchboard
Stryker Shannon McConnell 427-1158 (Cell)
904-296-6000 (Office)

Smith & Nephew J E Padgett 904-545-9050 (Cell)
Synthes Josh Adams 800-523-0322 (Office)
407-864-6643 (Mobile)
Open Outlook.
Click on File, Open and select Open Other Users’ Folder. In the name field put eoc. For the folder box click on the down arrow and select Inbox and then click OK.

You should now have access to the EOC mailbox.

EOC Addresses:
Internal = Munroeeoc
External = MunroeRegional_EOC@MRHS.ORG

Labor Pool = labor pool
Munroe Regional Medical Center
Plan
Attachment 11 - Pay Phone Listing

<table>
<thead>
<tr>
<th>Floor</th>
<th>Phone Number</th>
<th>Location</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ground</td>
<td>867-1082</td>
<td>By ATM Machine</td>
</tr>
<tr>
<td>1st</td>
<td>867-5109</td>
<td>Outside ED</td>
</tr>
<tr>
<td>3rd</td>
<td>840-9746</td>
<td>Surgical Waiting Room</td>
</tr>
</tbody>
</table>

Total Telephone Failure
External - PBX has an emergency Nextel phone – 274-5695.

There are VHF, HF, and 800 MHz Radios located in the Dining Room Conference Room Radio Room/Closet.

Internal – The Spectralink System will work in house only.
SCOPE: Munroe Regional Medical Center

PURPOSE: To show appreciation of the commitment and dedication required by our associates during an emergency situation.

POLICY: Associates who are required to work during an emergency situation will be compensated for all time that they are required to be on premises.

PROCEDURE:
An emergency staffing may be triggered by an unusual external event (such as a hurricane, tornado, disaster, or other similar event) that necessitates special changes to normal staffing schedules.

An emergency staffing situation is determined by the executive officers of the Medical Center and/or the Incident Commander.

A critical associate is an individual who performs essential job functions that are required to be carried out during emergency situations.

I. Pay Practices – Non Exempt
   A. Associates who are sent home before the end of their shift during an emergency staffing situation will be required to clock out and take PTO or unpaid. Each additional scheduled day/hours missed as a result of the emergency will be counted and paid as PTO, if available, or unpaid if not. This absence will not count against the associate under the Attendance Policy.
   B. Associates required to work during emergency situations will be paid at their regular rate of pay for all hours that they are required to be on the premises. Shift differentials will not be paid for nonworking/rest time. Associates should clock in and out for worked time. Nonworking time should be recorded manually and reported to the manager/director. Nonworking time will be paid on the second pay date following the disaster.

II. Pay Practices – Exempt
Munroe Regional Medical Center
Plan

Exempt associates required to work during emergency situations will be paid according to normal pay practices. Compensatory time off will be granted as available and based upon recovery needs.

III. An emergency staffing situation is determined to be cleared by the executive officers of the Medical Center and/or the Incident Commander, when the primary danger of the event has passed. This policy does not cover one-time localized issues such as temporary power failure, air conditioning failures, etc.

REFERENCES:
Attachment 13 – ChildCare/Dependant Care Needs Form

CHILDCARE/DEPENDANT CARE NEEDS FORM

(Complete annually in May, and update as necessary throughout the Hurricane Season)

Please print
Associate Name: ___________________________ Phone extension ______

Department: ______________________________________________________________________

Facility: __________________________________________________________________________

Physician contact: Name __________________ Phone number ______________

Required notification to Department Director: Pre Event ☐

DEPENDENT CHILDREN/DEPENDANT CARE NEEDS INFORMATION:

<table>
<thead>
<tr>
<th>Name</th>
<th>Birth date</th>
<th>Medications</th>
<th>Allergies</th>
<th>Special needs</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
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<td></td>
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<td></td>
</tr>
</tbody>
</table>

By my signature below I affirm that I am the only adult to care for my children/dependants listed above. If I am required or volunteer to work during or post-hurricane or other severe weather incident, I will need to make alternative arrangements for my children/dependants.

Associate signature: ___________________________ Date __________________

Director Signature: ___________________________ Date __________________

**Send completed form to your Department Director by June 1st or at time of any status changes.**
Munroe Regional Medical Center
Plan

Attachment 14 - Staffing Under Emergency Situations

TO: All Munroe Associates
FROM: Paul Clark, Sr. Vice President/COO
SUBJECT: Staffing Under Emergency Situations

Munroe Regional Medical Center greatly appreciates the loyalty and devotion to duty that associates demonstrated immediately before, during and after Hurricane Frances. Words cannot express our appreciation and thanks to you for all you did during this crisis. Unfortunately, there was some confusion as to our staffing expectations.

One of the most important priorities in a community-wide disaster situation concerns the availability and continuity of competent medical and emergency care. One of the burdens borne by associates at Munroe Regional Medical Center is their duty to continue to care for patients during disaster situations, often at the expense of their personal problems and concerns. Munroe associates are needed most when a disaster strikes. Under such conditions, they are held to a much higher standard of responsibility than their counterparts in other lines of work. It is for this reason that Munroe Regional Medical Center insists upon a higher calling of dependability and reliability from its associates during crisis situations, especially when they affect the entire community.

**POLICY:**

Essential patient caregivers and sufficient support staff will be scheduled and must be available to ensure that appropriate levels of quality care and emergency services can be provided during a disaster.

**PROCEDURE:**

I. Associate Call-Ins

All associates in regular, temporary, and pool positions must contact their immediate supervisor or manager, if they are unable to report to duty as scheduled,

All granted PTO will be cancelled. All associates must be available to report for duty if required.

Associates will be assigned to Team A or B and should report for duty as follows:

A. Team A will report to the hospital as scheduled, before hurricane force winds affect the Marion County area or make travel unsafe. Team A will remain at the hospital for the duration of the storm and until relieved from duty by Team B

B. Team B is expected to report to their department or labor pool when wind is less than 30 MPH and safe to travel.
Munroe Regional Medical Center
Plan

C. Associates who do not provide direct patient care and whose departmental functions can be halted until the emergency situation is over will be designated as either Team A or B and will be deployed to the Labor Pool. These associates will report directly to the Express Admission Desk in Johnson Lobby for assignment.

D. Team A and Team B will bring to the hospital:
   1. Hospital identification
   2. Change of clothes/uniform for three days
   3. Personal care items and medications
   4. Pillow and linens
   5. Water and snacks

III. Pay

Non-exempt associates who are required by management to be at the Medical Center, prior to a normal work shift, shall be paid for both work and non-work time. Non-work time will be paid at base rate only (shift differentials will not be paid). Associates who are required to be at work for their work times, but are not required to wait at the Medical Center are only paid for hours scheduled and worked.

Associates who are not required to report for regular work shall take the time as PTO or as unpaid time off.

III. Staff Responsibility

Team A associates may be required to remain on duty throughout the duration of the disaster, work in various assigned shifts and perform non-routine duties. Team B associates will report when an “all-clear” is called or when it is safe to travel.

IV. Support Facilities

Reasonable sleeping and shower areas will be assigned to off duty staff as needed. Food for patients will be allocated on a priority basis.

V. Corrective Action

Associates failing to respond to call during a disaster or refusing to remain on duty, unless such is due to a significant, verifiable emergency, shall be subject to corrective action as defined below. Prior to any termination, all documentation must be reviewed with the Vice President of People Services.
Munroe Regional Medical Center
Plan

A. Failure to report as instructed, refusal to report or to stay at the Medical Center as instructed will be considered insubordination and will result in immediate termination.

B. No call-no show for two shifts will result in immediate termination.

C. Call in but did not report (unless verified and documented extenuating circumstances will result in a Decision Day.)
Attachment 15 - Labor Pool

A LABOR TEAM has been created so surplus staff can be reassigned to areas in need of help. A LABOR POOL EMAIL address (laborpool@mrhs.org) is now set up for managers to email their staffing needs in lieu of the below form. Outlook = Laborpool

Captains:
Team A -------------- (Assigned by VP People Services)
Team B--------------- (Assigned by VP People Services)

Process:
1. Staff should check-in with their respective departments --- Managers should send surplus staff to EXPRESS ADMISSIONS located in the JOHNSON LOBBY for reassignment
2. Managers in need of staff should email their staffing needs to the LABOR POOL email address. These requests will be filled on a first come, first serve basis with confirmation of newly assigned staff member sent via email to the requesting department
3. Staff will not necessarily be assigned based on their position, but based on need.

Labor Pool Request Form

Please indicate the number of additional staff you will require or anticipate requiring to maintain required services during this hurricane/disaster.

Job Assignment s will include:

<table>
<thead>
<tr>
<th>Job Assignment</th>
<th>Number of Staff Needed</th>
</tr>
</thead>
</table>
HURRICANE PREPAREDNESS TELE-TALK BRIEFING

1. Date & Time

2. Current Weather Conditions

3. Weather Forecast

4. MUNROE Hurricane Status - Alert, Watch or Warning

5. Staffing Notifications
   Instructions to Team A or B
   Hold-over staff
   Sleeping accommodations

6. Facility Issues

7. Daycare Status
   Opening
   Location

8. Misc. Information


10. Next Briefing @ _______________

THIS IS AN OUTLINE ONLY. SITUATION WILL DICTATE ACTUAL VERBIAGE.
# Munroe Regional Medical Center Plan

## Attachment 17 - Florida’s American Red Cross Chapters

<table>
<thead>
<tr>
<th>Chapter</th>
<th>Address</th>
<th>Voice</th>
<th>Fax</th>
<th>E-Mail</th>
<th>Web Site</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Broward County Chapter</strong></td>
<td>6710 West Sunrise Boulevard # 111</td>
<td>954/797-3800</td>
<td>954/797-1860</td>
<td><a href="mailto:nichtawitc@usa.redcross">nichtawitc@usa.redcross</a></td>
<td><a href="http://www.arcbcc.org">www.arcbcc.org</a></td>
</tr>
<tr>
<td></td>
<td>Plantation Florida 33313</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td><strong>Coverage area:</strong> Broward County</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Capital Area Chapter</strong></td>
<td>187 Office Plaza Drive</td>
<td>850/878-6080</td>
<td>850/878-3441</td>
<td><a href="mailto:arc-disasterservices@tallytown.com">arc-disasterservices@tallytown.com</a></td>
<td><a href="http://www.tallytown.com/redcross/ds">www.tallytown.com/redcross/ds</a></td>
</tr>
<tr>
<td></td>
<td>Tallahassee Florida 32301</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td><strong>Coverage area:</strong> Franklin, Gadsden, Jefferson, Leon, Liberty, Madison, Taylor and Wakulla Counties</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Central Florida Chapter</strong></td>
<td>5 North Bumby Avenue</td>
<td>407/894-4141</td>
<td>407/894-6951</td>
<td><a href="mailto:mail@centralfl-redcross.org">mail@centralfl-redcross.org</a></td>
<td><a href="http://www.redcross.org/fl/centralflorida">www.redcross.org/fl/centralflorida</a></td>
</tr>
<tr>
<td></td>
<td>Orlando Florida 32803</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td><strong>Coverage area:</strong> Orange, Osceola and Seminole Counties</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Central Panhandle Chapter</strong></td>
<td>430 East 15th Street</td>
<td>850/763-6587</td>
<td>850/785-3995</td>
<td><a href="mailto:redcross@knology.net">redcross@knology.net</a></td>
<td><a href="http://www.centralpanhandle.redcross.org">www.centralpanhandle.redcross.org</a></td>
</tr>
<tr>
<td></td>
<td>Panama City Florida 32405</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td><strong>Coverage area:</strong> Bay, Calhoun, Gulf, Holmes, Jackson and Washington Counties</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Charlotte County Chapter</strong></td>
<td>1300 Enterprise Drive #10</td>
<td>941/629-4345</td>
<td>941/629-7385</td>
<td><a href="mailto:ccredcross@aol.com">ccredcross@aol.com</a></td>
<td><a href="http://www.sunline.net/redcross">www.sunline.net/redcross</a></td>
</tr>
<tr>
<td></td>
<td>Port Charlotte Florida 33953</td>
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<td></td>
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</tr>
<tr>
<td></td>
<td><strong>Coverage area:</strong> Charlotte County</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Collier County Chapter</strong></td>
<td>2610 Northbrooke Plaza Drive</td>
<td>941/596-6868</td>
<td>941/596-6923</td>
<td><a href="mailto:colliercountyredcross@comcast.net">colliercountyredcross@comcast.net</a></td>
<td><a href="http://www.colliercountyredcross.org">www.colliercountyredcross.org</a></td>
</tr>
<tr>
<td></td>
<td>Naples Florida 34119</td>
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<td><strong>Coverage area:</strong> Collier County</td>
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<tr>
<td><strong>Florida's Coast-to-Coast Chapter</strong></td>
<td>341 White Street</td>
<td>386/226-1400</td>
<td>386/258-8848</td>
<td><a href="mailto:ellenn@daytonaredcross.org">ellenn@daytonaredcross.org</a></td>
<td><a href="http://www.daytonaredcross.org">www.daytonaredcross.org</a></td>
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<td>Daytona Beach Florida 32114</td>
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<td><strong>Coverage area:</strong> Citrus, Flagler, Hernando, Lake, Marion, Sumter and Volusia Counties</td>
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<tr>
<td><strong>Greater Miami &amp; The Keys Chapter</strong></td>
<td>335 Southwest 27th Avenue</td>
<td>305/644-1200</td>
<td>305/644-1038</td>
<td><a href="mailto:info@miamiredcross.org">info@miamiredcross.org</a></td>
<td><a href="http://www.miamiredcross.org/">www.miamiredcross.org/</a></td>
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<td>Miami Florida 33135</td>
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<td><strong>Coverage area:</strong> Dade and Monroe Counties</td>
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</table>
# Munroe Regional Medical Center Plan

| Greater Palm Beach Area Chapter | Voice: 561/833-7711  
Fax: 561/833-8771  
E-Mail: chapterhq@redcross-pbc.org  
Web Site: www.redcross-pbc.org |
|-------------------------------|---------------------------------------------------------------|
| 825 Fern Street  
West Palm Beach Florida 33401 | Coverage area: Glades, Hendry, Okeechobee and Palm Beach Counties |

| Lee County Chapter | Voice: 941/278-3401  
Fax: 941/278-4829  
E-Mail: arlcc@crossnet.org  
Web Site: www.arlcc.org |
|--------------------|---------------------------------------------------------------------------------|
| 2516 Colonial Boulevard #201  
Fort Myers Florida 33907 | Coverage area: Lee County |

| Manatee County Chapter | Voice: 941/792-8686  
Fax: 941/792-3680  
E-Mail: information@manateeredcross.org  
Web Site: www.manateeredcross.org |
|-----------------------|---------------------------------------------------------------------------------|
| 2905 59th Street West  
Bradenton Florida 34209 | Coverage area: Hardee and Manatee Counties |

| Martin County Chapter | Voice: 561/287-2002  
Fax: 561/287-2018  
E-Mail: disasterdir@martinredcross.org  
Web Site: www.redcross.org/fl/martincounty/ |
|----------------------|---------------------------------------------------------------------------------|
| 2750 South Kanner Highway  
Stuart Florida 34994 | Coverage area: Martin County |

| North Central Florida Chapter | Voice: 352/376-4669  
Fax: 352/376-4267  
E-Mail: redcrossgator@earthlink.net  
Web Site: www.alachua.redcross.org |
|-----------------------------|---------------------------------------------------------------------------------|
| 1724 Northeast 2nd Street  
Gainesville Florida 32609 | Coverage area: Alachua, Columbia, Dixie, Gilchrist, Hamilton, Lafayette, Levy and Suwannee Counties |

| North Treasure Coast Chapter | Voice: 772/562-2549  
Fax: 772/778-5500  
E-Mail: info@ntc-redcross.org  
Web Site: www.northtreasurecoast.redcross.org |
|-------------------------------|---------------------------------------------------------------------------------|
| 2506 17th Avenue  
Vero Beach Florida 32960 | Coverage area: Indian River and St. Lucie County |

| Northeast Florida Chapter | Voice: 904/358-8091  
Fax: 904/791-9236  
E-Mail: cramers@nefloridaredcross.org  
Web Site: www.nefloridaredcross.org |
|---------------------------|---------------------------------------------------------------------------------|
| 751 Riverside Avenue  
Jacksonville Florida 32204 | Coverage area: Baker, Bradford, Clay, Duval, Nassau, Putnam, St. Johns and Union Counties |

| Northwest Florida Chapter | Voice: 850/432-7601  
Fax: 850/432-0315  
E-Mail: straderg@usa.redcross.org  
Web Site: www.westfla-redcross.org |
|---------------------------|---------------------------------------------------------------------------------|
| 1741 North Palafox Street  
Pensacola Florida 32051 | Coverage area: Escambia, Okaloosa, Santa Rosa and Walton Counties |
## Polk County Chapter
147 Avenue A Northwest  
Winter Haven Florida 33881  
Voice: 863/294-5941  
Fax: 863/293-9626  
E-Mail: polkcofl@polkredcross.org  
Web Site: www.redcross.org/fl/polkcounty  

Coverage area: Highlands and Polk Counties

## Southwest Florida Chapter
2001 Cantu Court  
Sarasota Florida 34232  
Voice: 941/379-9300  
Fax: 941/377-7830  
E-Mail:  
Web Site: www.southwestflorida.redcross.org  

Coverage area: DeSoto and Sarasota Counties

## Space Coast Chapter
1150 South Hickory Street  
Melbourne Florida 32901  
Voice: 321/723-7141  
Fax: 321/728-3863  
E-Mail: redcrossbrevard@cfl.rr.com  
Web Site: www.redcross.org/fl/brevard  

Coverage area: Brevard County

## Tampa Bay Chapter
3310 West Main Street  
Tampa Florida 33607  
Voice: 813/348-4820  
Fax: 813/348-4830  
E-Mail: tampabay@tampabay.redcross.org  
Web Site: www.redcrosstbc.org  

Coverage area: Hillsborough, Pinellas and Pasco Counties
SAMPLE NOTICE

IMPORTANT
Hurricane “Ivan” preparedness
STAFF NOTICE
The hospital is currently under a hurricane alert.

For further instructions on your role in the hurricane staffing plans please contact your manager/supervisor immediately.

Munroe’s Tel-Talk line will be effective 3:00PM
Thursday, September 09. Please call (352) 402-5333 (In-house ext. 5333) for Munroe updates delivered by the designated Hurricane Incident Commander.

Thank You.

Administration
Attachment 19 - State of Florida Emergency & Disaster Relief Website

Following is the 'official' State of Florida Emergency & Disaster Relief website. It is being updated continually throughout the recovery process. Clinicians will want to know the areas that need to be boiling their water in the event patients present with symptoms of contaminated water through the ED. It also has the school information. Here it is: http://www.myflorida.com
<table>
<thead>
<tr>
<th>#</th>
<th>P.O. #</th>
<th>Date</th>
<th>Time</th>
<th>Item/Service</th>
<th>Vendor</th>
<th>$ Amount</th>
<th>Requestor</th>
<th>Approval</th>
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EMM: VI - 29
Attachment 21 - Briefing Format

Date:_______________________  Time:___________________________

2. Present Situation:
   • Code/Status = Alert  Watch  Warning (Includes During)
     (Circle the present status)
   • Incident Commander = _______________________

   • Weather:
     i. Present
     ii. Forecast

   • Patients:
     o MUNROE -
     o TimberRidge -

   • Staff – Condition/Adequacy of Number and Specialty Including Doctors:
     o MUNROE -
     o TimberRidge –

   • Communications Systems Status – (MUNROE, TIMBERRIDGE, ORMC, West Marion, County EOC, and Others)

   • Damage Documentation – (MUNROE & TIMBERRIDGE)
     o Areas Surveyed
     o Areas Not Surveyed

   • Facilities/Buildings – Conditions (Off-site power available, windows, roofs, leaks, …)
     o MUNROE -
     o TimberRidge -

   • Supplies (Med. Supplies, normal expendables, fuel, …)
Munroe Regional Medical Center
Plan

- MUNROE -
- TimberRidge –
- Food
  - MUNROE -
  - TimberRidge -
  - Other –

- Staff Sleep Assignment Team
- Lockdown and Identification Team
- Labor Pool
- Other Issues

3. Mission Reminder:
   - Protect our patients, staff and visitors.
   - Maintain quality care for patients.
   - Protect property and assets.
   - Prioritize tasks to be performed utilizing available resources and personnel.
   - Assure self-sufficiency before the storm strikes to operate for at least 72 hours after the storm passes.
   - Resume normal operations quickly.

4. Problem Resolutions for Issues

5. Next Meeting: Time ___________     Place ___________
Attachment 22 – Identification of Personnel On-Site

Lifetime associates will screen incoming personnel and issue arm bands as per below:

Associates will be identified by their badges. Identification supplies i.e. Arm bands will be stored in the office of the Director of LifeTime Fitness & Rehabilitation. Tables and chairs that may be needed for processing incoming personnel are located in the HazMat Trailer adjacent to the ED ambulance entrance.

**Arm Band Designations**

Yellow – Patient visitor or family member (Only 1 per patient) – Patient’s name.

Green – Physicians – Physician’s name
## Munroe Regional Medical Center
### Plan

**Attachment 23 - Telephone Listing Form**

<table>
<thead>
<tr>
<th>Team A</th>
<th>Team B</th>
</tr>
</thead>
<tbody>
<tr>
<td>(circle)</td>
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</tr>
</tbody>
</table>

**Date:** __________

---

### Munroe Associate Contact Information

<table>
<thead>
<tr>
<th>Name</th>
<th>SpectraLink #</th>
<th>Nextel #</th>
<th>Landline Extension</th>
<th>Home Phone #</th>
<th>Personal Cell #</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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Attachment 24 - Visitor Policy

After Initiation of the Medical Center’s Hurricane Preparedness Plan

According to Munroe Regional Medical Center’s Hurricane Preparedness Plan only one family member per patient will be allowed to stay in the Hospital during the storm. The patient’s visitor shall bring bottled water and any additional supplies required (medications, personal hygiene items, snacks, linens).

Upon arrival to the Medical Center the patient visitor will identify themselves to the greeter, the greeter will confirm that there are no other visitors currently with the patient and then issue a yellow arm band which will identify the patient they are visiting.

Visitors will not be allowed to enter the Medical Center after a Hurricane Warning has been declared.

The greeters will be stationed at the Emergency Department entrance or the 2 North entrance. The remainder of the entrances will be secured and locked. The greeters will ensure that these 2-entrances remain secure and enforce the lock-down policy in effect:

Associates will be identified by their badges. Identification supplies i.e. Arm bands will be stored in the office of the Director of LifeTime Fitness & Rehabilitation. Tables and chairs that may be needed for processing incoming personnel are located in the HazMat Trailer adjacent to the ED ambulance entrance.)
attachment25 - local radio station list

<table>
<thead>
<tr>
<th>Radio Station</th>
<th>Contact</th>
<th>Email</th>
<th>Fax</th>
</tr>
</thead>
<tbody>
<tr>
<td>K-Country 93.7 FM</td>
<td>Jim Robertson</td>
<td><a href="mailto:ncfmrboob@earthlink.net">ncfmrboob@earthlink.net</a></td>
<td>(352) 622-7822</td>
</tr>
<tr>
<td>WIND-FM 92.5 &amp; 95.5 FM</td>
<td>Kevin Davis</td>
<td><a href="mailto:crash@windfm.com">crash@windfm.com</a></td>
<td>(352) 622-1900</td>
</tr>
<tr>
<td>WSKY 97.3 FM</td>
<td>TJ Hart</td>
<td><a href="mailto:tjhart@entercom.com">tjhart@entercom.com</a></td>
<td>(352) 351-0229</td>
</tr>
<tr>
<td>WKTK 98.5 FM</td>
<td>Greg Ryan</td>
<td><a href="mailto:gryan@entercom.com">gryan@entercom.com</a></td>
<td>(352) 351-0229</td>
</tr>
</tbody>
</table>

**TV Stations**

<table>
<thead>
<tr>
<th>Station</th>
<th>Contact</th>
<th>Email</th>
<th>Fax</th>
</tr>
</thead>
<tbody>
<tr>
<td>WCJB TV-20</td>
<td>Bob Williams</td>
<td><a href="mailto:gryan@entercom.com">gryan@entercom.com</a></td>
<td>(352) 371-0747</td>
</tr>
<tr>
<td>WESH Channel 2</td>
<td>Newsdesk</td>
<td><a href="mailto:desk@wesh.com">desk@wesh.com</a></td>
<td>(407) 539-7948</td>
</tr>
</tbody>
</table>
Attachment 26 – Hospital Evacuation Guidance for Hurricane Events

All evacuation plans must be coordinated with the County EOC, ESF-EMERGENCY MEDICAL SERVICES HEALTH AND SPECIAL NEEDS per contact information in Attachment 8 and/or Attachment 30. (The evacuation section of the MRMC Emergency Management Plan, VIII, Section 3, should be referenced and used per CEOC guidance and approval. (MOA’s are located in MRMC’s Emergency Management Plan, VII, Resources.)

An alternate number to arrange Ambulance transport (EMS) is 850-245-4440 and was staffed by Bobby Bailey in 2007.
Munroe Regional Medical Center
Plan

Attachment 27 - Hurricane Plan EOC Staffing Organization Chart (Modified HEICS)

Modified Hospital Emergency Incident Command System
For Team A During Hurricanes
(The Incident Commander may elect to modify this chart as desired such as having all executives on Team A.

The staffing of Team A is optimized for mission accomplishment during the storm with emphasis on having the adequate staff to assure a timely recovery afterward. Team B staffing including the EOC will depend on the actual conditions after the storm. The relieving Incident Commander will set-up the Team B command structure (Modified HEICS) to accommodate the situation.

- **Incident Commander**
- **Liaison Officer**
- **PIO**
- **Medical Staff Director** (Optional - Team A)
- **Safety Officer**
- **Security Officer**
- **Human Services Chief**
- **Operations Chief**
- **Planning Chief**
- **Logistics Chief**
- **Facilities Unit Leader**
- **Food & Nutrition Unit Leader**

EOC Staff

Note: All positions shown on this chart are expected to render status reports directly to the Emergency Operations Center as unusual situations are encountered and at all status meetings.

*The Incident Commander assigns 5-Chiefs and the Chiefs assign Unit Leaders.*

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Hurricane Preparedness Plan
Revision 5
8/23/2012
Munroe Regional Medical Center
Plan

INCIDENT COMMANDER
Mission: Organize and direct Emergency Operation Center (EOC). Give overall direction for hospital operations and if needed, authorize evacuation.

LIAISON OFFICER
Mission: Function as incident contact person for representatives from other agencies. (examples are OSHA, FEMA, law enforcement, fire department, NWS etc.)

SAFETY OFFICER
Mission: Monitor and have authority over the safety of rescue operations and hazardous conditions. Coordinate Damage Documentation Team during storm.

PIO
Mission: Provide information to the news media and to staff.

SECURITY OFFICER
Mission: Organize and enforce scene/facility protection and traffic security.

LOGISTICS SECTION CHIEF
Mission: Organize and direct those operations associated with supplies to support the medical objectives and hospital efforts.

FINANCE/ADMINISTRATION CHIEF
Mission: Monitor the utilization of financial assets. Oversee the acquisition of supplies and services necessary to carry out the hospital's medical mission. Supervise the documentation of expenditures relevant to the emergency situation. (Team B)

PLANNING CHIEF
Mission: Organize and direct all aspects of Planning Section operations. Ensure the distribution of critical information/data. Compile scenario/resource projections from all section chiefs and effect long range planning. Document and distribute facility action plan.

FOOD AND NUTRITIONAL SERVICES UNIT LEADER
Mission: Ensure adequate levels of food and water are available and prepared for consumption for patients, associates and others authorized.

FACILITIES UNIT LEADER
Mission: Ensure that facilities and equipment are maintained to assure readiness, coordinate repairs, and operate emergency equipment.

OPERATIONS CHIEF
Mission: Organizes and directs aspects relating to diagnostics, surgical services and pharmacy.

HUMAN SERVICES CHIEF
Mission: Organizes, directs and supervises those services associated with social and psychological needs of patients, staff and their respective families. Assist with discharge planning.

MEDICAL STAFF DIRECTOR (OPTIONAL)
Mission: Organizes, prioritizes, and assigns physicians to areas where medical care is being delivered. Advises the Incident Commander on issues related to the Medical Staff.

OPERATIONS CHIEF – Mission listed on preceding organization chart.

PATIENT CARE CHIEF – Mission listed on preceding organization chart.
Hurricane Alert

- The CEO/INCIDENT COMMANDER/Administrator on Call (IC) will announce a Hurricane ALERT upon initiation of Hurricane ALERT by the National Weather Service Hurricane Center in Miami.

- The CEO will notify Vice Presidents and the Chief of the Medical Staff and enter the Emergency Management Plan and make preparations using their standard preparation checklists and the checklist in Attachment 3 for guidance.

- The CEO (INCIDENT COMMANDER) will schedule a Readiness Briefing with all vice presidents and directors to assure readiness using the format below: (When to divide into teams; When to send Team A personnel home to complete their storm preparations; Team B and Exempt personnel onsite to complete preparations - )

- Information will then be passed on to all Department Directors to commence any hurricane preparedness activities that will take 48 or more hours to complete.

- If landfall probabilities remain the same, the CEO will evaluate upgrading the Alert status to Watch after analyzing the current hurricane position and probability charts published by the National Weather Service (NWS).

Readiness Briefing Format

Give a brief synopsis of the Hurricane Plan: (Ask all to review the latest revision located in Share Point.)

Weather: (Cover the possibilities that will affect Marion County, MUNROE and TIMBERIDGE.)

Cover Preparation Expectations per the Plan:
Hurricane Alert - Set schedule for Team B to prepare their homes and property (24 hours OFF)
Hurricane Watch – Set schedule for Team A to prepare their homes and property (~24 hours OFF)
Hurricane Warning – Set time for Team A to report to the hospital.

Obtain a synopsis from each VP’s area of their present preparations/readiness:
(Each VP or next in command should give this report, an estimated time for completion of their checklists, and any issues that they may be facing.)

Discuss Census and Discharges:
Discuss preparation completion issues and how each will be resolved:
Go over the Team A and Team B management positions:
Discuss possible evacuations to MUNROE

Other Items:
Munroe Regional Medical Center
Plan

- Medical records – protection plans
- Employee records – protection plans
- Financial records – protection plans
- Predetermination of Labor Pool for Team A
- Predetermination (some known needs) for Team B
- Designated smoking area until after Nov. 19th, 2009 then no longer applicable
- Other areas where help from our volunteers or volunteer organizations could be used?
- Pay policies (Pay early?)
- Evacuation plans – Just In Case!
- Communications
- Lockdown
- EDGs – MRMC & TREC
- Waste & Water
- Generic Checklists and Scheduling issues
- Infection Control’s role after the storm if there is no air conditioning. (Discuss possibility of “Sick Building” and necessary actions to prevent.)
- Pre-storm documentation of “as is” condition of all facilities.
- Emergency food – (MREs?) TimberRidge Emergency Center and Munroe
- HIPPA during life and death situations – Do not let privacy concerns interfere with life or property saving actions. (Blind compliance.)

Plan for briefing to last 1.5 hours.

1. Review the Hurricane Management Plan.  
   **Month of May**  
   Quality Improvement & Safety Department

2. Check all Incident Command Rooms for supplies, phones and phone numbers, TVs, PC and data jacks, and radios.  
   Quality Improvement & Safety Department

3. Re-establish contractual emergency agreements  
   Materials Management

4. Verify emergency vendor lists and numbers.  
   Materials Management

5. Review facility status (construction, etc.)  
   Engineering

6. Educate Staff  
   Safety

7. Update department phone lists and emergency phone numbers.  
   All Departments

8. Monitor National Weather Service and local news for
   Risk Management
developing storms.

9. Check emergency supplies, i.e. flashlights, batteries, rain gear, chainsaws, etc. All Departments per checklists.

Alert

1. Establish routine storm monitoring and reporting. Risk Management
   Quality Improvement & Safety Department

2. Conduct Readiness Briefing and announce Code Brown as applicable INCIDENT COMMANDER

3. Report via e-mail to all employees that the CEOC is in Level 3 activation (monitoring only). Risk Management

4. Make contact with all construction sites and begin preparedness activities. Facilities

5. Evaluate all grounds for materials that pose an airborne threat. Have dumpsters emptied. Facilities

6. Conduct visual inventory for items in short supply. Order hurricane supplies to include: Medical, Surgical, Central Supplies, and Water. Materials Management

7. Have employees on Team B secure homes, make arrangements for family and pets, and return to work. Unit/Department Managers

8. Check hospital preparation progress to assure that issues are being addressed. Quality Improvement & Safety Department

9. Order the removal of chemicals/hazardous waste, bio-hazardous, and regular dumpster waste. Environmental Services

10. Order extra (hurricane order) linen. Materials Management

11. Order extra food for a 5-7 day supply. Environmental Services

12. I.D. Incident Commanders (A & B) Site Administration

13. Identify and deliver computers to be used in the MUNROE EOC. MIS
Watch

1. Conduct survey of buildings and grounds to assure readiness. Take photos if necessary.
   Safety Officer, Engineering Department, Facilities Management, Risk Management Engineering Department

2. Have on hand construction materials that may be needed for the storm (plywood, visqueen, hardhats, caulk, sandbags, batteries, raingear, etc.).
   Unit/Department Managers

3. Identify and commit the staff needed for at least 72 hours beginning 12 hours prior to the arrival of the hurricane.
   Unit/Department Managers

4. Have employees on Team A secure homes, make arrangements for family and pets.
   Safety + INCIDENT COMMANDER

5. Determine staffing needs
   People Services

6. Have all staff review emergency plans (HEICS, CEOC, Access Control, Hurricane Plan, External Dependent Care arrangements, etc.).
   All Departments

7. Identify all HEICS Staff
   INCIDENT COMMANDER + Safety

Warning

   Operations VP

2. Conduct assessment of in-patients and evaluate for early discharge.
   Case Management

3. Begin conducting bed counts
   Bed Control

4. Check all two-way radios and assign to command posts. Rent/lease more as needed. Compile a list of all cell phone numbers of critical staff members.
   Communications Manager

5. Initiate disaster call list and establish Team A 12 hour shifts
   Unit/Department Managers
Munroe Regional Medical Center
Plan

for all employees working during the hurricane.

- **Conduct briefings at least every 8 hours and more frequently as needed.**

6. Evaluate all construction sites for preparedness. Order additional action if necessary.

7. Complete building preparations (plywood, sandbags, etc.)

During Hurricane and After All Clear

1. If necessary, announce to move patients away from windows.

2. Damage control teams will board broken windows, control leaks, turn off damaged electrical services.

3. Collect damage and status reports in each facility and relay them to the CEOC.

4. Provide available bed counts and patient status.

5. Maintain communications between facilities via land line, e-mail, Nextel, cell phone, or radio.


7. Evaluate damage and establish priority list for repairs.

8. Compile extraneous hurricane operating costs for filing with insurance and FEMA.

9. Implement stress debriefing teams as needed.

10. Schedule a phased deactivation of EOC.

11. Return employees to normal shifts and conditions.

Munroe Regional Medical Center
Plan

Attachment 29 – Exemption Form
Hurricane Exemption Form

(Associates meeting any of the following exemptions must complete this form annually in the month of May, and update throughout hurricane season)

Please Print
Associate Name: ________________________________________________

Department: ___________________________________________________

Facility: _______________________________________________________

I have reviewed Attachment 14, “Staffing Under Emergency Situations” and I am requesting exemption from working at any MUNROE assignment during a hurricane or other severe weather incident because I meet one of the following criteria:

☐ I provide care for an elderly, immediate relative who cannot care for himself or herself on a routine basis. There are no other adult family members to provide this care. This person would not otherwise qualify for a special needs shelter.

☐ I provide care that cannot otherwise be delivered for an immediate relative who is handicapped, or otherwise has a chronic illness.

☐ I am a sole caregiver of a child less than two years of age and cannot make other arrangements.

☐ When both parents of a child less than two years old, one of whom works for another emergency services employer (i.e. nursing, other hospital, law enforcement, fire/rescue and city employee) are required to work and have simultaneous roles during a storm, the associate is exempt.

☐ When both parents of a child less than two years old work at Munroe Regional Medical Center facilities and normally would have simultaneous roles during a storm, one is exempt.

I certify that the above checked statement is true. I also understand that untrue statements may subject me to disciplinary action.

Associate Signature: ________________________________ Date: ________

Based on the above statement, I am in agreement that this associate be granted exemption from working during the hurricane or other severe weather incident.

☐ Disapproved.

Manager’s Signature: ________________________________ Date: ________

Director’s Signature: ________________________________ Date: ________

Please forward completed form to your Department Director
Munroe Regional Medical Center
Plan

Attachment 30 – Communications

Munroe will be the hospitals’ HUB/Net controller for all hospital communications to the County Emergency Operations Center (CEOC).

Systems Available:

<table>
<thead>
<tr>
<th>Type</th>
<th>Ability</th>
<th>Notes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Internet</td>
<td>Wx, Communications, UHF – Med-8TA = short range; Med-8 = Statewide 800 MHz</td>
<td>All areas</td>
</tr>
<tr>
<td>Radio in ED</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Portable Radios</td>
<td>11 each = In-house and TIMBERRIDGE, 4 each = State channels and in-house + ORMC 800MHz</td>
<td>Maintenance (CH 2), Shuttle (CH 3), and Security (CH )</td>
</tr>
<tr>
<td>HAM VHF 145.270 commo. with hospitals; 146.610 commo. with CEOC</td>
<td>Statewide+</td>
<td>2-units are installed in the EOC closet (Voice &amp; digital via SEDAN) and 1-voice unit at TREC. (Sat. Ph. 254-387-0059) 671-2219 671-2212 (ext. 2100)</td>
</tr>
<tr>
<td>Telephones</td>
<td>Nextels, SpectraLinks, 4 each Land Lines, Satellite Phone</td>
<td>671-2189</td>
</tr>
<tr>
<td>FAX Machine</td>
<td>Direct Communication with EOC</td>
<td></td>
</tr>
<tr>
<td>TV – Cable and Satellite</td>
<td>EOC and Hosp.</td>
<td>Unit is located in EOC closet / Radio Room</td>
</tr>
<tr>
<td>HF Radio + WINLINK</td>
<td>Voice and Internet capability.</td>
<td></td>
</tr>
</tbody>
</table>

Facility Address Communication

Hospitals – VHA SE – See Emergency Preparedness Letter of Understanding for telephone numbers and emails. UHF = Med Channels

National Weather Service Forecast Office
13701 Fang Dr.
Jacksonville, 32218
904-741-4370

NOAA Atlantic Hurricane Recording
TimberRidge
SR 200
305-229-4483
UHF – Med 8 & 8TA; HAM – 145.270 351-7500; 671-2559 800MHz, Facilities VHF

Ocala Regional
Ocala
UHF – Med 8TA; 32-127.3

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Hurricane Preparedness Plan
Revision 5
8/23/2012
### Munroe Regional Medical Center Plan

<table>
<thead>
<tr>
<th>Hospital</th>
<th>City</th>
<th>UHF Frequencies</th>
<th>HAM Frequencies</th>
<th>Main Numbers</th>
<th>EOC Numbers</th>
<th>FAX Numbers</th>
</tr>
</thead>
<tbody>
<tr>
<td>West Marion Comm. Hosp</td>
<td>Ocala</td>
<td>UHF – Med 8TA; 22-127.3</td>
<td>HAM – 145.270</td>
<td>401-1000</td>
<td>1070</td>
<td>1198</td>
</tr>
<tr>
<td>Munroe Regional</td>
<td>Ocala</td>
<td>UHF – Med 8TA; 12-127.3</td>
<td>(Ln 1, F5)</td>
<td>291-3000</td>
<td>3070</td>
<td>6500</td>
</tr>
<tr>
<td>Shands</td>
<td>Gainesville</td>
<td>352-265-0028, HAM</td>
<td>UHF – Med 8; 62-118.8</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Ocala Fire Rescue</td>
<td>Ocala</td>
<td>911 or 800 MHz (HOSP GRP)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Marion County Fire Rescue</td>
<td>Ocala</td>
<td>800 MHz (HOSP GRP)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>MCFR EMS</td>
<td>Ocala</td>
<td>800 MHz (HOSP GRP)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Ocala PD</td>
<td>Ocala</td>
<td>911 or 800 MHz (HOSP GRP)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Sheriff's Office</td>
<td>Ocala</td>
<td>800 MHz (HOSP GRP)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>County EOC</td>
<td>Ocala</td>
<td>800 MHz (HOSP GRP), HAM 146.610</td>
<td></td>
<td>622-3205; and see listing in Attachment 8</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Email - pstefanski@marionso.com

---

**Diagram:**

- County EOC (After Activation)
  - HAM - Net 1
  - 800 MHz (EM)

- Munroe
  - HAM - Net 1 & 2
  - 800 MHz (Hosp)
  - HF=Winlink

- West Marion
  - HAM - Net 2
  - 800 MHz (Hosp)

- Ocala Regional
  - HAM - Net 2
  - 800 MHz (Hosp)

- TimberRidge
  - HAM - Net 2
  - 800 MHz (Hosp)
Attachment 31 – Director’s Checklist

HURRICANE PRE-SEASON DEPARTMENT DIRECTOR’S CHECKLIST

(Complete annually in May, and update as necessary throughout the Hurricane Season)

**Director’s Name:**

**Department:**

**Facility:**

<table>
<thead>
<tr>
<th>Pre-season</th>
<th>Check when completed</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Review and revise individual department hurricane preparedness plan. (Refer to plan template located in Attachment 3.)</td>
<td></td>
</tr>
<tr>
<td>2. Test emergency equipment and place an order for emergency items if needed.</td>
<td></td>
</tr>
<tr>
<td>3. Discuss volunteering for Team A or Team B.</td>
<td></td>
</tr>
<tr>
<td>4. Identify and document, if applicable, any special needs for equipment or supplies you may have as a result of a storm and submit those needs to the appropriate departments.</td>
<td></td>
</tr>
<tr>
<td>5. Pre-plan staffing to include the following teams:</td>
<td></td>
</tr>
<tr>
<td><strong>Pre storm:</strong> prepares the facility for the storm</td>
<td></td>
</tr>
<tr>
<td><strong>During storm:</strong> physically present 12 hours pre storm and during the storm. During storm team will consist of two (2) shifts.</td>
<td></td>
</tr>
<tr>
<td><strong>Post storm:</strong> reports to work after the storm when all clear is issued by Marion County Emergency Management Office.</td>
<td></td>
</tr>
<tr>
<td>6. Review Facility and Department hurricane preparedness plans with associates.</td>
<td></td>
</tr>
<tr>
<td>7. Review <strong>Hurricane Exemption Form</strong> as appropriate (Attachment 29), <strong>Staffing Under Emergency Situations</strong> (Attachment 14), and <strong>Childcare /Dependant Care Form</strong> (Attachment 13) with associates.</td>
<td></td>
</tr>
<tr>
<td>8. Review <strong>Staffing Under Emergency Conditions</strong> (Attachment 14)</td>
<td></td>
</tr>
<tr>
<td>9. Provide <strong>Associate Hurricane Preparedness Handbook</strong> to all associates.</td>
<td></td>
</tr>
<tr>
<td>10. Review key points of personal hurricane preparedness as outlined in the <strong>Associate Hurricane Preparedness Handbook</strong>.</td>
<td></td>
</tr>
<tr>
<td>11. Have associates complete and return the following forms to you, and route accordingly: <strong>Hurricane Pre season Associate Checklist</strong> (Attachment 32), <strong>Hurricane Exemption Form</strong>, <strong>Attachment # 29</strong> and <strong>Childcare/Dependant Care needs Form. Attachment # 13</strong></td>
<td></td>
</tr>
</tbody>
</table>
Munroe Regional Medical Center
Plan

Attachment 32 – Hurricane Pre season Associate Checklist

HURRICANE PRE SEASON ASSOCIATE CHECKLIST
(Complete annually in May, and update as necessary throughout the Hurricane Season)

Please print

Associate Name:

Department:

Facility:

<table>
<thead>
<tr>
<th>Reviewed</th>
<th>Initial when completed</th>
</tr>
</thead>
<tbody>
<tr>
<td>Staffing Under Emergency Conditions (Attachment 14)</td>
<td></td>
</tr>
<tr>
<td>Associate hurricane preparedness handbook</td>
<td></td>
</tr>
<tr>
<td>Department hurricane preparedness plan</td>
<td></td>
</tr>
<tr>
<td>Staffing desire/expectations, if applicable, to work either: (check as applicable)</td>
<td></td>
</tr>
<tr>
<td>- Pre-storm</td>
<td></td>
</tr>
<tr>
<td>- During storm</td>
<td></td>
</tr>
<tr>
<td>- Post-storm</td>
<td></td>
</tr>
<tr>
<td>I understand that I am not exempt from working at any Munroe Regional Medical Center facility during hurricanes or other severe weather incidents.</td>
<td></td>
</tr>
<tr>
<td>Complete Childcare/Dependant Care Needs Form( Attachment # 13, if applicable, and return to your director)</td>
<td></td>
</tr>
</tbody>
</table>

I have reviewed and acknowledge understanding the items as listed above.

Associate signature: ___________________________ Date __________________

Director’s signature: ___________________________ Date __________________
## Munroe Regional Medical Center Plan

**Attachment 33 – Florida ESF 8 Post Impact Assessment Form**

Email = esf8@fleoc.org or FAX 850-413-8859

---

### Facility Information
- **Facility:** Munroe Regional Medical Center
- **Address:** 1500 SW 1st Avenue
- **Facility Type:** Hospital
- **County:** Marion
- **Contact Person Name:**
- **Date:**
- **Time:**
- **Source (i.e. Facility, Local Emergency Operations Center):**
- **Other Method of Contact:** E-mail & Fax: Munroeregional_eoc@mrhs.org

Number used to contact (if applicable):

### Field Assessment

1. **Structure:**
   - [ ] Fully Functional
   - [ ] Partially Functional
   - [ ] Non Functional
   - [ ] Roof leaking
   - [ ] Windows out
   - [ ] Roof missing
   - [ ] Walls Collapsed

2. **Power:**
   - [ ] Grid (Utility) Power
   - [ ] On Generator
   - [ ] No Power
   - [ ] Time left on fuel supply ____________ as of _____ date _____ time ___________

3. **Water:**
   - [ ] Normal Operations
   - [ ] Boil Water
   - [ ] No Water

4. **Communications:**
   - [ ] Fully Functional
   - [ ] Partially Functional
   - [ ] Non Functional

5. **Replenishables:**
   - [ ] No shortages identified
   - [ ] Adequate but Limited
   - [ ] Critical Shortage
   - (i.e.: Blood supply, O2, Pharmaceuticals, Medical supplies, Food, ice and water for patients)

6. **Operations:**
   - [ ] Fully Functional
   - [ ] Partially Functional
   - [ ] Non Functional

7. **Morgue/Mortuary:**
   - [ ] Fully Functional
   - [ ] Partially Functional
   - [ ] Non Functional

8. **Sanitation Systems:**
   - [ ] Fully Functional
   - [ ] Partially Functional
   - [ ] Non Functional

9. **Radiation/Oncology:**
   - [ ] Fully Functional
   - [ ] Partially Functional
   - [ ] Non Functional
   - [ ] Non Applicable

10. **Transportation to off site services (i.e.: Dialysis treatment):**
    - [ ] Available/Functional
    - [ ] Not available/ Non Functional
    - [ ] Non Applicable

### Additional Information:

1. **Impact:** Is Facility open: ___ yes ________no
   - **Type of Impact:**
     - [ ] Elevator Damage
     - [ ] Flooding
     - [ ] Floor Damage
     - [ ] Elevator Damage
     - [ ] Foundation Damage
     - [ ] Mechanical Damage
     - [ ] Power Out
     - [ ] Roads Blocked
     - [ ] Roof Damage
     - [ ] Sewer System Out
     - [ ] Wall Damage
     - [ ] Water System Out
     - [ ] Window Damage
   - **Severity of Impact:** __ Major __ Minor __ Some Impacts

2. **Power**: Company Name: _______ Company Account #:__________________

3. **Water**: Company Name: _______ Company Account #:__________________

---

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Hurricane Preparedness Plan
Revision 5
8/23/2012
4. Communications: Additional Information

5. Facility Needs (Assistance)

___ Food ___ Generator ___ Generator Fuel ___ Ice ___ Medical Assistance ___ Oxygen
___ Medical/Non-Medical Equipment ___ Equipment ___ Portable Toilets ___ Security Personnel ___ Solution ___ Transportation
___ Ventilators ___ Water

Staff: ER, ICU, Med Surg, Pediatrics, Neonatal: Amount / Type Needed _______________________
Physicians: Type _________
Other:

EOC Tracker #: _______________ Status of Assistance Request: ______________________

6. Available Beds or Use Compiled Bed Report in Additional Comments Below

Provider:_____________________
Beds (male): ____________ Beds (female): ____________ Total Available Beds: __
Adult Psychiatric: ___ Burn: ___ Child Psychiatric: ___ Pediatric: ___
Obstetric: ___ Long Term Care: ___ Critical Care: ___ Medical/Surgical: ___ Rehabilitation: ___

Number of each Bed type: ____________________________

Special Resident Characteristics

Facility Census: _____________________ Type of Characteristic: __________________________

Number of Residents w/ Characteristic: __________

7. Morgue / Mortuary capacity: _____

8. Sewer Company Name: ___________________________ Sewer Company Account: __________

9. Radiation / Oncology additional Information

10. Transportation to off site services additional information

Additional comments:
Compiled Bed Report

As Of Time:                                Date:  

Please Report Immediately. Thank you.

<table>
<thead>
<tr>
<th>Name of Reporting Facility</th>
<th>Contact Person</th>
<th>Contact Phone Number</th>
<th>Contact e-mail address</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**TYPE**                                   **IMMEDIATE**

- Critical Care (CC)
- Pediatrics (MC)
- Medical / Surgery (MM-SS)
- Psychiatry (MP)
- Burn (SBN)
- Obstetric (OB)
- TOTAL

**DEFINITION:** Physically Available Beds = Staffed + Unstaffed Beds

Please e-mail to: [hospitals@ahca.myflorida.com](mailto:hospitals@ahca.myflorida.com)
[esf8@fleoc.org](mailto:esf8@fleoc.org)
FAX: 850-413-8859
Attachment 34 – Sleep Assignment Form

Associate Name: __________________________________________ Sex: ___ Female  ___Male

Scheduled Work Hours: __________________________________________________

Please be advised that private sleep areas are limited and may not be available. Sleep areas will be assigned in alternating shifts. All sleep areas must be vacated while associates are working.

Sleeping locations will primarily be scheduled in either 7 AM to 7 PM or 7 PM to 7 AM shifts. (i.e. If the associate is required to work 7 AM to 7 PM, their assigned sleep location time will be from 7 PM to 7 AM.) It is the associate’s responsibility to move and store their linens to make the space available to the person using the space during the next shift. **Associates are required to bring their own linens.**

Area Assigned: __________________________________________________________

Sleep time assigned: _____________________________________________________