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|  | TERMS OF REFERENCE | Med Policy Category | Code No | Page 1 of 3 |
| Title: Emergency Preparedness Committee Terms of Reference | | | Date Effective: September, 2010 Date Revised: November 2023 | |
| Issued by: Emergency Preparedness Committee | | Approved by: Senior Team | | |

TERMS OF REFERENCE

Official Name:

Emergency Preparedness Committee (EPC).

Purpose:

The purpose of the EPC is to maintain all Orillia Soldiers' Memorial Hospital (OSMH) emergency policies, procedures, exercises (MOCKs) and general education in alignment with Accreditation Canada standards and relevant regulatory directives or guidance. The purpose of the EPC is to also ensure an effective approach to the ongoing management of readiness activities that would assist OSMH in the successful mitigation, preparedness, response or recovery phases of any actual emergency event posing risk to patients, staff or infrastructure.


Key Responsibilities:

The Committee shall:

1. Ensure the approval, update and review of policies and procedures concerning hospital emergency codes to meet Accreditation Canada standards and applicable legislative requirements. Routing of code policies and procedures are categorized below:
 - a) Non-Medical Codes (White, Purple, Silver, Yellow, Amber, Brown, Black, Red, Green, Grey and Orange) will be routed to EPC for *final approval* and disseminated corporately with each revision.
 - b) Medical Codes (Blue, Blue Paediatric, Pink, OB) will be routed to EPC for *consultation* before final approval by Interprofessional Council (IPC) and Medical Advisory Committee (MAC) and disseminated corporately with each revision.
2. Support the Corporate Hazard Identification Risk Assessment (HIRA) – Risk Register process.
3. Ensure a schedule is created annually regarding Mock exercises to be executed (in various modes) to meet Accreditation Canada standards and applicable legislative requirements. Engagement with staff, leadership and stakeholders as well as an evidence-based analysis through the corporate risk register will inform the annual MOCK exercise cycle.
4. Promote the documentation of all real and mock codes. Code statistics are reviewed regularly, and make necessary recommendations for improvement to Quality and Professional Practice portfolio.
5. Ensure that all mandated staff education, training, exercise development and implementation plans are executed in partnership with the role of Quality and Professional Practice; providing guidance as required.
6. Consult with committee re budgetary planning and considerations need as it relates to carrying out the purpose of the EPC.
7. Maintain a reporting protocol for all actual and mock Codes utilizing the hospital's Incident Management System (IMS) resources.
8. Ensure a debrief process is promoted where appropriate after each incident for all real and mock codes using the identified process and debrief tool developed by EPC. Events requiring critical incident level of response and resources are coordinate by the Occupational Health and Safety Department for staff as required.
9. [Through the EPC Chair] Lead the coordination and update of all code policy and procedure revisions, with consultation from relevant internal and external stakeholders; documenting approvals via the corporate approval tracking process/record. See associated consultation and approval routing chart via Appendix 1.
10. [Through the EPC Chair] Create sub-groups or task forces to garner support with revisions to policy, procedure or MOCK exercises as required.
11. Make recommendations to Senior Team as required regarding corporate initiatives or information that require corporate approval. The Senior Team Executive Sponsor will be apprised of committee discussions/outcomes by way of meeting minutes and review with Chair(s).

Members/Composition:

1. Manager, Integrated Planning (Chairperson)
2. Director, Integrated Planning (Co-Chairperson)
3. Director, Facilities Management, Security, Environmental Services, and Biomedical Engineering
4. Manager, Diagnostic Services

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5. Manager, Emergency Department
6. Manager, Environmental Services
7. Manager, Facilities
8. Manager, ICU
9. Manager, Information Technology
10. Manager, Inpatient Surgery
11. Manager, Materials Management
12. Manager, Mental Health
13. Manager, Obstetrical Services
14. Manager, Occupational Health and Safety
15. Manager, Paediatrics
16. Manager, Perioperative
17. Manager, Switchboard
18. Quality Experience Representative
19. Patient Family Advisory Council Representative
20. Corporate Communications Representative
21. Regional Kidney Care Program Representative
22. Representative, Human Resources
23. Administrative Assistant (recorder)
24. Senior Team Member - Executive Sponsor (Ex-Officio)
25. EMS Representative (Non-Voting Member)
26. Orillia Fire Department (Non-Voting Member)
27. OPP (Non-Voting Member)

Principles:

1. Decision making and recommendations are in the Organization's interests in Emergency Preparedness, not department specific.
2. Decision-making is to be by vote (50% + 1).
3. All concerns associated with EPC, Departmental or Corporate will be given consideration and responded to by the Committee.
4. Policies must be aligned with Municipal, Regional and Provincial initiatives, where applicable.
5. Policies must be aligned with legislative, OHA Emergency Preparedness, Accreditation Canada guidelines and the Incident Management System (IMS) Methodology, where applicable.
6. Policies will follow the Document Development and Control Procedure for approvals.
7. Policies that include a patient form will follow the Forms Creation and Replacement Policy and Procedure.

Agenda:

The agenda shall be distributed one (1) week in advance of the meeting date via email.

Minutes:

The minutes shall be distributed with each subsequent agenda.

Meeting Frequency:

EPC will meet monthly; with a pause July, August and December.

Review Terms of Reference

EPC Terms of Reference are to be reviewed annually.

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Appendix 1: Code Consultation and Approval Routing Chart
Code Consultant Chart

| Code | Category | Internal / External Input Required from: | Approver |
|-------------|-------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------|
| Code Blue | Medical | RT, ICU, ED, Switchboard, Pharmacy, QEL | MAC, IPC, EPC |
| Code Pink | Medical | NICU, Paediatrics, RT, Switchboard, Pharmacy, QEL | MAC, IPC, EPC |
| Code OB | Medical | Obstetrics, NICU, Paediatrics, RT, Switchboard, QEL | MAC, IPC, EPC |
| Code White | Non-Medical | Mental Health, ED, Security, OPP, Switchboard, Occ. Health, QEL, JHS | EPC |
| Code Purple | Non-Medical | Mental Health, ED, Security, OPP, JHS, EMS, Switchboard, Occ. Health, QEL | EPC, Senior Team |
| Code Yellow | Non-Medical | ALC / Clinical Representation, Security, OPP, Switchboard, Mental Health, QEL | EPC |
| Code Amber | Non-Medical | Paediatrics, Security, OPP, Switchboard, Mental Health, QEL | EPC |
| Code Brown | Non-Medical | EVS, Facilities, Security, Occ. Health, Switchboard, Oncology Representation, QEL, JHS | EPC |
| Code Black | Non-Medical | Mental Health, ED, Security, OPP, EMS, Switchboard, Occ. Health, JHS, Senior Team Representation, QEL | EPC, Senior Team |
| Code Red | Non-Medical | Facilities, Security, Orillia Fire Dept., Switchboard, Clinical Representation, Senior Team Representation, QEL | EPC, OFD |
| Code Green | Non-Medical | Facilities, Security, Orillia Fire Dept., EMS, Switchboard, Clinical Representation, QEL, JHS | EPC, Senior Team |
| Code Grey | Non-Medical | Facilities, Information Technology, Switchboard, Security, Clinical Informatics, QEL | EPC |
| Code Orange | Non-Medical | Facilities, Information Technology, Security, OPP, EMS, Senior Team Representation, ICU, Clinical Representation, ED, DI, EVS, Human Resources, QEL, Switchboard | EPC, Senior Team |
| Code Silver | Non-Medical | Mental Health, ED, Security, OPP, EMS, Switchboard, Occ. Health, QEL, JHS | EPC |

MAC: Medical Advisory Committee
 IPC: Interprofessional Council

References:

1. MAHC Terms of Reference
2. RVH Terms of Reference
3. GBGH Terms of Reference
4. Accreditation Canada, Leadership, Emergency Preparedness Directives
5. Ontario Hospital Association, Emergency Preparedness Guidance