Developing a Medical Office Emergency Preparedness Plan

Medical Group Management Association® (MGMA®)
Adapted from Physician Practice Management: Essential Operational and Financial Knowledge

Steps to follow

1. Keep the plan simple.
2. Obtain copies of disaster plans from primary hospital providers.
3. Obtain copies of community disaster plans.
4. Use hospital and community plans as a model to build practice plan.
5. Let the plan reflect uniqueness of practice staff and resources available.
6. Distribute draft plan to physicians, nurses, and other employees for input.
7. Review plan with appropriate hospital/community entities, defining role of practice within framework of community disaster plans.
8. Finalize plan, including group governance approval.
10. Develop training modules (including disaster drills).
11. Conduct initial and on-going physician/staff training program, including testing and simulation.
12. Re-evaluate and update emergency response plan annually.

These steps should lead to the development of an emergency response plan that is customized to the specific needs of the practice. The challenge for the physician office is to develop a plan that identifies the unique characteristics and resources available within the practice, and how those resources will be used in response to disasters, outbreaks, and bioterrorism events. In a small practice, fewer people will be available to partition duties, but all duties need to be assigned, with appropriate training and annual review.

Using Reverse Planning

Developing a comprehensive general emergency plan can be daunting. One way is to break the process down into manageable steps based on three phases of emergency events and to use reverse planning. Working backwards gives perspective to the plan through this order:

1. Recovery Phase (reestablishing your practice)
   - Find outside help
   - Address continued patient care needs
   - Set communication procedures for recovery
   - Recover practice information
   - Manage staff availability
   - Manage finances and cash flow
   - Manage staff stress

2. Survival Phase (immediate actions)
   - First priority is protection against lost of life or injury
   - Run drills of the survival phase
   - Set communication procedures during survival

3. Preparation Phase (before disaster strikes)
   - Assess vulnerability
   - Develop an emergency plan for each scenario
   - Categorize whether events affect only the practice or the community
   - Have practice systems prepared
   - Coordinate with the local hospital and community