



Missouri Department of Health and Senior Services

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**TEMPLATE
ALL HAZARDS EMERGENCY RESPONSE PLAN FOR LABORATORIES**

Forward

The laboratory plan will be a multi-hazard, functional plan, broken into three components:

1. The plan administration that will document the preparation and maintenance of the plan.
2. The operational guidelines that serve as an overview of the laboratory's approach to any health emergency and addresses specific activities critical to emergency response and recovery.
3. Appendices that address individual biological, chemical, radiological, or natural events and contain *specific* technical information, details, and methods to be used in emergency operations.

It is not the intent of this plan to deal with those events that happen on a daily basis, which do not cause widespread problems and can be handled routinely by the laboratory.

The plan will consist of:

1. Cover Page/Promulgation statement
2. Table of Contents
3. Glossary of Terms
4. Plan Administration
5. Operational Guidelines
6. Assignment of Responsibilities
7. Authorities and References (references can also be appendix specific)
8. Appendices (event specific)
9. Record of Change
10. Laboratory Assessment Document

PLAN ADMINISTRATION

The Laboratory Director will ensure the following:

1. The creation of a laboratory emergency response plan.
2. The training of staff on their roles in the laboratory emergency response plan.
3. The assignment of responsibility for maintenance of the plan to specific staff.
4. The exercising of various aspects of the plan.
5. A review of the plan on an annual basis.
6. The incorporation of the plan into the overall facility/organization emergency response plan.

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The Missouri Department of Health and Senior Services protects and promotes quality of life and health for all Missourians by developing and implementing programs and systems that provide: information and education, effective regulation and oversight, quality services, and surveillance of diseases and conditions.

7. The registration of the laboratory with the State Public Health Laboratory (SPHL) as part of the Missouri Laboratory Response Network (MOLRN) and assignment of responsibility for updating of contact information.

- Plan creation: list who will create the plan, how they will create the plan (team approach or individual assignments), and timeframes.
- Training: list who will train the staff on the plan, how will this training be conducted, timeframes, documentation.
- Plan maintenance: list how the plan will be updated and who will be responsible.
- Plan exercise: list who will be responsible for exercising the plan, timeframes and feedback loop and documentation.
- Plan review: list who will review the plan, timeframes, and documentation process.
- Coordination with facility's plan: list who will coordinate the laboratory plan with the facility/organization plan and other pertinent information about the coordination.
- Missouri Laboratory Response Network: document the contact individual for this network.

OPERATIONAL GUIDELINES

I. Direction and Control

Document the individual(s) responsible for this section.

- A. Document the procedures utilized to alert organizational and community partners to a possible event. Include 24/7 contacts and telephone numbers along with a list of reportable diseases in the appendix.
- B. Describe the management structure that will be utilized during an event. Create an organizational chart showing the chain of command within the laboratory, including satellite laboratories if appropriate. How will the laboratory interface with the facility's Incident Management System?
- C. List by position title, plus two alternates, who is in charge of the laboratory in an emergency.
- D. List by position title, plus alternate(s), who will interface with the facility's Incident Management System during an event. Include what support will be available to that person and where and in what format it will be provided.
- E. Describe how decisions made by the laboratory or facility's Incident Management System will be communicated to the laboratory staff. Describe how the staff will communicate circumstantial changes to the Incident Management System.
- F. Describe any mutual aid agreements with surrounding local laboratories. Attach the agreement(s) and any planning documents as an appendix. Document the individual who has the authority to invoke the mutual aid agreement.

II. Workforce Management

Document the individual(s) responsible for this section.

- A. Workforce capabilities – Describe how employees will be utilized according to capabilities and how workforce reassignment will take place. A list of employee skill levels and employees with special training should be an appendix.
- B. Workforce capacity – Describe how work schedules will be adjusted, including extended hours. Describe the process to adjust work schedules if certain staff is delayed or unable to report to work. Actual schedule(s) with personnel assignments should be included as an appendix.
- C. Workforce notification – Describe how employees will be notified in the case of an event. Describe the process for employees to check with the organization in case of an event.
- D. Vaccination/Prophylaxis – List where and how will employees be vaccinated or prophylaxed before or during an event. Document how the record will be kept.
- E. Physical and mental health needs of staff – document plans for addressing physical and mental health staff needs such as communication avenues for staff and family members, attention to child care needs, rest areas and hot food, etc.

III. Specimen Handling

Document the individual(s) responsible for this section.

- A. Collection devices/supplies/directions – Describe how overall directions for sample collection will change during an identified event. Some collection directions may be agent specific and covered in the appendices. If so, reference in this section. Describe any special arrangements to order or distribute collection supplies. Document that the guidelines, supplies, and any changes are made available to all affected partners.
- B. Specimen Receipt/Accession – Document how specimen receipt and accessioning will differ during an event.
- C. Specimen/Sample Triage – Describe what criteria you will use to triage specimens to insure the highest priority samples are tested first. Document that this triage criteria has been shared with medical staff.
- D. Sample receipt from outside sources – If specimens are received from submitters outside the facility, document how that process will differ during an event. Document that outside submitters are informed of any changes in this process.
- E. Specimen Referral – Document the referral process for specimens. This will be agent specific and may be in the agent specific appendices. Document how your laboratory will determine the most current guidelines for referring specimens including contact information for referral laboratories. Include shipping and handling instructions that meet DOT guidelines as an appendix to your plan. Include a chain of custody form as an appendix in case legal authorities request it to be used with a referred sample.

IV. Specimen Testing

Document individual(s) responsible for this section.

- A. Safety – Determine the biosafety level of your laboratory, document what types of specimens for which agent(s) can be handled in your laboratory. Document the safety procedures for biological, chemical, and radiation hazards that will be employed by laboratory staff during receipt, testing and/or shipping and handling.
- B. Agent Specific Protocols – These protocols will be agent specific and can be included as appendices with specific instructions for your laboratory. Include chemical and radiological agents in this section.
- C. Reporting – Document result-reporting procedures for inpatient testing, for any patients that might be transported from your hospital to another hospital, as well as procedures for specimens received from outside your facility.
- D. Quality Control - Document any modifications in the quality control process that may be invoked during an event.

V. Communication

Document the individual(s) responsible for this section. Document redundancy in communication systems, and coordinate with the facility's plan.

- A. Internal (laboratory) – Document what communication channel(s) will be utilized to move information from the laboratory management to the laboratory staff and vice versa. (Refer to: *Direction and Control D.*)
- B. Facility partners – Identify facility partners that would need laboratory information. This information could be agent specific information, specimen collection information, or patient test results. Document by name and telephone number a call list of these partners. Document what communication channel(s) will be utilized to move laboratory information to these partners and to move situational information back to the laboratory.
- C. Public Health/First Responders/Emergency Management (local) – Identify community partners that will need laboratory information. Document by name and telephone number a call list of these partners. Document what communication channel(s) will be utilized to move laboratory information to these partners and to move situational information back to the laboratory. Coordinate this with the facility plan.
- D. DHSS/SPHL/CDC – State and Federal partners - Document by name and telephone number a call list of these partners. Document what communication channel(s) will be utilized to move laboratory/patient information to these partners and to move test results/technical/situational information back to the laboratory. Coordinate this with the facility plan.
- E. Patients – Document how the laboratory will communicate with patients or family members and “the worried well” that might contact the laboratory. Coordinate this response with the facility plan.

VI. Internal Event Response

Document the individual responsible for this section.

- A. How to handle suspicious package – Document instructions provided to employees for handling a suspicious packages.
- B. Contamination of the laboratory – Document instructions provided to employees to contain contamination within the laboratory.
- C. Evacuation – Document the evacuation plan for the laboratory/facility.
- D. Continuation of testing if laboratory incapacitated – Document arrangements that have been made to transfer laboratory testing within the existing facility, off site or to another laboratory in case of closure of existing laboratory/facility. Reference appropriate Mutual Aid Agreements.

VII. Support Services

Document the individual responsible for this section.

- A. Clerical/Record Management – Document the process for record management during an event.
- B. Telephone Coverage – Document any special arrangements that will be made for telephone coverage during an event.
- C. Ordering Supplies – Document any special arrangements for ordering supplies during an event.
- D. Waste Management – Document any special arrangements that have been made for waste management during an event.
- E. Facility Support Services – Document any special arrangements that have been made for facility support services during an event. This would include such areas as power, air conditioning, water, etc.

VIII. Security

Document the individual responsible for this section.

- A. Laboratory – Document the security procedures that are routinely in effect and how they will change during an event.
- B. Facility – Document security procedures that are routinely in effect and how they will change during an event.