



Disaster planning, response and recovery demand C-Suite involvement

Posted by Curt Lucas

Healthcare facilities cope with natural and manmade disasters ranging from mass shootings and infectious disease outbreaks, to hurricanes, blizzards and data breaches. It's why C-Suite executives must engage in disaster prevention, planning, response and recovery, according to Fierce Healthcare (<http://www.fiercehealthcare.com/hospitals/emergency-prep-role-c-suite-during-a-disaster>).

A November 2016 survey of more than 400 IT professionals from data protection firm Zetta (<http://www.zetta.net/resource/state-disaster-recovery-2016>) offers reasons for concern:



No Plan: Forty percent of those surveyed by Zetta admit that their organization lacks an evidence-based disaster plan.

No testing: Of those who attest to a having a plan, only 40 percent say that their organization has tested the plan at least once annually.

No worries: Organizations lack plans even though 54 percent have experienced a data crisis of at least eight hours within the last five years. Among the causes for downtime: power outages (75 percent), hardware error (53 percent) human error (35 percent) and viral/malware attacks (24 percent).

The implication is clear: C-suite executives can easily assume that their organization has a disaster strategy that covers natural and mandate disasters. However, these executives may still lack a documented, tested disaster prevention, response and recovery plan.

Disaster prevention, planning, response and recovery call for C-suite involvement. Together, senior executives must analyze the impact of a range of disasters on services, stakeholders, suppliers, and locations along the care continuum, along with needs and resources for training, promotion and testing.

An agile, flexible disaster plan offers a statement of scope, objectives and roles, responsibilities and contact information for internal and external stakeholders who will take on the disaster response and recovery process.

The plan should also specify how the organization will trigger the plan—for example, how it plans to advise board and C-suite executives, employees, clinicians, partners and media and launch the disaster recovery process and procedures. Equally important is the assembly of back-up documents on issues like alternate work locations, resources, assets and policies.

Disaster response and recovery plans are of little use if they sit on shelves or lie in drawers. Plans call for regular review and revision, monitoring against goals and evaluation. Among the issues are the following:

- What kinds of resources does the HCO need for education, training, promotion and testing?
- How might roles and responsibilities shift in the event of a specific type of disaster like a mass shooting or biochemical attack?
- How could the integration of new systems and technologies change plan objectives and processes?
- How might the list of stakeholders shift with the addition or expansion of programs and services?

C-suite executives should ensure that the organization tests its disaster plans in light of new and emerging crises like bird flu (<https://www.newscientist.com/article/2113725-killer-bird-flu-has-spread-across-europe-are-humans-next>), Zika, Ebola, Legionnaire's disease or a fungus called *candida auris*.

As HCOs prepare for hurricanes, floods, and storms and random acts of violence, they must continue the battle against serious healthcare-associated infections like MRSA and c.difficile. These and other HAIs target some 650,000 U.S. hospital patients annually; 75,000 die, according to the Centers for Disease Control and Prevention (CDC).

C-Suite executives are guardians and champions of an HCOs mission, vision and values. In the face of natural or manmade disasters, they must remind clinicians, employees and the community of the HCOs purpose, direction and standards. Disasters offer c-Suite executives an opportunity to reconfirm and celebrate the significance of health and healthcare.

Resources

Disaster Preparedness (Modern Healthcare)

<http://www.modernhealthcare.com/section/articles?tagID=510>

Where the C-Suite Fails in Disaster Preparedness (Advisory Board)

<https://www.advisory.com/daily-briefing/2016/11/04/disaster-preparedness-starts>

Healthcare Ready: CMS Emergency Preparedness Knowledge Center

<https://www.healthcareready.org/programs/cms-emergency-preparedness-knowledge-center>

www.inveniaspartners.com

