Overview

Island Hospital participated in the initial Skagit County Natural Hazards Mitigation Planning Process in 2003. Island Hospital continues to be proactive in the hazard vulnerability analysis process and plans to continue participation in the county-wide process. The Skagit County Natural Hazards Mitigation Plan (available through the Skagit County Department of Emergency Management) outlines the natural disasters most likely to affect the Skagit County area. This portion of that plan outlines Island Hospital’s vulnerability and mitigation strategies.

Asset Profile

<table>
<thead>
<tr>
<th>Facility/Property</th>
<th>2008 Estimated Value</th>
</tr>
</thead>
<tbody>
<tr>
<td>Building</td>
<td>$46,349,296</td>
</tr>
<tr>
<td>Fixed</td>
<td>$4,774,302</td>
</tr>
<tr>
<td>Land</td>
<td>$3,213,236</td>
</tr>
<tr>
<td>Land Improvements</td>
<td>$1,014,846</td>
</tr>
<tr>
<td>Moveable</td>
<td>$9,942,564</td>
</tr>
<tr>
<td>CIP (construction in process)</td>
<td>$455,978</td>
</tr>
<tr>
<td>Value of Area Served</td>
<td>$5,254,254,379</td>
</tr>
</tbody>
</table>

Estimated Relative Threat

The Island Hospital Hazard Vulnerability Analysis (HVA), which is reviewed annually by the Emergency Preparedness Committee, rates probability, human impact, property impact, business impact, preparedness, internal response and external response to determine a score of relative risk associated with each type of disaster outlined in the assessment. It should be noted that the greatest risks have the highest scores. After review and any necessary updates, the HVA is presented to the Safety Committee for review.

As indicated in the attached HVA, Island Hospital is most vulnerable to the following natural hazards – ranked in order:

1. Earthquake
2. Snow Fall
3. Severe Wind Storm

Recent (2003 – 2008) Natural Hazard Event History

- 2006 Winter Wind Storm: Loss of power throughout the region for several days. Hospital able to operate at normal level due to the emergency generator in place.
- 2008 Winter Storm: Island Hospital incurred additional expenses during the snow event of 2008 because of snow removal costs, curb damage and overtime costs. Preliminary damage assessments have been submitted.
- Other: Minor damage to roof top antennas has occurred in the past five years due to severe storms.
Existing Applicable Natural Hazard Mitigation Policies, Ordinances and Codes

Island Hospital follows the National Fire Protection Association (NFPA) codes and standards as well as uniform building and electric codes. Island Hospital also follows the Joint Commission Emergency Management Standards for Hospitals and the Washington State Department of Health recommendations specifically for hospitals in regards to disaster planning/emergency management. In doing so, Island Hospital ensures that all four phases of emergency management (mitigation, preparedness, response, and recovery) are considered and that disaster planning is consistent, timely, all-hazard focused and organization wide.

Emergency Management / Disaster Planning

The Island Hospital Emergency Preparedness Plan outlines Island’s preparedness, response and recovery strategies. A copy of that plan is available to staff online and in hard copy throughout the hospital. Island Hospital’s Emergency Preparedness Committee, which consists of physician representation, administration representation, and representation from all departments, meets on a bi-monthly basis to do planning for mitigation, preparedness, response, and recovery. The Safety Committee is updated bi-monthly regarding plan updates, drill and exercise after action plans, Joint Commission standards and the HVA.

Island Hospital works with local the Emergency Management Department, Public Health, the Region One Hospital Preparedness Committee, the Region One Healthcare Coalition, the Washington State Hospital Association, the Community of Anacortes Emergency Response Committee and other agencies in regards to emergency management/disaster planning.

2003-2008 Completed All-Hazard Mitigation Strategies

The following mitigation strategies outlined in 2003 have been completed. Policies are in place and they are a standard business practice.

- Critical supplies listing and vendor agreements are in place.
- NIMS/HICS training done since 2006 and NIMS/HICS instituted into our hospital plan beginning 2007.
- Disaster Plan is updated annually and drills/exercises focus on improving the plan.
- In 2008 a New Hospital Evacuation Plan was completed, exercised, and reviewed.
- Evacuation plans are posted in each department in a location accessible by staff and patients/customers.
- An automatic lock down system has been installed for patient care area of the main hospital building.
- A five to seven food supply is kept on hand with an MOU in place for emergencies.
- Snow removal equipment has been purchased by the hospital.
- Fire insurance coverage is in line with fire codes and regulations.
- Automatic sprinkler heads, smoke detectors, fire resistant walls and doors are in place with an annual inspection by outside contractor.
- Annual maintenance of fire extinguishers and monthly checks are in place.
- Monthly fire drills are conducted.
- A no smoking policy is in effect at Island Hospital.
- A security contract is in place to deter arson and vandalism.
- Extension cords are prohibited.
- Air circulation is provided for copy machines and other office machines.
- Flammable liquids are stored properly.
- Emergency Generators in place and are tested on a monthly basis.
- Fuel supply for 96 hours for the electrical generator is kept on hand.
2003-2008 Carry-Over Mitigation Strategies

The following mitigation strategies were outlined for the 2003-2008 timeframe but have not been completed due to funding restraints. They remain valid measures for the 2008-2013 timeframe.

- Installing security cameras in parking lot to continue deterrence of theft and vandalism.
  - Lead department: Administration, Materials Management, Plant
  - Funding: Hospital District Budget
  - Timeline: Completion by 2010
  - Status: On track for 4th quarter of budget

- Institution of a new state-wide standardization of Emergency Codes
  - Lead department: Administration, Emergency Preparedness Committee, Safety Committee, and Clinical Departments
  - Funding: Hospital District Budget
  - Timeline: Completion by October 2009
  - Status: Training Program near completion and plan to begin training by June 2009.

Proposed 2008-2013 All Hazard Mitigation Strategies

- Conduct annual hospital update for all employees that includes life safety, emergency preparedness, and hospital codes.
  - Lead department: Administration, Emergency Preparedness Committee, Safety Committee, and Clinical Departments
  - Funding: Hospital District Budget
  - Timeline: Current and on-going.

- Conduct annual update and re-certification for the dedicated hospital decontamination team.
  - Lead department: Administration, Emergency Preparedness Committee, Safety Committee, and Clinical Departments
  - Funding: Hospital District Budget
  - Timeline: Current and on-going.

- Participation in one Regional Emergency Preparedness Exercise and one Community Response Exercise on annual basis.
  - Lead department: Administration, Emergency Preparedness Committee, Safety Committee, and Clinical Departments
  - Funding: Hospital District Budget
  - Timeline: Current and on-going

- Continued participation in the Region 1 hospital emergency preparedness committee and the Region 1 Healthcare Coalition.
  - Lead department: Administration, Emergency Preparedness Committee, Safety Committee, and Clinical Departments
  - Funding: Hospital District Budget
  - Timeline: Current and on-going