



EMERGENCY OPERATIONS PLAN (EOP)

FOR

Blue Ridge Medical Center

August, 2025

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APPROVAL AND IMPLEMENTATION

WHEREAS, the Board of Directors of Blue Ridge Medical Center recognizes the need to prepare for, respond to, and recover from natural and manmade disasters; and

WHEREAS, Blue Ridge Medical Center has a responsibility to provide for the safety and well-being of its citizens and visitors; and

WHEREAS, Blue Ridge Medical Center has established and appointed an Emergency Management Coordinator;

NOW, THEREFORE, BE IT RESOLVED by the Board of Directors of Blue Ridge Medical Center, this Emergency Operations Plan as revised is officially adopted, and

IT IS FURTHER RESOLVED AND ORDERED that the Emergency Management Coordinator, or their designee, is tasked and authorized to maintain and revise as necessary this document during the next four (4) year period or until such time it be ordered to come before this board.

Adopted this 18st Day of August, 2025



Esther Larkin, Board President
Blue Ridge Medical Center
Commonwealth of Virginia

PROMULGATION

Blue Ridge Medical Center is responsible for the health, safety, and welfare of its employees, patients, and visitors. The welfare and safety of these persons is never more threatened than during disasters. The goal of emergency management is to ensure that mitigation, preparedness, response, and recovery actions exist so that public welfare and safety are preserved.

Blue Ridge Medical Center has updated its Emergency Operations Plan (EOP) to ensure effective allocation of resources during an emergency to protect life, property, and the environment. This plan supersedes any previous plans promulgated for this purpose.

The EOP provides a comprehensive framework for the Blue Ridge Medical Center emergency management program. It addresses the roles and responsibilities of government organizations and provides a link to local, State, Federal, and private organizations and resources that may be activated to address disasters and emergencies in Blue Ridge Medical Center.

The Blue Ridge Medical Center Emergency Operations Plan ensures consistency with current policy guidance and describes the interrelationship with other agencies and levels of government. The plan will continue to evolve, responding to lessons learned from actual disaster and emergency experiences, ongoing planning efforts, training and exercise activities, and Federal guidance.

Therefore, in recognition of the emergency management responsibilities of Blue Ridge Medical Center and with the authority vested in me as the Chief Executive Officer of Blue Ridge Medical Center, I hereby promulgate the Blue Ridge Medical Center Emergency Operations Plan.



Rodney Johnson, Chief Executive Officer
Blue Ridge Medical Center

Blue Ridge Medical Center

Emergency Operations Plan

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I. Statement of Purpose

A. Purpose

The Emergency Operations Plan (EOP) describes Blue Ridge Medical Center’s (BRMC) emergency response organization and assigns responsibilities for various emergency tasks. The EOP framework enables BRMC to manage cascading impacts and multiple incidents and to develop the understanding necessary to prevent or mitigate subsequent events. The EOP also authorizes BRMC entities to act quickly in an emergency and to work in conjunction with local, state, and federal emergency agencies as required to provide support to or accept support from those agencies during an emergency. The EOP provides a structure for coordinating preparedness, response, and recovery efforts by BRMC personnel and resources.

The EOP is a collection of dynamic components rather than a single document. These components include the basic plan, a set of plan appendices and a series of functional and hazard-specific annexes. Together, all these components coordinate to form a unified EOP, which can be employed in its entirety or in part to respond to and manage emergencies that may impact BRMC.

The BASIC PLAN provides an overarching framework for emergency management activities at BRMC. It details how BRMC will prepare for and manage emergencies from an organizational and administrative perspective. The elements described in the Basic Plan are intended to be flexible for implementation during any hazard that may affect the center.

The PLAN APPENDICES documents how the plan is distributed and revised over time, the emergency management structure and organization at BRMC and other important information.

The FUNCTIONAL ANNEXES detail the actions and responsibilities anticipated in specific functional areas that may be activated in response to an emergency. The Functional Annexes are intended to supplement the Basic Plan by identifying roles and responsibilities in terms of specific

functions that may be necessary to support an emergency response requiring the use of this EOP. Functional Annexes expand upon, but to not repeat, information contained in the Basic Plan.

The HAZARD-SPECIFIC ANNEXES detail specific actions and responsibilities BRMC departments and external partner agencies and organizations may take in response to specific types of hazards or situations that may affect BRMC. These annexes are intended to supplement the Basic Plan and Functional Annexes. Included in the Hazard-Specific Annexes are considerations applicable to the identified hazard or threat beyond the general actions identified in the EOP Basic Plan and/or Functional Annexes. Hazard-Specific Annexes are intended to be developed for types of emergency situations for which BRMC is at the greatest risk or has the highest probability of encountering.

B. Scope

This EOP is designed to address natural and human-caused hazards that could adversely affect BRMC. It covers the full range of complex and constantly changing requirements in anticipation of or in response to threats of or actual disasters and emergencies. It describes the fundamental policies, strategies, and general concepts of operations to be used to control the emergency or disaster from its onset through the recovery phase.

This EOP applies to all BRMC-owned property and assets and to all BRMC personnel participating in mitigation, preparedness, response, and recovery efforts. This EOP also recognizes external partner agencies and organizations that may be requested to aid or conduct operations in the context of actual or potential emergencies at BRMC. Since the incident or event affecting BRMC may also impact the surrounding community, the EOP shall also support the efforts of Nelson County, the town of Amherst, and the town of Appomattox.

It is the responsibility of all BRMC personnel to read and understand the EOP; to integrate their departmental procedures and emergency management activities in support of the EOP; and to participate in training exercises. The Emergency Management Coordinator is available to assist, consult, and help coordinate emergency operations planning upon request.

The EOP outlines the expectations for BRMC personnel; roles and responsibilities; direction and control systems; internal and external communications; and training and maintenance of the Plan.

II. Situation and Assumptions

A. Situation Overview

BRMC is a Federally Qualified Health Center (FQHC) operating in three locations.

The Nelson County location at 4038 Thomas Nelson Highway in Arrington, VA consists of Primary Care, Behavioral Health, Pharmacy, Dental, Administration, and Facilities Management. It is open five days a week, Monday through Friday with the Pharmacy providing Saturday hours. This facility is equipped with a 500KW, 208v, 3-phase diesel backup generator capable of keeping all facility systems online during power outages. The FEMA designation of this location is an “area of minimal flood hazard.”

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The Amherst location at 210 South Main Street in Amherst, VA provides Primary Care. It is open four days per week, Monday through Thursday. This facility is not equipped with a backup generator. The FEMA designation of this location is an “area of minimal flood hazard.”

The Appomattox location at 624 Jones Street in Appomattox, VA provides Primary Care. It is open four days per week, Tuesday through Friday. This facility is not equipped with a backup generator. The FEMA designation of this location is an “area of minimal flood hazard.”

This EOP was developed to address emergency preparedness through prevention, protection, mitigation, response, and recovery; it outlines, authorizes, and implements BRMC’s structure for coordination activities during all phases of an emergency using an all-hazards approach.

BRMC will work to protect life, property, and the environment from the effects of emergencies by providing a holistic, resilient approach through prevention, protection, mitigation, response, and recovery efforts. While developing programs and activities in these areas, BRMC will incorporate principles described in the National Preparedness Goal and associated frameworks articulated by FEMA, and preparedness will occur within the five mission areas outlined in Homeland Security Presidential Policy Directive (HSPD)-8: National Preparedness: prevention, protection, response, recovery, and mitigation.

Overall preparedness activities consist of actions that will improve or enhance emergency response such as training and exercises. BRMC will prepare for emergencies by creating and maintaining emergency plans and procedures to accomplish the tasks associated with an emergency response. Nelson County, the Town of Amherst, and the Town of Appomattox will be encouraged to participate in BRMC exercises. Exercise results will be documented and recommendations implemented to improve BRMC’s preparation for an emergency. BRMC will revise this EOP based on ongoing planning and the result of exercises.

BRMC is dependent on outside agencies for resources such as fire department; law enforcement; public utilities; chemical, biological, radiological, nuclear, and explosive materials (CBRNE) detection; and remediation and disposal services.

B. Planning Assumptions

BRMC’s EOP is based on the following planning assumptions and conditions:

- Any reference to a role or title, unless otherwise stated in the text, will assume the phrase “or their designee” to be intended.
- Incidents will typically be handled at the lowest level possible.
- Incident management activities will be conducted in accordance with the National Incident Management System, as adapted to meet BRMC’s specific environment.
- It is possible for a major disaster to occur at any time and any place in or near BRMC. While in some cases, timely dissemination of warnings and increased readiness measures may be possible, many disasters occur with little or no warning.

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- BRMC management recognizes and understands their responsibilities for the safety and welfare of staff, patients, and visitors; and they embrace their responsibilities in the implementation of this EOP.
- Any employee of BRMC may be tasked by this EOP and is obligated to respond accordingly.
- BRMC employees tasked with BRMC emergency responsibilities may need to attend to the immediate safety of their own families in the early stages of a widespread emergency.
- External resources can be requested to assist BRMC if the nature of the incident goes beyond or overwhelms the capacity of BRMC's resources.
- Local emergency response resources, such as police or fire support, will be available in emergency situations affecting BRMC; although in a community-wide disaster, those resources may be constrained.
- Effective implementation and proper understanding of this EOP through periodic training and exercises will enhance BRMC's ability to respond during an emergency.
- Hazardous conditions may continue for some time following a major disaster thereby increasing the risk of casualties or fatalities.
- The medical facilities at BRMC are not an emergency room. Casualties requiring emergency room resources will be evacuated via ambulance to an appropriate facility.
- Depending on the type of threat or emergency, it is possible that any combination of the following consequences may be encountered:
 - Death, injury or illness of people and/or animals.
 - Interruption or disruption of area transportation services, communications networks, business activities, utilities, or other essential services.
 - Convergence of large numbers of people at incident scenes.
 - Support for people requiring evacuation, shelter, feeding, or other emergency assistance.
 - Contamination of food and/or water sources.
 - Potential for civil unrest or disorder, including looting, riot/mob behavior, violence, etc.
 - Significant structural damage and continuing associated risks.
- Daily operations that do not contribute directly to BRMC's response to an emergency may be suspended for the duration of any emergency and those operational resources may be redirected to support the emergency response.
- During an emergency, BRMC should expect to receive a high volume of communications seeking information regarding the welfare of employees, patients, and visitors from concerned relatives, spouses, friends, etc., as well as news media. A significant surge in the number of emails and phone calls could quickly exceed system capabilities.
- BRMC will comply with the Americans with Disabilities Act (ADA), which requires that emergency procedures enable people with disabilities to evacuate and participate in all emergency and disaster-related programs together with their service animals.

III. Concept of Operations

A. General

BRMC acknowledges that the responsibilities and functions performed during an emergency must be incident-specific, therefore, this EOP is based on the all-hazards approach and is flexible in that individual elements of the plan or all elements of the plan may be activated based on the specific emergency/incident and the decisions of senior BRMC leadership.

BRMC's EOP outlines actions and procedures for managing a broad range of emergencies or crisis events – it does not prescribe specific actions to be taken in response to specific emergency situations. This EOP is expected to be activated whenever an emergency:

- goes beyond the capability of routine departmental response procedures, requiring sustained response and/or institutional level strategic/policy support; or,
- may threaten the health, safety or welfare of BRMC constituents; or,
- has the potential to disrupt BRMC business, programs or activities; or,
- could negatively impact the credibility or reputation of BRMC.

B. Authority to Make Decisions in an Emergency

The following positions are authorized to declare an emergency, to determine operational priorities and personnel assignments required to facilitate emergency operations and to activate the EOP in total or in part. This list also represents the succession of decision-making authority and operational control for continuity of operations.

- The Chief Executive Officer
- The Chief Operations Officer
- The Chief Financial Officer
- The Chief Medical Officer
- The Emergency Management Coordinator

Any decision to close BRMC must be made after consultation with the Chief Executive Officer.

C. Emergency Operations Priorities

1. Save lives and protect the health, safety, and welfare of all BRMC constituents including responders and recovery personnel.
2. Ensure security of BRMC and restore a sense of order.
3. Protect and restore critical infrastructure and key resources.
4. Participate in law enforcement investigations as required to resolve the incident, apprehend perpetrators, and collect and preserve evidence for prosecution and/or attribution.
5. Protect property and mitigate damage and impacts to individuals, the community, and the environment.
6. Facilitate recovery of individuals.
7. Facilitate recovery of operations.
8. Protect BRMC's credibility and reputation.

D. Key Elements of Emergency Planning

BRMC recognizes the five key elements of Emergency Planning as noted herein. While it is not appropriate to address every element within the EOP itself, BRMC expects to develop guidance for each element in the future. The five key elements and their relationship to this EOP include:

- **Prevention:** Actions taken to avoid or stop an incident from occurring, including deterrence operations and surveillance.
- **Protection:** Actions taken to secure BRMC against natural and human-caused disasters.
- **Mitigation:** Activities which reduce the probability of a disaster occurring or reduce the damaging and long-term effects of unavoidable emergencies.
- **Preparedness:** Activities that develop and strengthen the response capabilities needed to effectively respond to an emergency. This EOP addresses preparedness through planning and establishing training for both response personnel and university leadership, and the use of exercises to reinforce training and to test capabilities.
- **Response:** This EOP establishes the organization, structure and actions to be carried out to effectively respond to an emergency.
- **Recovery:** Short-term recovery operations seek to restore vital services to BRMC, and long-term recovery focuses on restoring BRMC to its normal, pre-disaster (or an improved) situation. Recovery also encompasses business continuity planning.

E. Levels of Emergency Response

BRMC classifies emergency responses into three (3) levels of response according to increasing severity. The severity level of an incident may increase or decrease during the incident and response activities, requiring the level of response to be adjusted. The severity of an incident is determined by the threat to the safety of BRMC and the ability of BRMC to handle the incident.

Level 1: Level 1 represents the least severe incidents which remain within the scope and capability of normal BRMC response without declaring an emergency and activating the EOP. Incidents may result in minor injuries or minor damage to BRMC facilities, but affect a small, localized area.

Level 2: Level 2 incidents require the response of several entities, coordinated through activation of the EOP and may require a partial or full activation of the Emergency Operations Center (EOC). Incidents may result in severe or multiple injuries; and/or major damage to BRMC facilities; and/or a continuing threat to the BRMC community; may affect one or more areas; may disrupt normal operations and delivery of services; and may pose a reputational or credibility risk to BRMC.

Level 3: Level 3 incidents require the response of multiple entities in concert with external agencies, coordinated through activation of the EOP with full activation of the EOC. Such incidents are not localized to a single area and may affect the surrounding community; may result in major damage to BRMC or its facilities; may result in multiple casualties or fatalities; may result from an area-wide disaster; disrupt normal operations and delivery of services; and may pose reputational or credibility risk to BRMC.

F. Planning for People with Special Needs

- a. Comprehensive emergency management includes consideration and preparedness to accommodate people with special needs. Consideration for people with special needs will be incorporated into planning and response activities. Such planning will include meeting special needs for building evacuations, sheltering people with special needs, and appropriately accommodating service animals.
- b. BRMC complies with the Americans with Disabilities Act (ADA), which states that emergency programs, services, activities, and facilities must be accessible to people with access and functional needs and may not use eligibility criteria that screen out or tend to screen out people with access and functional needs. ADA requirements include reasonable modifications to policies, practices, and procedures when necessary to accommodate persons with access and functional needs and to ensure effective communications with persons with access and functional needs throughout emergencies. The BRMC Emergency Management Coordinator will work with BRMC management to appropriately address emergency plans and procedures in accommodating people with access and functional needs.

G. External Requests for Assistance

- a. Requests for law enforcement assistance are requested by dialing 911.
- b. Requests for fire department assistance are requested by dialing 911.
- c. Requests from external agencies for emergency support or resources should be communicated to the Emergency Management Coordinator who will coordinate with the Chief Executive Officer. Commitment of BRMC resources should be made with consideration for capacity, availability, duration, scope of the emergency, etc.

H. Legal Questions/Issues

Legal questions/issues that arise during an emergency will be resolved by forwarding to the Chief Operating Officer for consultation with counsel.

IV. Organization and Assignment of Responsibilities

This section provides an overview of the broad roles and responsibilities of staff, and the key functions that external agencies may accomplish in support of an emergency at BRMC. For details regarding the roles of key personnel/departments during an emergency, see Functional Annex A.

A. Staff

Individual preparedness for staff is critical to emergency operations and response at BRMC. Staff should become familiar with BRMC emergency procedures and create their own personal plans for emergencies. Employees should know their responsibilities within their departments/offices in an emergency and determine how to communicate with coworkers and families in an emergency. All BRMC personnel should follow the directions of emergency authorities. For assistance in creating emergency plans and kits, staff can ask the Emergency Management Coordinator for guidance.

B. External Declarations of Emergency

Emergency situations that may not originate at or directly affect BRMC may be declared at the national level (by the President), the state level (by the Governor) or the local level. BRMC may activate the EOP in support of such declarations.

C. External Assistance

External assistance for an emergency at BRMC may be offered or arrive unannounced from any of the areas noted below. External offers for assistance will be referred to the Emergency Management Coordinator for determination whether or how to incorporate such resources into the emergency operation. Functional Annex B illustrates the roles of several potential external partners that may assist BRMC in an emergency. Such assistance may include:

- External law enforcement agencies including, but not limited to, Virginia State Police, Nelson County Sheriff's Office, Town of Amherst Police Department, Amherst County Sheriff's Office, or the Appomattox County Sheriff's Office.
- State agencies like the Health Department or the National Guard.
- Federal agencies such as FEMA.
- Government-sponsored volunteer organizations such as Community Emergency Response Teams (CERT), etc.
- Private-sector and volunteer organizations such as the American Red Cross, that assist with sheltering, feeding, and other services, as well as business and industry offers for assistance.

V. Administration, Finance, and Logistics

A. Administration

To create a historical record of emergency response activities to improve procedures and develop mitigation strategies, the EOC shall include a specifically designated position to document the actions taken during the emergency operation of the EOC. This responsibility should include the collection of incident command logs, action plans created during the emergency, internal and external entities involved, resources expended, etc. This information, when combined with the post-incident assessment, will form the official incident record.

B. Finance

While the finance section of the EOC is responsible for accounting for expenditures made through the EOC, the Administration and Finance Division is ultimately responsible for aggregating the overall costs incurred during an emergency that requires a substantial response effort. This financial information should include expenditures made by entities (internal and/or external) in addition to the EOC, and will be made available to support reimbursement efforts, insurance claims, and inform future emergency budgeting, etc.

Expenditures will be tracked on forms as prescribed and provided by the Chief Financial Officer to capture eligible costs for potential reimbursement. The Emergency Management Coordinator will

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inform responding agencies and local officials about the cost recovery process and how to document costs incurred during the response and recovery operations.

The Chief Operating Officer working in collaboration with the Chief Financial Officer is responsible for aspects of property and liability insurance coverage for BRMC. Insurance considerations may influence disaster preparedness, mitigation, response, and recovery efforts.

C. Logistics

The Emergency Management Coordinator will review and assess BRMC's hazard vulnerabilities, existing risks, internal response capabilities, potential external resources, and post-incident assessments to identify resource shortfalls and recommend appropriate resource levels. The Emergency Management Coordinator should also review the list of external/contracted resources that might be required during an emergency and recommend which risks should be addressed through contingency contracts to facilitate rapid emergency response.

Logistical considerations should also include support in an emergency for children and individuals with disabilities and their service animals.

VI. Plan Development, Maintenance, and Training

A. Plan Development

Responsibility for the development of this EOP, its appendices and supporting materials, resides with the Emergency Management Coordinator under the auspices of the Safety Committee.

BRMC followed the planning process outlined in FEMA's Comprehensive Preparedness Guide 101 (CPG 101) in developing this EOP. This process included:

- Forming a collaborative planning team (the Safety Committee).
- Understanding the situation (creating a hazard vulnerability assessment).
- Determining goals and objectives.
- Developing the EOP.
- Preparing, reviewing and approving the EOP.
- Implementing and maintaining the plan.

To coincide with federal, state, and local standards, this EOP was written to be consistent with laws, regulations and best practices, as described in Section VII: Authorities and References. Revisions to the EOP will go through the Safety Committee. The EOP will be reviewed as noted in Section VI.C. below and whenever needed following exercises and actual emergencies.

B. Plan Distribution

The Safety Committee shall determine the distribution (and method thereof) for the EOP; however, the plan should be distributed to those individuals, departments, agencies and organizations tasked within the EOP. The plan should be readily available in the EOC. Distribution of the plan is the responsibility of the Emergency Management Coordinator and will be recorded in Appendix A.

- Internal distribution should include at least the executive team, all directors and department heads.
- External distribution should include the Emergency Services Coordinator and Sheriff's Office for each jurisdiction in which BRMC maintains a presence.
- The Plan should be posted on the BRMC website for access by the public.

C. Plan Maintenance

The Safety Committee will review this EOP and its appendices and supporting documents annually at the first quarterly meeting. The Emergency Management Coordinator will seek input from appropriate units tasked in the plan prior to the review meeting. All units tasked in the plan are responsible for providing updates and changes to the Emergency Management coordinator prior to the Safety Committee review meeting. The Emergency Management Coordinator will remain apprised of changes and updates in federal requirements. The Emergency Management Coordinator will record all major plan revisions in Appendix B.

Minor edits, revisions or updates do not require re-authorization of the plan; however, the plan and its appendices with accumulated revisions will be re-authorized at least every five (5) years.

D. Training

Upon approval and implementation of the EOP, and no less than biennially, the Emergency Management Coordinator shall schedule sessions to train members of the EOC and other pertinent managers on the requirements of the EOP. This training should also include an overview of NIMS and ICS as adapted to align with BRMC's administrative structure and resources.

All individuals assigned to fulfill EOC responsibilities (and at least one back up person per position) will receive training in ICS, the role of the EOP, functioning of the EOC, and a basic understanding of the responsibilities of other EOC sections. The Emergency Management Coordinator will track this training requirement.

E. Drills & Exercises

The Emergency Management Coordinator will schedule an annual tabletop training exercise to include the EOC and other pertinent managers, and representatives from external response agencies related to the specific exercise scenario. The tabletop exercise should increase familiarity and practical experience with the EOP, test critical response components of the EOC and confirm that personnel are adequately trained to perform their assigned duties. The exercise shall include a post-training assessment to document lessons learned to improve BRMC's preparedness and response to emergencies.

BRMC will also conduct additional exercises, to include drills, functional exercises, and full-scale exercises, as necessary.

BRMC will participate in exercises conducted by external partners, such as Northern Virginia Emergency Response System, Southwest Virginia Healthcare Coalition, the Virginia Department of Emergency Management, and law enforcement agencies, to include community-wide drills and

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exercises. BRMC will also invite external partners to observe, participate in, and evaluate center-specific exercises.

The Emergency Management Coordinator will conduct a post-training review, document identified corrective actions in an after-action report and improvement plan, and track the implementation of any changes in procedures, resources, training, etc.

Individual departments and other BRMC entities tasked with responsibilities under this EOP are responsible for training pertinent personnel and maintaining appropriate preparedness to adequately respond during an emergency.

VII. Authorities and References

A. Authorities

Primary authority for the EOP is derived from recommendation of the document by the Safety Committee and approval by the Board of Directors. The Safety Committee is a BRMC committee with responsibility for establishing procedures related to emergency management.

This EOP uses the foundation provided by the Homeland Security Presidential Directive (HSPD)-5, and the Robert T. Stafford Disaster Relief and Emergency Assistance Act (Staffor Act) to describe a comprehensive, all-hazards approach to emergency management at BRMC. This EOP adheres to Public Law 106-390, the Disaster Mitigation Act of 2000, and Homeland Security Presidential Policy Directive (HSPD)-8: National Preparedness.

This EOP also adheres to the National Preparedness Goal, which emphasizes preparedness as an overarching mission that guides the entire emergency management program by identifying five mission areas: prevention, protection, mitigation, response, and recovery. Each mission area is supported by several Core Capabilities, which are critical elements needed to succeed in achieving preparedness on the national level. This EOP allows for coordination with local, state, and federal government entities to move towards one goal of preparedness. At the institutional level, BRMC will engage the BRMC community to build and maintain a comprehensive culture of preparedness using this EOP as a guide.

BRMC also considers and complies with additional federal legislation that applies to health care institutions, including the following:

- Health Insurance Portability and Accountability Act of 1996 (HIPAA)
- Americans with Disabilities Act (ADA)

This EOP can be used in conjunction with other emergency operations plans including local, regional, and state plans and complies with county and state authorities pertaining to emergency management, operations, and response.

B. References

BRMC created this EOP as a commitment to maintain a safe, secure, and disaster resistant health care facility. In drafting this document, BRMC employed emergency planning guidance, best practices, and regulation at the local, state, and federal levels. The following documents and sources were referenced during the planning process:

- Local:
 - Nelson County EOP
 - Amherst County EOP
 - Appomattox County EOP
- State:
 - Commonwealth of Virginia EOP
- Federal:
 - FEMA Comprehensive Preparedness Guide (CPG) 101 Version 2
 - FEMA State and Local Guide 101
 - DOJ/FBI Developing Emergency Operations Plans

VIII. Definition of Terms

ADA	Americans with Disabilities Act
AHAD	All Hazard All Discipline
BRHC	Blue Ridge Health Center
BRMC	Blue Ridge Medical Center
CBRNE	Chemical, Biological Radiological, Nuclear or Explosive
CERT	Community Emergency Response Team
CEO	Chief Executive Officer
CFO	Chief Financial Officer
CMO	Chief Medical Officer
COO	Chief Operations Officer
DBO	Director of Building Operations
DIT	Director of Information Technology
DON	Director of Nursing
DPH	Director of Pharmacy
DHHS/CDC	U.S. Department of Health & Human Services/Centers for Disease Control and Prevention
ECC	Emergency Communication Center
EHR	Electronic Health Record
EOC	Emergency Operations Center
EOP	Emergency Operations Plan
EPI	Emergency Public Information
FEMA	Federal Emergency Management Agency
FQHC	Federally Qualified Health Center
FTCA	Federal Tort Claims Act
IC	Incident Command/Incident Commander
ICS	Incident Command System
MOU	Memorandum of Understanding

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NIMS	National Incident Management System
PIO	Public Information Officer
POTS	Plain Old (Ordinary) Telephone Service
PM	Patient Access Manager
VOIP	Voice Over Internet Protocol

IX. Annexes and Appendices

Annexes and Appendices are kept as separate documents. They are listed here with their titles:

A. Plan Appendices

Appendix A	Record of Distribution
Appendix B	Record of EOP Revisions
Appendix C	Emergency Management Organization Chart
Appendix D	Hazard and Vulnerability Analysis

B. Functional Annexes

Functional Annex A	Responsibilities of Key Personnel/Departments
Functional Annex B	External Partners
Functional Annex C	EOC Structure
Functional Annex D	Codes
Functional Annex E	Evacuation
Functional Annex F	Shelter in Place

C. Hazard Specific Annexes

Hazard Specific Annex A	Inclement Weather
Hazard Specific Annex B	Fire
Hazard Specific Annex C	Active Shooter/Active Violence
Hazard Specific Annex D	Bomb Threat
Hazard Specific Annex E	Workplace Violence
Hazard Specific Annex F	Public Utility Failure
Hazard Specific Annex G	IT/Communications Failure
Hazard Specific Annex H	Missing Person