This draft is subject to review and approval by the Governor.

EXECUTIVE ORDER NO. 2023-__

WHEREAS, the National Hurricane Center has determined that Hurricane__________, which is currently a category _____ hurricane, may impact the State of South Carolina and other areas in the southeastern region of the United States; and

WHEREAS, the undersigned has been advised that Hurricane__________, including the associated wind, heavy rain, storm surge, flash flooding, and other severe weather, represents a significant threat to the State of South Carolina, which requires that the State take timely precautions to protect and preserve property, critical infrastructure, communities, and the general safety and welfare of the people of this State; and

WHEREAS, due to the potential impact of Hurricane__________, the undersigned issued Executive Order No. 2023-____ on ________, 2023, declaring that a State of Emergency exists throughout the State of South Carolina and activating the South Carolina Emergency Operations Plan; and

WHEREAS, the anticipated impacts of Hurricane__________ represent an imminent threat to the safety, security, and welfare of the residents and patients of certain healthcare facilities in the State of South Carolina; and

WHEREAS, as the elected Chief Executive of the State, the undersigned is authorized pursuant to section 25-1-440 of the South Carolina Code of Laws, as amended, to direct and compel the evacuation of all or part of the populace from any stricken or threatened area if such action is considered necessary for the preservation of life or other emergency mitigation, response, or recovery; and

WHEREAS, upon consultation with the South Carolina Emergency Management Division (“EMD”) and the South Carolina Department of Health and Environmental Control (“DHEC”), the undersigned has determined that the evacuation of healthcare facilities in and surrounding the
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threatened areas is necessary for the preservation of life and that, due to time and logistical concerns, such evacuation should begin prior to any general population evacuation.

NOW, THEREFORE, by virtue of the authority vested in me as the Governor of the State of South Carolina and pursuant to the Constitution and Laws of this State and the powers conferred upon me therein, effective immediately, I hereby order a mandatory medical evacuation of all healthcare facilities licensed by DHEC and located in the following Evacuation Zones, which are detailed further in Exhibit A: __________________________. Accordingly, for the foregoing reasons and in accordance with the cited authorities and other applicable law, I further order and direct as follows:

Section 1. Healthcare Facilities (other than General Acute Care Hospitals)

For purposes of this Order, healthcare facilities (other than general acute care hospitals, described below in Section 2) shall include psychiatric hospitals, alcohol and substance abuse hospitals, rehabilitation hospitals, nursing homes, community residential care facilities (also called assisted living facilities), ambulatory surgical facilities, hospice facilities, radiation therapy facilities, abortion facilities, day care facilities for adults, residential treatment facilities for children and adolescents, intermediate care facilities for persons with intellectual disability, facilities for chemically addicted or dependent persons, and birthing centers.

Upon the effective date and time of this Order, all healthcare facilities in the above-referenced Evacuation Zones are hereby ordered to:

- Initiate evacuation procedures;
- Stop admission of any non-emergent patients;
- Immediately begin to reduce their census of patients;
- Limit services to emergent or essential patient needs (for example, non-elective procedures, dialysis, giving birth, medications, and chemotherapy); and
- Take other measures as necessary to ensure evacuation is completed pursuant to this Order prior to the arrival of tropical storm force winds.

It is important to begin evacuating healthcare facilities in advance of the approaching storm and prior to any general population evacuation to ensure the safety of patients and staff. Each healthcare facility is unique with different needs and should begin implementing its plan now. Recognizing that fully evacuating takes time and the needs of each healthcare facility are different, each healthcare facility must notify DHEC upon completion of its evacuation so that the State has a census of healthcare facilities. Such notification to DHEC may be made by email at acc-healthreg@dhec.sc.gov or by telephone at [telephone number to be added].

Section 2. General Acute Care Hospitals
For purposes of this Order, general acute care hospitals means hospitals licensed by DHEC as general hospitals as defined by Regulation 61-16, whose licenses include general hospital beds.

**A. Exempted General Acute Care Hospitals**

Based on the forecasted wind speed at the time of issuance of this Order, as well as information previously submitted to DHEC, the following licensed general hospitals are exempt from mandatory medical evacuation:

[Hospital Name (Hospital License No.)]

[The determination of which hospitals will be exempted from mandatory evacuation in the Order will be based on the forecast information available at the time of the Order from the National Hurricane Center regarding wind speed (hurricane category); information on file with DHEC for individual hospitals regarding the wind speed the facility can safely withstand; and information on file with DHEC confirming height of the facility’s essential components. The hospital must also have a shelter-in-place plan on file with DHEC addressing the key components required by DHEC.]

Exempted hospitals must notify the Department of their decision to either evacuate or to shelter-in-place. Such notification to DHEC should be made by email at acc-healthreg@dhec.sc.gov or by telephone at [telephone # to added]. Exempted hospitals that activate their shelter-in-place plan must still reduce census, cancel elective procedures, and maintain communication with the Department throughout the event. Exempted hospitals must also maintain current information in the Critical Data Sheet, provide facility-wide bed availability data through PalmettoEOC and the evacuation survey tool, and maintain proper notification protocols internally and externally. Exempted hospitals must shutter at the time of EMS stoppage and must notify the public they will be shuttered during this time, but may render aid, to the degree safely possible, to first responders or local residents who come to the hospitals in extremis.

**B. Non-Exempted/Evacuating General Acute Care Hospitals**

General Acute Care Hospitals in the Evacuation Zones identified in this Order that are not listed above as exempt must evacuate. General Acute Care Hospitals that otherwise evacuate may, if they choose, shelter medically fragile patients in place in accordance with Section 3 of this Order, and/or may shelter staff on site so they can re-open emergency services immediately following the storm but before evacuation is lifted. Such hospitals must comply with the following requirements:

- Notify DHEC of their plans to shelter in place medically fragile patients and/or staff;
- Notify DHEC immediately of any change in plans to shelter in place medically fragile patients and/or staff;
• Inform DHEC of the number of patients and number of other persons who will shelter-in-place;
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• Have a written plan on file with DHEC that provides for the safety of the patient(s), staff, and those remaining with the patient(s);
• Have a written plan that ensures there is sufficient food, water, medications, and equipment and other logistical support internal to the hospital to maintain every person within the hospital for ninety-six (96) hours post impact of the hurricane;
• Coordinate storm-related emergency services with local EMS providers to ensure the hospital’s emergency services are available when needed by EMS and other first responders;
• Have a written plan on file with DHEC addressing the provision of urgent and emergent services as soon as the storm has subsided and it is safe for EMS to operate;
• Notify the public the facility will be closed from the time EMS in the hospital’s area ceases to operate until the storm has subsided and it is safe for EMS to operate; and
• Shutter the hospital during the period that EMS is not operating. During the period they are shuttered, hospitals should render aid, to the degree safely possible, to first responders or local residents who come to the hospitals in extremis.

Notifications to DHEC required by this Section should be made by email at acc-healthreg@dhec.sc.gov or by telephone at [telephone # to added]

Section 3. Shelter-in-Place for Medically Fragile Patients in Hospitals

Under limited circumstances, a physician may determine that it is medically advisable for a medically fragile patient to shelter-in-place in a hospital that has otherwise evacuated. In such cases, hospital management and the physician shall weigh the risks of sheltering in place to care for the patient as compared to the risks of evacuating the patient. In this scenario, such facility must:
• Obtain a written certification from a physician that the patient is too medically fragile to be evacuated (that is, the risk to the patient’s health or life by moving him/her is greater than the risk of remaining in the hospital during this emergency);
• Make reasonable efforts to consult with the patient or his/her legal representative prior to making a final determination to shelter a medically fragile patient in place. In circumstances where a consultation is not possible, the hospital shall document in the patient’s medical record details of the efforts made to attempt a consultation;
• Inform DHEC of the number of patients and number of other persons who will shelter-in-place;
• Have a written plan on file with DHEC that provides for the safety of the patient(s), staff, and those remaining with the patient(s) during the sheltering-in-place; and
• Have a written plan to ensure there is sufficient food, water, medication, equipment, and other logistical support internal to the facility for ninety-six (96) hours post impact of the hurricane.
Section 4. Re-Entry

After a county or a portion thereof is evacuated, decisions regarding re-entry into the county, or a portion thereof, will be made at a local level based on local conditions, by local officials in coordination with county emergency management authorities. The county emergency management authority is appropriate for coordination in re-entry decisions as they will have intimate knowledge of the local conditions, such as road conditions and risks to patients’ lives and safety.

When a hospital re-establishes emergency services, including those services necessary to support emergency services, within a part of the hospital after the hurricane has subsided but before the expiration of this Order, or after the expiration of this Order but before a county is allowing re-entry, the hospital must conduct an inspection of the facility to determine if that section can function safely and meet regulatory requirements. The inspection must be certified by the facility manager and the chief executive officer or their designees. Other affected healthcare facilities should make arrangements for similar inspections prior to re-entry and repatriation.

This Order is effective immediately. Further proclamations, orders, and directives deemed necessary to ensure the fullest possible protection of life and property during this State of Emergency shall be issued verbally by the undersigned and thereafter reduced to writing and published for dissemination within the succeeding 24-hour period.


HENRY McMASTERS
Governor

ATTEST:

MARK HAMMOND
Secretary of State