Hospital Emergency Preparedness Program Update

May 29, 2019
Today’s Program Topics

- Safety and Preparedness Update
  - Restructuring of Non-urban Healthcare Coalition Boundaries
  - 2019 Training and Exercise Opportunities
  - Orientation Template for Preparedness Staff

- EMResource and el CS Updates
  - Juvare Exchange
  - Overview of Advanced Bed Availability Drill
Safety and Preparedness Update
Restructuring of Non-urban Healthcare Coalition Boundaries
Missouri’s HPP Structure

Nonurban
- Clinical Advisor beginning July 1
- Dedicated operational readiness managers
- Align with trauma and transport plans

Statewide
- Administer electronic incident management technology
Restructuring Goals

• Planning: Administrative Efficiencies
  ➢ Consistent Overarching Policy
  ➢ Expand Operational Procedures

• Response: Seamless Escalation
  ➢ Standardizes Essential Elements of Information
  ➢ Coordinates deployment of uniform regionally-maintained assets
Statewide Preparedness Education

- Workplace Violence Prevention Program Development Workshops**
  - June 10, 2019; Blue Springs
  - June 12, 2019; Springfield
  - June 14, 2019; Chesterfield

- Emergency Preparedness Fundamentals Course**
  - June 20, 2019; MHA Board Room (waitlist only)
  - November 13, 2019; MHA Board Room

- EMResource and eICs training**, offered regionally, through Healthcare Coalitions

**Clock hours may be applied toward CHEP re-certification
2019 Annual Emergency Preparedness and Safety Conference
Conference Details

• October 9-11, 2019
• Tan-Tar-A Resort, Osage Beach
• Registration Fees
  ➢ MHA Member Organizations: $375
  ➢ Non-member Organizations: $475
• Vendor Opportunities
• Attendee Social – Seeking sponsor (Tentative)
Confirmed Presentations

• Leadership Engagement in Emergency Management Programs: Survey Compliance
• Workforce Resiliency: Critical Incident Stress Management
• Alaska Earthquake: Infrastructure
• Active Shooter and Hostile Events
• CMS Update from D.C.
• Hospital Exercise Program Requirements and Best Practices
• Hospital Perspectives from the Las Vegas Shooting
Spring 2019 Exercises

• Ebola Virus Disease full-scale exercise based on the statewide CONOPS plan: May 28-30, 2019
• Functional exercise to validate the statewide pediatric surge plan: May 31, 2019
• NMSZ-focused Mobile Communication Asset full-scale exercise in conjunction with National Level Exercise: Shaken Fury, June 3-7, 2019
Preparedness Curriculum

- MHA staff field recurring requests for training guidance from member hospitals and partner agencies.
- Recognize value in providing a standardized curriculum to engaged organizations.
  - Support programmatic buy-in
  - Reduce unnecessary burden
- Scope: Primary staff vs. supporting roles
Document Structure

- Core Competencies (Rows)
- Guidance (Columns)
  - Timeframe
  - Delivery Format
  - Frequency of offerings
  - Purpose: Compliance Required, Support compliance, professional development, best practice, resource
  - Related Links
  - Date Started
  - Date Completed
  - Notes
EMResource/ el CS Update
el CS

- Coordinated Response Feature: Add-on enhancement that allows sharing of incident information between facilities, healthcare systems and healthcare coalitions; resource tracking
- Reminder of el CS use by regulatory and compliance staff for survey management
- Juvare Exchange Pilot Project
Juvare Pilot Project

The Map View provides an expanded view of all incidents and associated information in real time. Clicking on MAP DATA allows specific layers to be selected (indicated by a check in the box that corresponds to the data feature).

Note: The scope of the map controls what displays in both side panels.
EMResource

- Ongoing evaluation of resources, statuses and users to ensure a robust, reliable, redundant communication platform
  - EMS engagement
  - Re-evaluation of psychiatric resource view
  - Refinement of KC metro ED diversion nomenclature, effective January 2, 2019
# EMResource Updates to Kansas City Diversion Statuses

## Status Type: Ed Diversion Status

<table>
<thead>
<tr>
<th>Status Type</th>
<th>Statuses</th>
<th>Definitions</th>
</tr>
</thead>
<tbody>
<tr>
<td>Open</td>
<td>The hospital ED is open to all ambulance traffic.</td>
<td></td>
</tr>
<tr>
<td>High Volume</td>
<td>The hospital ED is experiencing high volumes. When appropriate, alternate destinations should be evaluated for patient routing.</td>
<td></td>
</tr>
<tr>
<td>Catchment Area</td>
<td>All hospitals within the catchment area are experiencing High Volume.</td>
<td></td>
</tr>
<tr>
<td>Out of Service</td>
<td>The emergency department has suffered structural damage, loss of power, an exposure threat or other conditions that precludes the admission and care of any new patients.</td>
<td></td>
</tr>
</tbody>
</table>

## Status Type: TCD Status

<table>
<thead>
<tr>
<th>Status Type</th>
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<tbody>
<tr>
<td>TCD Diversion</td>
<td>TCD Diversion</td>
<td>A facility should indicate TCD Diversion when one or more of their TCD capabilities is placed on diversion status. <strong>NOTE</strong> Appropriate updates should be made to STEMI, Stroke, or Trauma TCD statuses as necessary.</td>
</tr>
<tr>
<td>Normal Operations</td>
<td>Services are open or normal for all applicable TCD capabilities</td>
<td></td>
</tr>
<tr>
<td>No Capability</td>
<td>Facility does not have TCD capabilities</td>
<td></td>
</tr>
</tbody>
</table>

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<tr>
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<tr>
<td>KC Hospital ED</td>
<td>Open</td>
<td>The hospital ED is open to all ambulance traffic.</td>
</tr>
<tr>
<td>Lawton Memorial Hospital</td>
<td>Open</td>
<td>The hospital ED is open to all ambulance traffic.</td>
</tr>
<tr>
<td>Clotue Medical Center</td>
<td>Open</td>
<td>The hospital ED is open to all ambulance traffic.</td>
</tr>
<tr>
<td>Saint Luke’s East Hospital</td>
<td>Open</td>
<td>The hospital ED is open to all ambulance traffic.</td>
</tr>
<tr>
<td>Belton Regional Medical Center - TC</td>
<td>Closed To Ambulances</td>
<td>The hospital ED is experiencing high volumes. When appropriate, alternate destinations should be evaluated for patient routing.</td>
</tr>
<tr>
<td>Lee’s Summit Medical Center</td>
<td>Open</td>
<td>The hospital ED is open to all ambulance traffic.</td>
</tr>
<tr>
<td>Liberty Hospital - TC</td>
<td>Open</td>
<td>The hospital ED is open to all ambulance traffic.</td>
</tr>
<tr>
<td>North Kansas City Hospital - TC</td>
<td>Open</td>
<td>The hospital ED is open to all ambulance traffic.</td>
</tr>
<tr>
<td>Overland Park Regional Med Ctr - TC</td>
<td>Open</td>
<td>The hospital ED is open to all ambulance traffic.</td>
</tr>
<tr>
<td>Providence Medical Center - TC</td>
<td>Open</td>
<td>The hospital ED is open to all ambulance traffic.</td>
</tr>
<tr>
<td>Research Medical Center - TC</td>
<td>Open</td>
<td>The hospital ED is open to all ambulance traffic.</td>
</tr>
<tr>
<td>Saint John Hospital (KS)</td>
<td>Open</td>
<td>The hospital ED is open to all ambulance traffic.</td>
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<td>Services are open or normal for all applicable TCD capabilities</td>
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Advanced Bed Availability
Query Overview
Purpose

- The query is designed to collect each facility’s current staffed bed capacity at the onset of a patient surge incident, and prompt them to consider surge planning procedures (patient discharge, increased staffing levels, etc.) to complete the additional surge bed availability information requested.

- With this information, hospitals and health care facilities will have the ability to monitor EMResource to determine bed availability during an incident, and state and regional partners will be able to utilize the data to support Immediate Bed Availability reporting efforts.
Query Notifications

- Advanced Bed Availability query notifications are generated automatically through the EMResource system.
  - By default, the system will notify all users associated to facilities included in the query
    - Notifications may be sent via email, text, or web page notification
    - For users with individual accounts, notification settings may be adjusted based on individual preferences and/or responsibilities
Query Response Procedures

Advanced Bed Availability
Query Information:

- An Advanced Bed Query has been initiated to gather data that will be used to determine bed availability for surge planning coordination. During an Advanced Bed Query activation, facilities are asked to consider internal medical surge procedures, and respond appropriately. It may be necessary to collaborate with internal facility staff to populate an accurate response. Reporting for this query will be a two-step process.

  - Step 1 - Current Staffed Bed Capacity*: Please use the most current information to report your current staffed bed capacity in the requested bed categories. To determine staffed bed capacities, please consider all currently staffed beds, including both occupied and vacant beds.

  - Step 2 - Surge Bed Availability*: Considering medical surge planning procedures, such as early discharges, patient transfers, non-critical procedure cancellations, increased staffing levels, etc., please enter the projected number of available beds your facility could provide within 4 hours.

*Please see the Definitions Page for a more detailed definition of all statuses
Query Response Procedure

1. If the web notification is activated, click to acknowledge all notifications
Query Response Procedure

2. Click on the event banner at the top of the screen
Query Response Procedure

3. From the event screen, click on the “keys” icon next to your facility.
4. From your facility’s Update Status screen, click on select all.
5. For Current Staffed Bed Capacity reporting, update each applicable bed category with the **total** number of **staffed** beds your facility currently has. This should include both occupied and vacant beds that are currently staffed.

Note: This number should not change throughout the event period, and will be used as a baseline for determining surge capacity.
Query Response Procedure

After conducting surge planning procedures and preparations within your facility, Surge Bed Availability (HAVBed Projections) statuses can be completed.

6. Update each applicable bed category with the total number of staffed beds that are currently available, or could be made available after surge planning considerations are completed. Surge bed availability numbers may change as planning efforts continue. Please update accordingly.

7. Click Save
Query Response Procedure

After updating and saving your bed status information, the event status view should reflect the most recent updates from each facility.
Query Response Procedure

As all facilities begin reporting, the Status Type Summary at the bottom of the event status screen will begin to provide the summary totals for use in bed availability planning, and calculation of bed surge percentages.
Status Definitions
<table>
<thead>
<tr>
<th><strong>BED CAPACITY STATUS</strong></th>
<th><strong>DEFINITIONS</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>Current Staffed Bed Capacity: Adult ICU</td>
<td>Please provide the total number of staffed adult ICU beds currently at your facility. This number may include both occupied and vacant staffed beds. Adult ICU beds can support critically ill or injured patients, including ventilator support.</td>
</tr>
<tr>
<td>Current Staffed Bed Capacity: ED</td>
<td>Please provide the total number of staffed ED beds currently at your facility. This number may include both occupied and vacant staffed beds.</td>
</tr>
<tr>
<td>Current Staffed Bed Capacity: Med/Surg</td>
<td>Please provide the total number of staffed Med/Surg beds currently at your facility. This number may include both occupied and vacant staffed beds.</td>
</tr>
<tr>
<td>Current Staffed Bed Capacity: NICU</td>
<td>Please provide the total number of staffed NICU beds currently at your facility. This number may include both occupied and vacant staffed beds.</td>
</tr>
<tr>
<td>Current Staffed Bed Capacity: Obstetric</td>
<td>Please provide the total number of staffed Obstetric beds currently at your facility. This number may include both occupied and vacant staffed beds.</td>
</tr>
<tr>
<td>Current Staffed Bed Capacity: OR</td>
<td>Please provide the total number of staffed OR beds currently at your facility. This number may include both occupied and vacant staffed beds.</td>
</tr>
<tr>
<td>Current Staffed Bed Capacity: Pediatric</td>
<td>Please provide the total number of staffed Pediatric beds currently at your facility. This number may include both occupied and vacant staffed beds.</td>
</tr>
<tr>
<td>Current Staffed Bed Capacity: Peds ICU</td>
<td>Please provide the total number of staffed Pediatric ICU beds currently at your facility. This number may include both occupied and vacant staffed beds.</td>
</tr>
<tr>
<td>Current Staffed Bed Capacity: Psych</td>
<td>Please provide the total number of staffed Psychiatric beds currently at your facility. This number may include both occupied and vacant staffed beds.</td>
</tr>
</tbody>
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<tr>
<th><strong>SURGE BED AVAILABILITY STATUS</strong></th>
<th><strong>DEFINITIONS</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>Surge Bed Availability: Adult ICU</td>
<td>Please provide the total projected number of staffed Adult ICU beds that are currently available or could be made available after surge planning considerations are completed. Please update this number as necessary to reflect any changes in bed availability estimates.</td>
</tr>
<tr>
<td>Surge Bed Availability: ED</td>
<td>Please provide the total projected number of staffed ED beds that are currently available or could be made available after surge planning considerations are completed. Please update this number as necessary to reflect any changes in bed availability estimates.</td>
</tr>
<tr>
<td>Surge Bed Availability: Med/Surg</td>
<td>Please provide the total projected number of staffed Med/Surg beds that are currently available or could be made available after surge planning considerations are completed. Please update this number as necessary to reflect any changes in bed availability estimates.</td>
</tr>
<tr>
<td>Surge Bed Availability: NICU</td>
<td>Please provide the total projected number of staffed NICU beds that are currently available or could be made available after surge planning considerations are completed. Please update this number as necessary to reflect any changes in bed availability estimates.</td>
</tr>
<tr>
<td>Surge Bed Availability: Obstetric</td>
<td>Please provide the total projected number of staffed Obstetric beds that are currently available or could be made available after surge planning considerations are completed. Please update this number as necessary to reflect any changes in bed availability estimates.</td>
</tr>
<tr>
<td>Surge Bed Availability: OR</td>
<td>Please provide the total projected number of staffed OR beds that are currently available or could be made available after surge planning considerations are completed. Please update this number as necessary to reflect any changes in bed availability estimates.</td>
</tr>
<tr>
<td>Surge Bed Availability: Pediatric</td>
<td>Please provide the total projected number of staffed Pediatric beds that are currently available or could be made available after surge planning considerations are completed. Please update this number as necessary to reflect any changes in bed availability estimates.</td>
</tr>
<tr>
<td>Surge Bed Availability: Pediatric ICU</td>
<td>Please provide the total projected number of staffed Pediatric ICU beds that are currently available or could be made available after surge planning considerations are completed. Please update this number as necessary to reflect any changes in bed availability estimates.</td>
</tr>
<tr>
<td>Surge Bed Availability: Psychiatric</td>
<td>Please provide the total projected number of staffed Psychiatric beds that are currently available or could be made available after surge planning considerations are completed. Please update this number as necessary to reflect any changes in bed availability estimates.</td>
</tr>
</tbody>
</table>
Routine Query Activations

- The Missouri Department of Health and Senior Services activates monthly EMResource queries to ensure hospitals maintain their ability to receive and respond to real-world event queries, with accurate data, in a timely manner.

  - Plan to incorporate Advanced Bed Availability queries into this schedule
    - 10 Current Bed Availability Queries per year
    - 2 Advanced Bed Queries per year
Contact Information

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