

September 24, 2012

Dear Hospital Partners,

The Florida Department of Health has been providing Hospital Preparedness Program (HPP) funding to hospital partners since 2002. Hospital funding support is intended to improve medical surge capacity and enhance community and hospital preparedness for public health emergencies. Florida's hospitals have made great progress in all-hazards preparedness. As we continue our efforts to assist with the ongoing development of capabilities and capacity with our hospital partners, it is important to examine our progress and the current status of all-hazards preparedness in the hospital setting.

The 2012 Hospital Preparedness Survey was distributed to 214 hospitals in the state of Florida and reflects data for the time period of July 1, 2011 to June 30, 2012. One hundred thirty six of the one hundred sixty four hospitals (83%) responding to the survey reported having a current HPP contract for FY 11-12. Survey results are summarized in the remainder of this letter.

The survey that was completed this year represents the end of a 5 year funding cycle. Future surveys will address key areas as indicated by the HPP Program Guidance for the next five year funding cycle. Surveys will continue to address all-hazards preparedness planning, training, exercises, capability sustainment, and will also include an increased emphasis on a whole community approach to include partnerships and coalition development.

### Programmatic Approach

- **Enhanced Planning:** HPP resources are used to enhance hospital and healthcare system planning and response at the state, local, and regional levels.
- **Increasing Integration:** HPP facilitates the integration of public and private sector medical planning and assets to increase the preparedness planning, response, and surge capacity of hospitals and other healthcare facilities.
- **Improving Infrastructure:** Awardees have used HPP resources and funding to improve the state, local, and regional infrastructures that help hospitals and healthcare systems prepare for all-hazard emergencies.

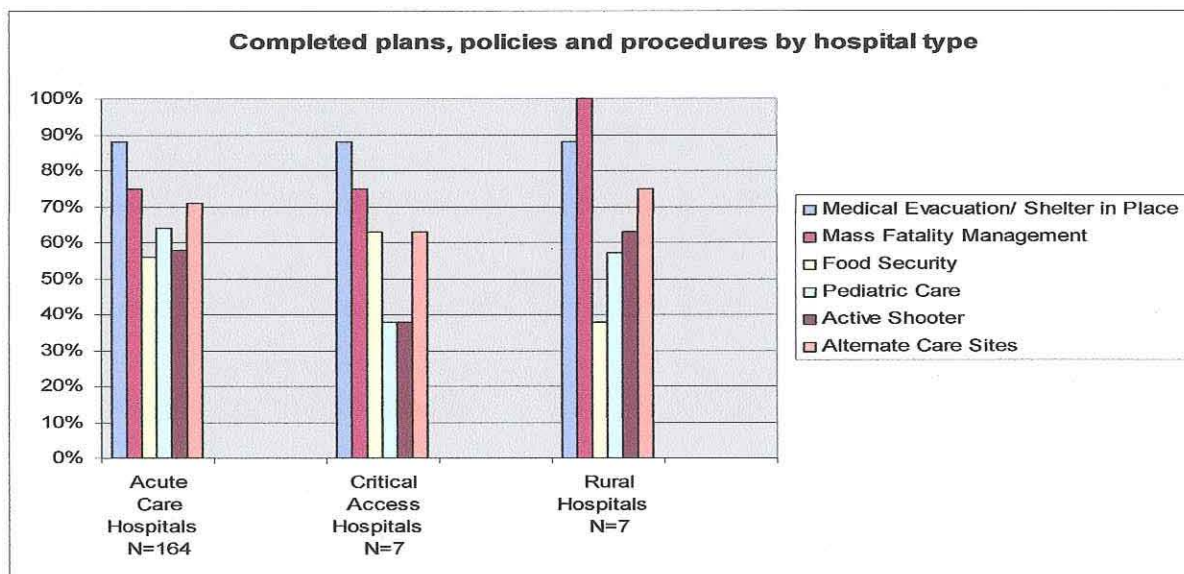
### Data Categories and Survey Results

**Hospital Exercises** – a detailed overview of hospital exercises including the type of exercises conducted and the target capabilities tested in FY 11-12.

For full-scale exercises, the following were the top 5 target capabilities tested:

1. Interoperable Communications
  2. Exercise Evaluation and Corrective Action.
  3. National Incident Management Systems (NIMS)
  4. Partnership/Coalition Development
  5. Personal Protective Equipment
- 96% of responding hospitals reported they had developed improvement plans based on exercise after-action reports.
  - Across all types of exercises, the use of mobile medical assets and volunteers were tested the least of all target capabilities.

**Hospital Preparedness Planning** – examines hospital plans, policies and procedures. The table below illustrates the completion status of plans by hospital type.



- **83%** of responding hospitals reported their plans are updated annually.
- **70%** of all responding hospitals reported they were equipped to provide care to pediatric patients during and after an incident.

- Hospitals reported their greatest need is training, followed by funding and personnel.

***Interoperable Communications*** – measures hospital communication capability and capacity across a wide range of technologies and platforms.

- **99%** of all responding hospitals reported they demonstrated dedicated redundant communications capability during an exercise or event.
- The primary tools used to demonstrate dedicated redundant communication capabilities were cellular telephones (98%), UHF radio (80%), 800 MHz radio (77%), Local Area Networks (LAN) (45%) and VHF radio (26%).
- **98%** of all responding hospitals reported they demonstrated sustained two-way communication capability.
- The primary tools used to demonstrate sustained two-way communication capability were cellular telephones (90%), UHF radio (66%), 800 MHz radio (62%), LAN (45%) and VHF radio (26%).
- **100%** of responding hospitals reported they can report bed availability to the state Emergency Operations Center (EOC) within 60 minutes of a request.

***Incident Command Systems and NIMS*** – measures the rate of completion of hospital incident command system and/or National Incident Management System (NIMS) training.

- **94%** of all responding hospitals indicated they incorporate Public Information Principles in their Incident Command Structure (ICS).

***Training and Exercise*** – measures specific preparedness training and education offered, the type of training (e.g., classroom, electronic, etc.), the number of personnel trained/educated and the target capabilities addressed.

- 148 hospitals reported they had trained employees in FY 11-12 using various formats.

***Hospital Coalitions and Partnerships*** – examines the current level of coalition, partnership and/or mutual aid across Florida's hospital community. Of the responding hospitals:

- **93%** of acute care hospitals reported participating in a partnership and/or coalition.
- **88%** of critical access hospitals reported participating in a partnership and/or coalition.
- **88%** of rural hospitals reported participating in a partnership and/or coalition.

**Hospitals and Volunteers** – examines aspects of medical volunteers as part of Florida's HPP and their integration with the hospital community.

- **88%** of responding hospitals reported they have finalized written plans, policies or procedures that outline the emergency credentialing process for volunteer medical staff during an event.
- **52%** of responding hospitals reported their Medical Staff Office and/or Chief Medical Officer may authorize emergency credentials, **27%** report their Chief Executive Officer, Administrator and/or Incident Commander may authorize emergency credentials and **14%** report their Human Resources department may authorize emergency credentials.
- **37%** of responding hospitals have integrated Medical Reserve Corps in exercises.

**Hospital Decontamination** – measures factors related to the response capability and capacity of hospitals to provide on-site decontamination to patients needing such services prior to medical treatment.

- 148 hospitals reported they can decontaminate a combined total of 13,306 ambulatory patients in a 3 hour period.
- 151 hospitals reported they can decontaminate a combined total of 4,497 non-ambulatory patients within a 3 hour period.

**Hospital Preparedness and Disease Control and Prevention** – measures different aspects of hospital preparedness related to infection prevention.

- 157 hospitals reported they have the ability to maintain a combined total of 529 patients in negative-pressure isolation in the Emergency Department (ED).
- 163 hospitals reported they have the ability to maintain a combined total of 2,874 patients in negative-pressure isolation outside of the ED utilizing hospital rooms and portable negative-pressure units.
- Hospitals identified an estimated number of 739,266 hospital personnel, hospital-based EMS and family members that would need antiviral medication for the purpose of prophylaxis in the first 72 hours of an event.
- Hospitals identified an estimated number of 678,031 hospital personnel, hospital-based EMS and family members that would need prophylactic antibiotics in the first 72 hours of an event.

- Hospitals reported they have a combined total of 7,156 lab personnel on staff which includes medical/clinical lab technologists and technicians. A combined total of 2,250 (31%) have been trained in the protocols for referral of clinical samples and associated information to the state public health labs.

**Next Steps** – Based on the information provided from this survey, the Hospital Preparedness Program will consider the following:

- Continue to develop a mechanism that would allow hospitals to self-report their information in real-time versus completing a semiannual survey. This approach would support timely and accurate reporting of data and may improve response rates.
- Develop guidance to assist the improvement of the annual review process of hospital emergency operations plans, both internally and with local Emergency Management agencies.
- Continue to encourage hospitals to participate in functional, full-scale and/or state/regional exercises.
- Continue to examine the needs of critical access and rural hospitals and assist in the development of solutions based on those needs to improve preparedness, response and recovery capability and capacity.
- Develop guidance to assist with plans, policies and procedures for food security.
- Develop guidance to assist with plans, policies and procedures for active shooter and workplace violence.
- Continue to enhance planning information and provide guidance for alternate care site activities.
- Support training opportunities to meet the needs of all health care system partners.
- Encourage and support synergy between hospital training opportunities and community partners.

- Continue to provide grant funding to support health care system preparedness.
- Focus grant funding opportunities on areas of need and identified gaps.
- Support efforts to integrate Medical Reserve Corps personnel into hospital exercises.
- Develop measures that define and assess health care system coalition capability.

### **Conclusion**

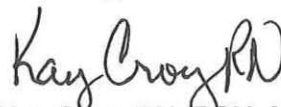
It is encouraging to see that hospitals have achieved a significant level of disaster preparedness and response capability and capacity over the past year. Hospitals have reported they have achieved this level of readiness utilizing the following strategies:

- hospital exercises
- preparedness planning
- interoperable communication platforms
- implementation of incident command
- NIMS compliance, training and education
- partnerships and coalitions
- volunteers
- decontamination
- disease prevention and control measures

Opportunities provided through HPP funding have helped enhance all-hazards preparedness for many hospitals across the state of Florida. The level of response to this survey and the reported information demonstrates the continued commitment and cooperation of our hospital partners in meeting Florida's vision of "working together for a safe and secure future."

Thank you for having generously taken your time to complete the survey. For complete survey results or questions please contact John Wilgis, M.B.A., RRT, Director - Emergency Management Services, Florida Hospital Association at (407) 841-6230.

Sincerely,



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Bureau of Preparedness & Response