Planning for Hurricane Response in the Middle of a Pandemic

June 23, 2020
Welcome!

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Florida Hospital Association
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Today’s Agenda

• Situational Awareness: Current and Predicted

• Planning Criteria

• Public Health Response

• The Challenges COVID-19 Presents to Hurricane Response

• Operational Success
Situational Awareness: Current and Predicted
2020 – A Year to Remember

- Political unrest (U.S. and globally)
- Other disasters (fire, tsunami, volcanoes)
- COVID-19 Pandemic
- Global economic hardship – U.S. recession
- Social discontent and civil conflict
- Dissolution in public trust of institutions
What has been the greatest challenge for your hospital responding to COVID-19?

a. Isolation capacity

b. Adequate staffing

c. Workforce protection

d. Clinical guidance that improves operations

e. Disruption to the supply chain

f. Access to information / assistance from County, State or Federal partners
The Toll of COVID-19

**Nationally**

- **Cases**
  - Total = 2.3M
  - New = 211,833 (last 7 days ending June 22)

- **Deaths** = 120,340

- **Testing** = 27.6M

**Florida**

- **Cases**
  - Total = 100,217
  - New = 23,550 (last 7 days ending June 22)

- **Deaths** = 3,173

- **Testing** = 1.6M


What’s Next with COVID-19?

- Plan for Florida’s Recovery
- Second wave?
- On-going testing
- Advances in medical treatment
- Vaccine development
# Past Active Storm Seasons

<table>
<thead>
<tr>
<th>Year</th>
<th>Hurricane</th>
<th>Category</th>
<th>Adjusted Cost</th>
</tr>
</thead>
<tbody>
<tr>
<td>2019</td>
<td>Dorian</td>
<td>5</td>
<td>$167.5 B</td>
</tr>
<tr>
<td>2018</td>
<td>Michael</td>
<td>5</td>
<td>$25.5 B</td>
</tr>
<tr>
<td>2017</td>
<td>Harvey</td>
<td>4</td>
<td>$131.3 B</td>
</tr>
<tr>
<td></td>
<td>Maria</td>
<td>4</td>
<td>$94.5 B</td>
</tr>
<tr>
<td></td>
<td>Irma</td>
<td>4</td>
<td>$52.5 B</td>
</tr>
</tbody>
</table>


2020 Hurricane Predictions

- **30%** Above-normal
- **60%** Near-normal
- **10%** Below-normal season

- **13-19** Named storms
- **6-10** Hurricanes
- **3-6** Major hurricanes

2020 Atlantic Storm Names

*Names provided by the World Meteorological Organization*
Planning Criteria
What is the biggest gap from the past 3 hurricane seasons?

a. Better personal / family preparedness
b. Essential worker housing / sheltering
c. Operational plans
d. Medical support of at-risk populations
e. Mutual aid
f. Government agency assistance
g. Data to support a common operating picture
AHCA Plan Requirements

- Basic hospital information
- Leadership information / authorities
- Hazard analysis
- Training elements
- Exercise requirements
- Concept of operations
- Appendices

Note: AHCA criteria not updated since 1994

CMS Emergency Preparedness Rule

Published September 16, 2016

Implemented November 15, 2017

Required for all 17 provider and supplier types within the Medicare and Medicaid / SCHIP programs
CMS Four Key Provisions

- Risk Assessment and Planning
- Policies and Procedures
- Emergency Preparedness Program
- Communication Plan
- Training and Testing
### Additional Steps

- Confirm Information
- Evaluate relationships
- Consider options and redundancies

#### Incident demand/resource imbalance increases
- Risk of morbidity/mortality to patient increases
- Recovery

<table>
<thead>
<tr>
<th>Normal operating conditions</th>
<th>Extreme operating conditions</th>
</tr>
</thead>
<tbody>
<tr>
<td>Indicator: potential for crisis standards</td>
<td>Trigger: crisis standards of care</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Conventional</th>
<th>Contingency</th>
<th>Crisis</th>
</tr>
</thead>
<tbody>
<tr>
<td>Space</td>
<td></td>
<td></td>
</tr>
<tr>
<td>- Usual patient care space fully utilized</td>
<td>- Patient care areas re-purposed (PACU, monitored units for ICU-level care)</td>
<td>- Facility damaged/unsafe or non-patient care areas (classrooms, etc.) used for patient care</td>
</tr>
<tr>
<td>Staff</td>
<td></td>
<td></td>
</tr>
<tr>
<td>- Usual staff called in and utilized</td>
<td>- Staff extension (brief deferrals of non-emergent service, supervision of broader group of patients, change in responsibilities, documentation, etc.)</td>
<td>- Trained staff unavailable or unable to adequately care for volume of patients even with extension techniques</td>
</tr>
<tr>
<td>Supplies</td>
<td></td>
<td></td>
</tr>
<tr>
<td>- Cached and usual supplies used</td>
<td>- Conservation, adaptation, and substitution of supplies with occasional re-use of select supplies</td>
<td>- Critical supplies lacking, possible re-allocation of life-sustaining resources</td>
</tr>
<tr>
<td>Standard of care</td>
<td></td>
<td></td>
</tr>
<tr>
<td>- Usual care</td>
<td>- Functionally equivalent care</td>
<td>- Crisis standards of care</td>
</tr>
</tbody>
</table>

*Please note: crises of care are beyond the control of the hospital.*
I believe my hospital’s emergency plan effectively supports co-response scenarios like COVID-19 and a major hurricane.

– True

– False
Public Health Response
Contributing Issues: COVID-19

- Early and renewal of travel-associated spread of virus
- Large social, cultural and professional gatherings
- Virus introduction into high-risk work settings
- Crowding and population density
- Pre- and asymptomatic transmission
Decreased ED Visits

FIGURE 1. Weekly number of emergency department (ED) visits — National Syndromic Surveillance Program, United States,* January 1, 2019–May 30, 2020†

* Hawaii, South Dakota, and Wyoming are not included.
† Vertical lines indicate the beginning and end of the 4-week coronavirus disease 2019 (COVID-19) early pandemic period (March 29–April 25, 2020) and the comparison period (March 31–April 27, 2019).
Hospitalization Data

COVID-19 Hospitalization Data
March 26 - To Present

- COVID Patients
- COVID Pts in ICU
- COVID Pts on Vents

AHCA ESS Data – June 22, 2020
COVID-19 Hospital Admissions and Discharges
April 3 - To Present

AHCA ESS Data – June 22, 2020; Note: June 6th spike is most likely due to hospital data entry error
Other Contributing Factors

- Individual and population health outcomes.
- Limitations of public health response.
- Government and public mistrust in public health science, guidance and recommendations.
- Politicization of the pandemic and the health response to the disease.
How can FHA better assist the hospital community? (*choose all that apply*)

- a. Isolation prevention and control training / information
- b. PPE / supply chain alternatives
- c. Patient transfer / discharge coordination
- d. Data gathering support and intelligence
- e. Sharing situational awareness / reporting
- f. Disseminating clinical guidance and information
- g. Providing business solutions
The Challenges COVID-19 Presents to Hurricane Response
Challenges from COVID-19

- **Disruption**
  - Social (personal and community)
  - Economic (all sectors; 2020 recession)
  - Health system (public and private)
  - Workforce (layoffs / closures; resilience)
  - Supply chain (↑ demand; ↓ supplies)
  - Response framework (public and private)
  - Recovery process (long duration event)
Past Storm Challenges

- Evacuation
  - Health care providers
  - Community
- Patient movement
  - Transportation
- Workforce housing
- Sheltering system
- Infrastructure damage
- Hospital surge
  - Poor community / individual planning
- Non-acute care support
  - Immediate
  - Long term
- Discharge planning and coordination
Comparisons

COVID-19
- Uncertainty
- Closures
- Treatment delays
- Cancellations
- All providers impacted

Hurricanes
- Uncertainty
- Evacuation
- Closure / delays
- Infrastructure damage
- Many providers impacted
FEMA Guidance

- Designed for state and local EMAs
- Describes anticipated challenges
- Outlines adaptive response and recovery operations

COVID-19 Pandemic Operational Guidance for the 2020 Hurricane Season

May 2020

FEMA
FEMA Guidance

➤ Supports EM preparedness and planning to create a shared understanding of expectations between FEMA and state and local entities.
FEMA Guidance

➢ Provides guidance, checklists and resources to help EMA “best adapt response and recovery plans”

COVID-19 Pandemic Operational Guidance for the 2020 Hurricane Season

May 2020

FEMA
FDEM Guidance

- Outlines planning assumptions
- Describes the potential impacts to standard operational procedures
- Provides suggestions and guidance for a modified hurricane response
- Identifies novel planning considerations
FDEM Guidance

1. Shelter-in-place/stay at home, if safe to do so
2. Use of non-congregate sheltering
3. Use of congregate sheltering
4. Use of refuges of last resort
Response Limitations

- Incident management teams
- Debris and road clearing
- Feeding distribution
- Utility restoration
- Search and rescue
- Volunteers
Operational Success
Critical Success Factors

- Staffing plans
- Self-quarantine and isolation plans
- Supply alternatives
- Mutual aid agreements
- Evacuation – patient reception agreements
- Planned redundancies
Adapt and Modify

- Continued support of COVID-19 patients
- Safe harboring of SpNS individuals
- Public messaging
- Security operations
- Business continuity plans
- Alternate care sites
- Sheltering of staff / families and pets
- Transportation options
- COVID-19 screening and testing strategies
- Public health support
FHA Role in Response

- Support agency to the State Emergency Response Team through ESF8
  - **Coordinate** hospital response activities
  - **Communicate** important information
  - **Advocate** for issues impacting Florida’s hospital community
Questions?
FHA Emergency Contacts

FHA 24/7 Emergency Hotline: 407-250-8711

disaster@fha.org

covidresponse@fha.org
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