

# Tools of Situational Awareness for Healthcare Coalitions and Public Health Emergency Preparedness Staff

## Purpose and methodology

The Incident Management (IM) Workgroup, one of five workgroups in the Georgia Hurricane Response Hub, was charged with developing systems, trainings and/or materials to support jurisdictions in Georgia that endure major events like hurricanes and often need help in their immediate response. One project of the IM Workgroup was to develop statewide capabilities and capacities tools and maps to provide emergency preparedness and response leadership at the Georgia Department of Public Health and its districts, the Georgia Hospital Association, and Healthcare Coalitions (HCC) with essential information about facilities as well as real time situational awareness during a hurricane or other major event.

Modeled after previous work by the Region E Healthcare Coalition, the IM Workgroup initially set out to gather Essential Elements of Information (EEI) via Excel spreadsheets from all hospital, nursing home and public health facilities in the 14 healthcare coalition regions and 18 public health districts in Georgia. As the Region E HCC had done, the original plan also included using Tableau to develop interactive maps for every region and district and to post these maps on a site where all emergency preparedness and response staff could access them.

This project aimed to collect four types of EEI:

- Healthcare (hospital and nursing home) facility *static* EEI (i.e., standard information about the healthcare facility's capabilities and capacities)
- Healthcare (hospital and nursing home) facility *response* EEI (i.e., data collected from the healthcare facility during an event for situational awareness)
- Public health facility *static* EEI (i.e., standard information about the public health facility's capabilities and capacities)
- Public health facility *response* EEI (i.e., data collected from the public health facility during an event for situational awareness)

Several months into its work, the IM Workgroup made two simultaneous decisions:

1. To capitalize on a mandate from the HHS Office of the Assistant Secretary for Preparedness and Response (ASPR) that all healthcare facilities submit current EEI to meet a September 2019 deadline. Beyond the required ASPR data, the IM Workgroup identified, and decided to capture, a list of additional EEI that would be helpful for standard information sharing and situational awareness about a facility's capabilities and capacities.
2. To use the WebEOC emergency management software (rather than Excel and Tableau) to capture and display the EEI information in a color-coded dashboard. The use of WebEOC

would allow additional functionality as the color-coded dashboard could display EEI on all facilities in the state, be updated in real time, and quickly reveal those that were in immediate need of assistance during or immediately after an event. To implement the color-coded functionality for each EEI important for situational awareness, the IM Workgroup identified values that would trigger a display as green (normal operations), yellow (warning of a limited impact to operations), or red (critical impact to operations).

During the fall of 2019, members of the Workgroup continued to identify and classify the EEI, and work with the Region IV HHS ASPR office to develop the new WebEOC dashboards. In January 2020 however, the Workgroup learned that the development of the dashboards would be delayed because of other pressing projects beyond the control of the Workgroup members and therefore, it would be necessary to create an interim workaround.

The workaround includes the use of ReadyOp (a SaaS emergency management, command and control platform) to collect data on public health and healthcare facilities. Unlike WebEOC, which requires programming by an external partner, ReadyOp is a system that Workgroup members could customize to some extent themselves. Due to the coronavirus pandemic, the use of ReadyOp has not been fully realized, but the plan calls for ReadyOp to be used to collect a.) Healthcare facility *response* EEI; b.) Public health facility *static* EEI; and c.) Public health facility *response* EEI. As a reminder, much of the healthcare facility *static* information is already collected as part of the ASPR mandate.

The required *static* and *response* data will be gathered using online forms (see Appendices 1 - 3) that can be disseminated to all healthcare facilities and public health facilities to complete. EEI data collected from these forms will then populate Excel spreadsheets that decision makers can access. Additionally, the data gathered via ReadyOp can be imported into the WebEOC system and available for viewing there (although likely not as a color-coded dashboard).

In early 2020, the Workgroup developed the online forms, began testing the utility of the new approach, and trained emergency preparedness and response leadership about the use of these tools at the February 26, 2020 Georgia ESF-8 meeting. By the end of May 2020, it was anticipated that *static* EEI information would be collected from all public health facilities in districts throughout the state and that healthcare and facility event *response* forms would be ready for implementation in the event of a hurricane or other emergency.

### **Status of work (as of December 2020)**

Unfortunately, in early March 2020, the first cases of COVID were detected in Georgia and all of the members of the IM Workgroup were called to respond. Consequently, progress on the work has been paused. To date:

- All healthcare facilities in the state have submitted *static* EEI
- A Public Health Department Facility *Static* EEI Form (see Appendix 1) has been created to collect information on public health facilities in each district
- Event *response* EEI data collection forms have been created for both healthcare and public health facilities (see Appendices 2 & 3)

## Epilogue

Although the work of the IM Workgroup was paused due to the COVID response, many of the ideas developed by the IM Workgroup related to the collection and tracking of EEI were incorporated into a WebEOC color-coded dashboard that the Georgia Department of Public Health and Georgia's 14 healthcare coalitions are using to track EEI specific to COVID-19 in acute care facilities. State and federal partners monitoring and responding to COVID throughout the state have acknowledged the COVID dashboard as a tremendous asset. The development of this COVID-related board will be the foundation of a WebEOC board that can be used during a Hurricane Event.

## Appendix

Appendix 1: Public Health Department Facility *Static* EEI Form

Appendix 2: Healthcare Facility Event *Response* Form

Appendix 3: Public Health Department Facility Event *Response* Form

*This project was developed as a part of the Georgia Hurricane Response Hub's Incident Management Workgroup. Funding for this activity has been provided to the National Network of Public Health Institutes (NNPHI) through a Cooperative Agreement with the Centers for Disease Control and Prevention (CDC – NU1ROT000004-01-00). NNPHI is collaborating with Rollins School of Public Health at Emory University and the CDC's National Center for Environmental Health on this project.*



## District Essential Elements of Information

Facility Status Report for Event Status Updates

### District Essential Information

Please complete the following District report

PHEP District (Please Select)

Date of Report



Time of Report

 hrs 

Public Health EP Director

Phone Number

### Facility Essential Information Report

Please complete the following facility report

County

County Population

HPP Region (Please Select)

County EMA Director

County EMA Contact Number

#### SELECT DISTRICT FACILITY TYPE

☐ District Office

☐ Health Department

☐ Warehouse Space

☐ Environmental Health

☐ Womens, Infants and Child Clinic (WIC)

GPS / Location

 or 

#### DOES THIS FACILITY HAVE SECURED ACCESS

☐ YES ☐ NO

NAME OF CONTACT AT FACILITY

PHONE NUMBER OF CONTACT

FACILITY MAIN PHONE & FAX NUMBER

FACILITY SOUTHERN LINC #

# OF FACILITY PH EMPLOYEES

# OF FACILITY NURSING STAFF

# OF FACILITY EXAM ROOMS

AMOUNT OF OXYGEN AT THIS FACILITY

GENERATOR FUEL TYPE

GENERATOR FUEL SUPPLY ON HAND

CAN HVAC RUN ON GENERATOR POWER

☐ YES ☐ NO ☐ Unknown ☐ N/A

DO YOU HAVE AN EXTERNAL GENERATOR INTERCONNECTION

☐ YES    ☐ NO    ☐ N/A

FACILITY INTERNAL UTILITY VENDOR NAME AND CONTACT NUMBER (TELCOM, SECURITY, INTERNET)

Please identify the name and a contact number of the internal utility vendor

SELECT VEHICLE TYPE

please choose vehicle type

NUMBER OF VEHICLE TYPE

123

SELECT VEHICLE TYPE

please choose vehicle type

NUMBER OF VEHICLE TYPE

123

SELECT VEHICLE TYPE

please choose vehicle type

NUMBER OF VEHICLE TYPE

123

SELECT VEHICLE TYPE

please choose vehicle type

NUMBER OF VEHICLE TYPE

123

SELECT VEHICLE TYPE

please choose vehicle type

NUMBER OF VEHICLE TYPE

123

ELECTRIC UTILITY PROVIDER

please provide a provider name

Phone Number

(201) 555-5555

WATER UTILITY PROVIDER

please provide a provider name

Phone Number

(201) 555-5555

MED GAS UTILITY PROVIDER

please provide a provider name

Phone Number

(201) 555-5555

SEWER UTILITY PROVIDER

please provide a provider name

Phone Number

(201) 555-5555

GAS UTILITY PROVIDER

please provide a provider name

Phone Number

(201) 555-5555

TRASH UTILITY PROVIDER

please provide a provider name

Phone Number

(201) 555-5555

DO YOU HAVE A WELL

☐ YES    ☐ NO    ☐ N/A

ADDITIONAL FACILITY RESOURCES (SHELTER KITS, GO BAGS, PORTABLE GENERATORS)

RESOURCES

MUTUAL AID/VENDOR AGGREMENTS

Choose File    No file chosen

MUTUAL AID/VENDOR AGGREMENTS

Choose File    No file chosen

Submit



## Facility Status Report #2

Facility Status Report for Event Status Updates

### Facility Information

Please complete the following facility information

Select Your Facility Name

Abbeville Healthcare & Rehab (FKA River Willows Nur...

Facility Type

Hospital

Date of Report

\_\_/\_\_/\_\_

Time of Report

eg. 1600

hrs

Phone Number of Contact at  
Command Center

(201) 555-5555

Name of Contact at Command Center

First

Last

HPP Region (Please Select)

Region A

PHEP District (Please Select)

### Facility Status

Please let us know the status of your facility by answering the questions below

Patient Treatment Status

☐ Open ☐ Limited ☐ Closed ☐ Unknown

Patient Treatment Status Notes

Facility Access Status

☐ Unlimited Access ☐ Limited Access ☐ No Access (Blocked) ☐ Unknown

Facility Access Status Notes

Facility Structure Damage

☐ No or Minor Damage ☐ Critical Damage ☐ Unknown

Facility structure Damage Notes

Facility Evacuation Status

☐ N/A ☐ Shelter In Place ☐ Partial Evacuation ☐ Full Evacuation ☐ Unknown

**Facility Evacuation Status Notes**

**Facility Power Status**

☐ Commercial Power   ☐ Alternate Power   ☐ No Power   ☐ Unknown

**Facility Power Status Notes**

**Generator Fuel Levels**

☐ N/A   ☐ Normal/Adequate   ☐ Limited   ☐ Refuel Needed   ☐ Unknown

**Generator Fuel Level Notes**

**Is your HVAC operational?**

☐ Yes   ☐ No   ☐ Unknown

**HVAC Notes**

**Facility on Normal Water Supply**

☐ Yes  
☐ No  
☐ Unknown

**Facility Water Supply Notes**

**Facility Communications Status**

☐ Normal   ☐ Affected   ☐ Unknown

**Facility Communications Status Notes**

**Can you meet nutritional needs of patients/community?**

☐ Can Meet   ☐ Can Not Meet   ☐ Unknown

Can you meet nutritional needs of patients/community? Notes

Are you able to Dialize patients?

☐ N/A ☐ Yes ☐ No ☐ Unknown

Dialize Patients Notes

Staffing Availability

☐ Normal/Adequate ☐ Limited ☐ No Staff Available ☐ Unknown

Staffing Notes

Does the Facility have any Immediate Needs Related to Medications/IV Fluids/Blood Impacting Its Ability to Care for Patients?

☐ No ☐ Yes ☐ Unknown

Does the Facility have any Immediate Needs Related to Oxygen Supply Impacting Its Ability to Care for Patients?

☐ No ☐ Yes ☐ Unknown

Additional notes that will help us understand your status.

## Image Attachments

Please attach any photos or documents that will help us better understand your status.

Attachment

No file chosen

Attachment

No file chosen

Attachment

No file chosen

Attachment

No file chosen

Attachment

No file chosen

Attachment

No file chosen



## District Status Report

District Status Report for Event Status Updates

### District Information

Please complete the following District information

PHEP District (Please Select)

Date of Report

Time of Report

 hrs

HPP Region (Please Select)

Point of Contact - District Command Center

Contact at Command Center

### District Status Report

Please let us know the status of your District by answering the questions below

District Operating Status

- ☐ Not Active ☐ Partially Active ☐ Active

District Operating Status Notes

If activated, please provide additional information

Are Any Buildings Within The District Structurally Damage

- ☐ No or Minor Damage ☐ Critical Damage ☐ Unknown

Structural Damage Notes

Please Provide Additional Information on Structural Damages

District - Evacuation Status

- ☐ Information Not Available ☐ Shelter In Place ☐ Partial Evacuation  
☐ Full Evacuation ☐ Unknown

District - Evacuation Status Notes

District Power Status

- ☐ Commercial Power ☐ Alternate Power ☐ No Power ☐ Unknown

**District Power Status Notes**

**Facility on Normal Water Supply**

- ☐ Water Supply Normal    ☐ Water Supply Affected    ☐ Water Supply Interrupted    ☐ Unknown

**Water Supply Status Notes**

**District Communications Status**

- ☐ Communications Normal                      ☐ Communications Affected  
☐ Communications Interrupted              ☐ Unknown

**District Communications Status Notes**

**Generator Fuel Levels**

- ☐ Normal/Adequate    ☐ Limited    ☐ Refuel Needed    ☐ No Fuel    ☐ Unknown

**Generator Fuel Level Notes**

**Staffing Availability**

- ☐ Staffing Adequate    ☐ Staffing Reduced    ☐ No Staff Available    ☐ Unknown

**Staffing Availability Notes**

**Do You Have Facility Access To All Buildings Within Your District Status**

- ☐ Unlimited Facility Access                      ☐ Facility Access Restricted  
☐ Facility Access Blocked                      ☐ Unknown

**Facility Access Status Notes**

If you limited or no access to a building in your district, please provide additional information here

**Does the District have any Immediate Needs**

- ☐ No Immediate Needs    ☐ Yes    ☐ Unknown

Additional Notes About the immediate needs of Your District

Attachment

Choose FileNo file chosen

Attachment

Choose FileNo file chosen

Image



Image



Image



Image



Image



Image



Submit