



Emergency Preparedness Symposium (EPS)

**The New York City Health Care Coalition
(NYCHCC)**

**NYC Department of Health and Mental Hygiene (DOHMH)
Office of Emergency Preparedness and Response (OEPR)
Bureau of Healthcare System readiness**

Thursday, October 25, 2018



Welcome!

Agenda

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AM

8:30 – 9:00

Registration

9:00 – 9:30

Welcome & Introduction - DOHMH & Emergency Preparedness Coalition of Manhattan (EPCOM)
Acknowledgement of EPCOM Members
Opening Remarks (EPCOM)

9:30 – 10:00

Borough Coalition Report (EPCOM)

10:00 – 10:25

Working Session: How Borough Coalitions Support Healthcare Facility Emergency Preparedness

Presentation

- 1. Healthcare Emergency Management Vision
Present Healthcare Facility Emergency Preparedness Service Model*
- 2. How EPCOM supports the individual HCF Emergency Preparedness Program*

10:25 – 10:50

Breakout Groups

- 1. Comments on HCF EP Service Model (including Mission, Operations, Tactics and Deliverables)*
- 2. Comments on borough coalition (EPCOM) support approach
Best practices, gaps, suggestions for improvement*

Agenda

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10:50 – 11:15	Reconvene - Group representatives report back
11:15 – 11:30	Networking Break
11:30 – 11:45	DOHMH Updates: SurgeEx, Playbook, NYCEM Academy
11:45 – 12:00	DOHMH/Office of Chief Medical Examiner (OCME): Mass Fatality Planning Update
PM	
12:00 – 12:30	DOHMH: Presentation: The Public Health Emergency Response Network Pharmacy Program (PHERN PP)
12:30 – 1:00	Networking Lunch
1:00	Meeting Adjourned



Borough Coalition Report - EPCOM

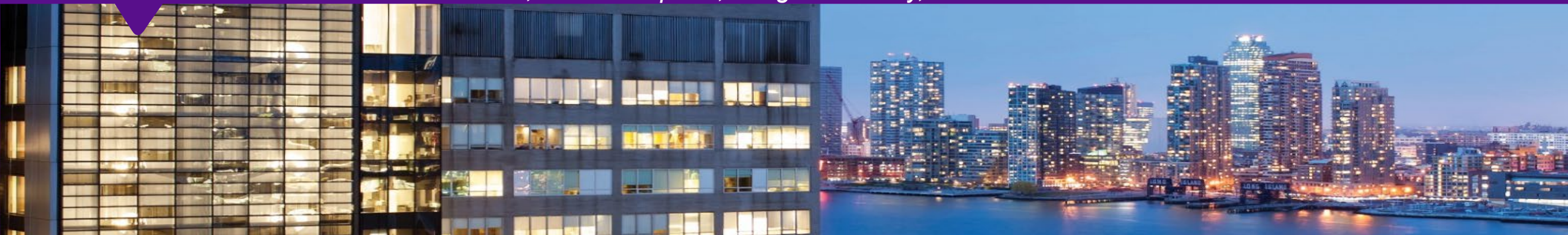
Borough Coalition – BP1 Achievements

Emergency Preparedness Symposium (EPS)

NYC Health Care Coalition (NYCHCC)

*NYC Department of Health and Mental Hygiene (DOHMH)
Office of Emergency Preparedness and Response (OEPR)*

CUNY School of Law, 2 Court Square, Long Island City, NY 11101



Agenda

Emergency Preparedness Symposium (EPS)

25 October 2018

Morning

8:30–9:00 *Registration*

9:00–9:30 *Welcome/ Opening Remarks (DOHMH & EPCOM)*

9:30–10:00 *Borough Coalition Report (EPCOM)*

10:00–10:25 *Working Session: How Borough Coalitions Support Healthcare Facility Emergency Preparedness*

- 1. Healthcare Facility Emergency Preparedness Service Model*
- 2. How Borough Coalition supports HCF EP Program*

10:25–10:50 *Breakout Groups: Comment on*

- 1. HCF Service Model*
- 2. Borough Coalition Support Approach*

10:50–11:15 *Reconvene: Group representatives report back*

11:15–11:30 *Networking Break*

11:30–11:45 *DOHMH Updates: SurgeEx, Playbook, NYCEM Academy*

11:45–12:00 *DOHMH/OCME: Mass Fatality Planning Update*

Afternoon

12:00–12:30 *DOHMH Presentation: Public Health Emergency Response Network Pharmacy Program (PHERN PP)*

12:30–1:00 *Networking Lunch*

1:00 *Meeting Adjourned*

Borough Coalition – Vision



CHARTER VERSION 2.0

I. This Charter

This Emergency Preparedness Coalition of Manhattan (EPCOM) Charter is a statement of the scope, objectives, membership and administration of the EPCOM. This EPCOM Charter describes the mission of the EPCOM, identifies its members and the expectations thereof.

1. Scope

EPCOM is a coalition of healthcare entities as authorized by the New York City Department of Health and Mental Hygiene (NYC DOHMH), Hospital Preparedness Program and Public Health Emergency Preparedness, Borough Coalitions grant program.

The region served by EPCOM will be inclusive of the borough of Manhattan in New York, New York.

2. Mission

The mission of EPCOM is to convene a multidisciplinary group of stakeholders to increase the collective preparedness of the healthcare sector in Manhattan through collaboration and information sharing before, during and after emergencies and disasters of every kind and type.

3. Objectives

The coalition will seek to achieve the following objectives to increase the collective preparedness of the healthcare sector in Manhattan:

- Provide a forum where healthcare sector stakeholders can meaningfully collaborate.
- Pursue planning, training and exercise projects that promote healthcare sector preparedness for emergencies and disasters of every kind and type.

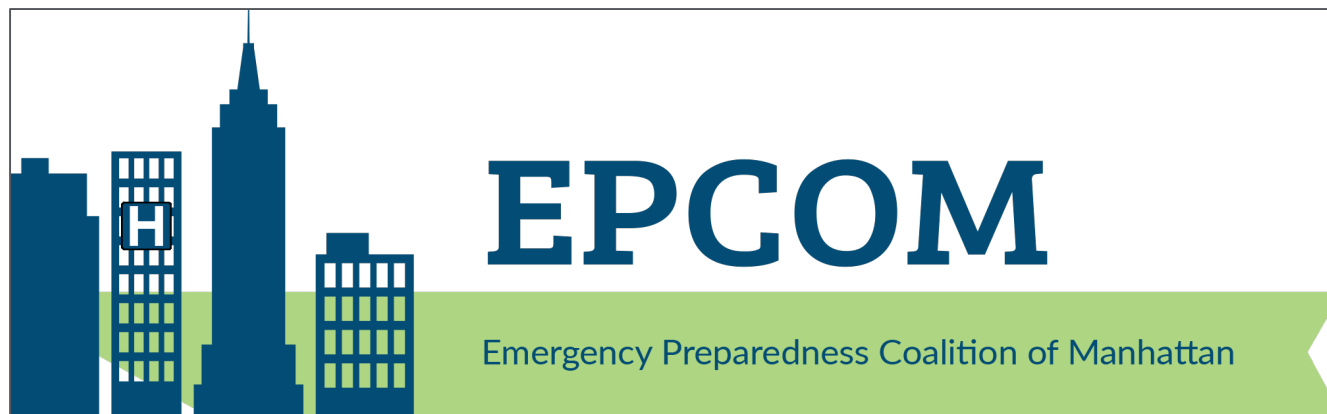
4. Governance

EPCOM members are requested to participate in triannual (three times per year) EPCOM meetings for collective resolution of grant project and funding issues.

- New grant year, “new” coalition
- Refocus / rebrand
- Initial Steps
 - Change name
 - Emergency Preparedness Coalition of Manhattan (EPCOM)
 - Develop logo
 - Review / revise Charter
 - Design challenge coins / EPCOM swag

Borough Coalition (EPCOM) – Goals

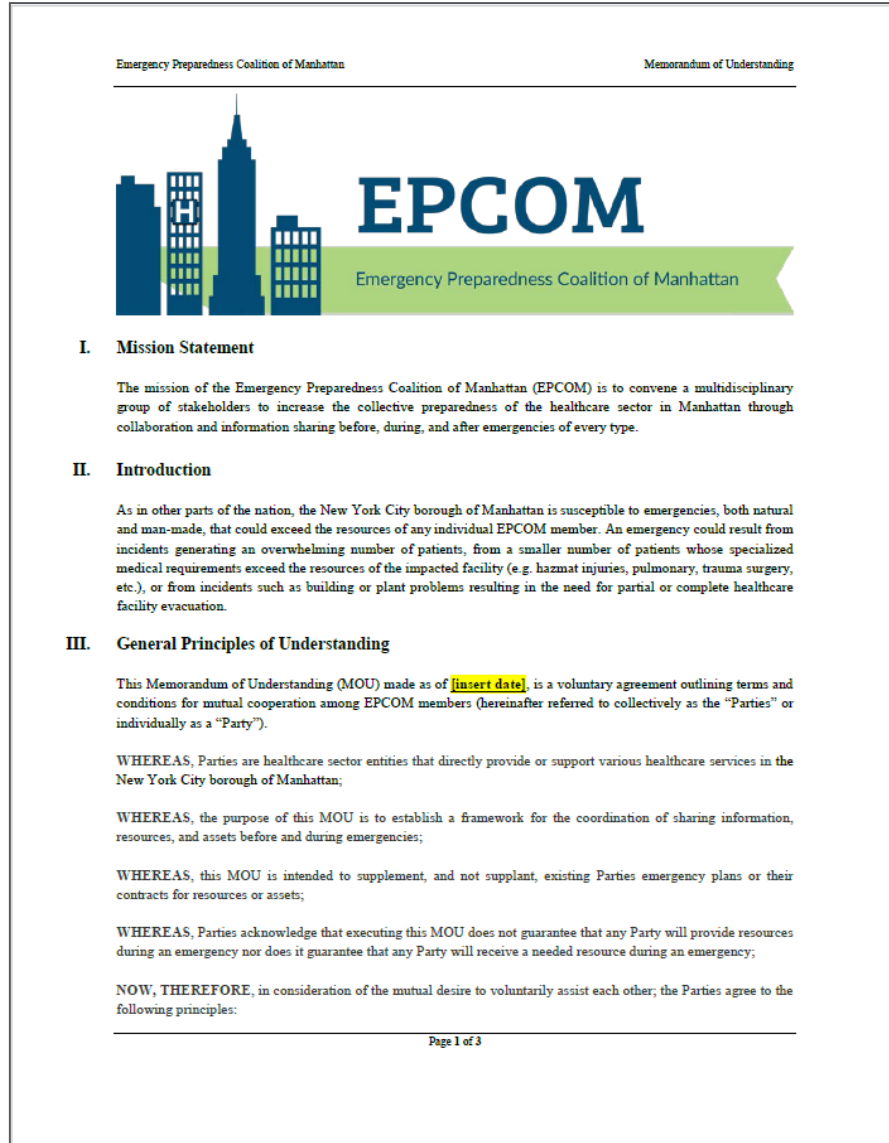
- Workable committee with obvious benefits to members
- Timely completion of all BP1 deliverables
- Establish baseline Hazard Vulnerability Analysis
- Develop partnership agreement MOU with the eventual goal of a comprehensive MOU



EPCOM – Borough-wide Hazard Vulnerability Analysis (HVA)

Organization	Hazard #1	Hazard #2	Hazard #3	Hazard #4	Hazard #5	Comments
<i>Memorial Sloan Kettering Cancer Center</i>	Communication / Telephone Failure	Hurricane / Coastal Storm	Supply Chain Shortage / Failure	Other Utility Failure (Steam)	Other Utility Failure (Elevator/Entrapment)	
<i>Mount Sinai Hospital</i>	Other Utility Failure (Electrical)	Power Outage	Internal Fire	Workplace Violence / Threat	IT System Outage	
<i>Hospital for Special Surgery</i>	Hazmat Incident with Mass Casualty	Flood	Pandemic	Hurricane	Other (Airplane into building)	
<i>Mount Sinai West</i>	Internal Fire	Infectious Disease Outbreak	Other Utility Failure (Network/Telecom Outage)	IT System Outage	Mass Casualty Incident	Workplace Violence / Threat – also tied for 5 th
<i>NYU Langone Health</i>	Hurricane / Coastal Storm	IT System Outage	Active Shooter	Supply Chain Shortage / Failure	Mass Casualty Incident	Workplace Violence / Threat – also tied for 3 rd
<i>New York Presbyterian – Weill Cornell Hospital</i>	Mass Casualty Incident	Active Shooter	Communication / Telephone Failure	Workplace Violence / Threat	Seasonal Influenza	
<i>New York Presbyterian – Allen Hospital</i>	Inclement Weather	Patient Surge	IT System Outage	Internal Flood	Active Shooter	
<i>VA NY Harbor Healthcare System</i>	External Flood	Internal Flood	Inclement Weather	Active Shooter	Workplace Violence / Threat	#2-5 assigned the same score
<i>Lenox Hill Hospital</i>	Inclement Weather	Temperature Extremes	Internal Flood	HVAC Failure	Infectious Disease Outbreak	
<i>East Harlem Council for Human Services</i>	Epidemic	Power Outage	Fire	Active Shooter	Civil Unrest	
<i>New York Eye and Ear Infirmary</i>	Internal Fire	Active Shooter	Bomb Threat	Hostage Situation	IT System Outage	

Mutual Aid MOU



- Mutual Aid MOU outlining terms for EPCOM members to follow when sharing resources during disasters
- Not intended to be a legally binding, contractual agreement
- Final draft distributed to EPCOM membership for review and comment August 7, 2018
- Signed MOU's due back to EPCOM by next membership meeting on **March 6, 2019**

BP1 – EPCOM Program Highlights

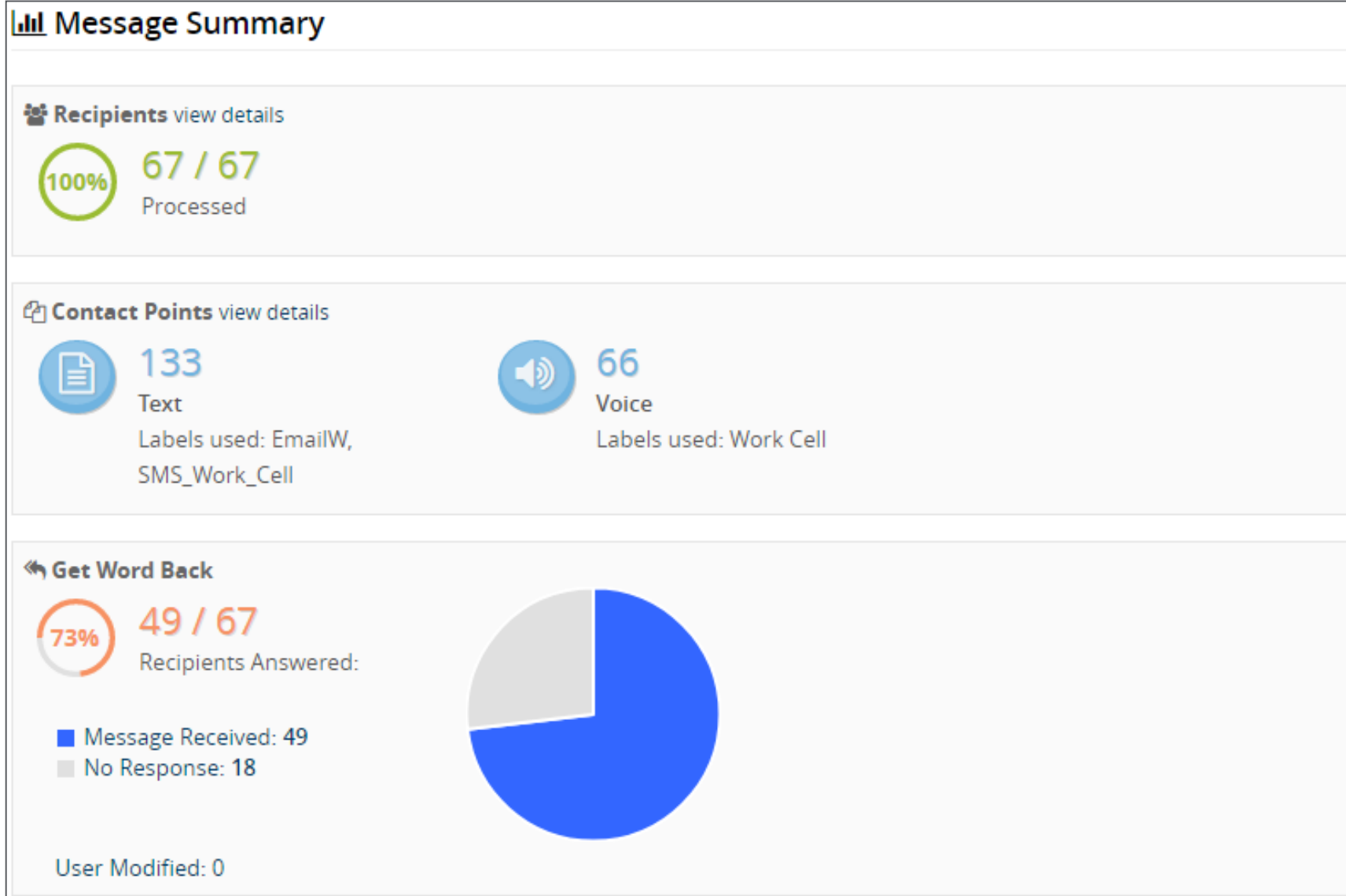
- Call Down Drill
- RRAP 1
- DHS / Supply Chain “SupplyEx” Tabletop (TTX)
- RRAP 2

Call Down Drill Results



- Drill conducted on Tuesday, January 23, 2018
- Notification sent via Voice, SMS Text, and Email
- Goal: 100% of members to respond to the Drill within 15 minutes of receipt
- Results tallied and distributed via email on February 1, 2018

Call Down Drill Results (15 min goal)



Call Down Drill Results

Results	<ul style="list-style-type: none">• 49 out of 67 recipients (73%) answered at least one point of contact within 15 minutes• 52 out of 67 recipients (78%) answered at least one point of contact within 30 minutes• 54 out of 67 recipients (81%) answered at least one point of contact within 60 minutes• 57 out of 67 recipients (85%) answered at least one point of contact within 24 hours
Gaps and Opportunities for Improvement	<ul style="list-style-type: none">• Messages did not reach recipients due to incorrect contact information on file• Members provided invalid responses to the SWN messages• Members unavailable to respond within a 15 minute window
Potential Corrective Actions	<ul style="list-style-type: none">• Review and update contact information for all committee members• Provide in-service to members regarding valid responses to SWN messages• Repeat call down notification drill at least annually

BP1 – EPCOM Program Highlights

- Call Down Drill

- RRAP 1

- DHS / Supply Chain “SupplyEx” Tabletop (TTX)


- RRAP 2

Regional Resilience Assessment Program (RRAP)


THE REGIONAL RESILIENCY ASSESSMENT PROGRAM

Resiliency Assessment

New York City Regional Healthcare Supply Chain RRAP Project

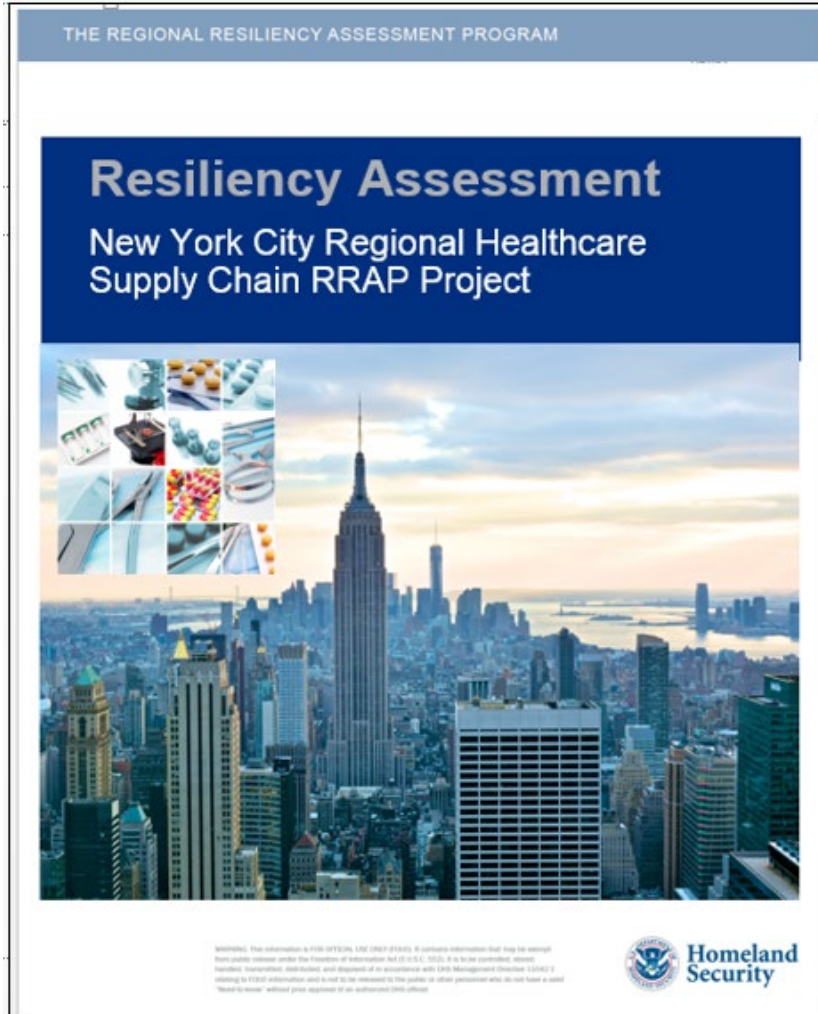


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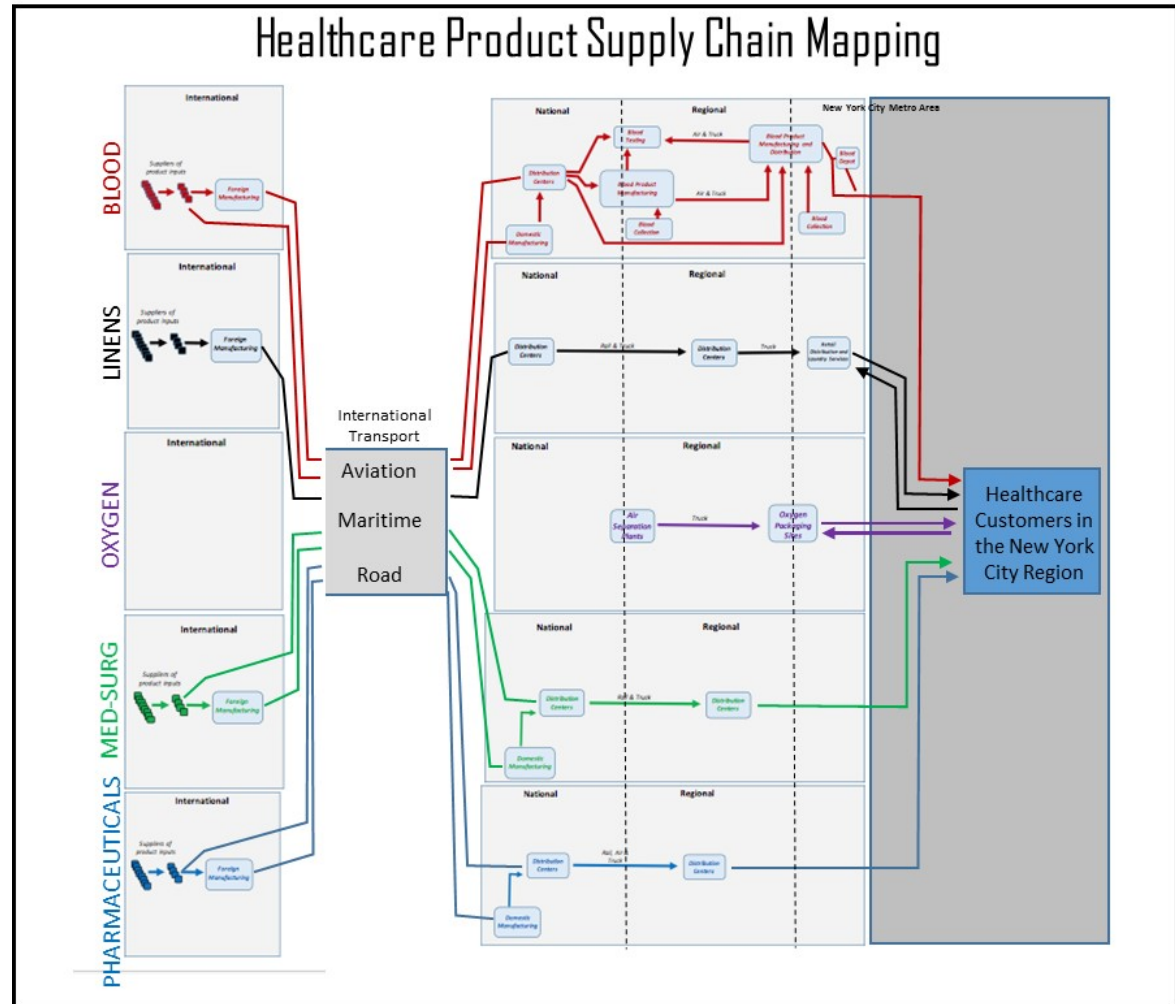
Project Deliverables

Project Report



Interactive Supply Chain Navigator

Healthcare Product Supply Chain Mapping



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Project Deliverables

Supply Chain Profiles

DRAFT

Supply Chain Profile for Blood Products

New York City Regional Healthcare Supply Chain RRAP Project



Overview
Medical treatments can involve transfusions of several types of blood products, including whole blood, red cells, platelets, plasma, and other components. The general target for the New York City region is to have 5-10 days of blood products for each blood type on-hand at any given time. While fluctuations occur throughout the year, blood supplies are not considered to be critically low unless they fall under 3 days of inventory.

Similar to other healthcare products, a network of blood manufacturers and distributors work together to deliver supplies on a daily basis to healthcare facilities. Lean inventory practices are increasingly being used within the blood product supply chain in the New York City region, with end customers holding as small an inventory as possible and relying on frequent deliveries from suppliers.

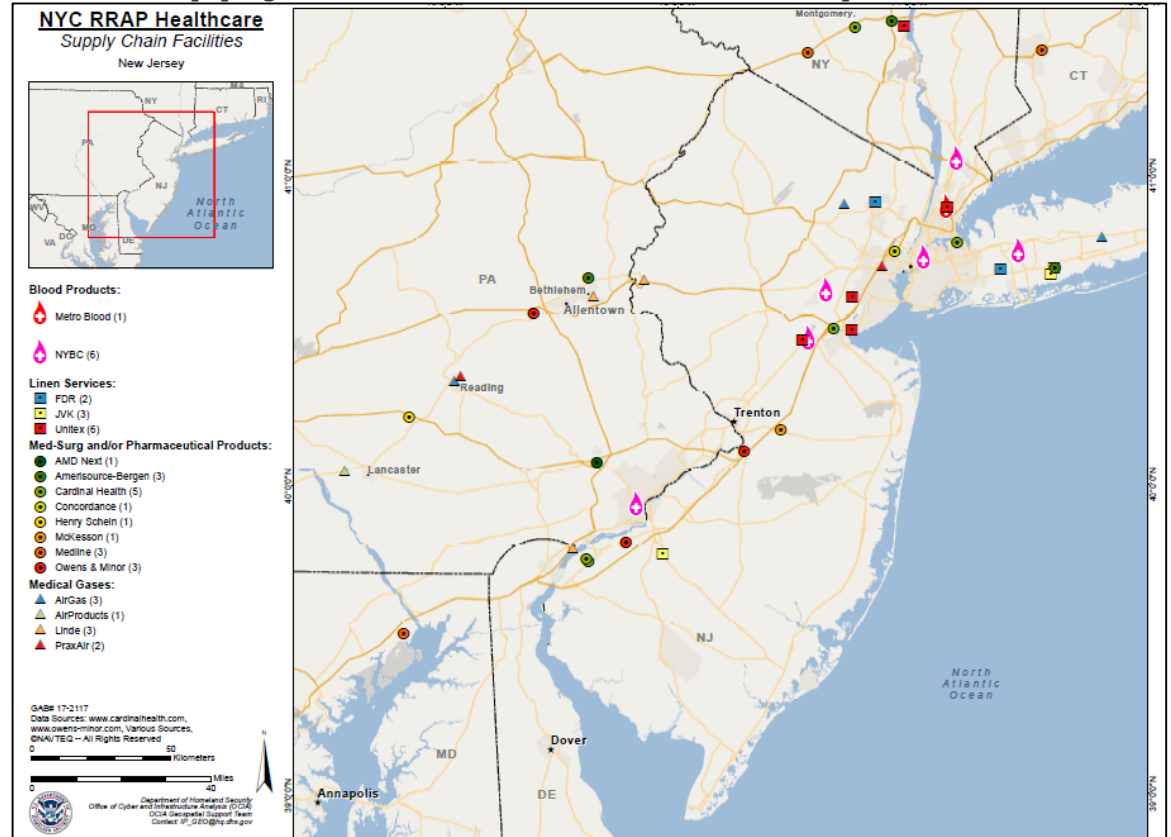
Nationally, the supply of blood products is considered to be stable. Despite the potential for local short-falls in donations and spikes in demand, blood products can be sourced from other regions and rapidly delivered in cases of emergency need.

It is critically important to also consider the supply chains for the range of "support" products that underpin the blood supply, such as blood bags, testing machinery, and transport equipment, much of which is manufactured overseas. These items must be factored into a broader view of and planning for the combined blood products supply chain.

There are two major suppliers of blood products to healthcare facilities in the region: New York Blood

1

Supply Chain Infrastructure Maps



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BP1 – EPCOM Program Highlights

- Call Down Drill
- RRAP 1
- DHS / Supply Chain “SupplyEx” Tabletop (TTX)
- RRAP 2

SupplyEx 2018



- ✓ Hurricane with Catastrophic Damage
- ✓ Players included:
 - Healthcare Networks
 - Governmental Entities
 - Medical Supply Chain Partners
- ✓ Takeaways:
 - Improve Coordination Between All Sectors
 - Understand Needs of Suppliers for Fulfillment
 - Need for a Lead ESF-8 Agency
- ✓ Submitted to DOHMH for deliverable

SupplyEx 2018

How well prepared we think we are!

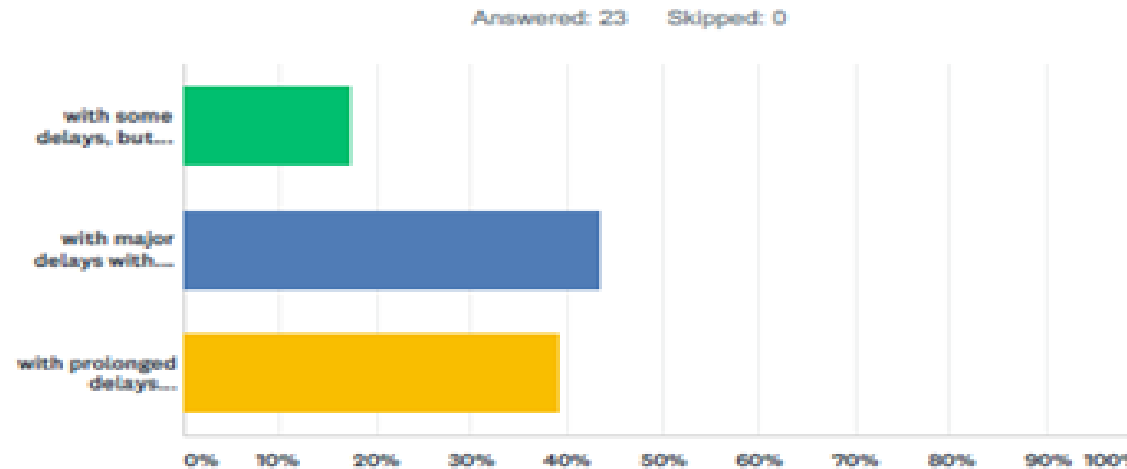
2. Assess your organization's ability to identify non-traditional transportation systems to meet Supply Chain requirements for the long term impacts of this catastrophic hurricane?



SupplyEx 2018

How well do we think we can communicate and coordinate!

Q9 The exercise focused on supply chain communication and coordination between healthcare operators, providers, and government for an extended duration catastrophic regional disaster. Complete the following sentence by selecting the most appropriate statement, based on the exercise scenario and current readiness level. Healthcare operators, providers, and government will be able to communicate, coordinate and prioritize the delivery of critical med-surge, medical gases, and blood products -



ANSWER CHOICES	RESPONSES	
with some delays, but ultimately meeting all prioritized requests	17.39%	4
with major delays with critical shortfalls not initially met	43.48%	10
with prolonged delays impacting patient care and long-term recovery	39.13%	9
TOTAL		23

BP1 – EPCOM Program Highlights

- Call Down Drill
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Regional Resilience Assessment Program (RRAP)

A New 2018 Effort Supported by DHS



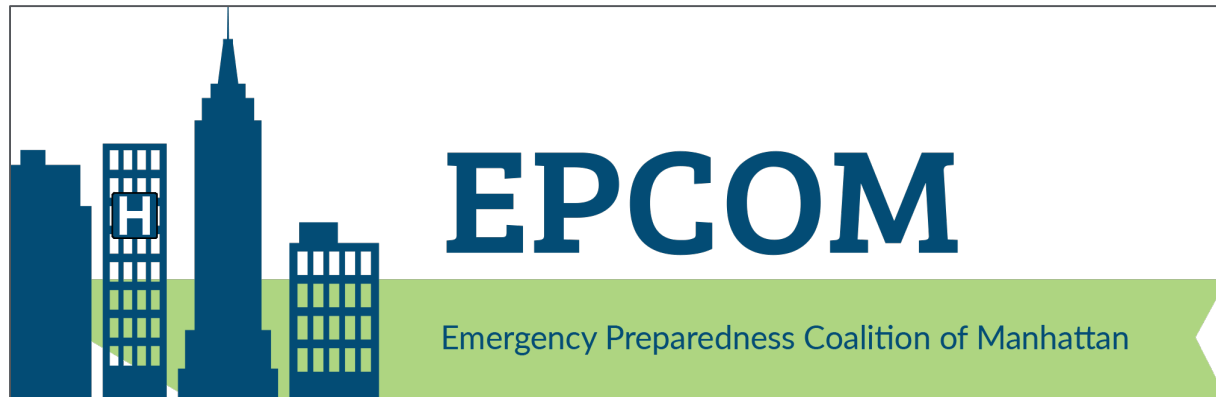
Supply Chains for Temperature- and Time-Sensitive Healthcare Products

- Building off EPCOM's 2016/2017 RRAP effort for Supply Chain
- Full commitment of DHS's National Infrastructure Program and Idaho National Labs
- Expanded partners: EPCOM, GNYHA, all participants of the prior Supply Chain Sector RRAP and additional private and public sector representatives from Aviation

Initially looking at the:

- Identification of most critical product types to focus on within these temperature- and time-sensitive categories
- Proper balance of focus between aviation/airports and other transport modes/supporting infrastructure
- Geographic bounds of project (Mid-Atlantic, New England, beyond)
- Most substantive concerns/knowledge gaps of stakeholders

Questions



EPCOM: Working Session

How Borough Coalitions Support Healthcare Facility Emergency Preparedness

Breakout Groups



Reconvene - Group representatives report back





Networking Break

DOHMH Updates: SurgeEx, Playbook, NYCEM Academy

Darrin Pruitt, Deputy Director, OEPR, Bureau of Healthcare System Readiness,
NYC DOHMH



Surge Ex

- ▶ ASPR Annual Federal Requirement (Coalition Surge Test, “CST”)
 - ▶ Last year was informative for “baseline”
- ▶ Tests NYC HCC’s acute care sector’s ability to surge 20%+ in response to a surge event
 - ▶ ExPlay will focus on **activities networks and hospitals can manage themselves prior to coordination by city**
 - ▶ Ability of receiving hospitals to respond to surge
- ▶ Scenario: TBA. Evacuation of 22 hospitals, Zones 1-6
- ▶ Low/No-notice Exercise



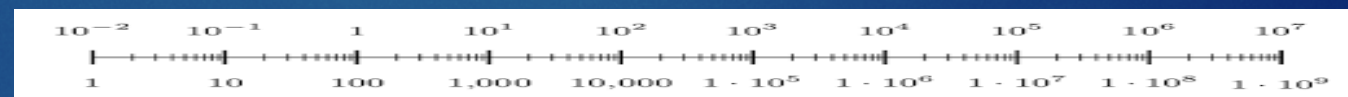
Surge Ex 2019 Timeline

Planning

- ▶ IPM Oct 9th, 2018
 - Update NYC HCC general membership at Oct 25th EPS
- ▶ MPM Jan 8, 2019
 - Update NYC HCC general membership at Feb 14 EPS
 - Trusted Insider Briefing Feb 26
- ▶ FPM Feb 20, 2019

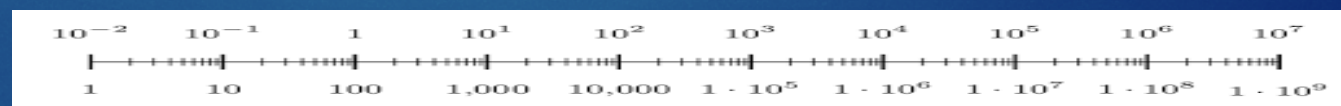
Exercise

- ▶ Functional Exercise
 - 2nd or 3rd week of March, 2019
- ▶ Facilitated Discussion
 - April 2019 EPS
- ▶ AAR/IP discussion w/ HMExec
 - May 2019



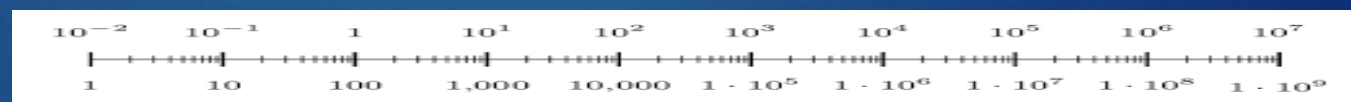
Planning and preparations for Surge Ex 2019

- ▶ Planning meeting series
- ▶ Pilot nursing home play (5 NHs)
- ▶ REMSCO: address transportation and TAL issues, Feb 14, 2019 EPS, play in “infocell”
- ▶ Stronger data analysis
- ▶ Call down notification
- ▶ Steering Committee to guide Surge Ex to benefit the NYC HCC.



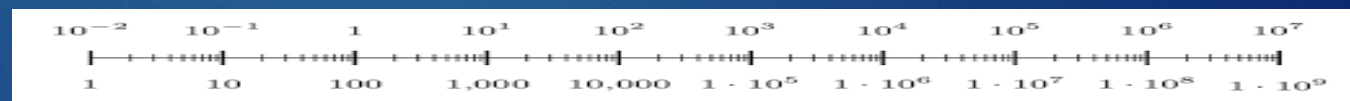
IPM Summary

- ▶ Overall objectives
 - Developing stronger, explicit assumptions
- ▶ Receive hospital objective
 - Assess ability to provide staffed beds for incoming patients.
- ▶ Transportation objective
 - Obtain data on the availability and wait time for non-9-1-1 transportation resources to support transportation planning assumptions for healthcare facility evacuation.
- ▶ Scenario: keeping sending and receiving facilities from Surge Ex 2018
- ▶ Data collection, MPM



Contract Deliverables, Surge Ex 2019

- ▶ Activities:
 - Provide 1 staff per facility to serve as Trusted Insider (evaluator/ controller)
 - Networks also provide 1 staff to serve as Network-level Trusted Insider
 - Conduct exercise
 - Complete DOHMH template for observations during the exercise for each facility
 - Collect data
- ▶ Documentation for vouchering
 - Observations from each facility; key strengths and weaknesses by the Network (template provided)
 - Surge data collected using DOHMH tool
- ▶ Work group deliverable (10)



Healthcare System Playbook update

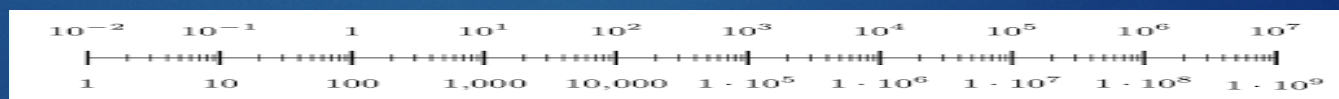
▶ Preparedness Scorecard

- HMExec/HCC Leadership Council Tool for advising on high level direction for coalition preparedness
- Status: Using HSP + HPP requirements to develop HPP work plan for next BP.

▶ Response Dashboard

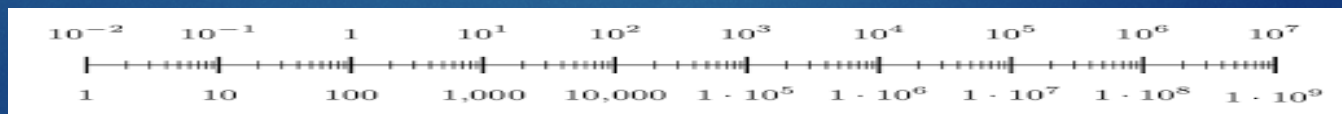
- HMExec Tool for monitoring evidence during city responses to inform preparedness/planning priorities and develop richer AARs
- Strengthen connection of DOHMH's ICS to NYC HCC.
- Status: training ICS, piloting during 2019 exercise

▶ Revision cycle, ownership by NYC HCC leadership council



NYC EM Academy

- ▶ Offerings for EM development, certificate available
- ▶ NYC relevant content (e.g., CIMS)
- ▶ Voluntary, not tied to deliverable
- ▶ Registrations and documentation are responsibility of enrollee
- ▶ For more information: NYCEMAcademy@oem.nyc.gov
- ▶ See hand out provided



NYC

Emergency Management Academy

Mission

NYC Emergency Management helps New Yorkers before, during, and after emergencies through preparedness, education, and response.

Who We Are

The agency is responsible for coordinating citywide emergency planning and response for all types and scales of emergencies. It is staffed by more than 200 dedicated professionals with diverse backgrounds and areas of expertise, including individuals assigned from other City agencies.

NYCEM Academy

The Academy helps prepare NYC Emergency Management staff and local partners to respond to emergencies. Additionally, this division oversees the NYC Emergency Operations Center. Training topic areas include city response operations, emergency management skills, compliance training, professional development, and much more! This also includes the Emergency Management Certificate Program:

Emergency Management Certificate Program (EMCP)

Introduces government, private sector, and non-profit personnel to the fundamentals of emergency management and provides participants with an awareness and understanding of how the City of New York operates and responds to emergencies.

Certificate Objectives

- Educate and train government employees on emergency management principles
- Explain Citywide Incident Management System (CIMS) Protocol and its application in New York City
- Provide participants with interdisciplinary emergency management training with an emphasis on “real world” experience
- Apply emergency management principles in problem-solving activities

In addition to classroom and online study, participants will engage in a culminating tabletop exercise with other program participants. Participants will have the opportunity to draw upon the knowledge that they have learned throughout the year and represent their agency in a tabletop exercise focused on an emergency scenario.

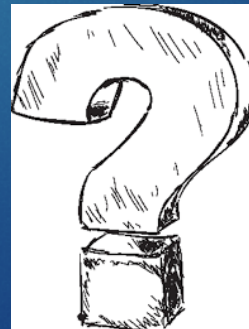
Contact

If you have questions about NYCEM Academy, or are interested in participating in the Emergency Certificate Program, please email NYCEMAcademy@oem.nyc.gov.

Questions?

DPRUITT@HEALTH.NYC.GOV

347-396-2699



DOHMH/OCME: Mass Fatality Planning Update

Timothy Styles, Medical Director, OEPR, Bureau of Healthcare System Readiness,
NYC DOHMH

Helen S. Alesbury, Assistant Director, Emergency Management/Forensic
Operations, OCME



Mass Fatality Planning

2018-19 HPP BP1-SUPP

Timothy Styles - NYC DOHMH
Helen Alesbury - NYC OCME



Objectives

- ▶ **Introduction: Helen Alesbury, OCME's Assistant Director, Emergency Management / Forensic Operations**
- ▶ **Background - Historical Planning**
- ▶ **NYC OCME Mass Fatality Guidance for Healthcare Facilities**
- ▶ **Key OCME needs /asks as facilities begin their planning**
- ▶ **Questions**

Background

► Historical Planning (recent history)

- Who remembers this? Circa 2008
- Focused on Pandemic Influenza Mass Fatality Management

NEW YORK CITY DEPARTMENT OF HEALTH AND MENTAL HYGIENE HEALTHCARE EMERGENCY PREPAREDNESS PROGRAM (HEPP)	
HEPP Project Fact Sheet	MASS FATALITY MANAGEMENT (MFM)
<p>QUICK FACTS</p> <p><u>Deliverables 2008-2009</u></p> <ul style="list-style-type: none">- Finalize written Hospital Mass Fatality Management Plan - includes senior management approval- Complete survey indicating if hospital will be using Body Collection Points for decedent management in a mass fatality event	<p>Project Goal</p> <ul style="list-style-type: none">• Prepare a City-wide response strategy to manage in- and out- of hospital decedents during a Pandemic Influenza (PI) event. <p>Project Objectives</p> <ul style="list-style-type: none">• Develop a Citywide MFM PI Surge Plan.• Train healthcare facility personnel on hospital's roles and responsibilities should a mass fatality event occur.• Describe the OCME's Body Collection Point (BCP) strategy to manage decedent surge.• Finalize hospital-specific written MFM Plans.

So What's New...

► DRAFT - 2016 OCME Biological Incident Surge Plan for In-Hospital Deaths

- Guidance on developing/updating facility Mass Fatality Plans for **ALL** biologic events causing mass fatalities
- Discusses triggers and scalable response
- Describes authorities (criminal vs. natural)
- Notes essential support/staff needed
- Potential equipment
- Description of expectations – if request OCME support vs not (includes communication via NYCEM EOC)

Biological Incident Surge Plan
for Managing In-Hospital Deaths

Planning Tool for Health Care Facilities

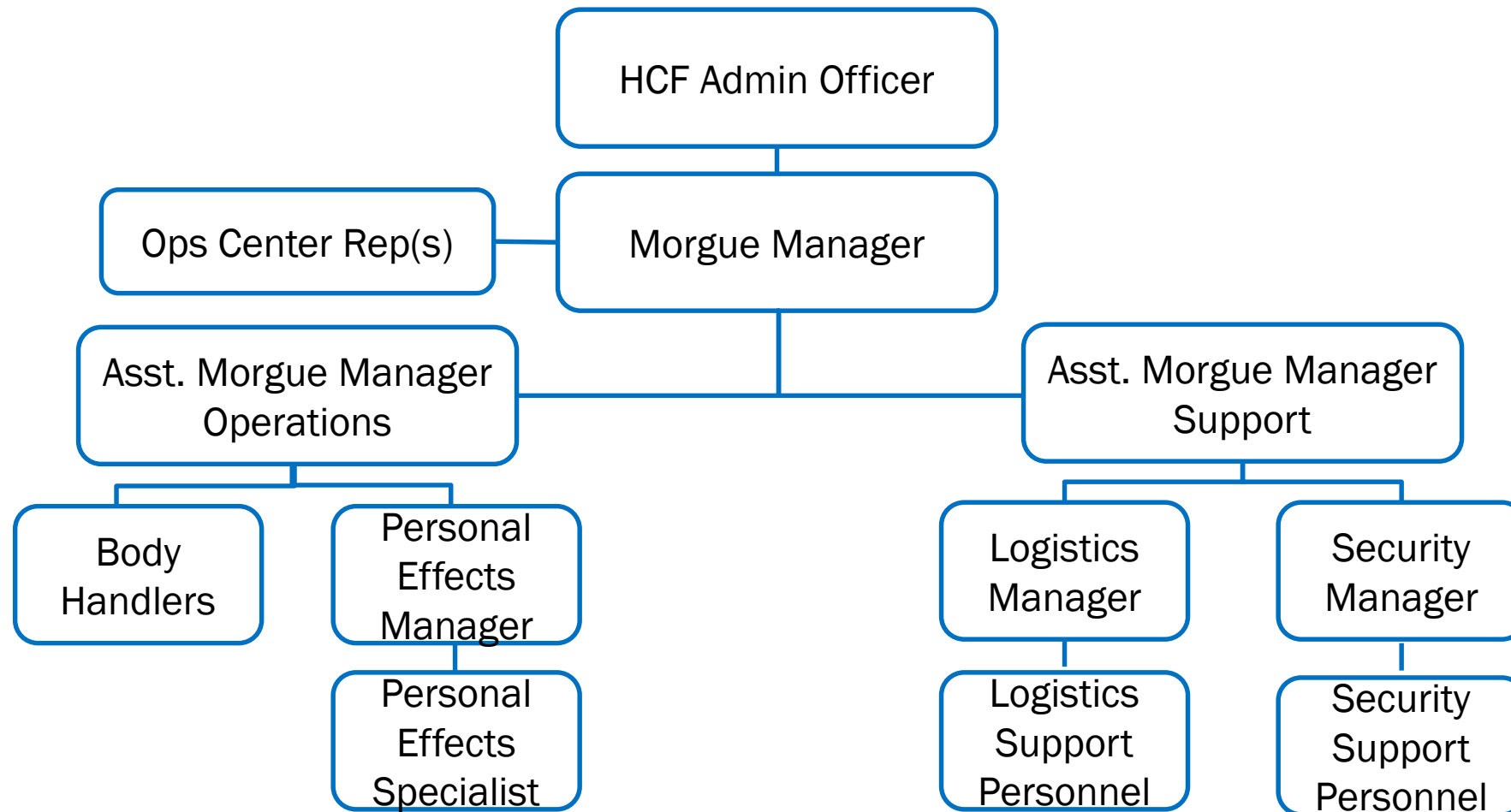


City of New York
Office of Chief Medical Examiner
Biological Incident Surge Plan for
Managing In-Hospital Deaths

Planning Tool for Health Care Facilities

2016
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Proposed Staffing/Organization



Job Action Sheets

HCF Morgue Manager

HCF Morgue Manager	
Purpose / Mission	To oversee the operations and logistical support for HCF Body Collection Point; To coordinate operational needs with NYC agencies and private contractors
Objectives	<ul style="list-style-type: none"> Identify appropriate Body Collection Point type based on incident characteristics and HCF infrastructure Coordinate with OCME Logistics personnel and the HCF Logistics Manager to determine optimal staging locations for BCP Coordinate remains storage and transportation between HCF and BCP Coordinate BCP pickup and drop off with private contractor/vendor
Suggested Qualifications	<ul style="list-style-type: none"> HCF Senior Leadership Experienced Mortuary Supervisor Knowledge of remains storage requirements Ability to delegate and communicate effectively Familiarity with disaster response procedures
Assigned Area	HCF Body Collection Point
Supervisor	To be determined by HCF Administrators
Supporting Positions / Functions	Assistant Morgue Manager – Operations Assistant Morgue Manager – Support Operations Center Representative(s)
Activation Checklist	
<input type="checkbox"/> Upon notification and deployment, receive incident characterization and initial information concerning the type and scope of remains storage needs. <input type="checkbox"/> Report to the HCF Administrators to receive instructions. <input type="checkbox"/> Notify supervisor of disaster role. <input type="checkbox"/> Receive instruction from the HCF Administrators to determine goals and objectives for decedent storage. <input type="checkbox"/> Formerly request OCME support through NYCEM in managing in-hospital surge deaths through body collection points. <input type="checkbox"/> Attend any briefings or conference calls related to the operation. <input type="checkbox"/> Determine staffing needs based on rate of recovery from the HCF and operational periods consistent with citywide operations. <input type="checkbox"/> Staff support positions, including: <ul style="list-style-type: none"> <input type="checkbox"/> HCF Assistant Morgue Manager – Operations <input type="checkbox"/> HCF Assistant Morgue Manager – Support <input type="checkbox"/> Operations Center Representative(s) <input type="checkbox"/> Ensure support positions fully staff respective functions. <input type="checkbox"/> Conduct staff briefing on current situation and incident objectives; develop response	

HCF Operations Center Representative

HCF Operations Center Representative	
Purpose / Mission	Represent the HCF at the required location during a biological incident to coordinate decedent management needs between appropriate NYC agencies.
Objectives	<ul style="list-style-type: none"> Communicate BCP status information and needs with OCME and NYCEM Coordinate agency needs/requests with relevant agencies at the operations center Facilitate the flow of information between HCF Morgue Manager and external agencies and entities as necessary and related to the biological incident
Suggested Qualifications	<ul style="list-style-type: none"> Knowledge of facility capabilities Ability to delegate and communicate effectively Familiarity with disaster response procedures
Assigned Area	Emergency Operations Center (NYCEM or OCME)
Supervisor	HCF Morgue Manager
Activation Checklist	
<input type="checkbox"/> Receive appointment and briefing from the HCF Morgue Manager. <input type="checkbox"/> Notify your usual supervisor of your disaster collateral assignment. <input type="checkbox"/> Report to requested Emergency Operations Center. <input type="checkbox"/> Coordinate with local governmental and non-governmental entities at the EOC to obtain resources that cannot be obtained locally, regionally or within the private sector. <ul style="list-style-type: none"> <i>Note: Obtaining these resources, just like when obtaining local assets, requires official coordination within the EOC.</i> Local NYC government, including NYC OCME Metropolitan Funeral Directors Association and all other funeral directors Private Sector Cemetery Owners Private Sector Crematorium Owners State Funeral Director Association American Red Cross The Salvation Army New York Disaster Interfaith Services (NYDIS) Other Private and Commercial Entities <input type="checkbox"/> Coordinate with State and Federal entities represented at the EOC to obtain resources that cannot be obtained locally, regionally, or within the private sector. <ul style="list-style-type: none"> <i>Note: Obtaining these resources, just like when obtaining local assets, requires official coordination within the EOC.</i> New York State Department of Health (DOH) New York State Department of Homeland Security and Emergency Services (DHSES) 	



Inventory/Tracking Templates

Remains Storage Inventory Form								
1. Incident Name:			3. Health Care Facility:					
2. HCF Morgue Manager:			4. BCP Number:					
5. Case Number	6. Date Entered	7. Time Entered	8. Storage Position	9. Initials	10. Date Removed	11. Time Removed	12. Initials	13. Released To

Personal Effects Chain-of-Custody Tracking Form				
1. Incident Name:				
2. Case Number:				
3. Submitting Personnel:				
4. Date/Time Submitted:				
5. Location:				
6. Voucher Number:				
7. Item Number	8. Quantity	9. Description of Item		
Chain-of-Custody				
10. Item Number	11. Date/Time	12. Released by	13. Received by	13. Comments

Possible BCP Equipment

- ▶ Facility may opt to expand internal storage*
- ▶ When OCME help requested, facilities should expect two main types of BCP
 - Trailers (Diesel vs. 230V)
 - CONEX unit (Diesel vs. 380/460V)
- ▶ Consider access for fuel truck and clearance / privacy for either type
 - Sized vary – more flexibility by the facility improves OCME’s ability to support
- ▶ Guidance on placement



* OCME may need significant lead time to get contracted resources in place; HCFs should plan accordingly and plan for surge regardless if OCME support will be requested



Key Needs from OCME

- ▶ **POCs for key positions**
 - Lead(s) facility management surge planning
 - Morgue manager
 - Facilities and Security Dept. Contact Info
- ▶ **Current on-site morgue capacity and alternate sites**
- ▶ **Plan to request BCP if needed (vs. utilize internal resources)?**
 - If internal, facility will need to manage logistics
 - If OCME supported – need location information, ideally with address, routes, map and coordinates (examples in guide)



Questions?

▶ **Timothy Styles**

- Email – tstylesmd@health.nyc.gov

▶ **Helen Alesbury**

- Email – halesbury@ocme.nyc.gov

DOHMH: Presentation: The Public Health Emergency Response Network Pharmacy Program (PHERN PP)



NYC's Public Health Emergency Response Network Pharmacy Program: Recruiting Community Pharmacies to Enhance Communication

OFFICE OF EMERGENCY PREPAREDNESS AND RESPONSE
BUREAU OF EMERGENCY FIELD OPERATIONS

Vibhuti Arya, PharmD, MPH: Clinical Advisor
Eric Medina, MPA: Special Projects Manager

New York City Pharmacy Landscape and Research

► Pharmacy COOP Research

- “Impact of Hurricane Sandy on community pharmacies in severely affected areas of New York City: A qualitative assessment.” Arya V, Medina et al.





New York City Pharmacy Landscape and Research

▶ Total number of licensed NYC pharmacies: 2936

- Independent: 2108 -72%
- Chain: 596 - 20%
- Hospital/Health Center/Other: 233 - 8%

▶ Averages

- Number of Independent pharmacies per year:
 - New: 176
 - Closed: 22
- Number of Chain pharmacies per year:
 - New: 12
 - Closed: 27



New York City Pharmacy Landscape and Research

Significant Findings:

- ▶ **Majority (80%) experienced power outage**
- ▶ **Transportation to Work (44%) was the largest challenge for staff**
 - Despite staffing challenges most pharmacies (88%) had enough staff /pharmacist to resume normal operations
- ▶ **Most pharmacies (66%) were able to reopen within 1 month**
 - 76% of these reopened with normal or close to normal hours pre-hurricane



New York City Pharmacy Landscape and Research

Significant Findings:

- ▶ **Issues other than power outages contributed more toward a pharmacy remaining operational after the storm**
 - Structural damage
 - Staff challenges
- ▶ **60% had no generator ready**
 - 0% received generator guidance from NYC



New York City Pharmacy Landscape and Research

Implications:

- ▶ **Lack of general pharmacy information and ability to communicate directly to affected pharmacies**
- ▶ **There were several barriers to pharmacies remaining operational after Hurricane Sandy that we could have easily addressed before the event (e.g. providing generator guidance, sending out alert emails to pharmacies, etc.)**



NYC Master Pharmacy List

- ▶ **NY State Education Department Board of Pharmacy (NYS BOP)**
 - Provided DOHMH pharmacy database of all registered pharmacies in NYC in 2013
 - DOHMH added more information
 - Geocoded all pharmacies
 - EPAP field
 - Part of the City's Immunization Registry
 - Classified pharmacies as chain, independent, hospital/clinic
 - Standing order status, etc.



NYC Master Pharmacy List

- ▶ **Bi-weekly reports from NYS BOP**
 - Updating list since 2013
- ▶ **Limitation of Board Pharmacy Data**
 - No email addresses
 - Only mailing address
 - One telephone number
- ▶ **Presented our pharmacy program to NYSED BOP in 2016**
 - Highlighted Board reaction positive
 - Prompted NYSED BOP to alter their bi-weekly report



PHERN PP





PHERN PP





Online Service Registration

Check the box next to each service that interests you.

Animal Abuse Registry

Animal Abuse Registry
You may only subscribe to the New York City Animal Abuse Registry if you are a NYC animal control officer, member of an animal rescue group that adopts out animals, a veterinarian, or employee of an animal shelter, humane society or pet shop. Employees and members of these business and organizations are required by the New York City Animal Abuse Registration Act (Local Law 4 of 2014) to consult this Animal Abuse Registry before selling or transferring an animal. Transfer or sale of an animal to individuals listed on the Registry is prohibited. Organizations may be verified to confirm eligibility. By subscribing to the Animal Abuse Registry you agree that you will use the registry only for the purpose of complying with the New York City Animal Abuse



Public Health Emergency Response Network Pharmacy Program
The Public Health Emergency Response Network Pharmacy Program (PHERN PP) is an easy-to-use application that allows pharmacies in NYC to provide DOHMH pharmacy contact and service information. This information will assist the City in engaging pharmacies in a productive exchange of information during emergencies to ensure the public's access to critical medications.



Water Tank Inspection Reporting
NYC Health Code requires that drinking water storage tanks be inspected annually and that the results be reported to the Health Department. Register and report your water tank's inspection results here. If your building does not use a drinking water storage tank, you can certify that your building uses an alternate water supply system here. ([View the FAQ](#))

Continue

NYC DOHMH PHERN PP Registration Process

Online Service Registration



Public Health Emergency Response Network Pharmacy Program (PHERN PP)

Additional Links:
[Public Health Emergency Preparedness](#)

Service Information

Please provide information about this store only.

Does your pharmacy:

1. Have certified immunizers?* Yes No **If yes, how many?**

2. Provide immunizations? Influenza Pneumococcal Meningococcal Herpes Zoster Tdap

3. Deliver to clients in their homes?* Yes No

4. Provide 24-hour pharmacy services?* Yes No

5. Participate in EPAP (Emergency Prescription Assistance Program)?* Yes No

The Emergency Prescription Assistance Program (EPAP) is currently under review. Additional information about this program will be provided as it becomes available.

6. Provide a specialty service?

Compounding HIV/AIDS Cancer/Oncology Infertility Medical Marijuana Other

7. Open Saturday and/or Sunday?* **Saturday** Yes No **Sunday** Yes No

8. Have staff that speak languages besides English?

Spanish French Creole Polish
 Chinese - Cantonese Korean Yiddish
 Chinese - Mandarin Italian Arabic
 Russian Bengali Language Line

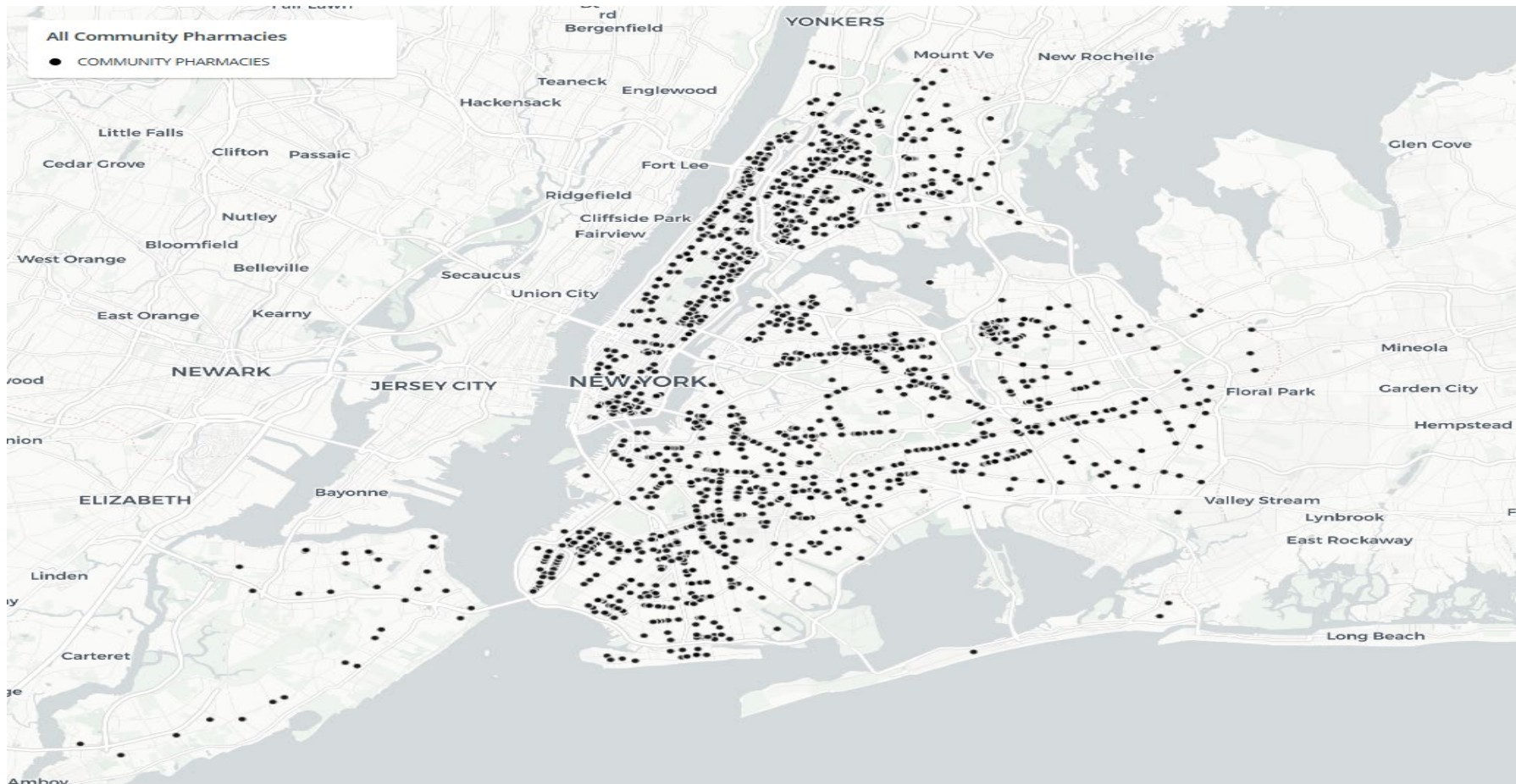
Back

Cancel

Continue

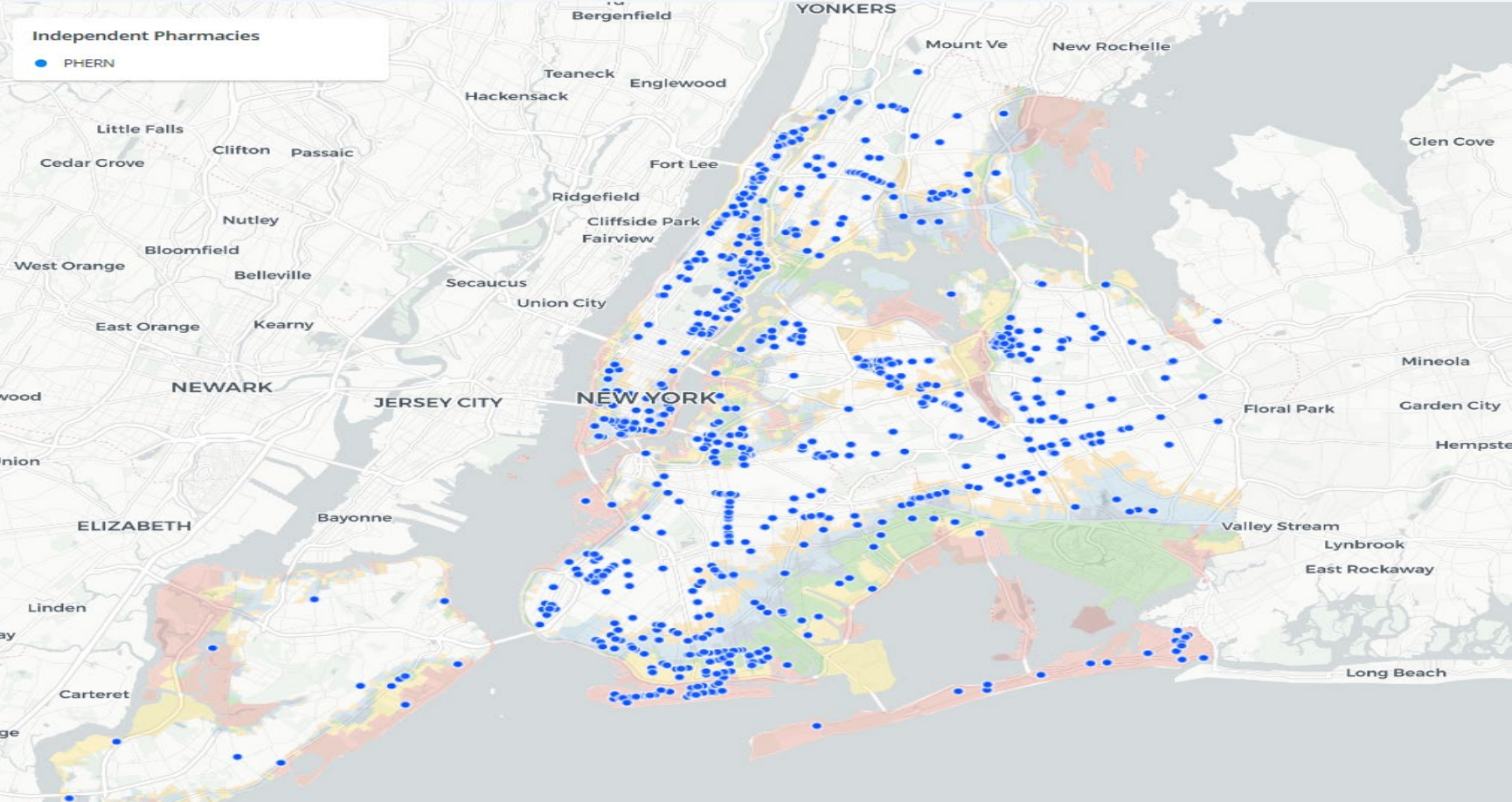


All Community Pharmacies





PHERN PP Pharmacies

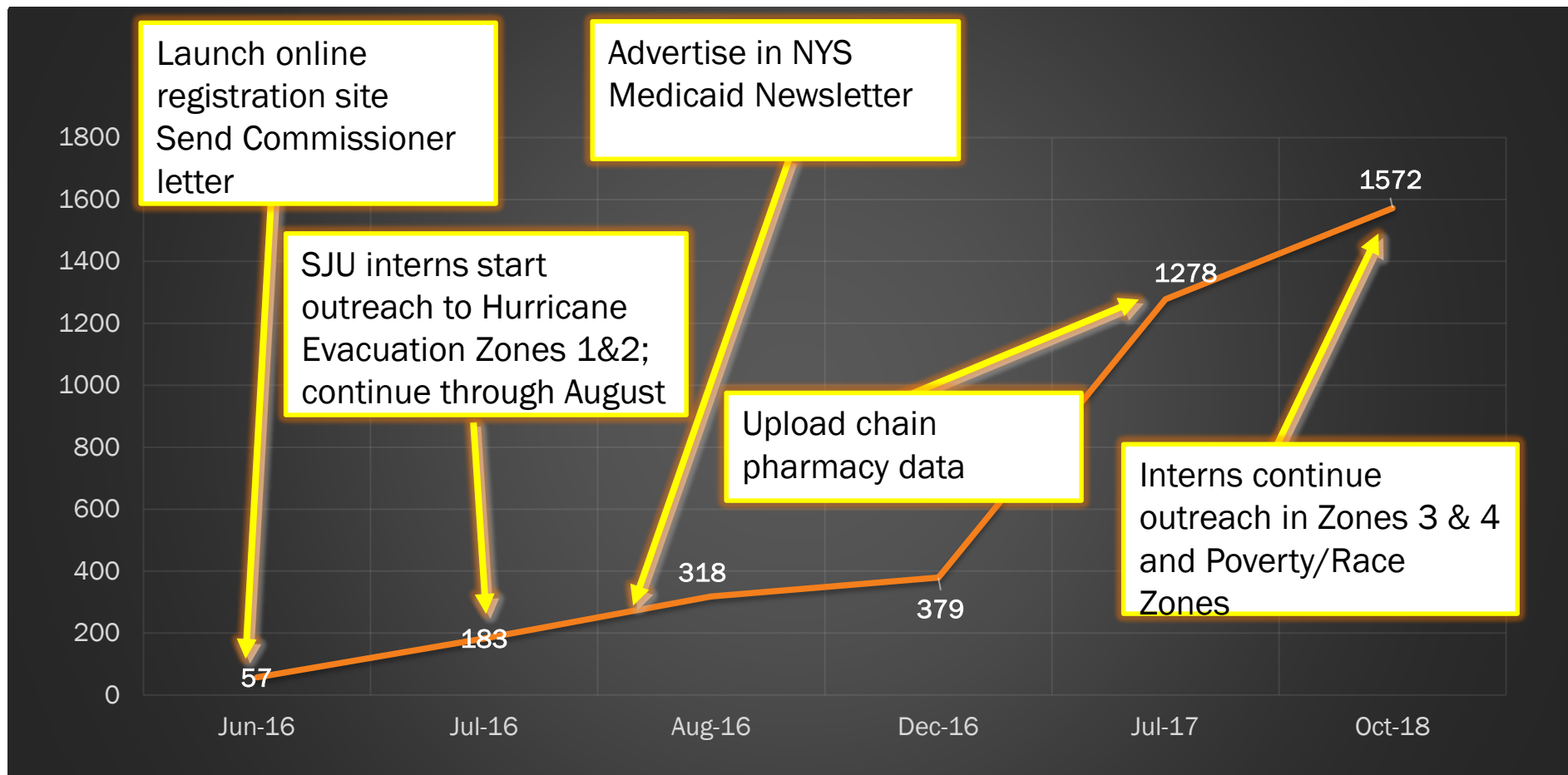




Independent Pharmacies



Enrollment in PHERN PP





Current Registrations

▶ Number of pharmacies registered in PHERN PP

- Total: 1355 – 50%
- Chain: 514 – 86%
- Independent: 838 – 40%

▶ Independent pharmacies in PHERN PP by Zone

- Zone 1: 86%
- Zone 2: 88%
- Zone 3: 79%
- Zone 4: 79%

▶ Immunizers

- 71% have immunizers available



Outreach Strategy

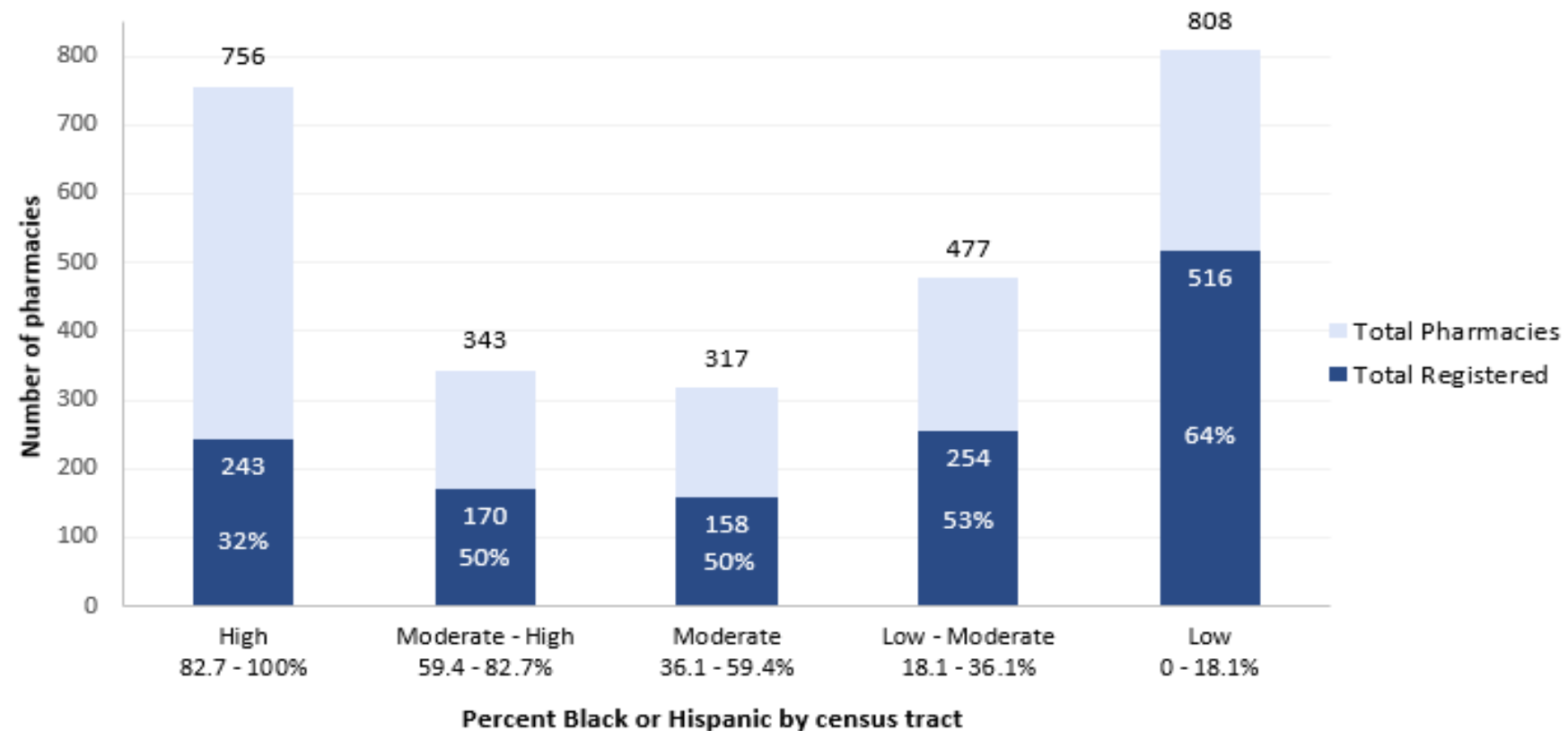
- ▶ Secondary Personal Outreach
 - Supervisor visits
- ▶ Letter encouraging sign up
 - “Everybody else is doing it.”
- ▶ Wait a year, and start over
- ▶ In Summer 2018, target new areas based on poverty and race, rather than Hurricane Evacuation Zones

NYC Pharmacy Distribution: Equity

		Pharmacy Distribution	
		Independent	Chain
Black or Hispanic*			
Low	0 - 18.1	64%	36%
Low – Moderate	> 18.1 - 36.1	73%	27%
Moderate	> 36.1 - 59.4	80%	20%
Moderate – High	> 59.4 - 82.7	81%	19%
High	> 82.7 - 100	84%	16%

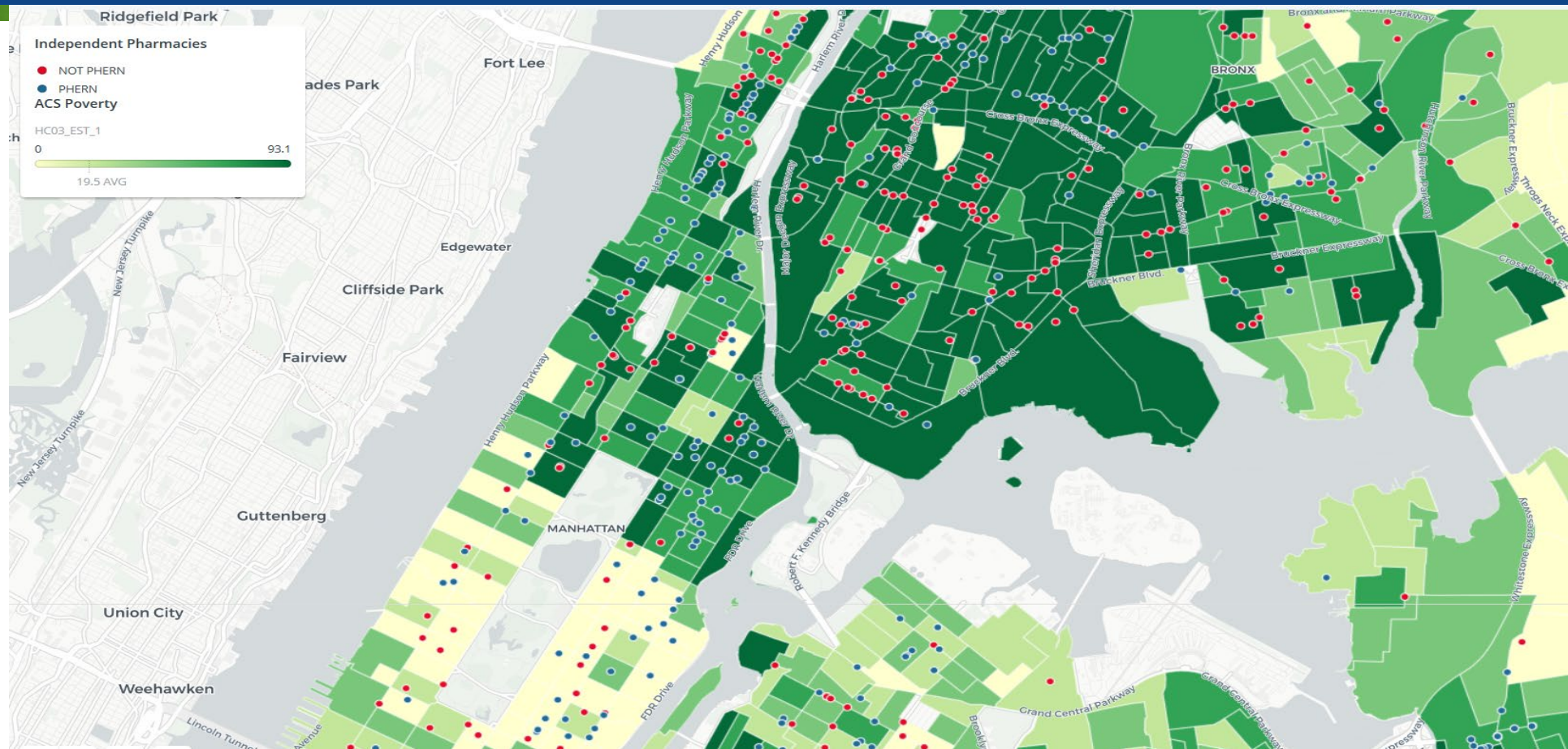
Black or Hispanic Table

Number of all retail community pharmacies in NYC (N=2701) registered in PHERN PP in census tracts by percent Black or Hispanic





Poverty Map



Hurricane Support Service Center – Fall 2017

Pharmacies Near The New York City Hurricane Support Service Center



Legend

Map ID	Pharmacy
A	I & S Pharmacy 1994 3rd Avenue New York, NY 10029 (212) 427-7123
B	Upper Madison Drugs 1590 Madison Avenue New York, NY 10029 (212) 427-4382
C	Madison Avenue Pharmacy 1407 Madison Avenue New York, NY 10029 (212) 722-3200
D	Drug Loft Pharmacy 1412 Madison Avenue New York, NY 10029 (212) 996-9499
E	Marcla Pharmacy 217 East 106 Street New York, NY 10029 (212) 534-1939
F	Blake Pharmacy 1868 3rd Avenue New York, NY 10029 (212) 369-1350
G	\$2 Pharmacy Inc. 1938 2nd Avenue New York, NY 10035 (212) 426-6484
H	Lax Drugs Inc. 1797 Lexington Avenue New York, NY 10029 (212) 426-0402
I	R.O.R. Madison Pharmacy 1636 Madison Avenue New York, NY 10029 (212) 369-0700
J	Maxwell Pharmacy Inc. 234 East 106 Street New York, NY 10029 (212) 534-7700
K	Royal Care Pharmacy, Inc. 127 East 110 Street New York, NY 10029 (212) 996-0055
L	Lexcare Pharmacy 1570 Lexington Avenue New York, NY 10029 (212) 722-5222
M	Gramercy Drugs 1938 3rd Avenue New York, NY 10010 (212) 532-0022
N	Skyline Pharmacy Inc. 2123 2nd Avenue New York, NY 10029 (212) 996-5929
O	Charlie Pharmacy Inc. 2034 2nd Avenue New York, NY 10029 (646) 596-7028
P	Ecogreen Pharmacy 1600 Madison Avenue New York, NY 10029 (212) 369-3084
Q	Magnolia Pharmacy 2032 3rd Avenue New York, NY 10029 (212) 369-6075
R	Drug Stop Corp 2062 2nd Avenue New York, NY 10029 (212) 410-0509
S	Quick Rx Pharmacy 175 East 96th Street New York, NY 10128 (646) 979-2900
T	Metro Rx Pharmacy 1976 2nd Avenue New York, NY 10029 (212) 831-1222
U	103 Pharmacy Inc 2002 2nd Avenue New York, NY 10029 (212) 410-4410
V	CVS Pharmacy 1500 Lexington Avenue New York, NY 10029 (212) 289-3846
W	Rite Aid Pharmacy 1951 1st Avenue New York, NY 10029 (212) 360-5530
X	Duane Reade (Walgreens) 333 East 102 Street New York, NY 10029 (212) 423-2042
Y	Duane Reade (Walgreens) 1490 Madison Avenue New York, NY 10029 (212) 410-2508
Z	Duane Reade (Walgreens) 1915 3rd Avenue New York, NY 10029 (917) 492-1038



Support for Pharmacies

- ▶ Communications Material
 - PHERN PP Window Decals
 - Personal Health Summary
 - 13 languages
 - Tips for Medication Preparedness
 - 13 languages
- ▶ Financial Support
 - Possible co-pay reimbursement
 - Connect with NYC Business/PREP
- ▶ Information
 - Generator Guidance
 - Receive emergency information from NYC DOHMH (e.g. waivers)

Generator Information for Pharmacies

Here is information on generators to help pharmacies maintain operations during power outages. Follow these tips to make sure you're prepared!

Guidance for Pharmacies

Pharmacies themselves will rarely have to file all of the permits and applications described below. The filings are generally handled by generator companies or licensed electricians. After this section, you will find details about New York City's requirements by agency that may need to be followed depending on your generator situation.

Pharmacies should:

1. Hire a licensed electrician to evaluate your power needs.
 - a. Determine what equipment you will need to maintain operations (e.g. computers, lighting, refrigerators, etc.).
 - b. The electrician will determine how much wattage you need. Based on this information he will determine the type of generator you will need. If you need to power sensitive equipment such as computers, your generator should contain an Automatic Voltage Regulator (AVR).
Discuss whether any special connection for a portable generator is necessary or desirable, or if a stationary generator is preferable.
2. Make arrangements with generator rental companies or purchase a small portable generator (if an electrician determines it is suitable for your needs) **before** an incident. Consider vendors outside NYC and/or negotiate priority access to a generator to increase your chances of obtaining an emergency portable generator during a widespread power outage.
 - a. The following generator rental companies have already filed generator permits with the NYC Department of Environmental Protection (DEP):
 - i. Aggreko, Linden, NJ
 - ii. United Rentals, Elmwood Park, NJ
 - iii. Sunbelt Rentals, Brooklyn, NY
 - iv. Carrier Rentals, Totowa, NJ
 - v. H.O. Penn Machinery, Poughkeepsie, NY
 - vi. On Site Energy, Hicksville, NY

General Information on Generators

Portable generators can be carried or moved from one location to another.

1. Small portable generators generally have built-in fuel tanks and power outlets. Small portable gasoline generators generally produce up to 18 kW, and small portable diesel generators produce up to 13 kW. Equipment is generally plugged directly into the generator, or powered through an extension cord plugged into the generator.
2. Towable generators are usually used to power larger facilities; they can be towed at highway speeds, are capable of multiple voltages/phases and have on-board fuel capacity. They generally produce up to 1000 kW.

Stationary generators are permanently connected to the electrical system of a building.



PHERN PP PARTNERS

▶ NYC DOHMH Bureau of Immunization (BOI)

- Promote vaccination service via standing orders

▶ NYC DOHMH Center of Health Equity

- Promote teen reproduction health program in Bronx

▶ NYC DOHMH STD Control

- Provide updates on Bicillin shortages

▶ NYC DOHMH BHSR

- NYC Health Care Coalition

▶ NYC DOHMH BEFO

- Community Engagement Partners

▶ NYC Small Business Services (SBS)

- Grant (up to \$3,000)
- Emergency Response Services

▶ Pharmacists Society of the State of NY (PSSNY)

- Promote PHERN PP, DOHMH CEUs (e.g. Reproduction Health) and NYC SBS programs

▶ NYC Society of Health System Pharmacists (NYCSHP)

- Promote PHERN PP and CEUs
- Connect with NY Health Care Coalition

Additional Resources

- ▶ For independent pharmacies:
 - Join the NYC PHERN Pharmacy Program:
 - <http://on.nyc.gov/phern>

PHERN PP

The Public Health Emergency Response Network Pharmacy Program

The Public Health Emergency Response Network Pharmacy Program (PHERN PP) is an easy-to-use application that allows pharmacies in New York City to register their contact and service information. With this information, the City can communicate vital information with pharmacies during emergencies and natural disasters.

- 1) REGISTER ONLINE**
Go to <http://on.nyc.gov/phern> and scroll down to "PHERN Pharmacy Program" to register your pharmacy. If you have multiple pharmacies under the same primary contact, please remember to register each pharmacy separately.
- 2) ENTER ANY REQUIRED INFORMATION**
Required information includes:
 - First and last names
 - Address and ZIP code
 - Pharmacy registration number
 - Telephone number
 - Fax number
 - Email address
- 3) ANSWER THE QUESTIONS**
Please answer the following questions about your pharmacy:
Does your pharmacy:
 - Have any certified immunizers? If yes, how many?
 - Deliver to clients' homes?
 - Provide 24-hour pharmacy services?
 - Participate in the Emergency Prescription Assistance Program (EPAP)?
 - Provide any specialty services (a.g., compounding or HIV)?
 - Have Saturday or Sunday hours?
 - Have staff members who speak a language other than English?
- 4) SUBMIT**
After you submit your registration, you will receive a confirmation email.
- 5) UPDATES**
You will receive emails periodically to verify that your contact information is still correct.

After you register, you will receive a letter and decal to show you are part of the PHERN PP network.
QUESTIONS? Email us at PHERNPP@health.nyc.gov

NYC
Health



QUESTIONS?

► **Questions/Request Materials:**

Eric Medina

emedina@health.nyc.gov

Vibhuti Arya

varya@health.nyc.gov



Networking Lunch

Thank You!

**“Emergency
Preparedness is a team
sport”**

-Eric Whitaker