## **Ambulatory Care Preparedness**

## Summary - Talking Points

## Primary Care Preparedness - Budget Period 1 Supplemental 2018 - 2019

**Introduction:** Primary care EM Activities are anchored in the following areas (The BIG 5 from the Readiness Project) – assessment, planning, policies / procedures, training + exercises; and communications/situational awareness; as well as the HPP Capabilities.

## Primary Care EM Technical Assistance Program – learning sessions and TTX

- Goals: 1) To provide NYC's primary care personnel with a foundation of knowledge and skills focused on emergency management principles and 2) To enhance primary care facilities' capacity and capability to prepared for, respond to, and recover from disasters or public health emergencies
- o Structure:
  - Advisory Board Development of educational curriculum and train-the-trainer toolkit
  - Pre-intervention assessment + document review
  - 2 Educational/Learning Sessions
  - On-site TA facilitation/mentoring sessions ( > 200 sessions, ~ 2 hrs.)
  - Citywide TTX (Pandemic Influenza)
  - Post-intervention assessment
- Participation:
  - 44 FQHCs networks (~ 312 individual clinic sites) citywide
  - 30 of the 44 (68%) FQHC networks, enrolled in the program
  - Of the 30 FQHC networks enrolled, 52 individual clinic sites participated (administrators, clinical and non-clinical staff)
  - Of those, 52 clinic sites:
    - 50 sites completed the program
    - 2 sites withdrew –lack of staff/personnel
- o Outcomes:
  - Sites had draft/final CEMP + HVA, EM Train-the-trainer curriculum

## • Emergency Management (EM) Seminar:

- o Annual Emergency Management 1-day Seminar
- EM Seminar Theme: The role of CHCs can play regarding response and recovery during and after emergencies / disasters
- EM Seminar Goal: To increase providers awareness on key emergency management principles and their centers role during emergencies/ disasters
- o The Seminar is growing:
  - 2017 seminar 86 attendees from 21 FQHCs
  - 2018 seminar 89 attendees from 28 FQHCs
  - 2019 seminar 93 attendees from 28 FQHCs
- EM Seminar Speakers:
  - Have included a variety of interesting speakers from other primary care associations, State
    Department of Health, Department of Homeland Security, Greater NY Hospital Association,
    health center staff, other partners Americares, Harvard University and more.
- o EM Seminar Content:
  - Hurricane Harvey response and recovery an FQHC perspective
  - Working with community health centers during emergencies the Massachusetts model
  - Resources for community health centers via National Cooperative Agreement (NCA) holders with Health and Resources Services Administration (HRSA)
  - New York City Health Care Coalition news and updates

- Priority communication programs
- Cybersecurity 101
- Active shooter threats building an effective policy and procedure
- o Participants received: *Active Shooter Annex Development* guidance document and *Running Exercises at Your Health Center* practical sessions.

### Healthcare Coalitions:

- o The Community Health Care Association of New York State (CHCANYS) attended these meeting on behalf of NYC-based Federally Qualified Health Centers (FQHCs A Federally Qualified Health Center is a reimbursement designation from the Bureau of Primary Health Care and the Centers for Medicare and Medicaid Services of the United States Department of Health and Human Services. This designation is significant for several health programs funded under the Health Center Consolidation Act. https://www.hrsa.gov/opa/eligibility-and-registration/health-centers/fqhc/index.html)
- CHCANYS participated in the Coalition Surge Ex Committee and Steering Meetings

## Pediatric Planning with Outpatient Care Sites / Federally Qualified Health Centers

• The New Yok City Pediatric Disaster Coalition created with FQHCs a site-specific pediatric disaster plan (staff, space) – guideline and templates via site visits, and webinars

### • Functional Exercise:

- o Exercise Overview:
  - This exercise was a functional exercise, planned for approximately 4 hours at CHCANYS and 31 participating primary care centers (PCCs) in New York City (NYC). It tested communication and coordination between CHCANYS and 31 participating PCCs, as well as among decision-makers at each participating site during a simulated large-scale emergency when the citywide Emergency Operations Center (including ESF-8) is activated, and CHCANYS' Emergency Operations Plan is activated to support PCCs.
  - Participating sites must have a completed Comprehensive Emergency Management Plan and a recent Hazard Vulnerability Assessment.
  - CEMP and HVA submitted to CHCANYS
  - CHCANYS reviews HVA to determine top 5 risks and identify exercise scenario based on top risk.
- Exercise scenario:
  - Coastal storm
- Exercise Participants:
  - 33 individual primary care sites enrolled, representing 28 unique organizations (27 FQHCs + 1 non-FQHC). NOTE: 2 FQHCs pulled out on the day of the exercise, bringing total participating sites to 31.
- o Exercise Conduct:
  - Exercise included 5 objectives 2 unique to CHCANYS and 3 for participating primary care
  - 2 Communication Drills conducted in concert with the exercise.
- Exercise Outcomes:
  - Strengths (highlights) emergency plans exist; centers are able to complete activation of ICS, without staffing issues with clearly defined ICS roles and responsibilities; participants able to submit requested data to CHCANYS. Internal plans for CHCANYS worked well.
  - Lessons Learned (highlights) challenges with communication technologies, space for ICS, some staff need additional ICS training, lack of redundancies. CHCANYS will be improving communications technology (messaging and data collection), as well as improving protocols.

## Primary Care Preparedness - Looking Forward: 2019 - 2020

## • Participation in New York City Health Care Coalition Activities:

 Participate in NYC Emergency Preparedness Symposium (EPS) and NYCHCC Leadership Council Meetings and provide perspective from primary care (e.g., HVA, Coalition Surge Test);

# Convene FQHC Leadership Advisory Council (LAC) for primary car preparedness

- Recruit a minimum of fifteen (15)executives/senior leadership (e.g., Chief Medical Officer, Senior VP of Quality Management, Chief Operations Officer etc.) from minimum of ten (10) NYCbased FQHC networks to represent the sector (e.g., five (5) NYC boroughs, various sizes, population typ es served)
- FQHC LAC members will participate in four (4) LAC meetings (i.e. 2 in-person meetings, 2 virtual meetings)
- This FQHC LAC will inform primary care emergency management activities (i.e. assessment capabilities, Surge Ex, EM Seminar, Functional Exercise etc.) and assist with defining the roles of NYC-based FQHCs in citywide response plans

### Assess preparedness capabilities of NYC-based FQHC Networks

- o Obtain a baseline of current needs and capabilities across the NYC-based FQHC networks
- Use assessment findings to inform 5-year strategic plan as well as other EM program activities for the primary care sector

### Conduct call-down drills with NYC-based FQHCs

- Using protocols developed previously, plan and conduct two (2) call-down notification drills with NYCbased FQHCs (N=44) including at least one (1) point of contact per FQHC network to increase response rate and improve communications among NYC-based FQHCs
- Test the ability to share information and provide situational awareness to NYC-based FQHCs in a timely manner

## Functional Exercise (FE)

- o Build upon previous exercises' areas for improvement and provide an opportunity for a community-based functional exercise for NYC-based FQHC networks
- o Invite all NYC-based FQHC networks (N=44) to participate in a FE that test their coordination and communication policies and procedures related to a public health emergency or disaster

### 6<sup>th</sup> Annual Emergency Management Seminar

- In collaboration with other partners, as appropriate (e.g., NYC Emergency Management (NYCEM), New York State Department of Health (NYSDOH), Americares, etc.), plan, promote and conduct one (1) fullday annual Emergency Management Seminar for NYC FQHCs.
- Seminar will include emergency management topics in support of developing facility preparedness and response capabilities
- o The date of the EM Seminar is: March 19th, 2020 @ Baruch College
- o EM Seminar Theme: TBD

### • Collaboration with the Pediatric Disaster Coalition (PDC)

- o Review the Outpatient Pediatric Disaster Planning Self-Use Toolkit
- Obtain input from FQHC LAC to optimize the roll out of the Outpatient Pediatric Disaster Planning Self-Use Toolkit to FQHC facilities throughout the city.

**In conclusion:** Thank you for your time. We continue to look for opportunities to partner and collaborate with other Health Care Coalitions, as well as ensure program activities are in alignment with the BIG 5 i.e., assessment, planning, policies / procedures, training + exercises; and communications/situational awareness mentioned earlier and the HPP Capabilities.

### Long Term Care Preparedness - Nursing Homes, Assisted Living and Adult Care Facilities

Summary – Talking Points

For the last 5 years following Sandy we have been working diligently in creating programs to assist the LTC facilities with developing and enhancing their emergency management capabilities. Because of these efforts, I am confident in their abilities to collaborate with other healthcare and community partners. Should you identify an area in which you feel your facility could work together with one of our facilities and or programs, we welcome the opportunity.

We have had many accomplishments over the past year, none of which would have been possible without the support of our NYC NH Associations – Continuing Care Leadership Coalition (CCLC), Greater New York Health Care Facilities Association (GNYHCFA) and Southern New York Association (SNYA), and Incident Management Solutions, who assists in the facilitation of our LTC programs.

The NYC LTC sector includes nursing homes (N= 169), adult care facilities and assisted living facilities (N=78). All our programming delineated below is offered to all facilities and participation is voluntary.

## **Nursing Home Associations**

For the last couple of years, DOHMH has contracted with the 3 NYC Nursing Home Associations to assist in the facilitation of emergency preparedness activities that address the following emergency preparedness topical areas:

- Communications and situational awareness
- NYC Health Care Coalition (NYCHCC) development
- Emergency preparedness education and training
- Citywide NH emergency preparedness planning

To start off the contract activities for FY18-19, the Associations developed, administered, and analyzed a sector survey to assess member and non-member interests, needs on emergency management and emergency preparedness education and training, as aligned with the NYCHCC's related goals and priorities, wherever feasible. This ultimately served as the guide to all activities offered below.

- Webinars Each webinar covered areas of "Mental Health in Emergencies", "Active Shooter", "Supply Chain Disruption" and "Health Risks Associated with Heat Exposure". Topics were chosen following surveys in which facilities identified those areas that were of the most interest and relevant to their day to day operations
- LTC Disaster Preparedness Council Meetings: These meetings serve as a forum to conduct and exchange ideas with community partners from other jurisdictions to learn from experiences and identify best practices. Topics for the meetings included, "Impact of Maria", "Cybersecurity", "Surge Capacity", "Influenza", "Hurricane Harvey", "American Red Cross", "NYC Jurisdictional Risk Assessment", "CMS Rule Implications and Changes", "PSEG processes", "Extreme Heat", etc.
- Annual Emergency Preparedness Conference: The Associations facilitated a full-day conference that
  included the morning session being devoted to a series of speakers providing the background,
  education, and context for a tabletop exercise conducted in the afternoon, which focused on testing the
  ability of nursing homes to respond to a cybersecurity attack within their facility; DHS facilitated the

planning meetings, and TTX and Hot Wash the day of the conference. The attendance at the conference this year was from 88 nursing homes, representing over 150 participants.

- Participation in the Emergency Preparedness Symposia and NYC Health Care Coalition Meetings The
  Associations are responsible for attending on behalf of the LTC sector and reporting back any
  information which they feel is necessary for the enhancement of the facilities emergency preparedness
  capabilities.
- **eFINDS Training** In coordination with the State DOH, the Associations conducted three (3) in person trainings on eFINDS, open to all NYC nursing homes.
- Surge Capacity In coordination with City and State partners, the Associations were asked to support a
  NYCEM-lead effort intended to enhance the capacity to receive evacuees in a coastal storm context. By
  participating in all NYCEM task force meetings (in-person or remotely) and providing feedback on draft
  and final documents of Surge Procedures where possible, a subset of nursing homes was able to identify
  significant capacity to receive.
- Coalition Surge Test 2019 Parallel Exercise -. In this 2019 New York City Nursing Homes SurgeEx Pilot, a select group of ten nursing homes, representing all five boroughs and including both evacuating and receiving facilities, was recruited to act as the set of planners and players in the pilot exercise. These piloting entities comprised 5% of the city's total number. In complement with the hospital branch of the exercise, the pilot tested the participating nursing homes' ability to evacuate facilities located in flood zones one through six, as well as the ability of nursing homes outside the six zones to receive evacuating patients, focusing on operations that are expected to occur prior to requesting assistance from New York State's Healthcare Evacuation Center (HEC). In addition to the expected activities among piloting nursing homes during 2019, several pilot and non-pilot nursing homes also received requests to accept evacuating hospital patients from hospitals, just as they did during the prior year. Nursing homes across the city as well as in nearby counties likewise were contacted by the pilot nursing homes to accept their evacuating patients.
- Participation in all LTC Emergency Management Programming Each of the Associations participated
  in the LTC programming offered to the LTC sector, to include the citywide functional exercise and
  Advisory Board.

#### **Long Term Care Emergency Management Programming**

Starting in 2013, OEPR addressed gaps identified in the NYC and HHS reports by investing funds received from the HHS Office of the Assistant Secretary for Preparedness and Response (ASPR) Hospital Preparedness Program (HPP) cooperative agreement. HPP funds helped build three, seven – nine month training programs to improve the emergency response capabilities of LTC facilities, offered at no cost to the facilities. These programs are facilitated by a contracted consultancy firm, Incident Management Solutions.

• The Long-Term Care Emergency Management Program (LTCEMP) - Though this program is no longer offered in its current state, or depicted in the slide deck, it's important to mention given the staged approach that was followed. It was designed to increase LTC facilities' knowledge of emergency management concepts and accessibility to emergency management tools and resources so they can better respond to all-hazard events. These goals were achieved via in-person educational learning sessions, onsite facilitated coaching sessions, and participation in a tabletop exercise. Since its inception, 80% of the nursing homes in NYC participated in this

program, which assisted in the design and execution of a Comprehensive Emergency Management Plan and Program at each facility.

- The Long-Term Care Exercise Program (LTCExP) helps facility teams design, develop, conduct, and evaluate meaningful exercises that identify the facility's strengths and opportunities for improvement in emergency response under simulated conditions. Following the design of their internal CEMPs, we felt it important to design a program that focused on the testing of those policies and procedures. The program was broken down into three phases and the culmination of the program was a functional exercise.
  - o Scenario: extreme heat weather emergency with a regional power outage
  - Total of 37 facilities participate this year; total of 140 over the past 5 years
  - o Implemented eFINDS and Emergency Radio Communication Program
  - o Each facility had their own internal objectives and reported into a central simcell

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• The Long-Term Care Continuity Planning Program (LTCCPP) was developed to build resiliency and sustainability for LTC facilities in the areas of continuity of care for residents during a disaster, continuity of operations for the facility, and continuity and sustainability of the emergency management program at both the facility level and across the city. These goals are achieved via in-person learning sessions, four monthly onsite mentoring sessions, and shadowing a functional exercise. Like the exercise program, this program was broken down into phases, with the culmination of the program being the design of a COOP plan and testing of a specific area identified by the facility. Each facility had their own scenarios.

## Long Term Care Emergency Management Programs – Looking Forward: BP1 2019 -2020

Looking forward to our current budget period, we are excited to continue collaborating with the healthcare sector in a variety of activities. We will continue to participate in the New York City Health Care Coalition activities; offer webinars; conduct our Annual LTC Emergency Preparedness Conference with Table-Top Exercise (TTX); participate in the 2020 Coalition Surge Test; offer a Redesigned Exercise Program with Functional exercise (FE); and new to this year we will be introducing the LTC and Primary Care - Hazard Specific Training. Based on the past five years of experience with administering these LTC programs and in recognition of reductions in federal funding for preparedness programs, we identified a need to build sustainable programs to support facilities that have already mastered basic emergency management concepts. This more advanced programming will focus on specific hazards that are likely to impact the Long Term and primary care sectors in NYC.

This training will offer a series of in-person workshops that highlight hazards identified by the sub-acute healthcare sector in the NYC DOHMH's Jurisdictional Risk Assessment and facility level After Action Reports. Participants will train on emergency preparedness concepts, review model policies applicable to the topic, and end with a scenario-based facilitated discussion, these sessions will serve as a brief version of a table-top exercise.

Below is the high level overview of our offerings.

- Participate in New York City Health Care Coalition activities
- Emergency preparedness webinars;
- Annual LTC Emergency Preparedness Conference with Table-Top Exercise (TTX);
- Participation in the 2020 Coalition Surge Test;
- Redesigned Exercise Program with Functional exercise (FE);
- Newly designed program offered to LTC and Primary Care Hazard Specific Training