
PROMISING PRACTICES IN STATE SURVEY AGENCIES

Emergency Preparedness Practices

Florida

Summary

The Office of Health Quality Assurance at Florida's Agency for Health Care Administration (AHCA) created the Emergency Status System (ESS) to track the status and needs of health care providers regulated by AHCA, throughout storms and other emergency situations. The ESS, an internally developed software application, promotes communication and collaboration among AHCA staff, multiple partner agencies and organizations, and providers by serving as a central database of information regarding the impact of an emergency event on affected providers, including evacuation efforts and resource needs.

Introduction

This report describes the Emergency Status System created and maintained by the Florida State Survey Agency. The system's design, use, and impact, and lessons learned that might benefit other state survey agencies are discussed. The information presented is based on interviews with AHCA management staff and review of selected materials describing the system.

Background

The ESS was first established in 2004, for internal use by AHCA staff members, in response to the multiple storms that hit Florida that year. AHCA management and IT staff collaborated to develop the ESS to streamline the previously more fragmented approach to recording emergency event information, which relied on reference to staff members' notes, Excel spreadsheets, and e-mail correspondence.

AHCA staff collaborate with the Florida Department of Health, the approximately 20 local Emergency Operations Centers (EOCs) located across the state, other state agencies, provider association affiliates, and providers to assist providers when needed during hurricanes and other emergency situations. To facilitate coordination with these partnering entities, AHCA expanded the ESS to a Web application in 2005, which allows multiple users to enter and

access comprehensive and up-to-date emergency information.

Intervention

The ESS includes data on hospitals, nursing homes, assisted living facilities, in-patient hospice, end stage renal disease centers, intermediate care facilities for developmentally disabled, and other residential or 24-hour care providers regulated by AHCA. Basic information for every licensed facility in the state is contained in the ESS, including name, address, phone number, administrator name, county, number of licensed beds, and other information. To ensure consistency and reduce duplicative data entry, AHCA staff upload facility information nightly from an AHCA licensure database.

Additional information recorded in the ESS is organized around events, most frequently hurricanes or other storms. When an event is open, users can enter information on facility evacuation status and destination; special resident characteristics; facility census; available beds; impact type and severity (e.g., leaks or other structural damage, impassable roads, generator or utilities problems); need for equipment, staff, or supplies; and status of needs requests. Requests for assistance also must be communicated directly to the local EOC. All ESS entries are based on contacts with specific provider facility

staff members, and contact history is recorded in the database. After an event is closed, only selected data are carried forward, with remaining information archived.

The inclusion of special needs information in the ESS facilitates collaboration between AHCA and the Department of Health, the entity responsible for overseeing the special needs shelters located across the state. The ESS indicates the number of residents with each need (e.g., requiring a ventilator, oxygen, or dialysis) at a particular facility, providing vital information to help coordinate evacuation of special needs residents to other provider locations, as necessary. Resident names are not listed to ensure the confidentiality of health information, particularly given the multi-user access to the system.

ESS users can generate reports on facility status related to most of the information stored in the system. Reports thus can be run to provide the most relevant information to particular entities involved in mobilizing resources to address specific provider needs.

State agencies with ESS accounts include the Department of Health, the State Attorney General's Office, and the State Ombudsman, all of which send staff to visit facilities immediately after a storm has hit. State and local EOC staff also have ESS access, to facilitate resource allocation in response to provider needs. Other ESS users include provider associations, providers, and provider affiliates. Provider affiliate accounts were established in anticipation of possible power outages during an emergency. Affiliates are entities typically located in a different region or outside of the state (e.g., a corporate affiliate) that are authorized by providers to enter information about the provider. User types have varying levels of permission and access to the database, in terms of entering, viewing or generating reports on particular information.

Enrollment in the ESS is voluntary, although recent state legislation requires licensed long-term care facilities to report assistance requests to AHCA. Providers are invited to enroll in the ESS at no cost, to facilitate communication

updates, reduce the volume of redundant phone calls, and help coordinate identification of needs and delivery of assistance. Voluntary participation in the ESS has been strong and it is anticipated that ESS enrollment will further increase when storms occur. As of September 2007, approximately 93 percent of the 673 skilled nursing facilities in the state had enrolled in the ESS, 98 percent of hospitals, and about 42 percent of assisted living facilities.

Implementation

AHCA staff developed the original ESS as an Access database in 2004 and soon replaced it with an Oracle database (.NET application) that allowed multiple AHCA field office as well as EOC staff to access information. The ESS was expanded in 2005 to a Web application that allows individuals outside of AHCA's network to enter and retrieve information.

The ESS was developed and modified in six-to-eight month increments, as time permitted between hurricane seasons. The IT team dedicated to ESS development consisted of a developer, a project manager, and four other IT staff. In addition to the IT team, end users such as management staff played a critical role in testing and enhancing the feasibility, ease of access and use, and speed of the system. AHCA regulatory and IT staff are available beyond standard business hours when in the highest level of activation for a storm or other emergency to ensure continued ESS operability.

Impact

AHCA management staff indicate that access to ESS reports has been essential in helping disseminate information to entities that work to meet provider needs. During the severe 2004 hurricane season, for example, data from ESS reports were communicated to the state National Guard and federal Homeland Security offices to help mobilize resources to the areas most in need. The report function also is critical in allowing expeditious and accurate reporting by AHCA to the multiple parties requesting updates during a storm, including Florida's Governor, CMS, and the press.

Although the Web-based, multi-user version of the ESS has yet to be used during a major storm, AHCA management staff report that the system has been extremely useful during the minor storms experienced since its implementation. Many providers used the ESS to report information, which significantly reduced the number of telephone calls for AHCA staff and promoted expeditious information dissemination and coordination among entities. The high level of enrollment in the ESS is expected to substantially reduce the need for AHCA staff to contact providers by phone and should reduce duplicative phone calls to providers from the various state agencies and other entities that are able to access provider status information via the ESS.

Lessons Learned

AHCA management staff emphasize the value of establishing a stable information system that is designed for concurrent use by multiple users. Management staff have found that uploading provider data from their licensure database ensures that information is up-to-date, reduces duplicative effort, and minimizes the opportunity for inconsistencies and errors. Using automated fields with dropdown boxes presenting standard options, rather than blank entry fields, is recommended to promote the use of consistent terminology, streamline data management, and enhance efficient report generation. It is important to consider confidentiality issues, particularly in a database with multiple end users, although it can be tempting to track individual residents by name.

Using internal IT staff to develop and maintain the system allows expeditious implementation of system refinements on an ongoing basis. To save time and resources, it also is useful to allow authorized managers to implement straight-forward modifications to the database structure (e.g., adding a new response option for storm impact), rather than relying on IT staff for all changes. It is critical to have IT support staff available to troubleshoot with the database at all times throughout a crisis.

Each state must consider the type of system and supporting processes and procedures that will fit with their operations and approach. When designing such a system, it is helpful to first identify the type of information to track during emergency situations, both in general and for situations typical to a particular state, and to determine the specific types of reports that will be useful. Management staff attribute much of the system's success to strong partnerships with providers and other agencies in collecting information.

Contact Information and Resources

For more information, please contact Molly McKinstry, Bureau Chief of Long Term Care Services, at mckinstm@ahca.myflorida.com or 850/414-9707. Additional information on the ESS also can be found at http://ahca.myflorida.com/MCHQ/Emergency_Activities/index.shtml.

This document is part of an issue brief on emergency preparedness practices in State Survey Agencies and long-term care provider associations. The issue brief is one of a series by the Division of Health Care Policy and Research, University of Colorado Health Sciences Center, for the U.S. Centers for Medicare & Medicaid Services (CMS) highlighting promising practices in State Survey Agencies. The entire series is available online at CMS' Web site, <http://www.cms.hhs.gov/SurvCertPromPractProj/>. The issue briefs are intended to share information about practices used in State Survey Agencies and other organizations and are not an endorsement of any practice.