

# Emergency Preparedness and Primary Care Medical Practices

## Session 1 – Primary Care Roles in Public Health Emergencies

*Esther Chernak, MD, MPH*  
*Center for Public Health Readiness  
and Communication*  
*Drexel University School of Public Health*



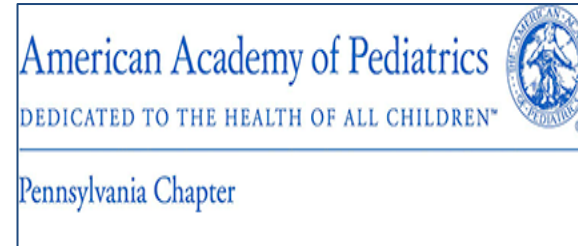
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- Planners/faculty have no relevant relationships to disclose.



# Primary Care Partners



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# Overview of Series – Systems Approach to Community Medical Practices and Emergency Preparedness

## 6 Mini Webinars

- Primary care physicians and preparedness
- Hazard and risk assessment
- Emergency planning for practices
- Evaluating the plan
- Communication with patients and partners
- Preparing patients with special health care needs for disasters



# Roles for Primary Care Physicians in Public Health Emergencies

- Medical care in ambulatory settings
  - In usual office setting
  - Offset burden on hospital emergency department



# Roles for Primary Care Practices in Public Health Emergencies

- “Medical countermeasures”
  - Administration from office
  - Manage drug interactions, adverse events
  - Follow-up and monitoring
  - Outcome assessment
  - Reinforce public health plans and activities
    - Points of dispensing



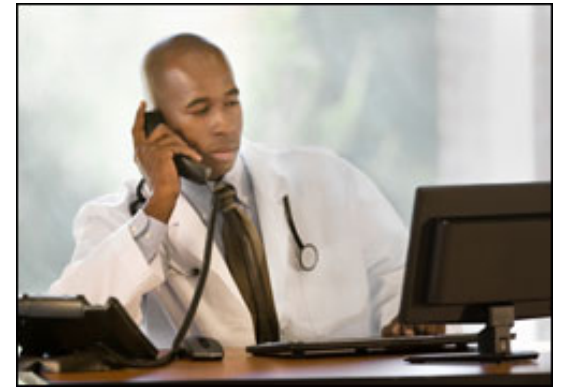
# Roles for Primary Care Practices in Public Health Emergencies

- Other primary care activities
  - Longitudinal follow-up after exposures, injuries
  - Disease recognition, reporting (surveillance)
  - Mental health



# Risk Communication

- Family physician is trusted expert
- People want health information from health professional who knows them during a public health emergency
  - Redefining Readiness Study





# Primary Care Physicians and Patients with Special Healthcare Needs

- Patients with special healthcare needs likely to have PCP (or specialist)
  - More likely than social service agency affiliation
  - More likely to plan if physician encourages (Redlener 2007, Olympia 2010)
- Opportunity for pre-event preparedness planning and education




# Survey of Primary Care Practices in Pennsylvania

- 37% have Continuity of Operations (COOP) plan
  - 39% have tested plan in real event or exercise
  - 54% no generator
- 26% have surge plan
- 39% receive Health Alerts
- 64% believe their patients with special needs not adequately prepared



# Practice “business continuity” planning

#	Answer	Bar	Response	%
1	The staff has been trained to use the COOP.		27	47.37%
2	The COOP has been tested (either in an exercise or real event).		22	38.60%
3	It contains a plan to communicate with staff regarding building closure or other issues affecting work schedules.		50	87.72%
4	It contains a plan to ensure vaccine storage if electricity fails.		41	71.93%
5	It contains a plan to see patients in a disaster where electricity is compromised.		33	57.89%
6	It contains a plan to ensure access and integrity of health records.		38	66.67%
7	None of these		2	3.51%



# Does your practice have the capacity to communicate with patients during a disaster?

#	Answer	Bar	Response	%
1	Yes		69	42.33%
2	No		73	44.79%
3	Not yet, but we're working on it		21	12.88%
	Total		163	100.00%



# What prevents your patients with special health care needs from preparing for disasters?

#	Answer	Bar	Response	%
1	Not Applicable		12	8.33%
2	Their financial resources are limited.		101	70.14%
3	They have limited access to information regarding what is needed to prepare.		85	59.03%
4	Language barriers impede their understanding of disaster preparedness materials.		42	29.17%
5	They lack information regarding what community or other resources are available to help them during and after disasters.		104	72.22%
6	Other, please specify:		10	6.94%



# What are practice barriers to helping patients with special health care needs?

#	Answer	Bar	Response	%
1	Insufficient time during typical patient encounter		88	75.21%
2	Insufficient resources (e.g. patient education materials) that assist patients with preparing for disasters		93	79.49%
3	Not enough information regarding government plans or programs for patients with special healthcare needs in my community, such as availability of special needs shelters, programs like enhanced 9-1-1, or special needs registries		100	85.47%
4	Not enough information about community social services that are available for patients		86	73.50%
5	Patients have limited access to specific resources such as additional supplies, generators		83	70.94%
6	Insurance company constraints regarding supplies, access to additional medication, etc.		76	64.96%
7	Other, please specify:		2	1.71%

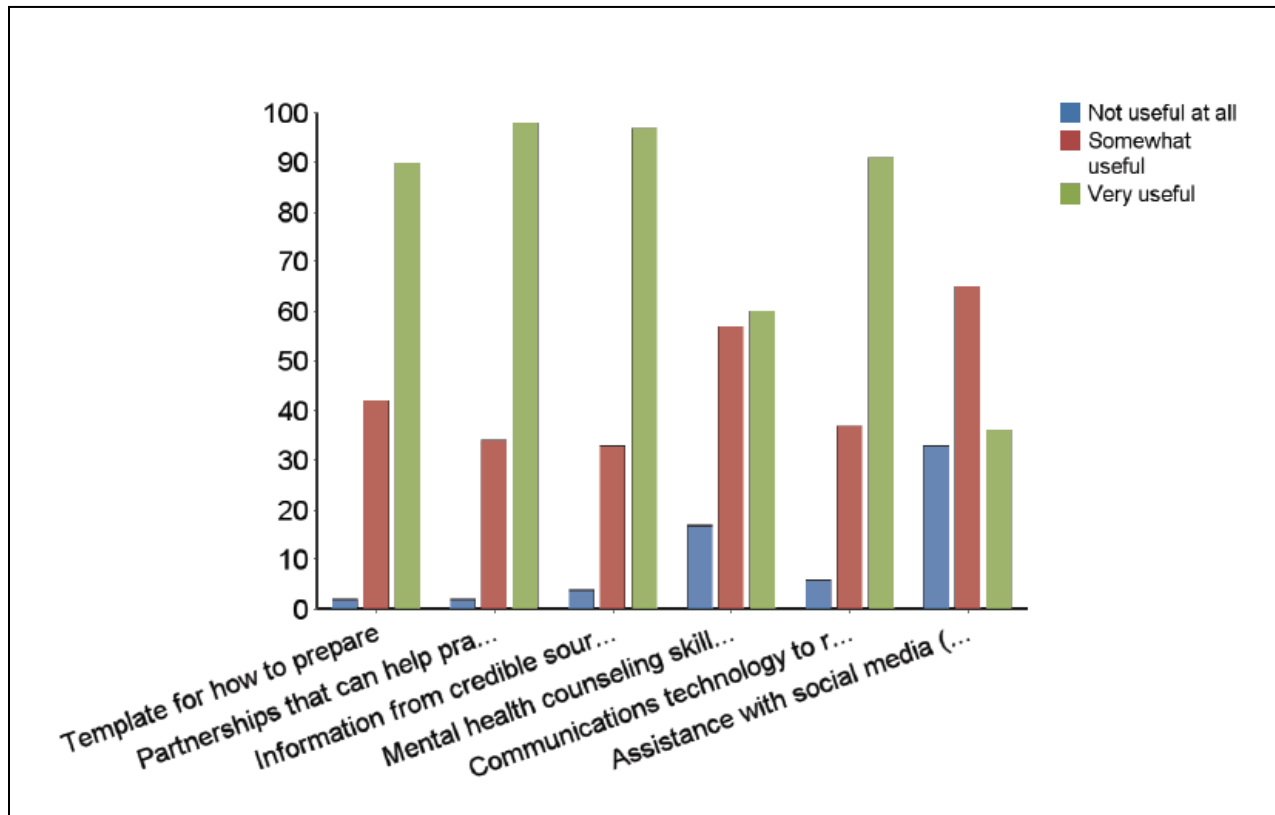


# What do practices need to prepare for emergencies?

#	Question	Not useful at all	Somewhat useful	Very useful	Response	Average Value
1	Template for how to prepare	2	42	90	134	2.66
2	Partnerships that can help practice (e.g., hospital, pharmacy, or other healthcare entities that can provide space for patient care, vaccine storage, etc.)	2	34	98	134	2.72
3	Information from credible sources that is current and relevant (situational awareness)	4	33	97	134	2.69
4	Mental health counseling skills	17	57	60	134	2.32
5	Communications technology to reach multiple patients quickly (e.g., email, text messaging system, etc.)	6	37	91	134	2.63
6	Assistance with social media (e.g., Twitter, Facebook, etc.)	33	65	36	134	2.02



# What would be helpful for practices?





# Emergency Plan Template for Practices

## EMERGENCY MANAGEMENT PLAN

For Primary Care Medical Practices

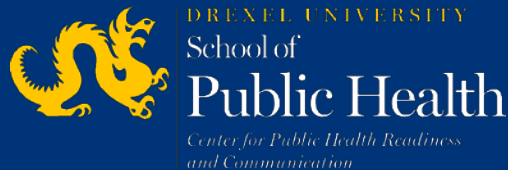
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# Special Healthcare Needs Guidance

**RESOURCES FOR PATIENTS  
WITH SPECIAL HEALTH CARE NEEDS**  
For Primary Care Medical Practices



pennsylvania  
DEPARTMENT OF HEALTH



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## CHECKLIST FOR PRACTICES

### Emergency Preparedness for Patients with Special Health Care Needs

#### PRIORITIZE PATIENTS FOR PLANNING AND COMMUNICATION RELATED TO PREPAREDNESS

- Identify patients with special health care needs for inclusion in panel or registry:
  - Patients who require support for respiratory issues (i.e., oxygen, ventilators, CPAP).
  - Patients who require nutritional support (i.e., gastrostomy, NG, SJ tubes).
  - Patients with access and mobility challenges or who are dependent on assistive technology due to physical disability.
  - Patients with immune suppression.
  - Patients with chronic diseases who have medication requirements (i.e., asthma and COPD, diabetes, end-stage renal disease, HIV infection).
- Plan for targeted communications and outreach to select groups via email/text messaging/patient portal, telephone (collect contact information if necessary) before and during emergencies.
- Create care plans or medical summaries for patients with the following information:
  - Diagnoses.
  - Medications.
  - Relevant past medical history.
  - Allergies.
  - Durable medical equipment requirements.
  - Insurance information, case manager, care coordinator, other service providers.

#### REVIEW KEY ELEMENTS OF PREPAREDNESS WITH HIGH-RISK PATIENTS (ANNUALLY)

##### Communications

- Register with local emergency response and utility companies, including:
  - Special needs registries – planning tool and response prioritization for local government.
  - Enhanced 911 services – information for use by first responders.
  - Utility company priority lists.
  - Emergency notification and early warning systems.
- Maintain an updated emergency contact list (caregivers, family and friends) and a list of people to contact who can help before and during emergencies.
- Plan for how to communicate with emergency personnel if communication aids are needed.

##### Planning

- Have a plan for evacuation and shelter-in-place, including:
  - Alternate living arrangements or locations of shelters for special needs.
  - Plan to bring medications, oxygen, DME, caregiver, service animal.
- Plan for fire safety: smoke alarms, escape routes from each room with accommodations for wheelchairs if necessary; inclusion of caregivers, schools, and workplaces in plans.
- Plan for electricity outage: generator, car battery, 12-volt inverter for automobiles.

##### Medication and Supply Needs

- Have a minimum one week supply of medications, medical supplies, food and water, pet food.
- Plan with DME companies for equipment failure, back-up supplies, loaner equipment.
- Prepare a “go-kit”: contact lists, medicines and supplies, insurance cards, medical information summary.

# ARE YOU READY FOR EMERGENCIES?

## Checklist for People with Special Health Care Needs

### BE PREPARED

- Keep a paper summary of your medical care plan. Include: current medical problems, medicines, past medical problems, allergies, medical equipment needs, insurance information, pharmacy information.
- Be able to stay home (shelter-in-place) for up to five to seven days if necessary.
  - Have enough food, water, medicines and medical supplies for at least one week.
- Make a "go-kit" of basic and medical supplies to bring with you if you need to leave your home during a disaster:
  - Take your medicines (bring a cold pack if they need to be refrigerated).
  - Have a copy of your medical care plan and important papers.
  - Take any medical equipment: wheelchair (have a lightweight manual chair available if you use a motorized wheelchair); extra batteries for your wheelchair, hearing aid or other devices; oxygen and extra tanks; cans of tube feedings; needles and syringes.
  - Have bottled water, food, battery-operated radio, flashlight, first-aid kit, garbage bags, extra child supplies (diapers, formula) and cash.
  - Make sure everything is labeled with your name and contact information.
  - Plan to bring your service animal with you; bring pet food and supplies.
- Plan for a power failure. Have extra batteries for equipment or a generator.
- Make a fire safety plan for home, work and school:
  - Have smoke alarms on every floor – with flashing lights indoors and outdoors.
  - Plan your escape – have two exits from each room; doorways and ramps for a wheelchair.

### BE IN TOUCH

- Create a support system of caregivers, family and friends who will help you in a disaster.

- Make sure they understand your medical needs. Contact them before and during emergencies to see who may be available if you need them.
- Make a contact list of family, friends and caregivers who can help you in emergencies and who others can call if something happens to you.
  - If you have a cell phone, put an ICE ("In Case of Emergency") contact in your contact list.
  - Contact your local emergency management agency to see what's available for you in your community.
  - Sign up for utility (power) company priority lists, enhanced 911 services and "special needs registries." Let them know about your special needs. *<Practice: Insert specific details/link to services/registries in your area. Your local Office of Emergency Management can help with this information.>*
  - Sign up for emergency management updates and early warnings.
  - Have a corded landline telephone that doesn't use electricity that you can use if you lose power. A cell phone can be used but will need to be recharged.

### IF YOU DEPEND ON ASSISTIVE TECHNOLOGY (AT)

- Keep back-up batteries (including a charger you can use in your car) at home. Test back-ups regularly and charge batteries.
- Ask your equipment supplier about replacement equipment and back-up power sources that can last for up to one week.
- Show your personal support network how to use and move your equipment.
- Label equipment, attach laminated instructions and photographs of you using AT.
- Register your AT with the company that makes it and record all AT serial numbers.
- If you use a generator, test monthly. Only use it outdoors, far from windows. Safely store back-up gas in case you run out. Get a kit that will help you get gas from your car if you need it.

ARE YOU READY FOR EMERGENCIES?

1

### IF YOU HAVE COMMUNICATION DIFFICULTIES

- Figure out how you will communicate with emergency personnel if you don't have your communication devices.
- Keep writing materials with you, or carry printed copies of key information for first responders, such as "I speak American Sign Language."
- Make sure emergency health information includes the best way to communicate with you.
- If you use a hearing aid or implant, keep extra batteries on hand. Maintain extra batteries for your Text Telephone and light phone signaler. Store your hearing aid in the same place so you can find it easily, and keep it in a water-proof container.

### IF YOU HAVE MOBILITY DIFFICULTIES

- If you use a motorized wheelchair, keep a manual chair as backup. If you live in a high-rise building, consider keeping one on the ground floor in case you are evacuated without the power wheelchair.
- Store emergency supplies in a pack attached to your walker, wheelchair or scooter.
- Make plans for evacuation at home, work or school, especially if you spend time above the ground floor of a building. Practice them.
- If you have visual impairment and use a cane, keep extra canes in the same location at your job, home, school, etc., to assist you. Keep an extra cane in your emergency kit.
- Make sure the furniture in your home or office does not block your exit.

### IF YOU RELY ON RESPIRATORY SUPPORT DEVICES OR OXYGEN

- Make sure you have plan for a back-up power source and test back-ups often.
- Plan to bring extra oxygen supplies to a shelter or other location if you need to evacuate.

### IF YOU HAVE INTELLECTUAL DISABILITIES

- Keep a written emergency plan with you and in several locations. Make sure the plan is easy to read.

ARE YOU READY FOR EMERGENCIES?

2

- Practice what to do during a disaster, including leaving places where you spend time, until you are sure you know what to do and where to go.
- Think through what a rescuer would need to know about you. Practice saying it or keep a written copy that says something like: "I cannot read" or "I may have difficulty understanding you. Please speak slowly and use simple language."

### IF YOU HAVE MENTAL HEALTH NEEDS

- Make sure your local emergency management team and neighbors know that you have mental health care needs and what they are.
- Make a personal support network of at least three family members, friends or neighbors who will check on you in an emergency.
- Consider signing up for electronic payments of federal benefits, like Social Security, because disasters can interrupt mail delivery.

### GET MORE INFORMATION FROM THESE AGENCIES

- Pennsylvania Emergency Management (PEMA): [Readyva.org](http://www.readyva.org)
- Pennsylvania Department of Health: [http://www.portal.health.state.pa.us/portal/serve\\_rpt/community/public\\_health\\_preparedness/11605](http://www.portal.health.state.pa.us/portal/serve_rpt/community/public_health_preparedness/11605)
- FEMA: Individuals with Disabilities or Access and Functional needs: <http://www.ready.gov/individuals-access-functional-needs>
- American Red Cross: <http://www.redcross.org/prepare/location/home-family/disabilities>
- Special needs registries in Pennsylvania: [www.specialneedspa.org](http://www.specialneedspa.org)
- Speak Unlimited: [www.papremisealert.com](http://www.papremisealert.com)
- Temple University Institute on Disabilities: <http://disabilities.temple.edu/programs/eprep/>
- Disability Preparedness Resource Guide: [www.disabilitypreparedness.gov](http://www.disabilitypreparedness.gov)
- Inclusive Preparedness Center: <http://www.inclusivepreparedness.org/DisasterReadiness.html>
- US Society for Augmentative and Alternative Communication: <http://www.ussaac.org/emergency-preparedness.cfm>



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# Toolkit for Risk Communication

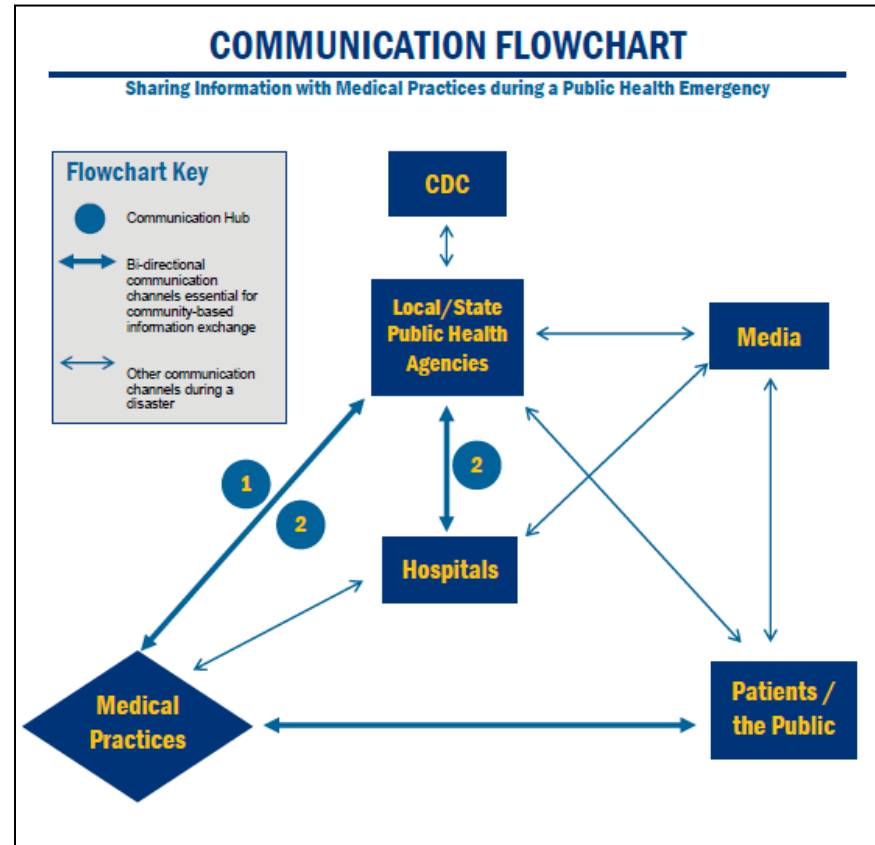
**COMMUNICATING WITH PATIENTS  
DURING PUBLIC HEALTH EMERGENCIES**

Toolkit for Primary Care Medical Practices

Pennsylvania Department of Health  
Center for Public Health Readiness & Communication,  
Drexel University School of Public Health  
June 2014



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# Communication Templates

- Voice mail
- Website
- Text messaging
- Social media

## INITIAL REPORTS:

### Twitter post:

"Possible #pandemicflu in US. Follow @CDCflu for info. No cases here yet."

### Facebook post:

"CDC reports possible pandemic flu cases. Health department says none in our community, but we will continue to monitor the situation and keep you updated."

## LOCAL OUTBREAK:

### Twitter post:

"Maybe #flu? Call our office before going to ED. Special nurse line to answer your questions."

### Facebook post:

"We've expanded our telephone capacity to answer your questions about pandemic flu. Call us before heading to the Emergency Department."

### Twitter/Facebook post:

"Fever, body aches and runny nose are typical symptoms of the flu, but not vomiting and diarrhea."

### Twitter/Facebook post:

"Aspirin is bad for kids with flu! Use acetaminophen or ibuprofen instead."

### Twitter/Facebook post:

"If your kid is sent home from school, stay home; don't go to visit friends or the mall."

## FLU VACCINE:

### Twitter post:

"We have #flushots! Will be giving this Saturday 11a-3p. Parent/guardian must be present."

### Facebook post:

"Health department reports 3 children have died in Pennsylvania from pandemic flu. Protect yourself and your kids by getting the vaccine."



# Challenges and Opportunities

- Resources and commitment
- Technology – Electronic Health Records and communications platforms



**Meaningful Use Stage 2 Requires Health Information Exchange**

60% of the objectives focus on interoperability within a health neighborhood.

Eligible Professionals	Eligible Hospitals
<ul style="list-style-type: none"><li>• Exchanging with others<ul style="list-style-type: none"><li>• Lab results &gt; 50% exchanged</li><li>• Summary of Care exchanged &gt; 65%</li><li>• Office visit summaries within 24 hours</li></ul></li><li>• Transmit Public Health data<ul style="list-style-type: none"><li>• Immunization</li><li>• Reportable Labs</li><li>• Syndromic surveillance</li></ul></li><li>• Exchanging with patients<ul style="list-style-type: none"><li>• Reminders &gt; 10%</li><li>• Online access &gt; 50%</li><li>• Secure messaging from patients &gt; 10%</li></ul></li></ul>	<ul style="list-style-type: none"><li>• Exchanging with others<ul style="list-style-type: none"><li>• Lab results &gt; 55%</li><li>• Summary of Care exchanged &gt; 65%</li><li>• Transmit Public Health data<ul style="list-style-type: none"><li>• Immunization</li><li>• Reportable Labs</li><li>• Syndromic surveillance</li></ul></li><li>• Publishing quality reports</li></ul></li><li>• Exchanging with Patients<ul style="list-style-type: none"><li>• Online access &gt; 50%</li></ul></li></ul>



# Next Steps

- Next sessions to address elements of preparing, planning for practices
- Communication with patients
- Preparing patients at high-risk

# Next Steps

- Materials on PA Medical Society and Drexel CPHRC websites:
  - <http://www.pamedsoc.org/MainMenuCategories/Practice-Management/Management/Emergency-Preparedness>
  - <http://publichealth.drexel.edu/research/research-centers/center-for-public-health-readiness-communication/our-projects/pcp-resources/>
- Technical assistance





# Continuing Medical Education Credit

- If you have registered for the live webinar, you will receive an email with a link to obtain CME and complete an evaluation.
- If you are viewing the archive of the webinar, please follow the instructions on the webpage where the training information is located to obtain CME.



# QUESTIONS?



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# Contact information

Tom Hipper: [tjh87@drexel.edu](mailto:tjh87@drexel.edu)

Jill Nash: [jn536@drexel.edu](mailto:jn536@drexel.edu)

Esther Chernak: [dec48@drexel.edu](mailto:dec48@drexel.edu)



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