

**Disaster Communications Assessment
at
New York-Presbyterian Healthcare**

***Presentation to Greater New York Hospital
Association***

By

Lynn H. Vogel, Ph.D.

Vice President, Information Services

New York Presbyterian Healthcare, Inc.

and

Paul Kirvan, FBCI, CISSP

Fortune Consulting

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Why We Initiated the Project

- **NYP survived 9/11 attacks but still suffered losses;**
- **Although communications generally worked well, we experienced problems;**
- **We want to be able to respond in *any* kind of emergency, including . . .**



What Was the Formal Outcome?

- **Initial Assessment Report**
- **Infrastructure Inventory and Summary of Gap Analysis**
- **Listing of Emergency Communications Preparedness Alternatives**

Project Approach

- **Define goals, scope, process, deliverables**
- **Interview subject matter experts**
 - ◆ *Hospital Operations*
 - ◆ *Clinical Operations*
 - ◆ *Emergency Medical Services*
 - ◆ *Nursing*
 - ◆ *Facilities*
 - ◆ *Security*
 - ◆ *Academic Computing Relationships*
 - ◆ *Telecommunications*
 - ◆ *IT Infrastructure*
 - ◆ *IT Core Resources*
 - ◆ *NYP Healthcare System*

Project Objectives

- **Understand and document current communications operations, emergency operations, procedures and processes, including**
 - ◆ ***Voice / Data Communications***
 - ◆ ***Wireless Infrastructure***
 - ◆ ***Emergency Communications Technologies (wired and wireless)***

Project Focus

- **Identify risks and vulnerabilities, technology interdependencies**
 - ◆ *Single points of failure*
 - ◆ *Network diversity / resilience*
 - ◆ *Network security*
 - ◆ *Wireline vs. wireless technologies*
 - ◆ *Voice vs. data communications technologies*
 - ◆ *Cross-linkages across technologies*
 - ◆ *Existing vs. next-generation technologies*
 - ◆ *Staffing issues*
 - ◆ *Procedure documentation*
 - ◆ *Emergency plan documentation*
 - ◆ *Emergency communications system testing*

Project Extensions

- **Identify potential disaster scenarios that impact communications infrastructure**
- **Identify and quantify potential impacts to the institution**
- **Define desired method(s) of operation, as applicable to emergency communications**

Identify Gaps and Solutions

- **Identify gaps between current and desired methods of operation**
- **Identify gaps in current communications environment**
- **Identify potential solutions to achieve desired methods of operation**

Focus on Primary Locations

- **Initial Assessment**
 - ◆ *New York Weill Cornell Campus - 68th/York*
 - ◆ *Columbia Presbyterian Campus - 168th/Ft. Washington*
 - ◆ *The Allen Pavilion - 220th/Broadway*
 - ◆ *Other Offices - 38th/First Avenue*
- **Subsequent Assessments**
 - ◆ *Facilities in Westchester*
 - ◆ *Facilities in Queens and Brooklyn*

Major Issues Addressed

- ◆ *Network diversity / resilience / security*
- ◆ *Wireline vs. wireless technologies*
- ◆ *Single points of failure*
- ◆ *Voice vs. data technologies*
- ◆ *Voice and data cross-linkages*
- ◆ *Emergency plan documentation*
- ◆ *System testing*

Systems and Services Reviewed

- ◆ *Local access (dial tone)*
- ◆ *SONET fiber ring technology*
- ◆ *Long distance service*
- ◆ *Digital PBX systems*
- ◆ *Radio paging*
- ◆ *Cellular service*
- ◆ *Two-way radios*
- ◆ *Campus intranet / WAN*
- ◆ *Red phones*
- ◆ *Microwave*

Risks We Face

- **Loss of electrical power**
- **Loss of access to local central office**
- **Loss of radio base stations, transmitters, antennas**
- **Loss of radio paging terminals, antennas, connections to carriers**
- **Loss of cell sites/switches**
- **Loss of Internet service provider (ISP)**
- **Loss of PBX at any particular site**
- **Voice/data traffic congestion**
- **Security breaches; virus infestations**



General Scenarios Projected for Review

- ◆ *Fires, floods, blackouts, vandalism*
- ◆ *Loss of access to local central office*
- ◆ *Loss of connectivity across carrier networks*
- ◆ *Loss of radio base stations, transmitters, antennas*
- ◆ *Loss of radio paging terminals, antennas, links to carriers*
- ◆ *Loss of cell sites/switches*

Specific Scenarios Considered

- ◆ *Loss of Internet service provider (ISP)*
- ◆ *Loss of data network infrastructure*
- ◆ *Loss of PBX at any particular site*
- ◆ *Loss of Red Phone service*
- ◆ *Loss of microwave service*
- ◆ *Voice/data traffic congestion*

Focused Scenarios

- ◆ *Security breaches; virus infestations*
- ◆ *Cable cuts, both internal and external*
- ◆ *Loss of call center and physicians answering service*
- ◆ *Denial of access to NYP buildings due to emergencies*
- ◆ *Inability of staff to reach NYP due to severe weather*



What We Assessed

- Identified over 50 Service Types/Locations
- Examples of Service Types
 - ◆ Local DT
 - ◆ Long distance service
 - ◆ Radio Paging
 - ◆ Cellular Service
 - ◆ Two-way Radios
 - ◆ Campus Intranet over Wide Area Network (WAN)
 - ◆ “Red Phones”
 - ◆ Microwave



Assessment Example

- **Location** - NYWC
- **Service Type** - OC-3 SONET
- **Department Owner** - Telecommunications
- **Service Description** - Verizon Service; connects to 168th and 38th
- **Quantity** - 155MB fiber ring
- **Risks Identified** - Catastrophic loss of Verizon office, multiple offices; major fiber optic cable damage; existing capacity insufficient for needs
- **Desired Configuration** - Multiple SONET rings with CO diversity, access to alternate sources of DT; wireless SONET access; sufficient bandwidth
- **Results of Gap Analysis** - Add'l SONET access desirable; non-wireline access desirable; upgrade to OC-12; connect to alternate DT sources

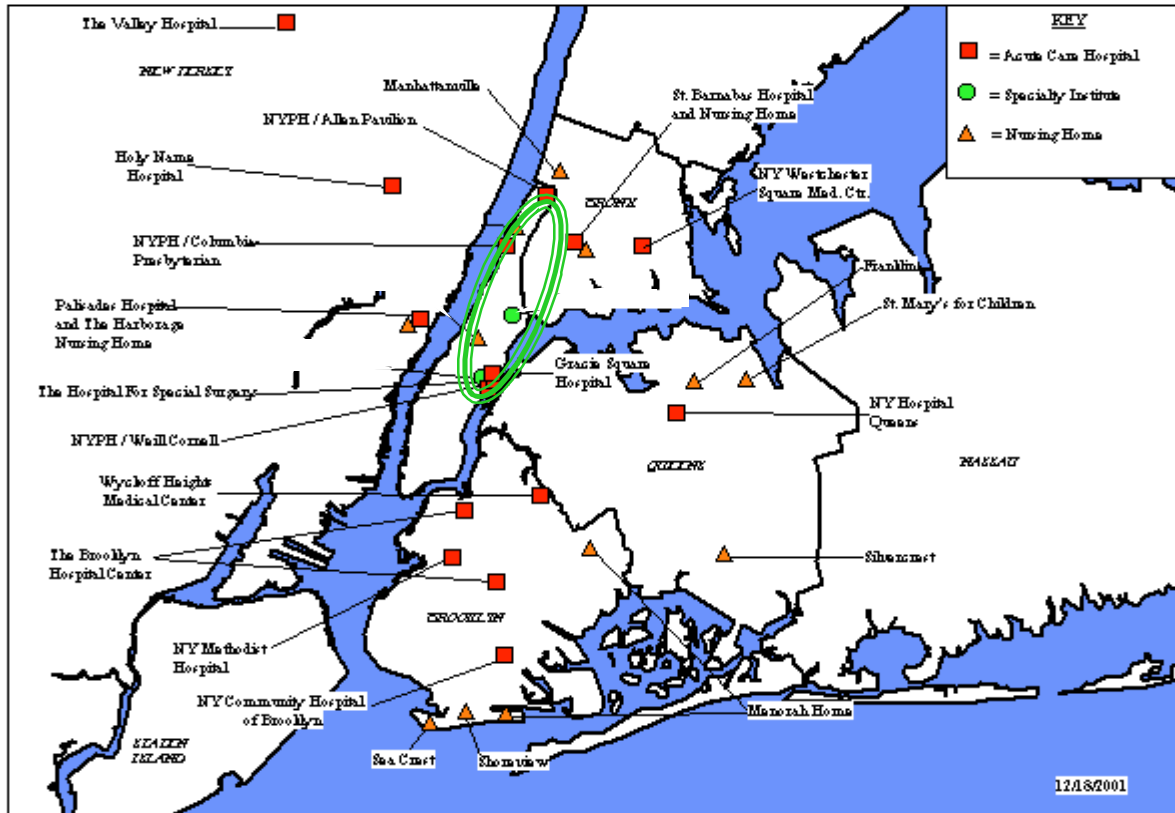
Another Assessment Example

- **Location** - CPMC
- **Service Type** – Red Phones (Centrex)
- **Department Owner** - Telecommunications
- **Service Description** – Verizon-Provided Service from single Central Office
- **Quantity** – 200 stations
- **Risks Identified** - Catastrophic loss of Verizon switching office; damage to MDF which is in same room as main PBX
- **Desired Configuration** – Service from different COs; MDF in location different from PBX; overlap critical extensions to WCMC campus; consider VoIP alternative
- **Results of Gap Analysis** – Re-terminate MDF in secure area; diversify to multiple CO's; begin pilot of VoIP alternative

What Did We Learn?

- **Voice and Data Communications**
 - ◆ *Two large SL-100 PBX systems need to be linked; both located in single rooms with power supplies, equipment*
 - ◆ *Already have highly resilient local access network with linkages to multiple Verizon offices*
 - ◆ *Already have high-bandwidth SONET fiber network linking major campuses, may need to be increased in capacity for added bandwidth, resilience*
 - ◆ *Emergency Red Phones currently back up main phone service; but no diverse routing and service located in same area as main phone service*
 - ◆ *Need to explore “dark fiber” alternatives*

Current SONET Network Infrastructure



Additional Lessons Learned

- ◆ *Heavy dependence on radio paging (in-house and long-range); different technology platforms; need to be fully integrated; some paging antennas located in same room*
- ◆ *Heavy use of two-way radios (approx. 400 in use); used by staff, also mounted in vehicles; need to review use of existing frequencies, need for common frequencies*

Additional Lessons Learned

- ◆ *Cellular service by Verizon and AT&T mostly good, but has capacity constraints; limited service available from Nextel; in-house cellular antenna advisable*
- ◆ *Overhead paging speakers located mostly in patient areas; not all buildings have speakers, limited coverage areas*

More Lessons Learned . . .

- **Voice and Data Communications**
 - ◆ *Audio and video conference facilities available; not currently part of emergency procedures*
 - ◆ *Heavy patient phone usage post-9/11 suggests need for revised PBX facilities*
 - ◆ *Need capability to dynamically reconfigure processing of outgoing calls to alternate local access*
 - ◆ *Need process for after-hours activation and operation of command center*
 - ◆ *Need for access to additional cable TV channels in command center*

And More Lessons . . .

- **Voice and Data Communications**
 - ◆ *Need for resources and action plan for communicating with other local and regional hospitals (especially NYP)*
 - ◆ *Need process to back up and recover call center and physicians answering service; add interactive voice response (IVR) system to facilitate emergency communications*
 - ◆ *Need process to re-route incoming calls to alternate sites*
 - ◆ *Command center communications needs to be reviewed and updated*

And Still More Lessons . . .

- **Voice and Data Communications**
 - ◆ *10MB Ethernet across campus; major program underway migrating to Gigabit Ethernet backbone, 100MB to the desktop will provide more capacity*
 - ◆ *Current Internet Service Provider (Applied Theory) to be joined by second ISP (AT&T)*
 - ◆ *Wiring infrastructure being upgraded; network has good diversity across nodes*
 - ◆ *Need A/C in equipment areas to protect infrastructure*

And Finally . . .

- **Voice and Data Communications**
 - ◆ *Access to Internet needs to be expanded for network resilience*
 - ◆ *Microwave communications in use between major campuses for data communications should be expanded to augment wireline network resources*
 - ◆ *Need to review current bandwidth assets to Disaster Recovery site in upstate NY*
 - ◆ *Need improved emergency communications procedures between NYPH System hospitals*

What's Available in General?

- **Wireline solutions**
 - ◆ *Local/long distance carrier resilience options*
 - ◆ *Carrier emergency recovery (TSP)*
 - ◆ *Long distance carrier resilience options*
 - ◆ *Broadband network services (e.g., SONET, dark fiber)*
 - ◆ *Digital PBX systems*
 - ◆ *Centrex service*
 - ◆ *Overhead paging*

What's Available Now / Future?

- **More Wireline solutions**
 - ◆ *Call recording systems*
 - ◆ *Dial dictation systems*
 - ◆ *Automated notification systems*
 - ◆ *Frame relay / ISDN / DSL*
 - ◆ *Cable TV*
 - ◆ *Building infrastructure diversity*
 - ◆ *Data network diversity*
 - ◆ *Voice over IP technology*

What's Available Now / Future?

- **Wireless solutions**
 - ◆ *Radio paging (one-way, two-way)*
 - ◆ *800 MHz radio (NYC)*
 - ◆ *Cellular (traditional)*
 - ◆ *Cellular (e.g., Nextel, GSM)*
 - ◆ *Wireless extensions to PBX (e.g., SpectraLink)*

What's Available Now / Future?

- **More Wireless solutions**
 - ◆ *Free-space transmission (e.g., microwave, infrared)*
 - ◆ *Blackberry (e-mail)*
 - ◆ *Satellite phones (Globalstar, Motient)*
 - ◆ *OnStar (GPS)*
 - ◆ *Amateur (ham) radio*

What Does It All Mean for NYPH?

- ◆ *Voice and data network infrastructures are highly diverse, resilient*
- ◆ *Wireless communications services work well, but need expansion and additional resilience*
- ◆ *Administrative, clinical and technical staffs understand value of emergency communications*
- ◆ *Emergency communications generally worked well following September 11, except for public carrier constraints; items for enhancement identified*

Accomplishments Identified

- ◆ *Emergency procedures reviewed and exercised regularly*
- ◆ *No serious or life-threatening infrastructure issues noted*
- ◆ *No adverse in-house technical issues that impacted Telecommunications operations*
- ◆ *Documentation of emergency plans and procedures varies across units*



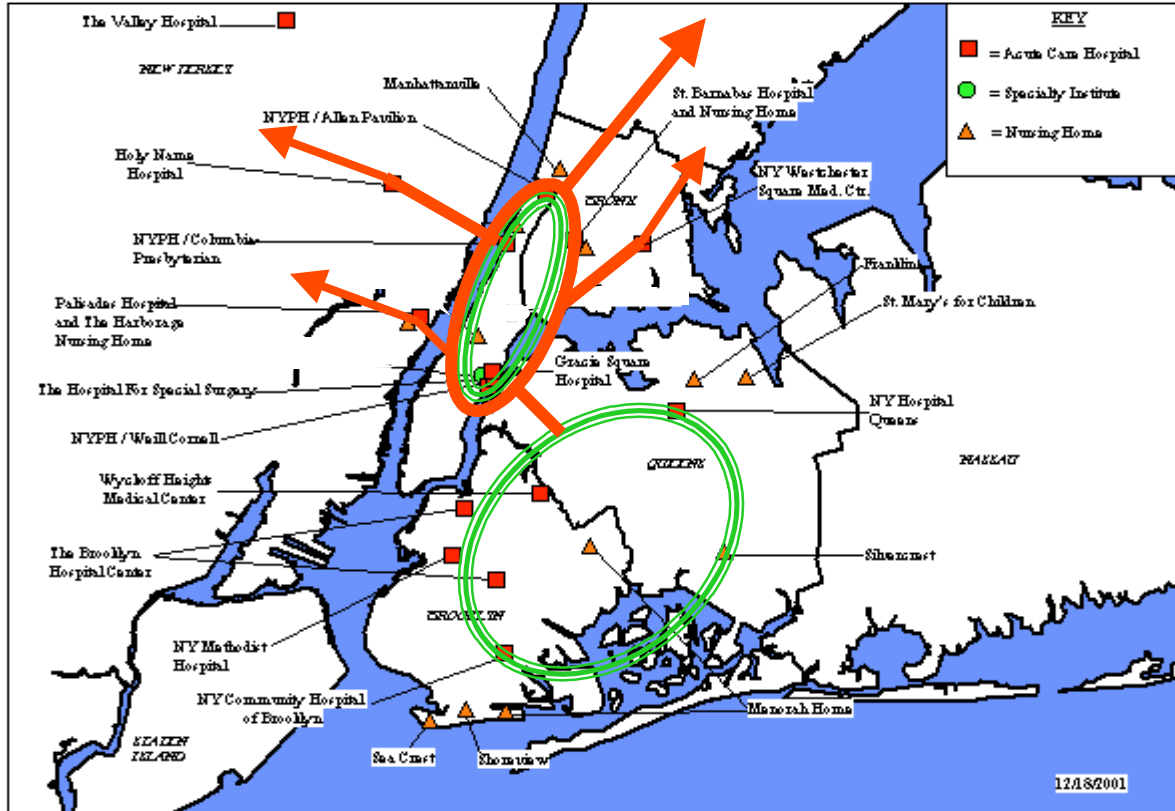
More Positive Conclusions . . .

- ◆ *Plans already developed to address and remedy identified infrastructure issues; plans / funding needed for other issues*
- ◆ *NYP staff committed to continuous improvement of service, survivability, and recoverability*
- ◆ *NYP is well-positioned to take advantage of advanced technologies*

Issues Still to be Addressed

- ◆ *Additional SONET access, bandwidth*
- ◆ *New sources of dial tone, e.g., NJ, CT*
- ◆ *Major phone systems situated in single equipment room*
- ◆ *Integration of SL-100 PBXs, remove outdated PBXs no longer in primary use*
- ◆ *Integration of radio paging platforms across campuses; enhance system backups*
- ◆ *Enhance cellular service coverage, e.g., use of Nextel, other carriers*

Potential SONET Network Infrastructure



Possibilities for Consideration

- ◆ *Relocate facilities for Red Phone service; consider VoIP alternative*
- ◆ *Expand CPMC-NYWCMC linkages for two-way radios, paging, voice/data*
- ◆ *Second, diversely routed ISP needed*
- ◆ *Expand wireless access, e.g., wireless local access, SONET, microwave*
- ◆ *Update communications assets for Command Centers*
- ◆ *Separate trunk groups for emergency personnel, patient phones*

Other Possibilities

- ◆ *Increase overhead paging speakers*
- ◆ *Revise connectivity arrangements with disaster recovery center in NY*
- ◆ *Prevent automatic shutdown of SL-100 extensions following non-use*
- ◆ *Need emergency contact data, emergency support procedures for dealing with area hospitals, Healthcare System members online and in hard copy*
- ◆ *Need backup plans, alternate location for Doctors Answering Service*

Going-Forward Actions

- ◆ *Deploy alternate sources of dial tone to ensure recoverability of PSTN*
- ◆ *Deploy “dark fiber” as bypass method for local carrier networks*
- ◆ *Enhance and expand microwave services to bypass local carrier networks*
- ◆ *Eliminate or minimize single points of failure in network infrastructure*
- ◆ *Expand communications assessment program to Healthcare System hospitals*

More Going Forward Actions

- ◆ *Complete linkage of SL-100s*
- ◆ *Integration of radio paging systems*
- ◆ *Telecommunications Strategic Plan that maps to current strategic planning efforts and addresses emergency issues*
- ◆ *Wireless communications standards for the institution, e.g., paging, cellular service, wireless phones, two-way, satellite, amateur radio*

And Still More Challenges . . .

- ◆ *Explore Use of Internet-based data access for reporting, emergency communications*
- ◆ *Provide awareness training on emergency preparedness and communications assets, particularly what works and what does not in a disaster situation*

Concluding Observations

- Major communications vulnerability is the Public Switched Telecommunications Network (PSTN)
- Major Technical Challenge: Maintain communications between, among and within institutional boundaries
- The Balancing Challenge: What risks do we prepare for, and at what cost?