

GNYHA

Emergency Preparedness

Coordinating Council

January 23, 2020



GREATER NEW YORK HOSPITAL ASSOCIATION

Over 100 years of helping hospitals deliver the finest patient care in the most cost-effective way.

For Webinar Participants

All participants are initially muted. Two ways to participate:

1. To speak

- Click the “raise hand” button 
- Click the “unmute” (microphone) button so it is green 
- Telephone users must unmute their phone & enter the audio pin.

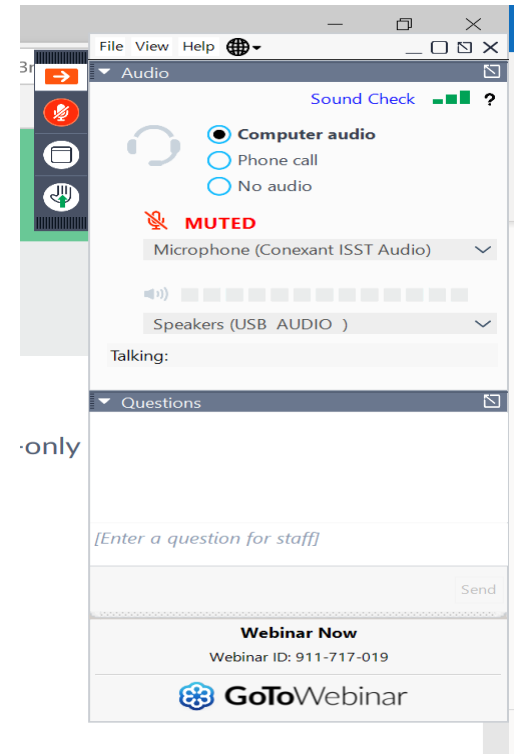
OR

1. Type into “questions” box and we will read it out loud

1. 

OR

2. 



3 Presentations

Lessons Learned from a Gas Leak at Vasser Brothers Hospital

- *Lisa Corcoran, Safety and Emergency Preparedness Coordinator, Vasser Brothers Medical Center*
- *Joe Stevens, Safety and Emergency Preparedness Coordinator, Northern Dutchess Hospital*

Improvised Nuclear Device Response Workgroup: Products to Facilitate Hospital Planning

- *Mark Maiello, Radiological Projects Planning Manager, Office of Emergency Preparedness and Response, and Tim Styles, CDC Career Epidemiology Field Officer and Medical Director, Office of Emergency Preparedness and Response, DOHMH*
- *Workgroup Members – Frank Mineo, Jake Neufeld, Greg Wayrich*

Hazard Vulnerability Analysis Tools: Community Discussion

- *Samia McEachin, Project Manager, Emergency Preparedness and Employee Wellness, GNYHA*
- *EPCC Participants*

Updates

GREATER NEW YORK
HOSPITAL ASSOCIATION

Infectious Disease Updates

NYS DOH has begun enhanced monitoring of hospitals related to seasonal flu

- Will push out a weekly HERDS survey every Monday with responses due on Wednesdays

CDC, DOH and DOHMH are monitoring an outbreak of a novel coronavirus in Wuhan, China.

- Airport screening at JFK of flights from that region began last week; DOHMH has been in direct contact with Jamaica, Flushing, and Bellevue Hospitals
- Informational call held yesterday

GNYHA INFECTIOUS CONTROL BULLETIN

FROM:
Zeynep Sumer King
Vice President

Jenna Mandel-Ricci
Vice President

DOH HERDS Flu Surveillance; Update on Novel Coronavirus Outbreak and Screening

GNYHA is in close communication with the New York State Department of Health (DOH) and the New York City Department of Health and Mental Hygiene (DOHMH) on the current flu season and the current novel coronavirus outbreak in China. Please see below for important updates for hospitals including webinar details.

DOH Enhanced Flu Monitoring; First HERDS Survey due Tomorrow, 1/17

DOH has begun enhanced monitoring of hospitals' capacity to handle the increased volume of flu patients by launching a survey that includes requests for information on hospital bed capacity, status of hospital surge plans, and other resource capabilities and needs, through the Health Emergency Response Data System (HERDS). Hospital staff who regularly complete HERDS surveys on the DOH Health Commerce System (HCS) website, should access the "Respiratory Illness Hospital Impact - Initial" survey activity on HERDS and respond as soon as possible. **Hospitals are expected to respond to the survey by tomorrow (January 17).** The HERDS survey will be sent each Monday morning thereafter, with responses expected by the close of business on the following Wednesday. The surveys will continue until DOH determines that they are required less frequently or may be discontinued.

Novel Coronavirus Outbreak; GNYHA/DOHMH Webinar, 1/22

The Centers for Disease Control and Prevention (CDC), DOH, and DOHMH are monitoring an outbreak of novel coronavirus with epidemiologic links to an animal wholesale market in Wuhan, China. More information on the outbreak can be found

Increased Focus on Cyber Security

Following the early January U.S. airstrike in Iraq, increased concern about Iranian cyber threats.

- GNYHA has been working to make members aware of various advisories and resources. Main message has been a focus on good cyber hygiene practices.

Additionally, we alerted members to critical vulnerabilities in Microsoft Windows operating systems.

GNYHA CYBERSECURITY BULLETIN

FROM:
GNYHA Cyber Team

Advisories Regarding Enhanced Monitoring for Iranian Cyber Attacks

Federal, State, and local security, law enforcement, and public health agencies are advising enhanced monitoring by public and private sector entities due to potential retaliation by Iran following the recent U.S. airstrike in Iraq. GNYHA is sharing a number of resources to assist members and advises hospitals to take this opportunity to reinforce their cybersecurity policies with all staff. Good cyber hygiene practices include

screening e-mails for media at workstations monitoring medical vigilance.

As always, please contact us with questions about

National Terrorism

This [bulletin](#) from the terrorist-related threats and vectors. The bulletin cybersecurity prepared. Released January 4,

News

Critical Vulnerabilities in Microsoft Windows Operating Systems

January 15, 2020

Hospitals with Microsoft Windows Operating Systems should apply the [most recent security updates](#) issued by the company as soon as possible, prioritizing mission critical systems, internet-facing systems, and networked servers. The Microsoft patch includes fixes that address 49 vulnerabilities, including critical weaknesses in the Windows Cryptographic Application Programming Interface and Windows Remote Desktop Protocol server and client. While there are no known exploits as of this release, an attacker could remotely exploit these vulnerabilities to decrypt, modify, or inject data into user connections. Such exploits would go largely undetected as they would appear to be cases of legitimate access to a network.

Also, the Department of Homeland Security's Cybersecurity and Infrastructure Security Agency issued an [alert](#) with additional detail about the security updates, vulnerabilities, a mitigation strategy, and a strong recommendation for users to apply the updates as soon as possible.

January 30th Cybersecurity Town Hall with US HHS

Next week GNYHA will be co-hosting a Cybersecurity Town Hall with US HHS.

Encourage attendance of following disciplines from member hospitals: info sec, biomedical, operations, clinicians and emergency managers.

Thursday, January 30th, 9:00am to 1:00pm

GNYHA EVENT NOTICE

FROM:
GNYHA Cyber Team

GNYHA/HHS Cybersecurity Town Hall: Manage Your Threats and Protect Your Patients

On January 30, GNYHA will partner with the Department of Health and Human Services (HHS) to hold a cybersecurity town hall meeting that will include local and national cybersecurity experts from both the public and private sectors. The program will include sessions that will be of interest to information security and biomedical engineering professionals, hospital operational leadership, frontline clinicians, and emergency preparedness staff. GNYHA also encourages hospital cybersecurity teams to join the program.


Details of the meeting are as follows:

Date:	Thursday, January 30, 2020
Time:	9:00 a.m.–1:00 p.m. (Breakfast will be served. Registration begins at 8:30 a.m.)
Location:	GNYHA Conference Center 555 West 57th Street, 15th Floor New York, New York 10019
Registration:	https://www.gnyha.org/event/cybersecurity-town-hall/

The program will kick-off with the HHS team discussing Federal public-private efforts against cybersecurity threats and how hospitals can participate. The HHS team will also discuss how hospitals can use its [publication](#) on managing cybersecurity threats and protecting patients. One session will detail the clinician's role in remaining alert

Physical Security

- At the request of members, GNYHA has developed a draft survey related to physical security
 - Next week we are hosting a focus group with several security directors to get feedback toward finalizing the survey
- Several other security-focused programs and resources are under discussion including IP/insider threat program, and a high-profile patient considerations document
- DHS is hosting an Active Shooter workshop on February 12th; GNYHA shared details via email



Department of Homeland Security
Cybersecurity and Infrastructure Security Agency
Active Shooter Preparedness Workshop

February 12, 2020

Conference Center
 26th Federal Plaza
 New York, NY 10278

Preparing employees for a potential active shooter incident is an integral component of an organization's incident response planning. Because active shooter incidents are unpredictable and evolve quickly, preparing for and knowing what to do in an active shooter situation can be the difference between life and death. Every second counts.

Unique Training Opportunity
 The Cybersecurity and Infrastructure Security Agency within the U.S. Department of Homeland Security is hosting a one-day workshop to enhance preparedness against active shooter incidents through:

- Developing an Emergency Action Plan with guidance from expert instructors
- Identifying strengths, weaknesses, and gaps in physical security and planning considerations via break-out sessions
- Learning how to prevent active shooter incidents by recognizing behavioral indicators on the pathway to violence
- Understanding the history of significant active shooter incidents through survivor stories and expert perspectives

Enhancing Emergency Planning
 The workshop will describe how to incorporate key elements of successful incident management into planning efforts, such as:

- Developing communication and incident plans for employees
- Building relationships with local first responders
- Coordinating with first responders before, during, and after an incident
- Integrating public affairs into incident management

For more information regarding the DHS Active Shooter Program, visit <http://www.cisa.gov/active-shooter-preparedness>

<p>Active Shooter</p> <p>Consequences from an Active Shooter incident can be fatal. Protect yourself by creating an emergency action plan by incorporating three basic response options.</p> <p>*Run, Hide, Fight</p>	<p>Did You Know?</p> <p>Active Shooter situations are often over within three minutes, before first responders can arrive on the scene.</p>	<p>Free Registration</p> <p>To Register: CLICK HERE</p> <p>Registration closes on February 10, 2020 at 12:00 pm EST</p>
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Gun Violence Prevention Activities/Initiatives

- GNYHA is working with members on a variety of initiatives related to gun violence prevention and mitigation of impacts
 - Will encourage members to take part in Everytown for Gun Safety's [National Gun Violence Survivors Week](#), February 1-8
 - Number of other activities under development related to MCI response readiness, support second victims, and safe gun storage
- Coordinating closely with Northwell Health after their recent Gun Violence Prevention Summit

Sit Stat 2.0 Project Status



January 18th Snow Event

Event Triggers

- ❑ Snow greater than 3 inches
- ❑ High temperatures below 15°F for a 48-hour period
- ❑ A wind chill below 0°F
- ❑ Sustained winds of more than 40mph
- ❑ Ice storms and/or freezing rain

Jan 18th Forecast

- ❑ NYC and Long Island: 2 to 3 inches of snow
- ❑ Hudson Valley and Upstate: 3 to 5 inches
- ❑ Temperatures hovering around and above freezing
- ❑ Wind gusts up to 25 mph
- ❑ Freezing rain not a primary concern

Considerations

- ❑ Forecast on low end of event triggers
- ❑ Only minor weather impacts seen early on
- ❑ Potential for over-surveying given ongoing flu situation and regular NYS DOH surveys
- ❑ **Decision:** no Sit Stat survey

Using Sit Stat 2.0 to Support Drills & Exercises

- **Sit Stat Event Survey Drills**
 - Ensure ongoing utility of existing surveys and prepare for real-world use
 - Time-sensitive data collection to mimic real-world response
 - Accurate data to reflect current facility status
- **External Drills and Exercises**
 - *Sit Stat can be used to support drills and exercises as part of DOHMH/DOH contract deliverables.*
 - Submit Support Form 2 months ahead of exercise
 - Can inform future use of system
- **Upcoming Opportunities**
 - SurgeEx 2020 & Prep Drill, DOHMH Special Pathogen Exercise, etc.

GNYHA Sit Stat 2.0 – Exercise/Drill Support Form

Exercise Date: _____ Support Form Submission Date: _____

Contact Information: Person GNYHA will work with to support the exercise.

Primary POC Name: _____
 Primary POC Title: _____
 Primary POC Email: _____
 Primary POC Phone #: _____

Exercise Background

Please provide a brief synopsis of the exercise scenario:

Please list the primary exercise objectives:
 1. _____
 2. _____
 3. _____

Please describe how the data collected via Sit Stat will support the exercise objectives:

Exercise Participants

Who will be attending and/or participating in the exercise? Please list the common roles or positions held by your exercise attendees.

Community Participation

We will often open up exercise surveys to all hospitals in the Sit Stat 2.0 system, even those not directly participating in an exercise. We do this to engage our users and to allow more opportunities for feedback on survey questions. Would you like to allow all hospitals to participate or would you prefer to limit survey participation?

Allow all members of the Sit Stat 2.0 community to participate.
 Limit participation to hospitals with representatives participating in the exercise.

Please submit this form to Jenna Mandel-Ricci (jmandel-ricci@nyha.org) or Samia McEachin (smceachin@nyha.org) at least 2 months prior to your scheduled exercise/drill date.

FDNY MCI Notifications – 10 Week Numbers

- **204** MCI's since November 4th rollout
 - *ALL Level A's*
 - *192 fires*
 - *6 motor vehicle accidents*
 - *3 hazardous materials incidents*
 - *1 construction/demolition incident*
 - *1 transit/rail event*
 - *1 other*
- **851** Notifications (initial, update, and stand-down) made to ED Red Phones
- **90%** of Notifications acknowledged by ED's

Of Note:

As of mid-December, FDNY is no longer *automatically* making MCI notifications for one-alarm fires. New policy dictates only notifying facilities for one-alarm fires if deemed necessary, meaning if there is a true potential for a large number of patients based upon an on-scene assessment.

Using Sit Stat 2.0 to Support Bed Matching & SurgeEx 2020

Bed-Matching Surveys

- 21 bed categories
 - 17 standardized definitions
 - Med/Surge Telemetry (A/P)
 - + Critical Care Vent (A/P)
- Bed-matching status
 - Agreement Only
 - Open to All

SurgeEx Data Collection

Data Requested	Data Due
Beginning Census (ALL)	9:00am
Post-RPD Census (evac) & Availability (rec)	10:45am
Updated Census (evac) & Availability (rec)	12:45pm
Updated Census (evac) & Availability (rec)	2:15pm

Sit Stat 2.0 Advisory Council

2020 Meeting Dates

~~January 16th~~
March 17th
May 26th
August 28th
September 29th
November 10th

All meetings are held at GNYHA's offices at 555 W 57th Street in the Boardroom from 2:30-4:30pm

2020 Areas of Focus

- Increasing coverage across NYS
- Increasing collaboration with agencies and coalitions
- Further operationalizing the current buildout
- Expanding emergency event use cases
- Exploring daily use cases
- Additional training and support



WORKPLACE VIOLENCE PREVENTION

2019 year-long learning series has wrapped up. Recordings of the above sessions and all materials can be found here: <https://www.gnyha.org/program/workplace-violence-prevention-learning-series/>

Work on this topic will continue. Number of topics are under development including:

- Considerations regarding flagging violent patients
- Assessment tools for risk of violence
- How to conduct workplace violence investigations

GNYHA has been participating in an ***NQF Action Team on Workplace Violence in Healthcare***

- Brings together practitioners and leaders from across the country
- Eight monthly webinars plus day-long meeting in mid-January
- Will produce a set of recommendations relevant to healthcare institutions as well as external entities; GNYHA will share these recommendations with members.

MCI Self-Evacuating Patient Bolus Protocol

- Developed this as part of overarching MCI response work to clarify what hospitals should do if/when they receive a substantial number of self-evacuation patients from a nearby MCI
 - Will be sending this out as a formal Emergency Preparedness Bulletin soon

HOSPITAL COORDINATION WITH FDNY EMS Related to Patient Surge from Nearby Mass Casualty Incidents

PRESIDENT, KENNETH E. RASKE • 555 WEST 57TH STREET, NEW YORK, NY 10019 • T (212) 246-7100 • F (212) 262-6350 • WWW.GNYHA.ORG

This document clarifies how hospital Emergency Department (ED) staff and other staff should interact with the Fire Department of the City of New York (FDNY) Emergency Medical Services (EMS) if the hospital receives multiple self-evacuating patients from a nearby Mass Casualty Incident (MCI).

*This document **does not** discuss the hospital MCI notification protocols that have been in place since August 1, 2016. For more information about these protocols, please refer to [EMS-to-Hospital Response Process for Mass Casualty Incidents: Hospital Guidance Document](#).*

NOTIFICATION TO THE FIRE DEPARTMENT OPERATIONS CENTER (FDOC)

Because many MCI victims self-evacuate to nearby hospitals, a hospital could receive a large number of patients from an MCI without the involvement of the 911 transport system. Anytime your hospital receives TWO or more patients with critical injuries and/or FIVE or more patients with non-critical injuries from an MCI who arrive on their own (self-evacuate), the facility should notify FDOC by calling 718-999-7912. This information is important for the overall management of the incident for purposes of patient tracking and for future patient transport decisions.

If it is unclear if the patient surge is related to an MCI, the hospital should determine this by gathering information from patients, ambulance crews, nearby first responders, and social media-based information sources such as Citizen App and Dataminr.

FDNY EMS HOSPITAL TRACKING OFFICER

Anytime a single hospital receives a large number of patients from an MCI, whether via self-evacuation or the 911 transport system, FDNY EMS will dispatch a Hospital Tracking Officer (HTO) to the hospital ED. The HTO supports information gathering and coordination and assists with patient tracking using the FDNY Patient Tracking System (PTS).

Upon arrival, the HTO should ask to speak with the Administrator on Duty, explaining his or her purpose. To complete information in FDNY's PTS, the HTO will need to gather the following on all incident-related patients:

- Name
- Age
- Date of Birth
- Mode of Arrival
- EMS Triage Tag Color (if available)
- Current Condition



GNYHA is a dynamic, constantly evolving center for health care advocacy and expertise, but our core mission—helping hospitals deliver the finest patient care in the most cost-effective way—never changes.

Special Pathogens Patient Allotment Planning

- Work resulting from September 2018 Emirates flight to JFK
- Have developed modified MCI distribution model with 4 incident levels
- Hospitals are split into 3 capability levels based on number of ED AIIR rooms; for each capability level hospitals are assigned a maximum number of critical and non-critical patients
- Beginning to develop guidance document for hospitals similar to introduction of other protocols
 - Intending to wrap this work up within next 1-2 months
 - Meeting happening tomorrow

Summary Table of Special Pathogen MCI Hospital Patient Allotments

Hospital Capacity Level	Critical Patients	Total Patients (including Critical and Non-Critical)
LEVEL W - 3 Hospital Notified		
Alpha	0	1
Bravo	1	2
Charlie	1	3
LEVEL X - 8 Hospitals Notified		
Alpha	0	1
Bravo	2	4
Charlie	2	5
LEVEL Y - 30 Hospitals Notified		
Alpha	1	4
Bravo	2	5
Charlie	3	6
LEVEL Z - All Hospitals Notified		

Total patient triggers for these levels:

W: 3 or less

X: >3 and <=16

Y: >16 and <= 100

Deployment to Puerto Rico: In Progress

- Working with Governor's Office to deploy a small group (~25) of bilingual mental health professionals
- Some volunteers will help staff the island's crisis hotline; others will be broken into teams and provide support at three largest base camps in Ponce, Guanica, and Guayanilla
 - Volunteers will work under the auspices of ASSMCA (PR's mental health agency) staff
- Deployment of ~7 days



Agency Updates

2020 EPCC Dates

January 23rd

February 20 (new date)

March 26th

April 23rd

May 21st

June 25th

July 23rd

August 20th

September 15th

October 22nd

November 17th

December 17th

We are always looking for interesting presentations. If you have recently managed a response to a real-world event, held an exercise, or are developing an innovate resource or approach please consider sharing it with colleagues via an EPCC presentation.

We did field an EPCC presentations survey. Thank you to those of you who responded. We are working our way through the ideas presented.

***All meetings are held from 1:30-4:00pm*