



Health Care Planning for Pandemic Influenza

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November 30, 2005



Objectives Today

- **Understand contents of HHS's plan as it relates to the health care system**
- **Understand next steps suggested by the citywide tabletop after action report**
- **Understand DOHMH initiatives and how they may involve your facility**



HHS: Pre-Pandemic/Pandemic Alert Phase

- Hospital Communications
- Education and Training
- Clinical Evaluation and Admission
- Facility Access
- Occupational Health
- Surge Capacity
- Mortuary Issues



HHS: Pandemic Period

- **Activate institutional influenza plans**
- **Identify and isolate all potential patients with pandemic influenza**
- **Ensure rapid and frequent communication within health care facilities and between health care facilities and DOHMH**
- **Implement surge capacity plans to sustain health care delivery**



Citywide Tabletop Exercises: Recommended Next Steps (1)

■ Hospitals

- **Further define your surge capacity plan for bioevents from respiratory pathogens**
- **Test/drill your surge capacity plans**
- **Implement and drill routinely screening and isolation strategies in emergency department**
- **Develop plan to distribute information to staff and visitors**
- **Develop policies for managing ill workers**



Citywide Tabletop Exercises: Recommended Next Steps (2)

- **DOHMH**

- **Develop strategies to engage other clinical care entities in pandemic flu planning**
- **Assess equipment and supply needs**
- **Draft public information messages and talking points for health care provider**
- **Develop working group to create a template for hospital plan**
- **Distribute documents from CBPPs re: rapid patient discharge, determining staffing need**



Reimbursable Opportunities Related to Influenza, BHPP 2005-6

- **Drill single patient with cough and fever in your ED (\$10,000)**
- **Elective Activities**
 - **Pandemic Influenza Tabletop Exercise (10K)**
 - **Develop plan to coordinate with primary care facilities in your neighborhood**
 - **Conduct pandemic influenza tabletop exercise using DOHMH tabletop exercise toolkit**
- **Submit a RFP to prepare a hospital preparedness plan for a respiratory illness requiring droplet or airborne isolation (50K X 2 hospitals)**



Triage, Screening and Isolation in ED

- **Drills well underway**
- **20 hospitals have completed their drills**
- **DOHMH is developing examples of promising practices of signage, forms used, infection control reminders and pre-drill education administered**

Signage At Entrance



- Fever/rash and fever/respiratory
- Identifies next step

Location of Signage



Note signage near vending machine

Description of Signage



- Identifies both fever/resp and fever/rash
- Multiple languages
- Conserves space
- Directions on hand hygiene, reporting

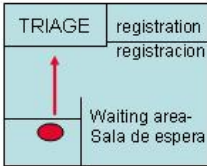


Another Example of Signage


STOP **If you have a fever and cough and/or a rash please take the following steps:** **PARE**

Si usted tiene fiebre y tos y/o sarpullido, favor de tomar los siguientes pasos:

Please take a mask from the shelf and put the mask on   Obtenga una mascarilla del estante y pongase la mascarilla

After you have put on the mask, go to the area marked TRIAGE and speak with the nurse  Despues de ponerse la mascarilla, pregunte por la enfermera de TRIAGE

You are here ● **Usted esta aqui** ●

THANK YOU  **GRACIAS**

NYU Medical Center

- Identifies fever/respiratory and fever/rash
- Multiple languages
- Directions for next steps

Initial Interaction with Security and/or Greeter



- Security staff trained to intervene with symptomatic patients
- Training to account for mask refusal but to encourage hand hygiene

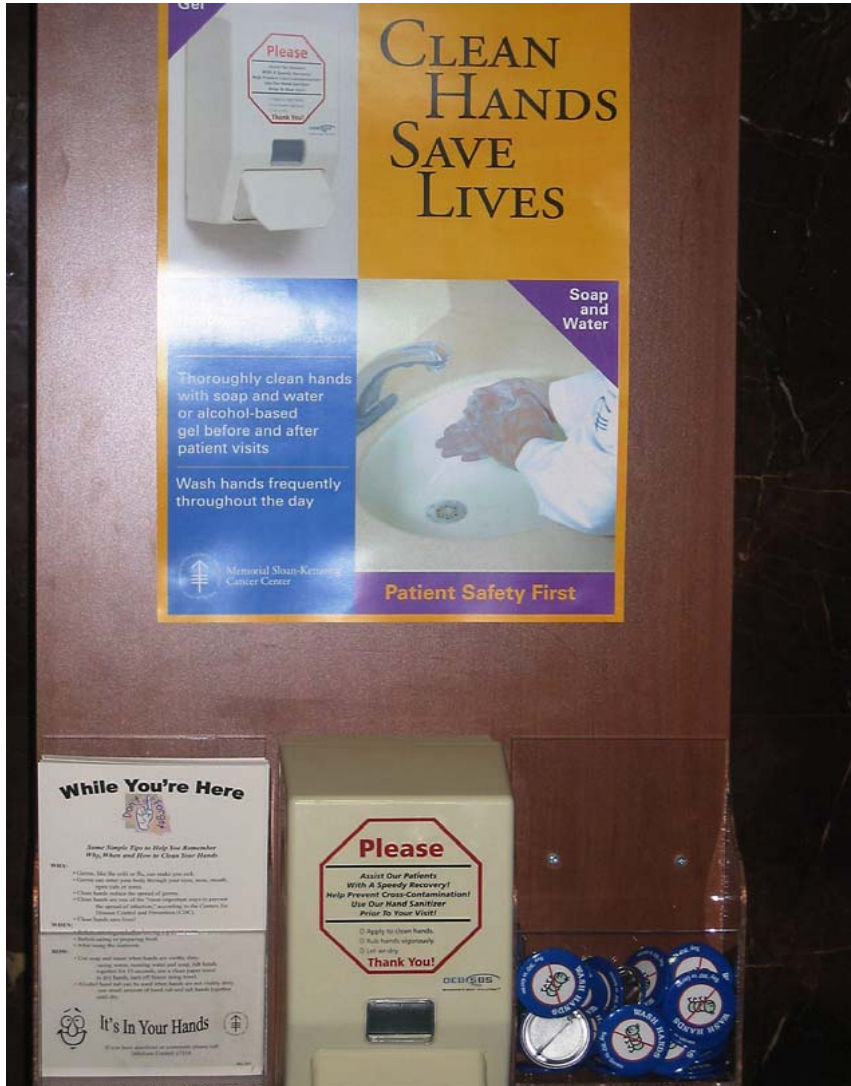
Location of Hand Hygiene Products



- Location of hand hygiene product next to greeter
- Greeter trained to intervene with entering patients



Instructions Provided for Handwashing



- Hand hygiene signage
- Coincides with alcohol dispenser



Triage, Screening and Isolation in ED

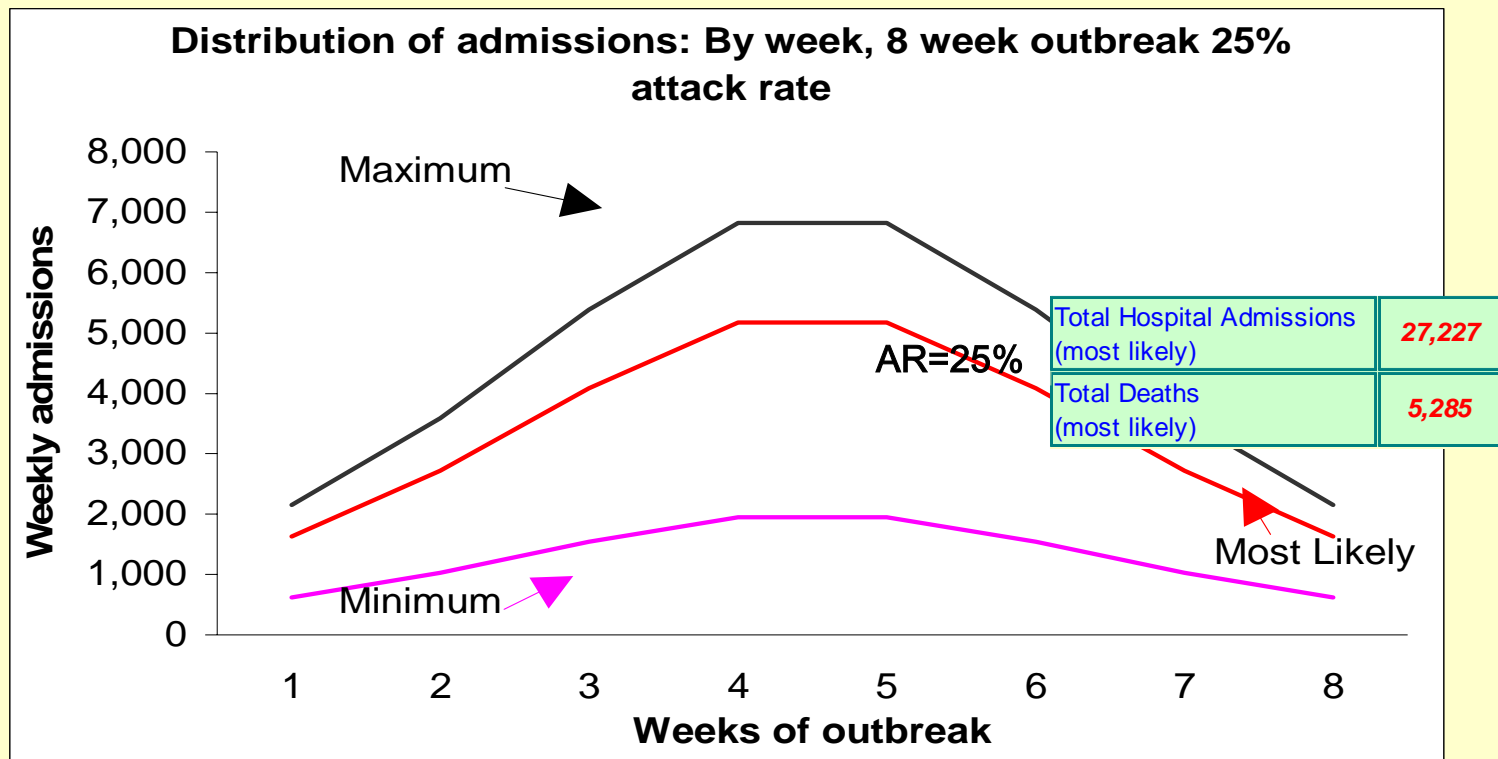
- Signage at entrance
- Initial interaction may be with security guard/greeter and they will provide the mask and hand hygiene
- Triage forms contain communicable disease review of systems, document time seen
- Given mask if not done so; hand hygiene performed
- **Isolate or place in semi-private area or place in separate part of ED waiting area**
- **Document time and type of isolation**
- **Physician dons PPE and evaluates patient**
- **Physician removes PPE**



Screening and Isolation Drills

- 7 hospitals still need to submit their screening and isolation operationalized plans
- Frequently Asked Questions about drill has been distributed several times
- Schedule drill now with Lauren DiBiase at ldibiase@health.nyc.gov

Impact of Pandemic on Hospital Admissions in NYC



Source: CDC FluSurge 2.0 – Data from referenced sources

Impact of Influenza Patients on NYC Hospitals at Peak (Week 5)

Variable	# Related to Influenza Pts.	% Capacity Increase due to Influenza Patients
Daily Admissions	806	24
Weekly Admissions	5,173	18
Bed Capacity	3,937	16
ICU Capacity	1,141	67
Vent. Capacity	570	24
Deaths in hosp.	555	49

Source: CDC FluSurge 2.0 – Data from referenced sources; NYC Vital Statistics, 2003; DOHMH Hospital Survey 2001.



Hospital Survey of Ventilator Capacity

Goal: Provide accurate estimate of critical care surge capacity in NYC

- Collect hospital data: pediatric and adult ventilators (full featured, portable, automatic resuscitators, surge vents), staff and oxygen supplies
- Acquire “normal” operations-level and surge-level data based on 2004-05 flu season
- Identify vendors and degree of overlap between hospitals and vendors
- Refine surge capacity / pandemic influenza planning models based on revised data
- Explore how NYC could assist with gaps



What you may expect from DOHMH

- **Q & A conference calls with DOHMH prior to due date**
- **Compilation of data**
- **Aggregate data / summary report**
- **Discussion of findings as it relates to ventilator inventory, oxygen sources and staff**
- **Determine if needed: purchase of emergency ventilators necessary, staff cross-training, additional sources of oxygen**



Ventilator Survey – Next Steps

- Meet with Director of Respiratory Therapy and share ventilator survey
- DOHMH-sponsored teleconferences to address your questions
- Due date: December 23, 2005
- Reimbursement: \$5000 for completed survey and timely submission



Summary

- **HHS's pandemic influenza plan provides comprehensive guidance; hospital checklist good**
- **Citywide tabletop exercise after action report is good summary of next steps for hospitals and agencies to take**
- **Several initiatives are underway to help address our gaps**
- **Further discussion will be forthcoming**



Next Steps

- **Review HHS plan with emphasis on supplement 3, 4, 5**
- **Discuss with your facility's emergency planning committee and determine strengths and gaps in your plan**
- **Hospitals should select elective activities based on their review**
- **Schedule your screening and isolation drill with DOHMH (Idibiase@health.nyc.gov)**
- **Meet with Director of Respiratory Therapy to conduct the ventilator survey**