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DEPARTMENT OF HEALTH & HUMAN SERVICES

PUBLIC HEALTH SERVICE

Indian Health Service California Area Office 650 Capitol Mall – Suite 7-100 Sacramento, California 95814 916-930-3927

Dear Program Director:

The purpose of this letter is to request your assistance in collecting information regarding the level of disaster preparedness for the tribal and urban Indian health programs in California. Since the attack on the World Trade Center and other national and international incidents, it has become very clear that Americans are vulnerable to attack by terrorists. Although there is no sure way to guarantee protection, planning for an effective response to terrorism and other disasters does have the potential of saving many lives.

In December 2001, President Bush signed a law that appropriated \$1.1 billion to the Department of Health and Human Services for distribution to state and large municipal jurisdictions to enhance their ability to respond to a bioterrorism incident. A portion of the \$1.1 billion appropriation is intended to go to ambulatory clinics to assist them in strengthening their bioterrorism response potential. A clinic assessment must be completed prior to any distribution of funds. The California Area Indian Health Service (CAIHS) is interested in supporting the tribal and urban Indian Health programs' ability to secure a portion of this funding from the State of California. In addition, we want to provide technical assistance and training in the areas that are most needed by the health programs.

WHY IS YOUR PARTICIPATION IN THE CLINIC ASSESSMENT IMPORTANT?

- o This information will be used to plan for a regional response to bioterrorism and other outbreaks of infectious and chemically induced diseases. Should a large amount of victims overwhelm the healthcare system's capacity and resources, responding to the event as a region will be essential. Regional planning and preparedness will enhance the ability of the local healthcare system to respond to such an event.
- o Hospitals, clinics and healthcare providers may be provided training programs, planning protocols, response equipment or other resources to enhance your ability to respond.
- o The provision of those resources will help your clinic establish protocols and plans to respond to biological and chemical terrorism, and may also assist you in planning for the more common outbreaks of infectious disease including influenza. The enhancement of your clinic's emergency management plan (or disaster plan) and response resources will be a valuable asset should a response be necessary.
- Many organizations and entities are conducting surveys across the state and the nation and you may be feeling inundated with requests to complete multiple assessments. This survey is very similar to the California State Hospital Bioterrorism Preparedness Planning Committee survey. If you have filled out that survey already, please photocopy it and send it to us as a substitute.

Page 2 - Disaster Planning Assessment

Clinics will not be "graded" or measured on their preparedness so answering the assessment questions honestly to reflect your current state of preparedness or lack thereof is critical to the development of a realistic and effective implementation plan. Please assist the CAIHS by providing an accurate picture of your facility.

If you have any questions regarding this clinic assessment, please contact Dr. Dave Sprenger at (916) 930-3981, extension 321. You may also reach Dr. Sprenger via email at <u>david.sprenger@mail.ihs.gov</u>.

Sincerely yours,

Stephen J. Mader, MD Chief Medical Officer

Enclosure

INSTRUCTIONS FACILITY SURVEY COORDINATOR CHECKLIST

- o We ask that each health program assign a survey coordinator to facilitate this important task.
- 0
- o The survey coordinator's role is to:
 - Communicate within the facility and to appropriate departments, including administration, the reasons and rationale for the survey and the timelines and deadlines. This will help expedite the survey completion.
 - o Oversee the completion of the survey.
 - o Read and refer to the glossary for definitions of terms as this may assist you in answering the questions.
 - Act as a resource person to the departments/persons completing the appropriate section of the survey.
 - o Ensure that timelines and deadlines for completion of the survey are met.
 - o Act as a resource for the departments/persons completing each section.
- o Conducting the survey:
 - Read the entire survey document including the introduction, survey questions and glossary.
 - o ALL questions must be answered with 'yes' (Y), 'no' (N), 'don't know' (DK) or 'not applicable' (NA) by checking the appropriate box. Please make every attempt to find the information requested even though it requires a bit of research, investigation and follow up. This will help make the survey information more pertinent and valid, assisting with the development of the implementation plan!
 - o Follow up regularly with the departments/persons completing the survey to ensure timely and accurate completion.
 - o Collect the responses for all the sections of the survey
 - Verify answers are present for all questions
 - Check for overall consistency of the answers.

TIMELINE FOR ASSESSMENT COMPLETION

o Assessment responses should be mailed, faxed or sent as an email attachment to:

Dr. Dave Sprenger California Area Indian Health Service 650 Capitol Mall, Suite 7-100 Sacramento, CA 95814 Email: david.sprenger@mail.ihs.gov Fax: (916) 930-3952

Please send all responses by February 7th. Thank you for your cooperation!

CLINIC DEMOGRAPHICS

Clinic Name: Street Address: City:	Zip Code:	County:	
Telephone Number:		Fax:	
Title of Person Responsible Telephone Number of Person	e for Completing t Responsible for C	his Survey: this Survey: Completing this Survey: mpleting this Survey:	
Average Annual Patient Enc. clinic and satellites that o 1 - 19,999 o 20,000 - 49,999 o 50,000 - 99,999 o over 100,000		all sites combined including parent 2002-2003:	

CLINIC DEMOGRAPHICS

For Clinic Corporations with multiple locations:

Total Number of Clinics ____

o Other Services:

Number of Full Time Satellite Clinics

Number of Part Time Satellite Clinics

Zip Codes of Full Time Satellite Clinic Locations:

(Please list a zip code more than once if you have more than one clinic in it)

._____.

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Zip Codes of Part Time Clinic Locations:

_

(Please list a zip code more than once if you have more than one clinic in it)

Se	rvices Offered (check all that apply):
0	General Medical
0	Family Planning
0	Preventative Health
0	Substance Abuse
0	Rehabilitation
0	Mental Health

GENERAL EMERGENCY PREPAREDNESS

Please answer the following questions pertaining to the disaster plan. The disaster plan describes how the organization will establish and maintain a program to ensure effective response to disasters or emergencies affecting the environment of care. The plan should address four phases of emergency management activities: mitigation, preparedness, response, and recovery.

					Sa	atellit	e Clin	nics	
		Main Clinic		Fı	ıll Ti	me	Pa	art Ti	me
	Y	Ν	DK	Y	Ν	DK	Y	Ν	DK
1. Does the clinic have a disaster plan?									
Is the clinic incorporated into any hospital emergency plan?									
3. Has the plan been reviewed and updated within the last 12 months?									
4. Does the plan have an organizational structure and organized leadership during a disaster or emergency?									
Does the plan make provisions for patient overflow and tracking?									
6. Does the plan have contingencies for a mass influx of patients?									
7. Does the plan make provisions for vulnerable populations' health needs (e.g., elderly, handicapped, children, etc.)?									
 Does the plan have a section for addressing security issues, including the provision of personnel to secure the site? 									
9. Are specific persons or personnel assigned to a disaster response team?									
10. Does the plan contain a section on for biological or chemical disasters?									
11. Does the plan provide for involvement of the clinic's medical personnel?									
12. Has your clinic worked with the county or other healthcare providers to coordinate planning and response activities?									
13. Have any of your medical providers or staff agreed to volunteer their services in an emergency (e.g. through the Disaster Service Worker program, Disaster Medical Assistance Teams, American Red Cross or other program)?									

GENERAL EMERGENCY PREPAREDNESS

Please answer the following questions pertaining to the disaster plan. The disaster plan describes how the organization will establish and maintain a program to ensure effective response to disasters or emergencies affecting the environment of care. The plan should address four phases of emergency management activities: mitigation, preparedness, response, and recovery.

					Sa	atellite	e Clinics				
		Main Clinio		Fı	ıll Ti	me	Pa	art Ti	me		
	Y	Ν	DK	Y	N	DK	Y	Ν	DK		
14. Has your clinic performed a Hazard Vulnerability Assessment (see glossary for definition) within the last 12 months?											
15. Are specific personnel assigned to a bioterrorism response team?											
16. Does your clinic conduct or participate in an annual disaster drill?											
17. Has your clinic conducted or participated in a drill using a scenario with a biological or chemical agent exposure within the last two years?											
18. Does your clinic have its own mass prophylaxis plan?											
19. Is your clinic included in your county's mass prophylaxis plan, providing resources such as personnel or facility space?											
20. Does your clinic plan have a provision to extend regular treatment hours in an emergency or disaster situation?											
20.a. If no, could you extend hours if you had additional finances and resources?											
21. Does your clinic's disaster plan address increasing operational capacity (staff, space) by at least:											
21.a. 10%											
21.b. 20%											
21.c. 30%											
22. Does your medical director know who the public health officer is?											

GENERAL EMERGENCY PREPAREDNESS

Please answer the following questions pertaining to the disaster plan. The disaster plan describes how the organization will establish and maintain a program to ensure effective response to disasters or emergencies affecting the environment of care. The plan should address four phases of emergency management activities: mitigation, preparedness, response, and recovery.

			Sa	ntellite	e Clinics				
		Main Clinic		Fu	ıll Tiı	me	e Part T		me
	Y	Ν	DK	Y	Ν	DK	Y	Ν	DK
23. Does your clinic have a system for the surveillance and identification of infectious and chemical outbreaks?									

POLICIES AND PROCEDURES

Please answer the following questions with respect to policies and procedures that have been reviewed, revised or implemented within the last 12 months.

		Mair	1		Sa	tellite	e Clin	ics	
		Clini	c	Fı	ıll Ti	me	Pa	rt Ti	me
	Y	N	DK	Y	N	DK	Y	N	DK
24. Are the following policies in place?									
24.a. Security/lock-down policy									
24.b. Personnel recall policy									
24.c. Evacuation policy									
24.d. Policy regarding patient care during a disaster									
24.e. Policy regarding reports of suspicious symptoms to the county health department									
25. Are procedures in place for the following:									
25.a. Handling patients who are exposed to biological or chemical events									
25.b. Isolating segments of the facility									
25.c. Triage of patients to appropriate hospitals and other treatment centers									
25.d. Addressing patient and situation confidentiality									
25.e. Acquisition and handling of suspect laboratory specimens									
25.f. Evidence collection and consultation with local law enforcement									
25.g. Personnel recall									
25.h. Testing for exposure to biological or chemical agents									

FACILITIES, EQUIPMENT, AND SUPPLIES

Please answer the following questions with respect to the facilities, equipment and supplies.

		Main	I		Sa	tellite	e Clin	ics		
		Clini	C	Fu	ıll Ti	me	Part T		Гіте	
	Y	N	DK	Y	Ν	DK	Y	Ν	DK	
26. Does your facility have provisions for patient or staff decontamination?										
27. Does the clinic have any personal protective equipment, such as a protective suits or kits?										
28. Does the clinic have provisions for obtaining emergency or back up supplies from vendors, hospitals, county or any other alternative source?										
29. Does your clinic have emergency or back up power?										
30. Does your clinic disaster plan address the clinic as a primary site that chemically or biologically contaminated patients may come to in an emergency?										
31. Does your facility have a cache of antibiotics to provide for mass prophylaxis for anthrax?										
32. How many patients can your clinic provide mass prophylaxis for anthrax for three days?										
33. How many miles is your clinic from the nearest emergency department? (In average miles if there are multiple sites in each category)	-			-			_			

TRAINING AND PERSONNEL DEVELOPMENT

Please answer the following questions with respect to training and personnel development.

		Mair	1		Sa	tellite	e Clin	ics	
		Clini	c	Fı	ull Ti	me	Pa	rt Ti	me
	Y	Ν	DK	Y	Ν	DK	Y	Ν	DK
34. Do staff members receive training in disaster awareness, preparedness and response?									
35. Is it mandatory?									
36. Does the training include preparedness for chemical or biological terrorism events?									
37. Has staff been trained on the use of appropriate personal protective equipment for biological and chemical events?									
38. Is annual "refresher" training in disaster preparedness conducted?									
39. Are annual "refresher" trainings in biological or chemical terrorism conducted?									
40. Is disaster training conducted during new employee orientation?									
41. Do you evaluate the effectiveness of your disaster training programs?									
42. Have educational opportunities been provided to medical staff on specific procedures regarding biological and chemical incidents?									
43. Has medical staff been trained to identify and remove contaminants?									
44. Do training programs include preparation for emotional and mental impacts of a terrorist attack?									
45. Have you developed any patient education materials regarding emergency preparedness?									
46. Have you provided training to staff, patients or community members regarding emergency preparedness at home and self care when ill?									
47. What types of training modalities are utilized?									

TRAINING AND PERSONNEL DEVELOPMENT

Please answer the following questions with respect to training and personnel development.

		e Clinics							
	Clinic			Fu	ıll Tiı	ne	Pa	rt Tii	ne
	Y	Ν	DK	Y	Ν	DK	Y	Ν	DK
47. a. Books and journal articles?									
47. b. Web-based tutorials?									
47.c. Satellite-based tutorials?									
47.d. Lecturer									

COMMUNICATIONS

Please answer the following questions with respect to the clinics communications capabilities. If more than one answer applies to the satellite clinics, please select both answers.

		Main	l		Sa	e Clin	ics		
		Clinio	c	Fu	ıll Tiı	ne	Pa	rt Ti	me
	Y	Ν	DK	Y	Ν	DK	Y	Ν	DK
48. Does your clinic have a pre- designated way to communicate with staff after hours in an emergency (e.g., a telephone tree or group paging system)?									
49. Does your clinic have high speed Internet access (other than dial up)?									
If yes, at what level?									
49.a. T-3 Line									
49.b. T-1 Line									
49.c. DSL/ISDN									
49.d. Other									
50. Does your clinic have secure offsite data backup capability for its information systems?									
51. Are procedures in place for establishing emergency communications between the clinic and the county or local government?									
52. Are procedures in place for establishing emergency communications between the clinic and the clinic associations, hospitals and other partners?									
53. Is there a communication system in place for the county health department to quickly alert clinic providers to suspicious clusters of symptoms or disease outbreaks?									
54. Does the emergency preparedness plan provide for communications with the public and media in bioterrorism events?									

COMMUNICATIONS

Please answer the following questions with respect to the clinics communications capabilities. If more than one answer applies to the satellite clinics, please select both answers.

		Main	1		Sa	tellite	e Clinics																															
		Clini	c	Fı	ıll Ti	me	Pa	rt Ti	me																													
	Y	Ν	DK	Y	N	DK	Y	Ν	DK																													
55. Which of the following emergency communication systems do you have that are fully redundant with or complementary to normal communications?																																						
55.a. Internal two-way radios																																						
55.b. Cell phones																																						
55.c. Voice mail boxes																																						
55.d. Satellite phones																																						
55.e. Wireless messaging																																						
55.f. Citizen's band radio																																						
55.g. Amateur radio																																						
55.h. California Health Alert Network (HAN)																																						
55.i. Other																																						
56. Have you been contacted by local emergency planners and/or government emergency managers about inclusion of your clinic in community planning?																																						
57. Rank the following needs as 1 through 6, in order of priority with 1 being the highest priority, for each type of clinic:																																						
57.a. Planning and preparedness tools			_							·								l		l		l												l				_
57.b. Communications			-			-			_																													
57.c. Supplies			-						-																													
57.d. Equipment			-						_																													
57.e. Training			-						_																													
57.f. Technical advice and information			-			-			_																													

STAFFING

	Main	Satellite	e Clinics
	Clinic	Full Time	Part Time
58. For the entire clinic system in your corporation, please give the number of full time equivalents (FTEs) of staff for the following categories:			
MD			
PA			
DO			
FNP			
RN			
LVN			
Medical Technician			
Support Personnel			
Other			
Total			

STAFFING

Biological Agent - Living organisms or the materials derived from them that cause disease in or harm to humans, animals, or plants, or cause deterioration of material. Biological agents may be dispersed as liquid droplets, aerosols, or dry powders.

Bioterrorism - The systematic use of terrorist practices using biological agents as weapons of coercion.

Decontamination Team - Personnel identified to operate decontamination facilities and equipment and monitor the results. The personnel will have specific training and knowledge in the decontamination facilities and equipment to be used.

Emergency Management Plan (EMP) The EMP describes how the organization will establish and maintain a program to ensure effective response to disasters or emergencies affecting the environment of care. The plan should address four phases of emergency management activities: mitigation, preparedness, response, and recovery.

Emergency Response Team - The personnel identified, or positions designated, to perform specific duties and functions in managing an emergency condition. For example, the personnel assigned to a command structure, like an Incident Command Structure ("ICS"), would be the emergency response team. For the purposes of this survey, the Emergency Response Team is not the local police or fire department first responders but personnel inside the clinic assigned the duties and responsibilities for managing an emergency situation.

Hazard Vulnerability Analysis - A tool used to determine the probability, risk, and preparedness of an organization to a natural or manmade crisis. The results determine the priorities for organizational focus and resources for emergency planning.

HEPA - The HEPA acronym is from "High Efficiency Particulate Air" filter. A HEPA filter is normally defined as a high efficiency filter with pleated glass-fiber filter medium, which has a minimum efficiency of 99.97% to a normally dispersed 0.3um test aerosol.

National Disaster Management (Medical) System - A cooperative assetsharing program among Federal government agencies, state and local governments, and the private businesses and civilian volunteers to ensure resources are available to provide medical services following a disaster that overwhelms the local health care resources.

N 95 Mask (Respirator) - A particulate respirator that is designed to protect the wearer from oil-free dusts, fumes, and mists at a minimum of 95% efficiency. This results in a reduced risk of inhalation of airborne pathogens.

Personal Protective Equipment ("PPE") - In this context, PPE refers to devices worn by personnel to protect them from biological, chemical, or physical hazards.

Regional Trauma Advisory Council - An organization intended to facilitate the development, implementation and operation of a comprehensive regional trauma care system based on accepted standards of care to decrease morbidity and morality from traumatic injuries.

STAFFING

California Health Alert Network – An Internet secure system for sending out public health alerts and receiving reportable diseases to and from local, regional, and state public health officials, healthcare organizations, and law enforcement agencies.

State Strategic Committee on Terrorism (SSCOT) - provides advice to the OES management during validated terrorist threats of actual incidents. **State Threat Assessment Committee (S-TAC)** - provides real-time threat assessments and conveys findings to the Governor, state constitutional officers and legislative leaders.

Bioterrorism Surveillance and Epidemiologic Response Team (BSERT) - serves as the state's core epidemiologic rapid response team.