

The AHA's Role in Emergency Preparedness

American Hospital Association
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Who We Are

- AHA is a national professional association
- 4,800 hospitals and health care systems of all types
 - short-term general acute care, psychiatric, long-term care, public, private non-profit, investor-owned, faith-based
- 33,000 individual members

AHA's Role, in brief

- Communicate
- Advocate
- Investigate
- Participate

AHA Role, Communicate

AHA Staff Team on Readiness

- Cross-functional internal team representing:
 - Senior executive staff, policy, fed'l affairs, communications, media relations, personal membership groups (engineers, materials managers, risk managers), Assn of Nurse Executives
- Met weekly for one year after 9/11/01, since then, as needed
- Plan for AHA activities, brainstorm

AHA Role, Communicate

- **State/Metro/Regional Hospital Association Readiness Liaisons**
- Meet annually; monthly calls; and constant interaction on listserv
- AHA hosts interactions with readiness liaisons from 78 sub-national hospital associations
- Sharing information and resources

AHA Role, Communicate

- **Listening to Members**
 - 1:1 and small group conference calls
- **AHA Meetings**
 - Invitational Forum on Mass Casualty Incidents (Mar. 2000)
 - National Symposium on Hospital Disaster Readiness (Feb. 2002)
 - State Issues Forum (annual)
- **AHA Readiness Website**

AHA Role, Communicate

- Hospital Disaster Readiness Advisories
 - OSHA Guidelines for Hazardous Materials Events
 - Disaster drill evaluation tool
 - CDC SARS Plan
 - Bioterrorism and Epidemic Outbreak Response Model
 - CDC Smallpox Vaccination Program
 - Behavioral health services
 - Disaster readiness checklist
 - Hospital self-assessment tool, bio agent list
 - BT template for hospitals
 - Hospital emergency incident command system (HEICS)
 - Communicating with community re. readiness
 - Plus numerous Bulletins and Alerts

AHA Role, Advocate

- **Advocacy**
 - Congress/ Administration—Appropriation; defining hospitals as first responders; disaster relief funding for all hospitals
 - Testimony (e.g. Congressional, NCVHS, IOM)
 - Comment letters (e.g. CDC smallpox plan, pandemic influenza, DHS target capabilities list)
- **Advisor to Government**
 - DHS—Target Capabilities List
 - Institute of Medicine—MMRS eval.; Smallpox vaccination
 - HHS—Pandemic Influenza Plan; NDMS Working Groups
 - CDC—Flu vaccine shortage; field triage
 - AHRQ Projects on Hospital Preparedness
 - HRSA—NBHPP Partnership; ESAR-VHP
- **Advisor to Private Sector**
 - ACEP Terrorism Response Task Force
 - AABB Interorganizational Terrorism Task Force

AHA Role, Investigate

- **ESAR-VHP** = Emergency System for the Advanced Registration of Volunteer Healthcare Professionals
- **AHA working with HRSA** to provide input on hospital implementation issues and solutions
- **4 Hospital Issues Focus Group meetings** over 2 years to coincide with the nationwide phased implementation of the state-based ESAR-VHP systems

ESAR-VHP Key Hospital Issues

- Emergency credentialing standards and levels
- Legal liability, workers compensation and regulatory issues
- State licensure and license portability
- System activation in emergency
- Hospital role in recruiting volunteers

AHA Role, Participate

Katrina-Related Activities:

- Daily calls with HHS and DHS
- Daily calls w/ nat'l hosp groups
- Daily calls w/ state associations
- Created Hospitalreliefforts.org
- AHA as conduit
(hosps/gov't/relief agencies)
- Helping locate patients from LA/MS
- Hospital employee relief fund:
thecarefund.net (\$100K seed money)
- Legislative/regulatory needs



AHA Input on Hurricane Relief

Regulatory

WAIVERS

- COP Requirements
- Rehab 75%
- Psych IMD
- EMTALA
- CAH
- Quality Reporting

Legislative

MEDICAID

- FMAP 100%
- Eligibility
- Patient Assess.
Waived
- Coverage to all
affected w/o means

FEMA- Investor-
owned

LIABILITY

- Comments to:
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- Questions?