CMS Emergency Preparedness by the Numbers

Everbridge's Gap Analysis Results

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Everbridge conducted a CMS Gap Analysis Survey, with the goal of understanding the emergency preparedness disparities that exist among hospitals and healthcare systems throughout the United States. The survey also sought to understand whether this places hospitals at risk for meeting CMS compliance. 219 healthcare executives and hospital emergency responders participated in the survey, which examined communications criteria for emergency preparedness and compliance.

After taking our survey, 9% of hospitals felt highly confident they have communications in place to respond to a full scale of emergencies while 33% said they were moderately confident. Read our survey results to find out why.

15%	15%	33%	28%	9%
Low	Moderately Low	Moderately	Moderately High	High
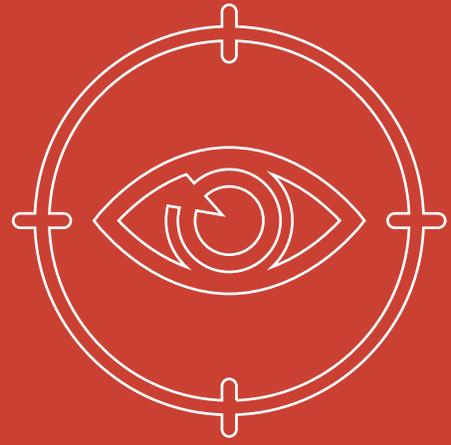
Expect the unexpected:
Taking an all-hazards approach

Which hazards do hospitals have a communications place for?

When asked whether hospitals have communications in place for an all hazards approach, respondents voiced they were most prepared to respond to natural disasters, followed by an active shooter incident and were least prepared for a cybersecurity attack.

By the numbers

36% of hospitals voiced that they don't have communications in place for all hazards. Although, 85% said they do have communication plans for natural disasters and 71% are ready to respond to an active shooter event.

46% of hospitals voiced they are least prepared to respond to cybersecurity incidents, while the following percent lack communications plans for other hazards:

+ 43%: explosive/incendiary incident
+ 42%: biological/radiological incidents
+ 40%: clinical alerts
+ 34%: chemical spill

46%
OF HOSPITALS SAID THEY ARE LEAST PREPARED FOR
CYBERSECURITY INCIDENTS

Flexible and scalable plans
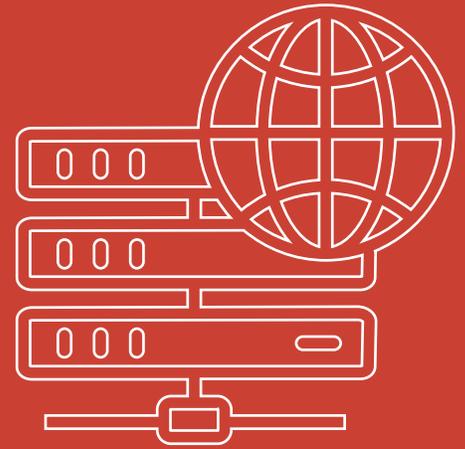
A core component of taking an all hazards approach

Hospitals that take an all hazards approach will have a strong foundation in place to better respond, regardless of the type of incident. A core component of this approach is assessing the risks that will most likely impact the hospital and communities it serves. For an all hazards approach to be effective, plans should be flexible and scalable enough to adapt to a wide variety of disasters and also account for the continuity of essential services.

What communications do hospitals have in place today?

+ 38% leverage a mass communication system
+ 50% rely on a combination of three of the following: e-mail, phone, pagers, overhead paging, conference call and wireless phones and radio
+ 8% only have one mode of communication in place
+ 4% rely on two modes of communication

Through a mass communication system, hospitals can track the status of each message and confirm the receipt of each individual message. Leveraging a system that continually contacts individuals on multiple delivery modes is optimal when verifying each person is accounted for and has received the appropriate message in accordance to the situation or location whether within the hospital or outside of the hospital's main campus. The system should include ready-made templates to ensure messages can be quickly tailored to a specific incident. Communications that are ready to go and can be quickly launched won't matter if the right message never reaches the right person. Ensure your system has the scale, reliability and security to manage the delivery of messages.

Are hospitals able to contact all staff during an emergency?

35% of respondents said their current communication system enables them to contact all staff including clinical, non-clinical staff, executive stakeholders, contractors and volunteers.

Who's at risk

32% of hospitals don't have the ability to contact contractors and:

+ 30% are unable to contact volunteers
+ 16% are unable to contact executive stakeholders

Hospitals and healthcare systems should have a communication system in place to reach all staff including key executive stakeholders, physicians, contractors, volunteers and other affiliates including local hospitals. This will ensure different, impacted groups can be easily activated according to the incident. The solution should also include and easy-to-update method of managing the contact information for everyone.

4% HAVE ACCURATE CONTACT INFORMATION FOR

ALL CLINICAL, ALL NON-CLINICAL, EXECUTIVE STAKEHOLDERS, AND VOLUNTEERS

Do hospitals have the most up-to-date contact information readily accessible for all staff, including all clinical staff, non-clinical staff, executive stakeholders, contractors and volunteers?

19% of hospitals responded that they have accurate contact information readily accessible for all groups.

+ 76% have accurate contact information readily accessible for all clinical and non-clinical staff

+ 43% have accurate contact information for all clinical, non-clinical and executive stakeholders

+ 7% have accurate contact information for all clinical, non-clinical, executive stakeholders, and all contractors

+ 4% have accurate contact information for all clinical, non-clinical, executive stakeholders, and volunteers

Developing an effective communications plan begins with the ability to contact the right people. Having the most up-to-date contact information and an emergency preparedness communications platform that enables you to import, organize and categorize contact data will help you better inform and mobilize the right people at the right time, and at the right location, whether on-site or off-site.

The platform should include a secure, central file for contact information that can be updated by designated staff periodically to ensure that information for all employees, on-site and off-site is current. A database that allows contact with all staff based on their roles and responsibilities, location and their areas of expertise and the hospital's needs, as well as the ability to set up groups of contacts such as clinical staff versus facilities staff will speed coordination of aid during an event.

How do hospitals know their messages have made it through?

50% of hospitals have a communications system that confirms receipt of a message and allows recipients to respond to an incident.

Reach matters

Having a reliable way to reach the right people and track receipt of each message, as well as the status of each response is critical to ensuring every person is accounted for and has received the appropriate message in accordance to their situation/location.

Are emergency preparedness plans and communications systems easily accessed from any location and any device, by your hospital or organization's designated emergency responders?

39% say no.

When critical events happen, those administering the response need to ensure the right information quickly reaches those impacted as well as those responding. Emergency management personnel must be able to rapidly initiate communication with various teams from any location (on-site or off-site).

Employees and other entities including volunteers may be based at multiple locations onsite or offsite during an emergency. Given that they may be impacted in different ways and backup forms of communications may be needed, establishing multiple modes of communication is required. To help minimize disruption, your team should evaluate the best ways to interact with your team members.

Do hospitals have a way to interact with federal, state, and local emergency management agencies during an incident?

+ 19% of respondents said they don't have a system in place to interact and collaborate with federal, state and local emergency agencies during an incident. As an emergency situation unfolds, the ability to share accurate information about your facility, including bed availability and patientcare information will be critical in informing the local community of police, fire, EMTs, state and local official if your hospital/facility is available to take patients or if it needs to be evacuated.

Is there a system in place that's HIPPA-compliant to track patients during an emergency?

36% of hospitals say no.

To ensure an integrated response during a disaster or emergency, hospitals should have a process for ensuring cooperation and collaboration with local, regional, state, or federal emergency preparedness officials' efforts. Hospitals are often at the center of their communities when it comes to ensuring the health of the local population. This is particularly evident during a crisis, when those in need of aid tend to turn to their local Emergency Department. The local community of police, fire, EMTs, state and local officials need to know if your hospital is available to take patients or if it needs to be evacuated. Hospitals will likely need to work with other hospitals and healthcare facilities to coordinate transfers of patients during an event, ensuring communications account for the following:

+ The ability to communicate easily with off-hospital coordinators to send and receive information
+ The ability remain HIPAA-compliant as patients are being transferred, whether patients are incoming or being evacuated

The CMS requirements also call for health care providers to document efforts, logging steps during an event for review purposes and to submit to federal, state and local agencies as needed. If you have an emergency preparedness communications platform that automatically archives messages, that will relieve emergency responders from worrying about manually tracking interactions.
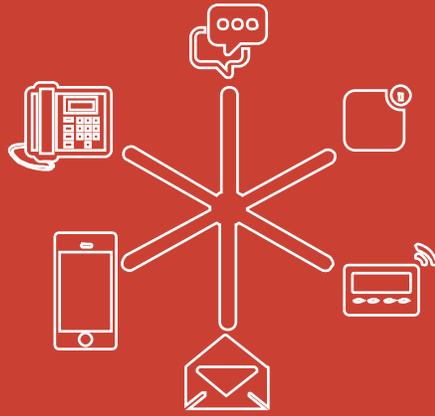
Practice makes preparedness
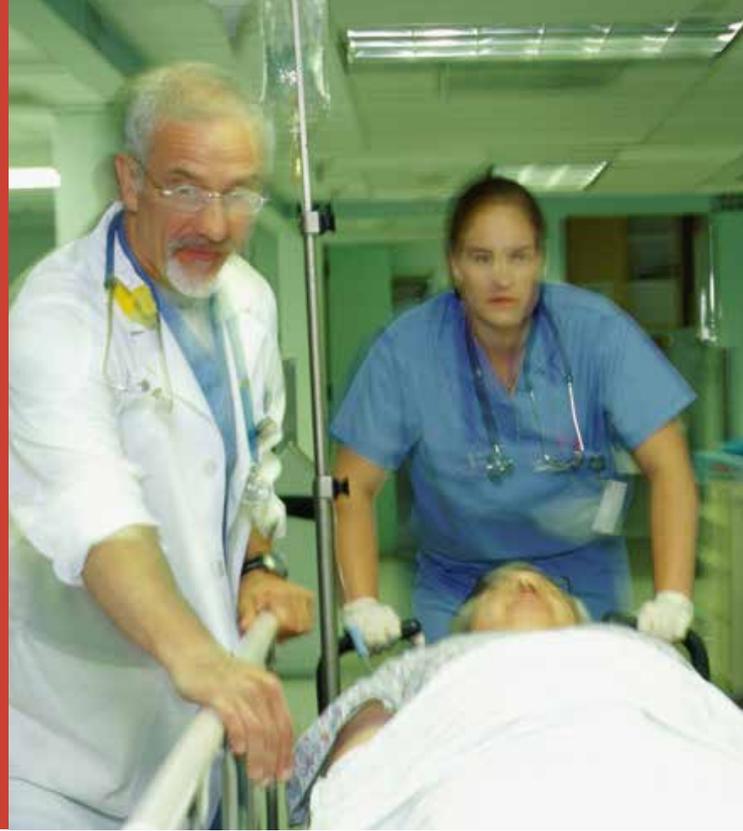
When was the last time an active drill or exercise was conducted to test emergency preparedness plans?

More than half of hospitals have conducted an active drill within the past six months and 21% conducted an active drill 6-12 months ago.

+ Past 6 months: 53%

+ 6-12 months ago: 21%

+ 1-2 years ago: 8%

+ 2+ years ago: 5%

+ Aren't sure: 15%

It is nearly impossible to prepare for anything and everything, but we can consider our vulnerabilities and account for them. What are your plans for care-related emergencies? How will you deal with equipment and utility failures? Are you protected against interruptions in communications, including cyberattacks? How well are you prepared for interruptions to the normal supply of essential resources such as water, food, fuel and medications? All of these questions need to be considered carefully and should become an integral part of your plan.

It cannot be stressed enough that you must prepare to communicate and coordinate with the community at large both in dissemination of information and receiving of information. Community resources can play a decisive role in successfully dealing with an emergency event. Is everyone on the same page? Does everyone understand their role? Are procedures in place to test and train? Are communications open? Are all staff notified of chains of command? These questions are critical when evaluating preparedness efforts for individual situations and facility requirements.

53% OF HOSPITALS HAVE CONDUCTED AN ACTIVE DRILL WITHIN THE PAST SIX MONTHS

Do you have a simple way to log/track incidents as they occur for review purposes and to submit to federal, state and local agencies as needed?

+ 21% have automatic tracking
+ 61% rely on manual tracking
+ 18% don't have a tracking system

The CMS requirements call for health care providers to document efforts, logging steps during an event for review purposes and to submit to federal, state and local agencies as needed. An emergency preparedness communications platform that automatically archives messages will relieve emergency responders from worrying about manually tracking interactions.

Effective, efficient and fast communication across the board is key to handling emergency events, and also key to being CMS compliant. Contact us or request a demo and learn how we can help you deliver on this key element of emergency preparedness.

18%

OF HOSPITALS DON'T HAVE A SYSTEM IN PLACE

TO LOG/TRACK INCIDENTS AS THEY OCCUR

About Everbridge

Everbridge, Inc. (NASDAQ: EVBG) is a global software company that provides enterprise software applications that automate and accelerate organizations' operational response to critical events in order to keep people safe and businesses running. During public safety threats such as active shooter situations, terrorist attacks or severe weather conditions, as well as critical business events including IT outages, cyber-attacks or other incidents such as product recalls or supply-chain interruptions, over 4,000 global customers rely on the company's Critical Event Management Platform to quickly and reliably aggregate and assess threat data, locate people at risk and responders able to assist, automate the execution of pre-defined communications processes through the secure delivery to over 100 different communication devices, and track progress on executing response plans. The company's platform sent over 2 billion messages in 2017 and offers the ability to reach over 500 million people in more than 200 countries and territories, including the entire mobile populations on a country-wide scale in Sweden, the Netherlands, the Bahamas, Singapore, Greece, Cambodia, and a number of the largest states in India. The company's critical communications and enterprise safety applications include Mass Notification, Incident Management, Safety Connection™, IT Alerting, Visual Command Center®, Crisis Commander®,

Community Engagement™ and Secure Messaging. Everbridge serves 9 of the 10 largest U.S. cities, 8 of the 10 largest U.S.-based investment banks, all 25 of the 25 busiest North American airports, six of the 10 largest global consulting firms, six of the 10 largest global auto makers, all four of the largest global accounting firms, nine of the 10 largest U.S. healthcare systems and four of the 10 largest U.S.-based health insurers. Everbridge is based in Boston and Los Angeles with additional offices in Lansing, San Francisco, Beijing, Kolkata, London, Oslo and Stockholm. For more information, visit www.everbridge.com, read the company blog, and follow on Twitter and Facebook.

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