

Abrazo HealthCare Group Saves Money and Time While Preparing for Emergency Situations

A Success Story for Disaster Incident Management System (DIMS™), which powers the HealthStream Preparedness Center

IMPACT

Using DIMS from HealthStream partner DisastersNet, Abrazo HealthCare Group hospitals were able to:

- Effectively handle a 50% increase in patient load, due to H1N1
- Be community leaders in responding to emergency situations
- Easily Meet Joint Commission requirements for Hazard Vulnerability Analysis and the alignment of planning, training and exercises with identified vulnerabilities
- Save as much as 50% of personnel costs involved with traditional emergency preparedness
- Communicate far more easily under emergency situations
- Save significant amounts of time during emergencies due to an more efficient, automated way to coordinate and document response

SITUATION

Those experienced in managing emergency incidents have learned that the Boy Scouts had it right: “Be Prepared” is an essential motto and creed for disaster response. In our post-9/11, post-Katrina world, the role of hospitals as community leaders in emergency situations is increasing. As a result, disaster and incident management has become much more science than art. HealthStream offers a number of solutions that make it easy for a hospital to “Be Prepared” for emergencies.

Hospitals are required by The Joint Commission to conduct an annual Hazard Vulnerability Analysis (HVA) and align planning, training, and exercises with identified vulnerabilities. The Joint Commission requires hospitals to conduct two exercises per year in order to remain compliant, demonstrate their capacity to handle emergency situations, train their staff, and identify opportunities to improve their level of preparedness. These requirements are supported by grant funding available from the Assistant Secretary for Preparedness and Response (ASPR), designed to provide tightly-budgeted hospitals with the funding to encourage greater emergency preparedness.

In spite of federal mandates and funding, most hospitals report that they are woefully under-trained in this area. The May-June 2009 issue of *Prehospital and Disaster Medicine* reports from its own survey that while 54.2% of hospitals reported that the most frequent training program they offer to hospital staff is incident command system training, over 80% of hospitals surveyed reported that they use no formal process or procedure to identify appropriate training courses for hospital staff to assure that course content is reliable and credible.

In this same survey virtually all the hospitals described this staff training as essential and yet many also reported that these “essential” staff members have received no training in their anticipated functional role described in the hospital’s emergency and disaster response plan. Hospital administrators consistently identify one essential barrier to this training: difficulty in coordinating and conducting a comprehensive preparedness education and training program for all hospital workers. Specifically, hospitals reported that either they lacked the internal expertise or credentials necessary to conduct education and training in areas such as incident command systems, decontamination, chemical, biological, radiological, nuclear, or explosive, and personal protective equipment.

APPROACH

Fortunately, Vanguard’s entire Abrazo Health Care Group in Arizona had recently replaced their inefficient, paper-based notebook operations manuals with the fully automated Disaster Incident Management System (DIMS™), which powers the HealthStream Preparedness Center. By automating this process, DIMS™ makes training significantly more efficient, reducing the time required to conduct and complete these exercises.

Vanguard’s Maryvale Hospital in Phoenix, Arizona, recently discovered the importance of this adage. Faced with a nearly 50% increase in patient load coming into their emergency room due to H1N1 flu, hospital management put their Incident Command Team to the test. This online incident management program features an integrated Pandemic Influenza Outbreak Solution. By having key personnel trained and ready to react to emergency incidents, hospitals put themselves in the best position to address situations as they arise.

In addition to making the hospital more effective in handling this recent patient surge, Maryvale Hospital’s Director of Safety, Steve Howard, estimates that the DIMS™ program is saving 50% in personnel time resources. “In the past we were inundated with paperwork and forms”, says Howard. “Hospital staff had to cram into a control room and information was conveyed by face-to-face conversations and walkie-talkies, which wasted a lot of time. With DIMS™, all information is sent to staff on their mobile phones or computers-so communication is faster, easier and more efficient.” This incident management system better prepared this hospital to rise to the challenge when needed.

RESULTS

When a real emergency arises, the quality of a hospital’s response ties directly to the quality of its training. HealthStream’s offerings include training in Emergency Preparedness, Incident Command System, and Emergency Management for the National Incident Management System. DIMS™ provides both realistic exercises and the incident management systems necessary to coordinate responses in the event of an actual emergency.

The powerful DIMS™ array of tools enables hospitals to administer exercises pre-loaded into the very system that would be used in a real emergency. Teams engage in invaluable learning experiences with these exercises that utilize immersive multimedia to promote realism and challenging injects that simulate real-life challenges that could occur during actual

emergencies. Communication is enhanced by providing instantaneous access to the entire system within a single DIMS™ interface including text messaging, virtual meetings, and the sharing of forms or other documents through email. Additionally the Incident Command team has access to automated Hospital Incident Command System forms that provide a more efficient way to coordinate and document response. After the exercise or incident, DIMS™ also fully automates the cumbersome task of finding, completing and filing the required forms, such as the After Action Report (AAR). Jeff Alderson, the Safety Officer for West Valley Hospital in Goodyear, Arizona, states that “DIMS™ was very helpful in completing HICS forms and documenting communication online. Players thought the system was very helpful when trying to complete required job action tasks. Communication between all the players in this exercise was highly efficient and seamless. Also, there was no issue with contacting other participating hospitals and the local Public Health Department. Communication is an important issue with any exercise and this system allowed the players to communicate with each other very easily.”

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