

# ON THE FRONT LINES: READYING THE HEALTHCARE SYSTEM

Hospitals must be prepared for any emergency—including their own evacuation.



**T**he only light emanated from flashlights held aloft by medical students at the staircase landings. A cluster of a half-dozen nurses, doctors and aides, each carrying a pump or monitor, tube or fluid bag, descended. At their center, supported by all that medical apparatus—and a nurse’s arms—lay one tiny patient of the Neonatal Intensive Care Unit (NICU) of NYU Langone Medical Center (NYU Langone), located beside the East River.

When Hurricane Sandy made landfall, the ninth-floor NICU was warm and dry. Then the river overflowed its banks, infiltrating the safety circuits of the hospital’s fuel pumps, which shut down the generators. The NICU had to evacuate.

Since 2008, the New York City Pediatric Disaster Coalition (PDC), a critical New York City Health Department-funded partner, worked closely with hospitals to plan and train for the emergency evacuation and surge capacity of NICUs.

The New York City Health Department, PDC and NYC hospitals, including NYU Langone, had made significant improvements to

evacuation plans after Hurricane Irene in 2011. Lessons learned during Hurricane Irene informed planning to further readiness efforts for future emergencies such as Hurricane Sandy.

With Hurricane Sandy at its door, NYU Langone arranged with other hospitals to receive its patients. All patients were safely transported to 14 area hospitals. It transferred out stable patients, instituted patient-tracking and updated medical records. Life-sustaining equipment was battery-operated.

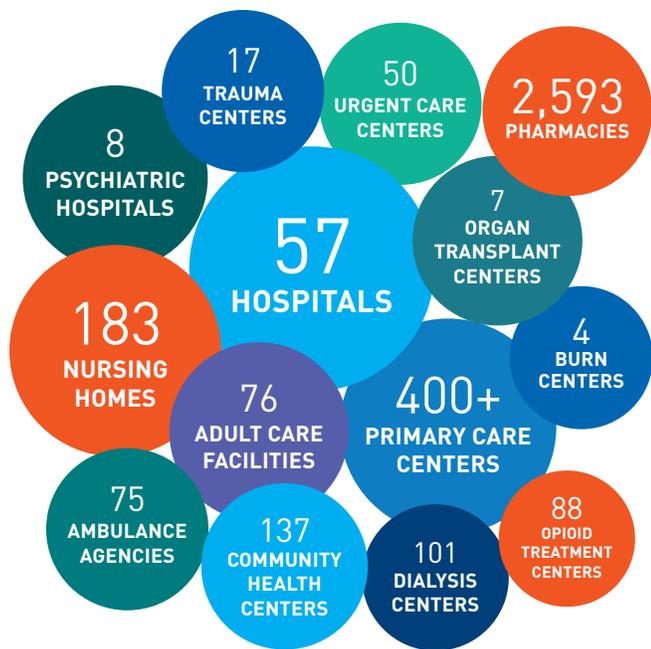
Without power, records and tracking data were locked inside computers; staff handwrote notes off the forms they used

to communicate patient information from shift to shift and drew up a paper patient tracker. With elevators down, the special beds used to move infants were of little use. The infants would have to be carried down nine flights of stairs.

Still, thanks to post-Irene planning and training by Health Department-supported partners like the PDC and other hospitals like NYU Langone, extra staff were waiting in nearby dorms, prepped for action. The healthcare evacuation center in Brooklyn—where City and State employees coordinated actions—sent frequent updates about facilities that were full or out of commission. That saved time for doctors calling around seeking beds. Unlike Irene, when a shortage of vehicles slowed transport, this time plenty of ambulances were ready at the curb.

NYU Langone staff informed parents of their children’s whereabouts during the evacuation. Later that night, parents could touch their babies, asleep in the warm, beeping havens of NICUs throughout the city.

**The Health Department works with healthcare facilities citywide to strengthen emergency preparedness, including developing emergency plans.**



These numbers are subject to change.

**VISIT OUR WEBSITE AT [nyc.gov/health](http://nyc.gov/health)  
CONTACT [EmergencyPrep@health.nyc.gov](mailto:EmergencyPrep@health.nyc.gov)**

**NYC Public Health and Healthcare Preparedness and Response REPORT**

## Impact

- The Health Department utilizes Hospital Preparedness Program (HPP) funds to contract with 55 acute care hospitals in NYC. Hospitals are required to complete deliverables that further their readiness. NYU Langone has received HPP funds since 2002, and this funding has contributed to its hurricane response readiness.
- The Health Department has funded the PDC since 2008 to ensure effective use of critical assets before and after a large-scale disaster affecting children. PDC has worked with NYC NICUs and pediatric ICUs to develop evacuation plans. NYU Langone relied on its NICU evacuation plan to guide its Hurricane Sandy response.
- Supported by annual preparedness funding, the Health Department’s evaluation staff conducts after-action reviews to evaluate results and identify opportunities to improve response operations. Lessons learned from Hurricane Irene directly informed the city’s Hurricane Sandy response.

## Critical Need

- Increased and sustained funds to support the healthcare system in preparing for a wide range of emergencies, including emerging infectious diseases, hurricanes or a mass-casualty incident.
- Expanded planning to other healthcare sectors to strengthen other parts of NYC’s complex healthcare system.

