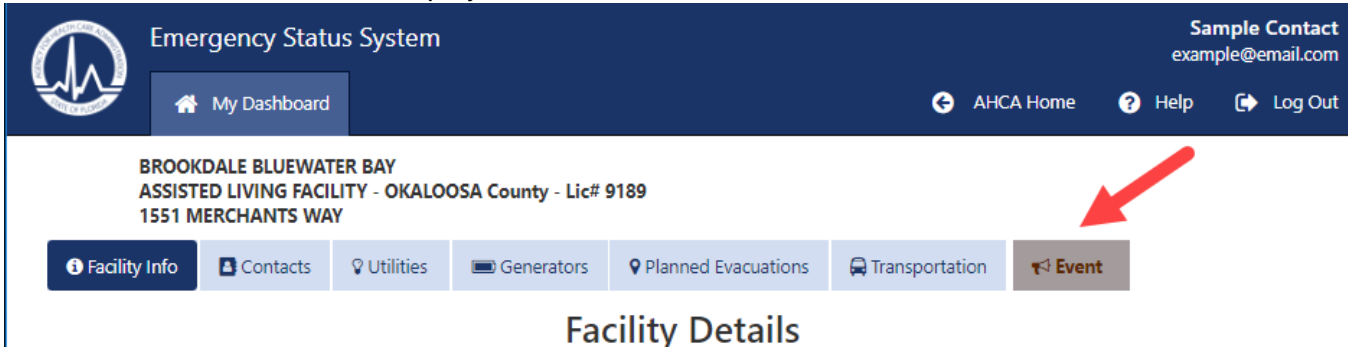


Entering Event/Situational Awareness Information in the Emergency Status System (ESS)

Audience: Providers, Partners, and AHCA Staff

1. Navigate to and log in at the website: <https://apps.ahca.myflorida.com/ess>
2. Once logged in, the tabs displayed vary based on the user account's permissions. Locate and select the provider. The provider's "Facility Details" screen will open. If the provider is part of the event, the "Event" tab will display.



Emergency Status System

Sample Contact
example@email.com

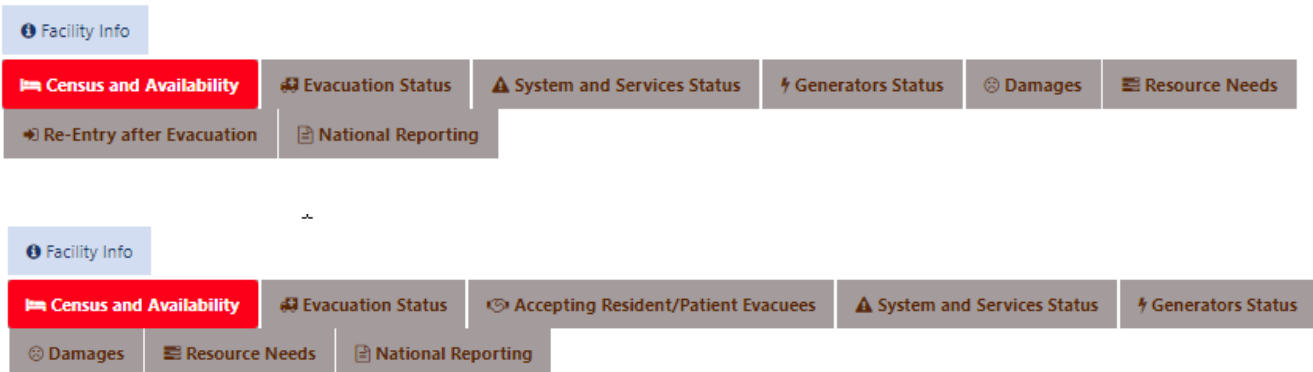
My Dashboard AHCA Home Help Log Out

BROOKDALE BLUEWATER BAY
ASSISTED LIVING FACILITY - OKALOOSA County - Lic# 9189
1551 MERCHANTS WAY

Facility Info Contacts Utilities Generators Planned Evacuations Transportation **Event**

Facility Details

3. Click the "Event" tab to open the set of event-specific tabs for information entry. The tabs displayed vary based on the information entered/saved.



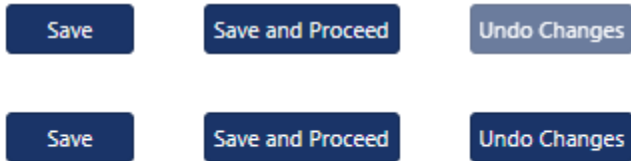
Facility Info

Census and Availability Evacuation Status System and Services Status Generators Status Damages Resource Needs
Re-Entry after Evacuation National Reporting

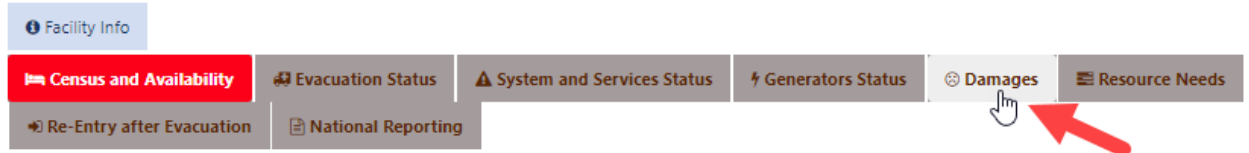
Facility Info

Census and Availability Evacuation Status Accepting Resident/Patient Evacuees System and Services Status Generators Status
Damages Resource Needs National Reporting

4. Basic information about the event tabs/screens:
 - a. "Save" button will save the information entered and keep the screen open.
 - b. "Save and Proceed" button will save the information entered and automatically open the next screen. Note: System users must click one of the save buttons or all information entered will be lost.
 - c. "Undo Changes" button will only be active once something is entered; use this button to revert all fields to what they were before changes were made. Remember to save once the correct information is input, if needed.



- d. The event tabs may be clicked individually to navigate to that particular screen to view or enter information.



- e. Each screen has a history table at the bottom. This table displays all submitted entries with information about who and when it was submitted. System users may click the “Details” button to view the entire entry, if desired.

History

	Date Submitted	User
Details	07/11/2018 11:26 AM	El [redacted] a
Details	07/11/2018 11:17 AM	Bl [redacted] a

1 - 2 of 2 items

- 5. The “Census and Availability” tab is used to enter the provider’s current resident census and demographics; it is also used to enter availability for other residents/patients. The questions vary based on provider type.

a. **ESRDs (dialysis facilities):**

ESRD Stations Census and Availability

Total ESRD Stations	<input type="text" value="21"/>
Peritoneal Patient Census	<input type="text"/>
Home Peritoneal Patient Census	<input type="text"/>
Hemodialysis Patient Census	<input type="text"/>
Home Hemodialysis Patient Census	<input type="text"/>
Percentage of Patients Accounted For	<input type="text"/> %
Are you able to take displaced patients?	<input type="text" value="Sele"/> ▼
Do you have isolation stations available?	<input type="text" value="Sele"/> ▼

b. **Hospitals:**

- i. If the hospital has an onsite emergency department (ED), a question about the ED's status will display.

Hospital Census and Available Beds

Emergency Department Status: ▼

- ii. Bed availability is calculated based on the current census for each bed type and the hospital's staffed capacity for each bed type. Be sure to enter both values for

the calculations to be accurate.

	Licensed Beds	Current Bed Census	Staffed Capacity	Available Beds
Total Beds	254	211	300	89
Total Acute Care	247	208	295	87
Adult ICU		48	57	9
Pediatric ICU		0	0	0
Adult Med Surg		123	168	45
Pediatric Med Surg		0	0	0
Burn		5	5	0
General Acute Care		32	65	33
NICU Level2	7	3	5	2
NICU Level3		0	0	0
Adult Psych		0	0	0
PediatricPsych		0	0	0
Adult Substance Abuse		0	0	0
Pediatric Substance Abuse		0	0	0
Skilled Nursing		0	0	0
Long Term Care	0	0	0	0
Comp Med Rehab		0	0	0

c. Standalone Emergency Department:

- i. Standalone EDs will only be asked for their status.

Stand Alone Emergency Department Status

Emergency Department Status:

Sele ▾

Save

Save and Proceed

Undo Changes

d. **All other provider types (i.e. Nursing Homes, Residential Treatment Centers, etc.):**

- i. Census and bed availability are input. Availability is split up by bed type. If the provider has any gender specific beds, input those values. All other available beds would be entered into the space for non-gender specific beds.

Census and Available Beds

Licensed Beds

50

Current Resident Census

63

Current Total Bed Available

13

Non-Gender Specific Beds Available

5

Male Beds Available

4

Female Beds Available

4

- ii. The demographics of the residents/patients should also be entered, if applicable.

What is the number of residents/patients with the following dependencies?

Electricity	<input type="text"/>
Insulin	<input type="text"/>
Life Support/Ventilator	<input type="text"/>
Oxygen	<input type="text"/>
Trach Care	<input type="text"/>
Dialysis	<input type="text"/>
Non-Ambulatory	<input type="text"/>
Mental Health/Cognitive Impairments	<input type="text"/>

- 6. The “Evacuation Status” tab is used to say if the provider is or is planning to evacuate.

Evacuation Status

Are you planning to or are you currently evacuating your facility?

Select

- a. If no, the user will be able to save the answer and move to the next tab.
- b. If yes, the user will be prompted for more detailed information about who is evacuating and to what locations. Contact information for a staff member knowledgeable of or with

the evacuated residents/patients should also be entered for each location.

Evacuation Status

Are you planning to or are you currently evacuating your facility?

Evacuation Status

Evacuation Start Date

Evacuation Complete Date

Are ALL residents/patients being evacuated?

Total Number of Residents/Patients Evacuating

Total Number of Staff Evacuating with Residents/Patients

How many of your facility's resident/patient evacuees are dependent on the following:

Electricity

Insulin

Life Support/Ventilator

Oxygen

Trach Care

Dialysis

Non-Ambulatory

Mental Health/Cognitive Impairments

Select from Planned Evacuation Locations

Add AHCA Licensed Evacuation Location

Add Other Evacuation Location

Type	Name	Phone	Number of Residents/ Patients	Number of Staff
------	------	-------	-------------------------------	-----------------

- i. There are 3 ways to enter the evacuation location(s).
 1. The "Select from Planned Evacuation Locations" button will allow the user to select from the locations entered during preseason; all locations saved in the preseason information section will appear in the "Location Name"

dropdown menu.

The screenshot shows a web form titled "Planned Evacuation Location" with a close button (X) in the top right corner. Below the title is the instruction: "Select an evacuation destination from your previously entered planned evacuation locations." The form contains several fields: "Location Type" (a dropdown menu currently showing "Planned Evacuation Location"), "Location Name" (a dropdown menu currently showing "Select", with a red arrow pointing to it), "Street Address" (a dropdown menu currently showing "Select"), "Ste/Apt Number" (a text input field containing "LOWER KEYS MEDICAL CENTER"), "City" (a text input field containing "no name location"), "State" (a text input field), "Zip" (a text input field), "Phone Number" (a text input field), "Provider's Contact Person" (a text input field), "Provider's Contact Person Phone Number" (a text input field), "Number of Residents/Patients Evacuated" (a text input field), and "Number of Staff Evacuated" (a text input field). At the bottom right of the form are two buttons: "Add" and "Cancel".

2. The "Add AHCA Licensed Evacuation Location" button will allow the user to enter a location that is AHCA-licensed. This location will not be saved to the list for future events. Start typing the name of the location in the

“Search...” field and a list will generate with matching options.

Non-Planned AHCA Licensed Evacuation Location [X]

Search and select an AHCA licensed location as your evacuation site.

Evacuation Type: AHCA Licensed Facility Evacuation Location

Search and select an AHCA Licensed Facility: hidde| [X]

Phone Number: []

Provider's Contact Person: []

Provider's Contact Person Phone Number: []

Number of Residents/Patients Evacuated: []

Number of Staff Evacuated: []

[Add] [Cancel]

Search Results:

- HIDDEN GARDEN ASSISTED LIVING RESIDENCE LLC | 4373 VENUS AVENUE, WEST PALM BEACH, FL 33406
- HIDDEN PINES ALF INC | 16242 SYCAMORE DR E, LOXAHATCHEE, FL 33470
- HIDDEN PINES RETIREMENT CENTER | 1840 SW 31ST AVE, OCALA, FL 34474

3. The “Add Other Evacuation Location” button will allow the user to enter a location that is not AHCA-licensed. This location will not be saved to the

list for future events.

Non-Planned Evacuation Location ✕

Select your evacuation location type and complete the requested information.

Location Type	<input type="text" value="Hotel"/>
Location Name	<input type="text" value="Happy Hotel"/>
Street Address	<input type="text" value="123 Main Street"/>
Ste/Apt Number	<input type="text"/>
City	<input type="text" value="City"/>
State	<input type="text" value="FL"/>
Zip	<input type="text" value="33333"/>
Phone Number	<input type="text" value="(444) 444-4444"/>
Provider's Contact Person	<input type="text" value="Knowledgeable Staff"/>
Provider's Contact Person Phone Number	<input type="text" value="(777) 777-7777"/>
Number of Residents/Patients Evacuated	<input type="text" value="25"/>
Number of Staff Evacuated	<input type="text" value="5"/>


- ii. Information about the location may be edited by clicking the “Edit” button next to the location.

Select from Planned Evacuation Locations
Add AHCA Licensed Evacuation Location

		Type	Name	Phone	Number of Residents/Patients	Number of Staff
	<input type="button" value="Edit"/> <input type="button" value="Remove"/>	Planned Evacuation Location	LOWER KEYS MEDICAL CENTER	(305) 294-5531	43	2
	<input type="button" value="Edit"/> <input type="button" value="Remove"/>	AHCA Licensed Facility Evacuation Location	HIDDEN PINES RETIREMENT CENTER	(352) 854-7171	31	3
	<input type="button" value="Edit"/> <input type="button" value="Remove"/>	Hotel	Happy Hotel	(444) 444-4444	25	5

- iii. The location may be removed if plans have changed by clicking the “Remove” button next to the location.

Select from Planned Evacuation Locations Add AHCA Licensed Evacuation Location

		Type	Name	Phone	Number of Residents/Patients	Number of Staff	
	<input type="button" value="Edit"/>	<input type="button" value="Remove"/>	Planned Evacuation Location	LOWER KEYS MEDICAL CENTER	(305) 294-5531	43	2
	<input type="button" value="Edit"/>	<input type="button" value="Remove"/>	AHCA Licensed Facility Evacuation Location	HIDDEN PINES RETIREMENT CENTER	(352) 854-7171	31	3
	<input type="button" value="Edit"/>	<input type="button" value="Remove"/>	Hotel	Happy Hotel	(444) 444-4444	25	5

- 7. The “Accepting Resident/Patient Evacueees” tab is used to say if the provider is able to accept evacuees and how many. This tab will only display if the provider’s most recent “Evacuation Status” is no to evacuating.

Accepting Resident/Patient Evacuees

Are you willing and able to accept residents/patients into your facility from another evacuating healthcare provider?

- a. If no, the user will be able to save the answer and move to the next tab.
- b. If yes, the user will be prompted for more detailed information about how many residents/patients may be accepted.

Accepting Resident/Patient Evacuees

Are you willing and able to accept residents/patients into your facility from another evacuating healthcare provider?

Number of resident/patient evacuees you are able to accept at your current staffing level

Number of resident/patient evacuees you are able to accept with additional staffing

Number of additional staff needed

Number of Pediatric Ventilators Available

Number of Adult Ventilators Available

- c. The user may also provide information about what types of residents/patients may be accepted.

What is the number of resident/patient evacuees with the following dependencies your facility is able to accept?

Electricity	<input type="text"/>
Insulin	<input type="text"/>
Life Support/ Ventilator	<input type="text"/>
Oxygen	<input type="text"/>
Trach Care	<input type="text"/>
Dialysis	<input type="text"/>
Non-Ambulatory	<input type="text"/>
Mental Health/Cognitive Impairments	<input type="text"/>

- 8. The “System and Services Status” tab is used to provide details about the operational statuses of each utility and service (i.e. telephone, hot water heater, HVAC, etc.). This tab is also used to report if the provider is utilizing any generators.

Utilities, Systems, and Services Current Status

- If you have immediate health or life threatening issues or residents/patients are in danger, call 911.
- You must report any power outages directly to your utility provider.
- If your facility has any resource needs or requests for assistance, you must contact your local Emergency Operations Center: [County Emergency Management Contacts](#)

Are you currently running any generators at your facility?

What is the status of the following:

Electricity	<input type="text" value="Partial Power on Gener"/>
Water	<input type="text" value="Operational"/>
Sewer	<input type="text" value="Non-Operational"/>
Telephone	<input type="text" value="Operational"/>
Internet	<input type="text" value="Operational"/>
Natural Gas	<input type="text" value="N/A"/>
Propane	<input type="text" value="Empty Tank"/>
Hot Water Heater	<input type="text" value="Non-Operational"/>
Heating & Air Condition Status	<input type="text" value="Using Generator"/>

Are you able to maintain a safe temperature for all residents/patients and staff in your facility?

- a. If any generators are being utilized, select what is being powered by the generator(s). Select all that apply.

Are you currently running any generators at your facility? Yes ▾

What systems are currently running on generators:

- Entire Facility
- Life Safety Systems
- Life Support Systems
- Essential Equipment including select lighting
- Full HVAC (Heat & Air)
- Partial HVAC (Heat & Air)
- Food Refrigeration
- Medical Refrigeration

- b. Information being reported should not conflict; if so, an error message may display.

Are you currently running any generators at your facility? No ▾

What is the status of the following:

Electricity Full Power on Generat ▾

The 'Electricity Status' does not match the 'Systems Currently Running on Generators'. Please correct the appropriate answer.

Water Select ▾

9. The “Generators Status” tab is used to report which generators are currently being utilized for powering the facility and information about the fuel status for each generator. All generators entered during preseason will be displayed.


Add New Generator

Make/ Model	Type	Fuel Type	Currently Running Generator	Generator Run Time at Current Fuel Supply (Hours)	Refill Status	Next Refill Date
todays best	Permanently Installed	Diesel	Yes ▾		Select ▾	

- a. If a generator needs to be removed or updated, proceed to the “Generators” tab to make changes.





- b. If another generator needs to be added, click the “Add New Generator” button. The screen for adding a generator will open. Input the information and save.

Add New Generator 

Make/ Model	Type	Fuel Type	Currently Running Generator	Generator Run Time at Current Fuel Supply (Hours)	Refill
todays best	Permanently Installed	Diesel	Yes		Select

- c. The generator will now display on this list. Enter the information requested about each generator.

Make/ Model	Type	Fuel Type	Currently Running Generator	Generator Run Time at Current Fuel Supply (Hours)	Refill Status	Next Refill Date
todays best	Permanently Installed	Diesel	Yes		Select	
Test Gen 4	Portable	Gasolin	Select		Select	

10. The “Damages” tab is used to report any damages sustained by the facility during the event.

- a. If no, the user will be able to save the answer and move to the next tab.

- b. If yes, the user will be prompted for more detailed information including the type of damage and the severity.


Facility Damages


Did the facility sustain any damages?

Is the facility out of service due to damages?

Damage Type

Damage Severity

Date Damage Occurred 

Date Resolved 

Out of Service: Currently unable to occupy the facility due to damages.
Minor: Damage has occurred but does not affect the safety of patients, residents, or staff or the ability to deliver care; can be fixed at a later date.
Moderate: Damage has occurred but is isolated; partial patient/resident evacuation/relocation may be necessary, but the facility is safe and able to deliver care; repairs will be needed before the area or system affected can be used.
Major: Damage has occurred and safety and/or patient/resident care is effected; facility evacuation is necessary (if occupied); repairs will be needed before the facility can be reoccupied.

Damage Description

* For Damage Description - Character Limit: 500

- c. Save an entry for each type of damage sustained. Include a brief description of the actual damage.

Did the facility sustain any damages?

Is the facility out of service due to damages?

Damage Type

Damage Severity

Date Damage Occurred

Date Resolved

Damage Description

vice: Currently unable to occupy the facility due to damage has occurred but does not affect the safety of patient after date.

; Damage has occurred but is isolated; partial patient/residents safe and able to deliver care; repairs will be needed before damage has occurred and safety and/or patient/resident care be needed before the facility can be reoccupied.

deliver care

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Elevator

Floor

Foundation

Roads

Roof

Wall/Structural

Water Intrusion/Flooding

Windows/Door

Damage Description

* For Damage Description - Character Limit: 500

History



	Date Submitted	User	Damages?	Out of Service	Damage Type	Severity
Details	07/25/2018 3:32 PM	Contact, Sample	Yes	No	Roof	Minor
Details	07/25/2018 3:31 PM	Contact, Sample	Yes	No	Elevator	Major

11. The "Resource Needs" tab is used to inform AHCA that a provider has needs that the local emergency management officials should be assisting with.
 - a. If no, the user will be able to save the answer and move to the next tab.
 - b. If yes, the user will be prompted for more detailed information about what types of things are needed, who to contact about these needs, and whether these have been reported

to the local emergency management officials.

Resource Needs

- If you have immediate health or life threatening issues call 911.
- If your facility has any needs or requests for assistance, you must contact your local Emergency Operations Center : [County Emergency Management Contacts](#)

As a result of the emergency, do you currently have any needs for the facility?

Select all needs that currently apply:

- | | |
|---|---|
| <input type="checkbox"/> Diabetes Supplies | <input type="checkbox"/> Food |
| <input type="checkbox"/> Dialysis Supplies | <input type="checkbox"/> Fuel |
| <input type="checkbox"/> Gases | <input type="checkbox"/> Generator |
| <input type="checkbox"/> Medical/Pharmaceuticals | <input type="checkbox"/> Ice |
| <input type="checkbox"/> Oxygen Equipment/Ventilators | <input type="checkbox"/> Personnel |
| <input type="checkbox"/> PPE Supplies | <input type="checkbox"/> Portable Toilets |
| <input type="checkbox"/> Other Medical Supplies | <input type="checkbox"/> Transportation |
| | <input type="checkbox"/> Water |
| | <input type="checkbox"/> Other Resources Needed |

Provide a point of contact who can be reached to answer questions about these needs:

Name

Telephone Number

Have your needs been reported to your local EOC?

12. The “Re-Entry after Evacuation” tab is used to collect information about the return of evacuated residents/patients and staff. It will only display if the provider’s most recent “Evacuation Status” is yes to evacuating.

Re-entry After Evacuation

Is your facility Fully Operational?

***If your facility is not fully operational including full power, sewer, and water from your utility companies, inform your local Emergency Operations Center prior to re-occupying the facility.**

Facility Re-Entry Status

Facility Re-Entry Start Date 

Facility Re-Entry Completed Date 

Save

Save and Proceed

Undo Changes

13. The “National Reporting” tab is used to collect information that is requested by federal partners. This information is for reporting purposes only.

National Report Data

Thank you for submitting reports regarding your emergency status.
We do appreciate your continued compliance with Florida Statute 408.821. As part of our ongoing efforts to manage emergency circumstances, we request you fill out the information requested as accurately as possible.

Have any residents/patients been injured during this emergency event?	<input type="text" value="Yes"/>
How many residents/patients have been injured?	<input type="text" value="2"/>
Have any residents/patients expired during this emergency event?	<input type="text" value="Yes"/>
How many residents/patients have expired?	<input type="text" value="1"/>

14. All event/situational awareness information has been entered and saved. Please review and update by the specified reporting times and as the provider’s situation changes..