

CHALLENGES AND CONSIDERATIONS FOR HEALTHCARE FACILITIES AND RESIDENTS AFFECTED BY PLANNED POWER OUTAGES

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Over the past few years, wildfires have increased in frequency, severity, and duration. Additionally, in 2019, utility companies began to mitigate fire and other potential risks by shutting off power to whole communities if weather conditions were expected to increase the risk of fire or the potential for critical infrastructure failure.

Localized and widespread power outages related to wildfires, whether planned or unplanned, create significant challenges for the healthcare sector and communities in the event of an emergency. When power goes out during a disaster, public health and medical risks increase for individuals with access and functional needs that live independently in the community and rely on life-maintaining electricity-dependent medical and assistive equipment (e.g., oxygen concentrator, home dialysis, wheelchairs) and health care services (e.g., outpatient facility dialysis, oxygen services). Many of these individuals may rapidly seek assistance from emergency medical services (EMS) or overwhelm hospitals and shelters when seeking access to care or secure power. Others may shelter in place as they are unable to evacuate safely without assistance, putting their lives at risk. This is of significant concern, especially as technology and health and human service program advancements, including [long-term support service programs](#), are assisting more at-risk individuals to live independently in their communities.

Power outages also cause life-threatening risks to hospitals and other community-based healthcare facilities and providers. For example, when hospitals lose power, their ability to provide emergency care and surgical interventions, as well as dialysis and other critical services, is significantly impacted.

Successful mitigation of these risks requires an integrated, multi-sector, and local, state, territory, and federal governmental planning strategy. The strategy should leverage best practices, identify planning actions and mitigation measures, and use new data and health information technology capabilities, tools, and resources to help prevent adverse health impacts and death from a widespread power outage.

HHS emPOWER Program

ASPR, in partnership with the Centers for Medicare & Medicaid Services (CMS), developed and launched the HHS emPOWER Program in 2013 to help public health authorities, emergency managers, healthcare providers, first responders, aging agencies, volunteer organizations, and other community partners anticipate, plan for, and respond to the emergency needs of the over 4.2 million Medicare beneficiaries and other community members who rely on electricity-dependent medical and assistive equipment.

The HHS emPOWER Program provides multiple tools and resources, including the [HHS emPOWER Map](#), an interactive, online tool that is updated monthly and displays the total number of at-risk electricity-dependent Medicare beneficiaries in a geographic area, down to the ZIP code.

Check out these resources for more information on the HHS emPOWER Program:

- [HHS emPOWER Program Fact Sheet](#)
- [HHS emPOWER Program Executive Summary](#)
- [HHS emPOWER Program Web-Based Training](#)
- [HHS emPOWER REST Service Job Aid](#)

The HHS emPOWER Map enhances population-based situational awareness and provides actionable information for those assisting at-risk populations that may be impacted by wildfires, severe power outages, and other disasters. For example:

- Public health and emergency management officials can optimize shelter locations and shelter resource needs, plan for evacuations by identifying potential evacuation routes, and develop improved public communications to ensure individuals know where they can go to get assistance.
- Healthcare coalitions (HCC), hospitals, and first responders, including EMS, can identify healthcare

resource needs and potential areas of hospital and EMS surge. They can also work with public health officials and emergency managers to mitigate potential surge.

- Local electric companies can identify the areas that may require prioritized power restoration and offer power charging station options to protect health and save lives during the outage.
- Civic and volunteer organizations and community businesses can use the data to identify ways to provide support to the community in an emergency, such as offering access to power or charging stations (e.g., for backup batteries).

ASPR also provides related [technical assistance and tools](#) for health and emergency management professionals.

Wildfire- and Public Safety Power Shutoff (PSPS)-Related Challenges Encountered by Emergency Management, Healthcare, and Residents

Over the past few years, wildfires and PSPS events have challenged healthcare and related fields in the following ways:

- Critical infrastructure lacked back up power support to ensure communications, transportation routes, and other essential services were consistently able to operate during the prolonged power outages. Lack of cell tower generators and internet resulted in communication failures and a need for satellite, radio and other alternate options to support communications.
- Healthcare and related data was critical to assessing electricity, health and human services needs as power company medical baseline registries did not reflect the actual populations in the communities which impacted resource and power restoration prioritization.
- Power company information and timelines for de-energizing, location of power stations, and actual areas to be impacted were inconsistent. This significantly impacted the ability of local governmental agencies, healthcare providers, first responders and others to respond due to continually changing requirements.
- At-risk residents lacked information, resources and transportation to seek alternate safe locations (e.g., shelters, power stations, hotels, and family/friends) which led many to seek access to power and assistance through EMS and in hospital settings.

Planning for At-Risk Electricity and Healthcare Dependent Populations

In advance of the next wildfire season, healthcare facilities should consider the following best practices when planning for at-risk populations with access and functional needs who rely on life-maintaining, electricity-dependent medical and assistive equipment and healthcare services:

- Use the emPOWER data and tools to inform situational awareness, emergency planning and response activities prior to such events. Community partners should also leverage the [HHS emPOWER Map](#) to identify the number of electricity-dependent Medicare beneficiaries in their state/territory, county, and ZIP Code to obtain a minimum baseline for potential assistance needs and opportunities to assist.
- Equip shelters with generators and plan for charging stations, either independently or in coordination with utility companies, local businesses, or organizations that are accessible to individuals with access and functional needs.
- Anticipate at-risk population dependency on local medical assistive and public transportation resources to ensure continuity for access to critical healthcare services (e.g., dialysis) and temporary shelter and charging station locations.
- Provide consistent and timely communication updates and resources (e.g., website, hotlines, media, landline and mobile phone alerts) to ensure residents understand the location of planned charging stations, shelters and other services (e.g., transportation, food, medical care, heating/cooling) that may be provided to assist community members.
- Perform legal and administrative reviews now to know and understand existing legal authorities and program or policy allowances that can support responses to a severe power outage which does not result in a local, state, or federal declaration. Ensure plans and agreements (with both government and non-government agencies) are updated to enable rapid execution for shelters and other resources in non-declared events.



Please contact empower@hhs.gov for more information.

