

Adjust staffing levels, supplies

93% of ED physicians say they're not fully prepared for patient surge capacity due to natural disasters¹.

Failure to effectively plan can leave healthcare staff scrambling to provide adequate treatment due to inefficient staffing levels, supplies and emergency medicine.

ptimize communication

35% of hospitals have a communication system capable of contacting all staff.

Failed, truncated and delayed notifications can lead to disjointed communications and mobilization of necessary staff, as well as first responders and local and regional government.



Establish patient evacuation protocols

During Hurricane Sandy, many hospitals had to close or evacuate patients and 160,000 ED patients were diverted².

> Without a HIPAA- compliant system with tracking capabilities, patients may be separated from their medical records and untraceable by families for weeks.

Evaluate response plans

13% of hospitals have re-evaluated preparation/ response plans³.

Plans should be flexible and scalable enough to adapt to a wide variety of disaster scenarios and also account for the continuity of essential services.



- 1. CEP Emergency Department Violence Poll Results, American College of Emergency Physicians, 2018
- 2. S.C. Department of Health and Environmental Control, October 11, 2018
- 3. ACEP Emergency Department Violence Poll Results, American College of Emergency Physicians, 2018

Have a plan before disaster strikes.

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