

Dealing With Disasters: Whats Hospitals Will Learn from Hurricane Harvey

OSF HealthCare Newsroom - Shelli Dankoff | Media Relations Coordinator

25 hospitals evacuated or closed. 12 hospitals running on generator power. 14 hospitals sheltering in place. 31 nursing homes closed. Long-term care facilities evacuating. Staffing shortages and access issues.

Those are the just some of the statistics and stories in the Houston, Texas area in the wake of historic flooding caused by Hurricane/Tropical Storm Harvey. Hundreds of patients and their families were affected.

Most medical facilities train regularly to deal with emergencies and disasters, most of them on a significantly smaller scale than the epic flooding caused by Harvey. OSF HealthCare is an 11-hospital system based in Peoria, Illinois with a dedicated team that focuses on preparedness. The team says that is a benefit, and should be an added comfort, to patients, visitors and staff.

Even with ready supplies and a staff that trains regularly, it's hard to prepare for every scenario – like a 1,000 year flood – so you have to be ready to adapt.

SOT Troy Erbentraut, Disaster Preparedness Manager - OSF HealthCare Saint Francis Medical Center

(We learn from other events like Katrina, a lot of those hospitals initiated their hurricane plans. What happened, the hurricane, just like in Houston, the hurricane did not hit that town, it flooded. So the transition between a hurricane plan and a flood plan is slightly different. And we learned from there that we need to write those 2 the same. Now we don't have hurricanes in Illinois, but we can't write a tornado plan that doesn't have something else. We don't want just one plan, we want a comprehensive emergency management program that no matter what happens we respond. :40)

V/O: Troy Erbentraut is the Disaster Preparedness Manager for OSF HealthCare Saint Francis Medical Center, a 629-bed, Level I Trauma Center, and largest hospital in the OSF HealthCare system. He is also the Region Hospital Coordinating Center coordinator for the Illinois Department of Public Health EMS region 2, which cover 17 counties and 25 hospitals in Illinois.

Another goal for his team during any disaster is to make sure the hospital keeps functioning as a hospital. They learn lessons from any disaster – such as Harvey and Katrina, another hurricane whose damage was caused by severe flooding in its wake, and the tornado that hit Joplin, Missouri in 2011, making a nearly direct hit on a hospital.

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(Every disaster that happens you learn something from and you take away huge things. I can go back to the way we teach certain things. From Joplin it was shoes that was a big thing. We don't put shoes on our patients and in scenes like Joplin there are scenes where there is a lot of glass and debris around so you're asking patients to walk, well they don't have their shoes. Katrina was our first flooding issue, they kept moving up, well how do they get out. It's those stories that come out that teach people about preparedness. :34)

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(With 22 hospitals evacuated we should have huge lessons on how the evacuation went. Did they use equipment? Were they able to use the elevators or did they have to use evacuation equipment? If they did use equipment how well did it work? We've learned some of those lessons too where we spend money on equipment A, first time they use it in a real world disaster – we trained with it, we educated on it – but the first time we use it in a real world disaster maybe it wasn't as good as it should have been, so then there's a transition to equipment B. :30)

V/O: Erbentraut calls himself the "what if" guy who's always looking to what lies ahead. He knows reopening some of the flooded Houston hospitals will take time and a lot of resources – it isn't like cleaning a flooded basement. Mold mitigation from all of that water will take time and then licensing agencies have to sign-off. He expects to be discussing – and learning from this – for years to come.

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(There's a lot to come out of Houston. We're still in this acute response phase where we're still rescuing people off roofs, we're still trying to get people out of harm's way. We've not transitioned into anything. We're still in the infancy of this disaster. I believe we're looking at years and billions of dollars to come. :21)

V/O: As a disaster preparedness professional, Erbentraut encourages people NOT to self-deploy to a disaster such as Houston. He says he understands people wanting to help, but often those people end up needing resources, such as food and water, or sometimes rescued themselves because they failed to plan properly. He recommends if you really want to help, go with an established organization and have an entry – and exit – plan.