



**For Immediate Release**  
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## **Emergency Preparedness Drills Completed at CT Hospitals**

*Congresswoman Rosa DeLauro Discusses Emergency Preparedness Needs at CHA*

WALLINGFORD – Since the first report of an Ebola case in the U.S., interdisciplinary teams of caregivers from the state’s acute care hospitals have been reviewing and testing their emergency and healthcare response plans and conducting emergency preparedness drills and exercises. All acute care hospitals in Connecticut have now completed drills in line with the Governor’s directive, and they will continue to drill in the coming weeks and months as guidance and best practices evolve.

Hospital emergency preparedness needs was the subject of a forum at CHA today. Congresswoman Rosa DeLauro (CT-3) held a roundtable discussion with representatives of more than 20 hospitals from across the state to talk about the impact of cuts to hospital preparedness programs funded by the federal government. Congresswoman DeLauro expressed that the impact of these cuts has been more evident than ever because of Ebola.

“This is a trying time for our hospital preparedness system, which is at the center of the effort to control the spread of Ebola,” said Congresswoman DeLauro. “But federal support has been moving in the wrong direction. The deep cuts we have seen over the last four years are a danger to the public health. Congress has a responsibility to provide the federal funding public health agencies need to properly respond to, and be prepared for, whatever emergencies may arise. I have been fighting these cuts and will continue to do so. I am glad to hear from the hospital administrators present today, who represent every corner of Connecticut. I will take the feedback I received today back to Washington and continue to fight for the resources those on the front lines need to confront all possible epidemics.”

Hospitals discussed the resources needed to prepare for and cope with any type of emergency that would put stress on the healthcare delivery system. They highlighted the cost issues related to Ebola, which include ongoing training, exercises, medical response supplies including personal protective equipment (PPE), and coordination with other local, regional, and statewide emergency response providers. Hospitals discussed the concept of regionalizing the inpatient treatment of Ebola patients, as well as the need for careful planning and coordination with emergency medical services (EMS) responders.

Congresswoman DeLauro praised this week’s release of the CDC’s new, tighter guidelines for treating Ebola patients. The new information provides clear and consistent guidance and a higher level of protection for healthcare workers consistent with proven, effective approaches.

Connecticut hospitals have been engaged in planning and sharing resources, and many had already established higher levels of personal protective equipment (PPE) comparable to the new guidelines. Patient safety and the safety of doctors, nurses, and other frontline caregivers is

paramount. Connecticut hospitals feel strongly that a collaborative approach that includes caregivers, community emergency response resources, and local, state, and federal government and agencies, is essential to coordinated planning and response.

Through CHA, Connecticut hospitals participate in weekly statewide hospital meetings and calls to coordinate approaches on issues ranging from pre-hospital care to screening protocols and PPE. They are participating in multiple CDC calls weekly to discuss new developments and best practices in the detection, prevention, and treatment of Ebola. As they have from the beginning, Connecticut hospitals continue to work closely with DPH to ensure that efforts statewide are coordinated.

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### **About CHA**

The Connecticut Hospital Association has been dedicated to serving Connecticut's hospitals since 1919. Through state and federal advocacy, CHA represents the interests of Connecticut's hospitals on key healthcare issues in the areas of quality and patient safety, access and coverage, workforce, community health, diversity, and hospital reimbursement.