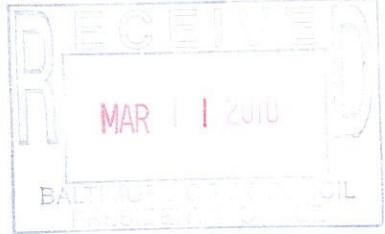


F R O M	Name & Title	Olivia D. Farrow, Esq., RS Interim Commissioner of Health <i>OF</i>	Health Department	
	Agency Name & Address	Health Department 1001 E. Fayette Street	MEMO	
	Subject	10-0191R - Council Bill Informational Hearing - Response to the February 2010 Winter Storms		

To: President and Members  
of the City Council  
c/o  
409 City Hall

March 4, 2010



The Baltimore City Health Department (BCHD) is pleased to submit comments in response to City Council Bill 10-0191R. The purpose of the bill is to review the lessons learned from this crisis, and explore best practices from other jurisdictions in order to better prepare the City's response to future storms.

In the first half of February 2010, Baltimore City was hit by two historic snowstorms in the span of five days. Each of these storms alone delivered more snow in a single outing than Baltimore typically receives in an entire winter season. City government responded quickly and forcefully to this challenge. During the three phases of the City's Snow Emergency Plan, the Health Department responded to the health needs of the City's residents. At the request of the Mayor and City Council, the Health Department reviewed its response to the crisis in order to determine what did and did not work, whether City resources were used effectively, and how the Department can better meet this sort of challenge in the future.

During the storm response, BCHD's main areas of responsibility included hospital coordination, coordination of dialysis patient transport, and implementation of BCHD's Continuity of Operations (COOP) Plan to ensure essential services continued to be provided during the snow event. BCHD fielded requests from hospitals and relayed situational information to the appropriate agencies. BCHD's Field Health Services (FHS) coordinated transport of dialysis patients in collaboration with MTA Mobility, the Fire Department, the Mayor's Commission on Disabilities, and the Mayor's Office of Emergency Management. BCHD's FHS and MTA Mobility coordinated efforts to communicate dialysis transport requests, and together transported 1,708 dialysis patients during the activation period of the Snow Room.

BCHD staff participation was excellent, and following the activation of the Emergency Operation Center numerous staff promptly volunteered for shifts and continued to volunteer as the event unfolded. At all times, BCHD maintained a representative at the EOC. Away from the EOC, BCHD's FHS personnel worked around the clock to ensure coverage for their services. However, in review of the agency's activities during the storm, some improvement is needed. Better coordination and communication with local hospitals, particularly during implementation of Phase III, is needed. Hospitals were not given advance notice of the City's intention to

*Comments*  
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implement Phase III activities, and their ability to plan staffing for essential hospital services during the worst part of the second snowstorm was adversely impacted. Additionally, the exception to travel restrictions granted to critical care hospital staff led to confusion about who was considered “critical care.” BCHD recommends that the City and Department of Transportation re-examine implementation of Phase III of the Snow Emergency Plan to include providing hospitals advance notice of the potential for enactment of Phase III of the Snow Emergency Plan, to allow the hospitals, in turn, to plan accordingly.

Another area for improvement was capacity, including conference call capability, and physical space in the EOC. The inability of the City operators to set up conference calls, as well as the lack of necessary ports for emergency conference calls (e.g. calls regarding notification of Phase III guidelines to hospitals) limited the participation of hospital partners. Coordination with the State Department of Health and Mental Hygiene, in response to inquiries from hospitals regarding the guidelines for critical care personnel traveling to work during Phase III, requires further clarification. The hospitals were not clear on whether essential employees could report to work, despite the Phase III alert. Clarification on the protocol and better definition of travel guidelines for critical care personnel is needed.

The coordination of dialysis patient transportation functioned well, but could be improved. MTA Mobility and FHS experienced service disruptions and communication issues with clients, temporarily overloading the City’s 311 and 911 services, as well as the EOC operators. BCHD is re-evaluating its operations and emergency plan to address the communication and transportation gaps identified during the snow event. However, despite these problems, BCHD and other EOC partners coordinated services and transport of dialysis patients effectively and efficiently.

BCHD clinic sites faced some challenges implementing the COOP plan due to lack of clarity about the clearing of streets/parking lots, and whether staff would be able to access the facility and parking at their various sites. In some instances, key holders were unable to access buildings due to weather conditions. BCHD has recommended that protocol be developed to determine if clinics will close, prior to inclement weather.

The Health Department looks forward to the opportunity to build upon its success and address the areas identified as needing improvement.

CC: Angela Gibson  
Rachel Indek

Catherine Raggio, Secretary  
George P. Falla, Jr. Deputy Secretary

Martin O'Malley, Governor  
Anthony G. Brown, Lt. Governor



February 26, 2010

OFFICE OF THE  
MAYOR

2010 MAR - 2 AM 10:33

The Honorable Stephanie Rawlings-Blake  
City Hall, Room 250  
100 N. Holliday Street  
Baltimore, Maryland 21202

Dear Mayor Rawlings-Blake:

I want to share with you the observations of our Department regarding the close cooperation among the Maryland Transit Administration's Mobility paratransit service, the transportation service of the City Health Department's Field Health Services, the City's Fire Department and Transportation Department, with the continuing active interaction of the City's Commission on Disabilities, in tending to the medical transportation needs of citizens with disabilities during this month's successive snow emergencies. All acted as one, in effectively and sometimes almost heroically providing transportation to emergency and critical medical treatment for the City's sometimes stranded and very vulnerable residents, extending what I am sure amounted to a lifeline for some of these individuals.

The recent successive snow emergencies tested the emergency preparedness planning and provided an example of what we all are capable of when working together.

Sincerely,

*Catherine A. Raggio*

Catherine A. Raggio  
Secretary

C: Nollie Wood