CCHC Emergency Preparedness Gap Analysis

This tool will help clinics and community health centers identify gaps in their planning for disaster response. If further emergency planning support is needed please review the tools and templates available on the California Primary Care Association website, or email us at: EP@CPCA.org.

Part I: Emergency Operations Planning

1. Has your organization conducted a thorough Hazard Vulnerability Analysis (HVA)?
   □ Yes
   □ No

2. Do you have an Emergency Operations Plan (EOP) that specifically addresses the four disaster phases? (Mitigation, preparedness, response, recovery).
   □ Yes
   □ No

3. Does your EOP identify those who have the authority to activate emergency response procedures, and the process for bringing together the emergency management team and activating the clinic command center?
   □ Yes
   □ No

4. Does your EOP define the triggers that activate a switch to emergency operations mode?
   □ Yes
   □ No

5. Does your EOP include guidelines for communication with hard-to-reach and vulnerable populations?
   □ Yes
   □ No

6. Does your EOP address your capacity to render mass immunization/prophylaxis?
   □ Yes
   □ No

7. Does your clinic have an updated emergency risk communications plan?
   □ Yes
   □ No
8. Does your organization conduct annual drills to test your plan?
   □ Yes
   □ No

**Part II: Response Capability**

9. Is your clinic’s key administrative staff trained in how to access local health authorities and emergency management?
   □ Yes
   □ No

10. Does your clinic maintain 24/7 contact numbers for local health authorities and emergency management (fire, sheriff, medical health operational area coordinator, etc)
    □ Yes
    □ No

11. Have you documented the procedure to request supplies, equipment, personnel, and other resources from the California Medical Mutual Aid Plan?
    □ Yes
    □ No

12. To what extent has the appropriate staff within your clinic been trained to coordinate patient registration, provide services, and follow EOP procedures in case of an emergency or surge event?
    □ Not started
    □ In progress
    □ Mostly complete
    □ Complete
    □ No plans to conduct this activity

13. Do you maintain key supplies and equipment in order to sustain operations for 24, 48, 72, 96 hours with full patient capacity?
    □ Yes
    □ No
14. To what extent has your clinic developed contingency plans to provide services at your current facility(ies) if it is damaged or diminished in operational capacity?

☐ Not started
☐ In progress
☐ Mostly complete
☐ Complete
☐ No plans to conduct this activity

15. To what degree has your clinic contracted with vendors, medical and non-medical suppliers, and other contractors to provide supplies, equipment, and maintenance during an emergency response?

☐ Not started
☐ In progress
☐ Mostly complete
☐ Complete
☐ No plans to conduct this activity

16. Is there adequate refrigerated storage space for an influx of emergency supplies at your clinic (such as pre-filled syringes and multi-dose vials of vaccine, adjuvant).

☐ Yes
☐ No

17. Is there adequate storage space for an influx of non-refrigerated and ancillary supplies?

☐ Yes
☐ No

18. To what degree does your clinic have staff on-call to coordinate patient registration and provide services in a surge event?

☐ Not started
☐ In progress
☐ Mostly complete
☐ Complete
☐ No plans to conduct this activity
19. Does your organization have a back-up communications system?
   □ Internal
   □ External
   □ None

20. Does your clinic have an off-site backup of your information technology system?
   □ Yes
   □ No

**Part III: Community Integration**

21. Is your EOP integrated into the local/regional emergency plan?
   □ Yes
   □ No

22. Does your clinic actively participate in community-wide emergency response planning with public health and other emergency response partners?
   □ Yes
   □ No

23. Has your local health department developed plans for supporting your operational and resource needs during a formal emergency response?
   □ Yes
   □ No

24. Has your clinic established mutual agreements for support with the local health department and engaged other providers in your area to assist in an emergency situation or provide care for your patients if your clinic is unable to do so?
   □ Yes
   □ No
25. To what degree has your clinic contracted with volunteer groups, temporary staffing agencies, or other personnel sources to augment staff during an emergency response?
   - Not started
   - In progress
   - Mostly complete
   - Complete
   - No plans to conduct this activity

26. Does your clinic have arrangements with Federal, State, and/or local agencies for reporting of data?
   - Yes
   - No

27. To what extent do your health department and health departments within your jurisdiction have procedures in place to request antiviral medications?
   - Not started
   - In progress
   - Mostly complete
   - Complete
   - No plans to conduct this activity

28. To what extent has your clinic developed a plan to provide services from an alternate location if the current facility is damaged or diminished in operational capacity?
   - Not started
   - In progress
   - Mostly complete
   - Complete
   - No plans to conduct this activity
29. To what extent does your clinic have a system in place to receive messages and guidance from local/regional health departments, community partners, and medical authorities?

- Not started
- In progress
- Mostly complete
- Complete
- No plans to conduct this activity

30. To what extent is your clinic prepared to disseminate educational materials to patients when responding to specific emergency guidelines?

- Not started
- In progress
- Mostly complete
- Complete
- No plans to conduct this activity

31. To what extent does your clinic have materials (such as fact sheets) and mechanisms (such as public service announcements) in place to communicate personal protective measures to your patients?

- Not started
- In progress
- Mostly complete
- Complete
- No plans to conduct this activity

32. To what extent does your clinic currently have staff to support websites, hotlines, and other avenues for public information?

- Not started
- In progress
- Mostly complete
- Complete
- No plans to conduct this activity
Part IV: Finance and Administration

33. Has your clinic completed a business impact analysis to estimate the potential costs of emergency or disaster scenarios?
   □ Yes
   □ No

34. Can you rapidly assess supplies and equipment inventories, including applicable personal protective equipment?
   □ Yes
   □ No

35. Can your clinic track all costs related to a disaster response, including supplies and equipment, medical care, manpower and lost revenue?
   □ Yes
   □ No

36. Have you implemented measures to prevent financial/revenue and facilities loss due to an emergency? (example: insurance coverage for short-term closure)
   □ Yes
   □ No

Part V: Diminished Infrastructure

37. Is your clinic prepared to perform the functions listed in this document in the case of server disruption, power outage, or otherwise diminished infrastructure?
   □ Yes
   □ No