AHCA AMERICAN HEALTH CARE ASSOCIATION NCAL NATIONAL CENTER FOR ASSISTED LIVING

HAZARD VULNERABILITY ASSESSMENTS FOR HEALTHCARE FACILITIES

I. What is a Hazard Vulnerability Assessment (HVA)

a. Tool to help evaluate vulnerability to specific hazards
b. Puts each hazard in perspective by using categories
    i. Probability
    ii. Human impact
    iii. Property and business impact
    iv. Response
c. Creates numeric value to give relative threat
d. Is an evolving document

II. Purpose of HVA is to Make Risk Based Choices

a. Address your vulnerabilities
b. Mitigate hazards
c. Respond to events
d. Recover from events
e. Create a plan to address greatest risks

III. The HVA TOOL Contents

a. Events
    i. Naturally occurring
    ii. Human
    iii. Technological
b. Ranking/Scoring of each section = 0 to 3
c. Vulnerabilities
    i. Human Impact
    ii. Risk of injury/death to staff or residents
    iii. Property Impact
        1. Damage risks
        2. Cost to replace, for temp replacements, repairs, etc
        3. Time to recover
    iv. Business Impact
        1. Will business be disrupted
        2. employees access to work
        3. Customers access to facility
        4. Do you have contractual agreements that will result in fines, penalties, legal costs

5. Interruption of critical supplies
6. Reputation/public image
7. Financial impact/burden

d. Resources/Preparedness Section

i. Preparedness

1. Preplanning
2. Status of current plans
3. Drills and Training
4. Insurance
5. Alternate sources of supplies/services
6. Memorandums of Understanding (MOUs)

ii. Internal Response

1. Timeliness and, effectiveness of response, resources
    a. Types and volume of supplies on hand
    b. Distribution of supplies
    c. Staff availability
    d. Mobility of supplies
2. Backup systems
3. Internal resource's ability to withstand disasters/survivability

iii. External Response

1. Community/mutual aid, includes staff and supplies
2. Preplanning
3. Status of current plans
4. Community Drills
5. Training status
6. Coordination of local and state agencies
7. Coordination of nearby health centers and treatment specific facilities

IV. Scoring of HVA

a. Complete at least once year
b. Completed by safety committee/knowledgeable staff and approved by administration
c. Highest total scores = highest risks
d. Organization determines what scores need to be addressed
e. Utilize data to assist in decision making
    i. Known risks
    ii. Historical data/statistics
    iii. Manufacturer/vendor data/statistics
f. Probability and Impact Scoring
    i. 3 = high risk (event ~ every 1-3 yrs)
    ii. 2 = moderate risk (event ~ every 3 -10 yrs)
    iii. 1 = low risk (event ~ >>10 yrs)
    iv. 0 = not applicable
g. Preparedness/Response Scoring
    i. 3 = low or no risk
    ii. 2 = moderate
    iii. 1 = high
    iv. 0 = NA

Resources/References

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