



**American Hospital
Association**

Liberty Place, Suite 700
325 Seventh Street, NW
Washington, DC 20004-2802
(202) 638-1100 Phone
www.aha.org

January 22, 2009

Mr. Don Grant
Incident Management Systems Director
National Preparedness Directorate
Federal Emergency Management Agency
500 C Street, S.W.
Washington, DC 20472

RE: Docket ID FEMA-2008-0017, Voluntary Private Sector Accreditation and Certification Preparedness Program; Notice and request for recommendations; (Vol. 73, No. 248), December 24, 2008.

Dear Mr. Grant:

On behalf of our more than 5,000 member hospitals, health systems and other health care organizations, and our 38,000 individual members, the American Hospital Association (AHA) appreciates the opportunity to provide comments on the Federal Emergency Management Agency's (FEMA) Voluntary Private Sector Accreditation and Certification Preparedness Program (PS-Prep).

The disasters we faced over the last eight years, from the September 11 terrorist attacks to the Gulf Coast hurricanes to the recent flooding in the Midwest, redefined the meaning of disaster readiness for the nation, its communities and its hospitals. As our nation worked to strengthen national security and emergency readiness, America's hospitals upgraded existing emergency operations plans and integrated these plans with their local response structure. They continue to tailor their plans to suit the individual needs of their communities in the face of new and emerging threats.

While hospitals continue to improve their own emergency response capacity and capability over time, a hospital's successful response in a disaster will depend largely on whether its other partners in the private sector, such as drug and device manufacturers and distributors, food suppliers and telecommunication organizations, are prepared. As a result, the AHA supports PS-Prep's goal of widely encouraging private sector preparedness. PS-Prep certification would provide some assurance of private sector readiness to hospitals working in conjunction with these partners.



We are hopeful that seeking certification under PS-Prep will continue to be completely voluntary and that no private sector entity will be required by the Department of Homeland Security to seek or obtain a PS-Prep certification. We are concerned because other federal programs and initiatives of only marginal value to hospital preparedness and response, initially described as voluntary for hospitals, have been made mandatory. For example, this occurred with the National Incident Management System (NIMS), which initially was mandatory only for federal agencies and state governments; however, compliance is now mandatory for hospitals that receive federal preparedness funding. The AHA encourages FEMA to clearly articulate in the final documents that PS-Prep is a completely voluntary program and that other federal and state agencies and departments should not make certification of private sector entities mandatory.

We also are encouraged by FEMA's willingness to consider the adoption of private sector preparedness standards that apply to a particular industry. Hospitals are regulated and accredited under existing comprehensive standards that address leadership, sustainability of services, continuity of operations and maintenance of facility operations under adverse conditions. These standards, which are focused on and relevant to hospital operations, provide a platform for an effective emergency management program and are periodically updated and enhanced to reflect new or changing threats and risks. Examples of these standards and regulations include:

- The Joint Commission Emergency Management Standards;
- American Osteopathic Association (AoA) – Healthcare Facility Accreditation Program;
- Centers for Medicare and Medicaid Services (CMS) Hospital and Critical Access Hospital Conditions of Participation;
- Det Norske Veritas Healthcare Inc.'s (DNV) National Integrated Accreditation for Healthcare Organizations; and
- National Fire Protection Association (NFPA) – 99.

We recommend that FEMA adopt these standards rather than create new standards for hospitals. By doing so, FEMA will avoid potential confusion within the health care field.

Furthermore, we urge FEMA to ensure that policies and procedures are in place that will simplify the ability of PS-Prep certifiers to carry out their statutory obligation to, at the request of an entity seeking certification, consider non-PS-Prep certifications. This will avoid unnecessarily duplicative certification requirements. It also will allow PS-Prep certifiers to recognize an organization's compliance with equivalent preparedness standards that may not yet be adopted by the PS-Prep program.

We also are concerned that the expense of the certification process could cause small businesses, such as critical access hospitals, to avoid seeking certification. Therefore, we strongly recommend that FEMA establish a variety of lower-cost options as an alternative to third-party certification for small businesses. Such options, as described in the December 24 notice, include self-declaration of conformity and second-party attestation.

Mr. Don Grant
January 22, 2009
Page 3 of 3

On behalf of the nation's hospitals, the AHA is committed to working with FEMA, the Department of Health and Human Services and other federal agencies to ensure that the nation's hospitals continue to fulfill their critical role in preparing for and responding to all types of disasters.

Thank you for the opportunity to comment. If you have any questions, please feel free to contact me or Roslyne Schulman, senior associate director for policy, at (202) 626-2273 or rschulman@aha.org.

Sincerely,

Rick Pollack
Executive Vice President