



HHS emPOWER Program

STORY FROM THE FIELD | PLANNING FOR MULTIPLE THREATS IN ARIZONA

The HHS emPOWER Program’s innovative tools support state and local efforts to anticipate, prepare for, and respond to the needs of electricity and health care dependent individuals throughout the emergency management lifecycle.



Why Was the HHS emPOWER Program Needed?

The state of Arizona regularly works to prepare the whole community for a variety of incidents, emergencies, and disasters, such as severe weather, poor air quality, and severe power outages. These threats are often exacerbated by severe heat, with Maricopa County as one of the hottest counties in the U.S. To better address the access and functional needs (AFN) of individuals in their communities, the Arizona Department of Health Services (ADHS) used the map and datasets to prepare for, respond to, and work to mitigate threats to at-risk individuals in emergencies.



How Were the HHS emPOWER Program Tools Used?

In 2015, ADHS established deployable caches of durable medical equipment (DME) and medical supplies to help local shelters support the health care needs of individuals with AFN throughout Arizona. The caches provide resources that allow people with basic medical needs to stay in general population shelters, keep families and caregivers together, and reduce medical surge. ADHS **used the HHS emPOWER Map to identify the number and type of required inventory items for the AFN cache.** They used this information to find sources for cache maintenance and replenishment, and identify entities willing to manage and deploy resources serving approximately 1,000 individuals with AFN. Finally, they provided training and conducted exercises on the cache deployment.

In 2016, the state of Arizona, Maricopa County, and their partners participated in an exercise scenario where a storm resulted in a major power outage and hazardous travel conditions for power company crews. All players were asked to use the **HHS emPOWER Map and emPOWER Emergency Planning Dataset** to inform the following tasks:

- Provide situational awareness and safety recommendations,
- Provide guidance and information on accessing assistance and resources to avoid greater impacts to the community,
- Quickly identify and assess the level of needs in the community, and
- Provide appropriate support and services to responders.

Partners



- ADHS
- Maricopa County Department of Public Health
- Health Care Coalitions (HCC)
- Geographic Information System (GIS) Analysts
- Arizona Statewide Independent Living Council



What Was the Impact?

Before Arizona officials had access to the HHS emPOWER Map, they only had information on the at-risk population down to the county level. However, approximately 60 percent of the state’s population is concentrated in just one county. Having data **down to the ZIP Code level gave emergency and health planners a clearer picture of the potential health care needs in their community** in advance of a disaster, and **helped them prioritize resources** during the emergency based on the size and scope of the emergency. Further, this data informed partners’ decision-making regarding prioritization of power restoration, assisted with forecasting equipment needs, shortages, and resource requests, and assisted the HCC with surge preparation and management.

Lessons Learned: The HHS emPOWER Program tools can be used for innovative applications outside of the loss of power, such as assisting individuals with AFN who need to be evacuated during flooding scenarios, or identifying individuals who may be impacted by poor air quality resulting from large fires and other events due to their use of oxygen related medical equipment.

Quick Facts

Date: 2015 - 2019

Location: Arizona



Tool(s) used:

- emPOWER Map
- emPOWER Emergency Planning De-identified Dataset

Stage(s) of the Emergency Management Lifecycle:

- Preparedness
- Response
- Mitigation

“I’m encouraged that ASPR’s vision was that we need something like this to help the community...[emPOWER data] has been a very helpful tool.”

*-Theresa Ehnert,
Arizona Department of Health Services*

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