(Hospital Available Beds for Emergencies and Disasters)

Person responsible:  State HAvBED Coordinator  
Backup:  Regional Resource Center Directors  
Other:  Designated hospital personnel  
Vendor:  Intermedix EMSystems

Rationale:

Maine’s HAvBED system (Intermedix EMSystems’ EMResource) is a web-based reporting tool used to gather real-time bed availability counts, asset statuses, and situational assessments for hospitals during an event. All states that receive ASPR funding are required to have a HAvBED system in place.

Assumptions:

Procedural

• Hospitals affected by the event will see an increase in the number of patients requiring care.
• Hospitals will receive a notification from their respective Regional Resource Center Director (most likely, via the Health Alert Network) to log in to EMResource and update their current bed count information and diversion status. This message may include an initial desired update frequency.

Technical

• Electrical power and internet access are available at each hospital.
• End-users at hospitals will require password resets and other technical assistance while using the system. Regional Resource Center Directors (or designated personnel) will be available to help the State HAvBED Coordinator provide administrative support to these users.

Overview:

This Annex provides general guidance on the use of EMResource for monitoring bed availability during an event.
Annex 3. Part 1. HAvBED

**Maine Inter-Pandemic Period**

**Mitigation and Preparedness**

**ME Level 0, I, II**

1. System initiation
   a. Log in to EMResource.
   b. Initiate a HAvBED poll to obtain updated bed counts at all hospitals.
   c. Contact Maine CDC Regional Resource Centers to request technical assistance in facilitating hospital bed count entry at a determined frequency (every 12 hours, at a shift-change, etc.).

2. Reporting
   a. Generate situational report on bed availability.
   b. Review report to determine if there exist any trends in surge or diversion status.
   c. Distribute report to Logistics Section Chief, who would then submit it to the Incident Commander.
   d. Command staff will review the situation report.

3. Potential response action
   a. If any shortfalls are identified via the situational report, Command staff will contact hospitals to determine resource needs.
   b. Logistics staff will work to locate and distribute requested resources and notify relevant response partners that a request for resources has been received and is being addressed.

**Maine Pandemic Alert Period**

**Heightened Preparedness: On Standby**

**ME Levels III, IV**

1. Maintain all activities from Maine Inter-Pandemic Period
   b. Command staff will determine whether or not to increase the frequency of bed count polling.

**Maine Pandemic Period**
Activate Response Plan  
ME Levels V, IV

1. Maintain all activities from Maine Pandemic Alert Period

Maine Post Pandemic Recovery

Recovery Activities  
ME Levels VII

1. Operations Medical Care Group Supervisor notifies hospitals that the event is over and to cease providing bed polling data.
### Annex 3 Part 1. HAvBED Summary Matrix

<table>
<thead>
<tr>
<th>HAvBED</th>
<th>Maine Inter-Pandemic Period: Awareness Mitigation/Preparedness ME Level 0, I, II</th>
<th>Maine Pandemic Alert Period: Standby Heightened Preparedness ME Levels III, IV</th>
<th>Maine Pandemic Period: Activate Response Plan Response ME Levels V, IV</th>
<th>Maine Post Pandemic Recovery Period Recovery ME Levels VII</th>
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</thead>
<tbody>
<tr>
<td>HAvBED</td>
<td>Initiate bed count poll. Determine reporting frequency</td>
<td>Consider increase reporting frequency</td>
<td>Consider increase reporting frequency</td>
<td>Cease bed count polling</td>
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