

## Assessing Domestic Readiness for the Treatment of Ebola Virus Disease Patients: Rapid Ebola Preparedness Teams – United States, 2014

**Author:** William (Chris) Edens  
**Date:** Monday, April 20, 2015  
**Time:** 3:25 pm/et  
**Location:** Ravinia Ballroom

**Summary:** Getting U.S. hospitals ready for Ebola was a massive, rapid, meticulous effort: Inside CDC's Rapid Ebola Preparedness (REP) teams.

### Abstract:

**Background:** Potential importation of Ebola virus disease (Ebola) into the United States requires assurance of domestic Ebola preparedness. The CDC Rapid Ebola Preparedness (REP) strategy was created to assess and support potential Ebola Treatment Centers identified as part of state and regional planning efforts. Our objective was to assess the results of REP visits and quantify U.S. readiness to treat Ebola patients.

**Methods:** At the request of state/local health officials, REP teams visited hospitals developing Ebola preparedness plans. Teams consisted of CDC staff members, including NIOSH, state/local health officials, additional federal partners, and external hospital infection control experts. Tools created from guidance issued by CDC and other agencies were used to assess each facility's readiness to treat Ebola patients. Teams assessed and provided guidance on facility infrastructure and protocols in multiple domains, including staffing, patient transport and placement, personal protective equipment (PPE), training, laboratory safety, environmental infection control, and waste management.

**Results:** As of January 2, 2015, REP teams had visited 75 facilities in 20 states and the District of Columbia. The most common challenges identified included PPE supplies, PPE doffing procedures, infrastructure/facility design, laboratory procedures, and sustainable models for staffing and competency assessment. By January 2, 46 REP-assessed hospitals were considered prepared to care for Ebola patients, increasing national capacity from 6 treatment beds (located in the three previously designated national bio-containment facilities) to 67.

**Conclusions:** On-site REP team activities during the Ebola response have expanded U.S. Ebola treatment capacity and identified previously unrecognized barriers to preparedness. Obtaining sufficient PPE quantity and developing sustainable staffing models remain concerns at some facilities. CDC continues to provide assistance and issue guidance to improve Ebola treatment capacity.