

*Emergency Status System
Health Care Provider Information*

Agency for Health Care Administration

May 2006

Molly McKinstry

Chief of Long Term Care Services

Emergency Status System - ESS

- Track Emergency Status & Impact for AHCA Regulated Providers
- Assists in Prioritization of Activities and Response to Emergencies
- Resource to Emergency Operations Center

- 2005 Hurricane Season – Internal Use by AHCA
- 2006 Web Interface – Input from Providers, Associations, and Others

ESS Online Enhancements

- Individual User Accounts
- Enter Provider Information:
 - Providers (Requires AHCA User Code)
 - Provider Affiliates (Requires Provider Approval)
 - Provider Association Staff (Executive Director Approval)
- View Reports:
 - Emergency Operations Center
 - Provider Association Staff
 - Attorney General Office Staff
 - Long Term Care Ombudsman Staff

ESS Providers

- Hospitals
- Skilled Nursing Facilities
- Assisted Living Facilities
- In-Patient/Residential Hospice
- Adult Family Care Homes
- Intermediate Care Facilities for the Developmentally Disabled
- Crisis Stabilization Units
- Residential Treatment Facilities
- Transitional Living Facilities
- End Stage Renal Disease Centers

ESS Events & Points of Contact

Events

- Activities Revolve Around “Events” e.g.: Hurricanes
- Different Entries (Options) Based Upon Whether an Event is Open

No Event Open - Pre-Season Information

- Emergency Contact Persons & Contact Numbers
- Utility Account Information
- Existing Generator Information

ESS Points of Contact

Open Event (Storm)

- Pre-Storm Information
 - Evacuation Status Including Destination
 - Special Resident Characteristics - Oxygen, Ventilator, Dialysis Dependent
 - Census & Available Beds

ESS Points of Contact

- Post-Storm Information
 - Power Status
 - Impact - Structural Damage
 - Evacuation Status - Return to Facility
 - Available Beds
 - Provider Needs and Status of Needs Requests - Equipment, Staff, Supplies (Limited to Internal Users)

ESS User Access

Agency for Health Care Administration - ESS Website - ESS Home

[AHCA Emergency Resources](#) [County Emergency Management](#)

The following information is currently on file for user : **SALLY TESTER - PROVIDER**

[Enter Provider Information](#) [My Affiliates](#) [User Account](#) [Reports](#) [ESS Help](#) [Log Out](#)

User Account Information

Name: SALLY TESTER
Title: Administrator/Director
Email: Y@Y.COM
Phone: (666) 666-6666

Provider Information

Review provider information for accuracy. Any discrepancies must be reported to the AHCA [Hospital Unit](#) .

Provider name: ALL CHILDREN'S HOSPITAL
Administrator/CEO: Gary Carnes
Street Address: 801 Sixth Street South
City: Saint Petersburg
State: FL
Zip: 33701
Phone: (727) 767-7451

Link to Florida Emergency Operations Offices



FloridaDisaster.org
Florida Division of Emergency Management

Contact | Search | Site

Public | Business | EM Community | Information | Organization

FL Hazard Lookup ▾

COMMUNITY AFFAIRS > EMERGENCY MANAGEMENT > COUNTY LIST

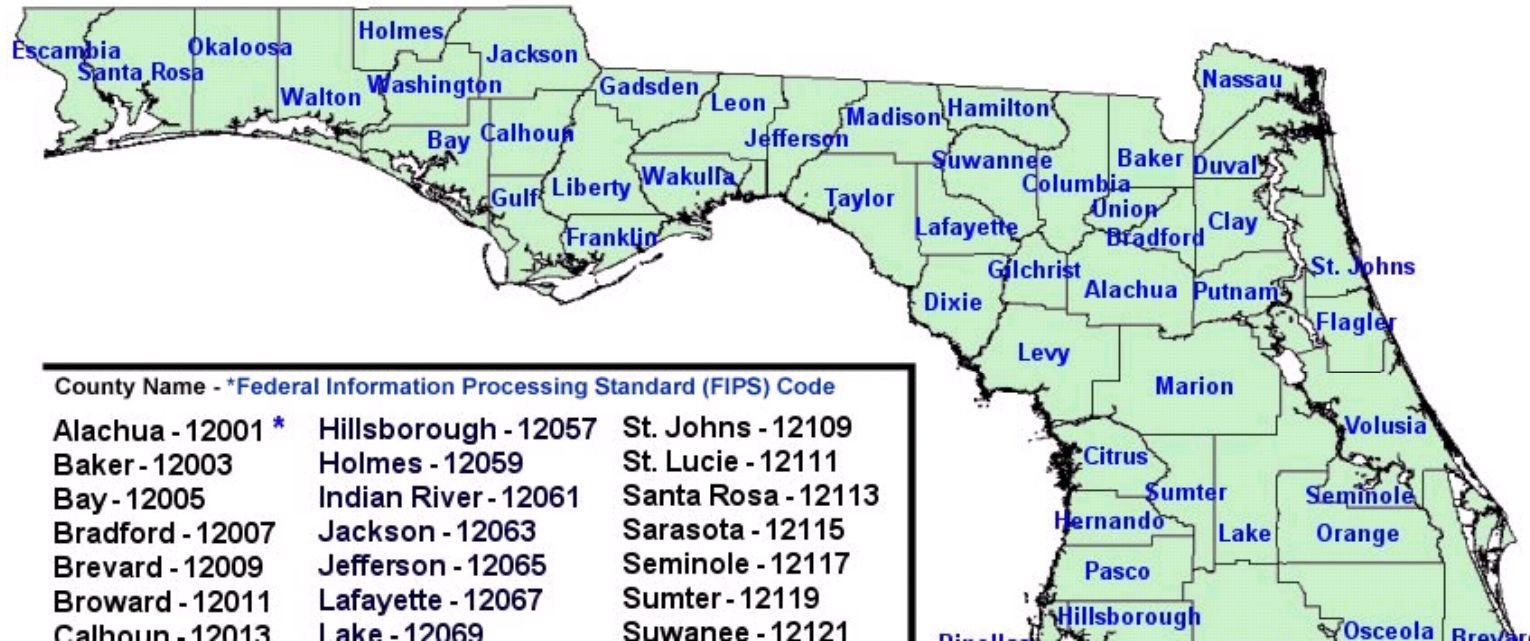
County Emergency Management Listing

All County Emergency Management Websites

County Emergency Management Entire List

View List By Area:

[Area 1](#) | [Area 2](#) | [Area 3](#) | [Area 4](#) | [Area 5](#) | [Area 6](#) | [Area 7](#)



Navigation of Provider Information

| | | | | | | | | |
|-------------------|----------------------------|--------------------------|----------------------------------|---------------------------------|--------------------------------|--------------------------|---------------|--|
| Navigation | License Information | Emergency Contact | Power/Utility Information | Resident Characteristics | Census / Available Beds | Evacuation Status | Impact | |
|-------------------|----------------------------|--------------------------|----------------------------------|---------------------------------|--------------------------------|--------------------------|---------------|--|

✓
Provider: JUPITER MEDICAL CENTER PAVILION INC

Hurricane Alberto is currently active in ESS. Please enter all available emergency-related information for the selected provider.

Emergency Status System Instructions

Enter information for the selected provider by choosing tabs above. Use ESS Help for detailed instructions

Enter any time:

Emergency Contact

Power/Utility Information

Enter if an emergency/storm is active in ESS:

Power/Utility Information

Resident Characteristics

Census / Available Beds

Evacuation Status

Impact

Assistance Request

License Information

Agency for Health Care Administration - ESS Website

[AHCA Emergency Resources](#) | [County Emergency Management](#) | [ESS Help](#) | [ESS Home](#) | [Log Out](#)

| | | | | | | | |
|----------------------------|-------------------------------------|-----------------------------------|---|--|---|-----------------------------------|------------------------|
| Navigation | License Information | Emergency Contact | Power/Utility Information | Resident Characteristics | Census / Available Beds | Evacuation Status | Impact |
|----------------------------|-------------------------------------|-----------------------------------|---|--|---|-----------------------------------|------------------------|

Instructions: Demographic information from the AHCA Licensing Database "LicenseEase". View only.

Provider: JUPITER MEDICAL CENTER PAVILION INC

Provider License Information

Review provider information for accuracy.
Any discrepancies must be reported to the AHCA [Long Term Care Unit](#)

Provider Name: JUPITER MEDICAL CENTER PAVILION INC

Administrator/CEO: Betsy Heartfield

Street Address: 1230 South Old Dixie Hwy

City: Jupiter

State: FL

Zip: 33458-7297

Phone: (561) 744-4444

Fax: (561) 745-5730

Provider Type: Skilled Nursing Facility

License Number: 1263096

Emergency Contacts – Brought Forward

| | | | | | | | |
|------------|---------------------|--------------------------|---------------------------|--------------------------|-------------------------|-------------------|--------|
| Navigation | License Information | Emergency Contact | Power/Utility Information | Resident Characteristics | Census / Available Beds | Evacuation Status | Impact |
|------------|---------------------|--------------------------|---------------------------|--------------------------|-------------------------|-------------------|--------|

Instructions: Maintain Emergency Contacts for Provider. Select Detail to edit or remove an existing emergency contact, or select Add to create a new Emergency Contact.

Provider: JUPITER MEDICAL CENTER PAVILION INC

| Provider Emergency Contacts List | | | | | |
|------------------------------------|--------|------------------|------------------------|---------------|---------|
| | Status | Name | Title | Work Phone | Rank |
| Detail | Active | Betsy Heartfield | Administrator/Director | (561)744-4444 | Primary |
| Detail | Active | Linda Nelson | Director of Nursing | (561)744-4444 | |
| Detail | Active | My Name | Administrator/Director | (850)555-1212 | |
| <input type="button" value="Add"/> | | | | | |

One primary contact per provider.

Power/Utility Information – No Event Open

Agency for Health Care Administration - ESS Website - Enter Provider Information

[AHCA Emergency Resources](#) | [County Emergency Management](#) | [ESS Help](#) | [ESS Home](#) | [Log Out](#)

Navigation | **License Information** | **Emergency Contact** | **Power/Utility Information** | **Resident Characteristics** | **Census / Available Beds** | **Evacuation Status** | **Impact**

Instructions: Maintain Power/Utility status and generator information. Enter requested information and continue. Questions vary if an emergency event /storm is active.

Provider: JUPITER MEDICAL CENTER PAVILION INC

| Power/Utility | Generator | | |
|---|--|----------|---------------------------------------|
| <div style="border: 1px solid gray; height: 100px; width: 100%;"></div> | | | |
| <i>Last updated on 5/17/2006 4:27:38 PM by PROVIDER</i> | | | |
| Utility Company Name: | <input type="text" value="FPL"/> | Account: | <input type="text" value="12345678"/> |
| Water Company Name: | <input type="text" value="Water Company"/> | Account: | <input type="text" value="12345678"/> |
| Facility has a Quick Connection installed for temporary generator: <input type="checkbox"/> | | | |
| <input type="button" value="Continue"/> | | | |

Power/Utility Information – Event Open

Agency for Health Care Administration - ESS Website - Enter Provider Information

[AHCA Emergency Resources](#) | [County Emergency Management](#) | [ESS Help](#) | [ESS Home](#) | [Log Out](#)

Navigation | **License Information** | **Emergency Contact** | **Power/Utility Information** | **Resident Characteristics** | **Census / Available Beds** | **Evacuation Status** | **Impact**

Instructions: Maintain Power/Utility status and generator information. Enter requested information and continue. Questions vary if an emergency event /storm is active.

Provider: JUPITER MEDICAL CENTER PAVILION INC

| Power/Utility | Generator |
|--|----------------------------------|
| Provider Has Power: No | |
| Outage Start Date: 05/31/2006 3 PM | Date Power Restored: 3 PM |
| <i>Last updated on 5/17/2006 4:27:38 PM by PROVIDER</i> | |
| Utility Company Name: FPL | Account: 12345678 |
| Water Company Name: Water Company | Account: 12345678 |
| Facility has a Quick Connection installed for temporary generator: <input type="checkbox"/> | |
| Residents Depend on Life Support: Yes | |
| <input type="button" value="Continue"/> | |

Generator Information – No Event Open

[AHCA Emergency Resources](#) | [County Emergency Management](#) | [ESS Help](#) | [ESS Home](#) | [Log Out](#)

Navigation | **License Information** | **Emergency Contact** | **Power/Utility Information** | **Resident Characteristics** | **Census / Available Beds** | **Evacuation Status** | **Impact**

Instructions: Maintain Power/Utility status and generator information. Enter requested information and continue. Questions vary if an emergency event /storm is active.

Provider: JUPITER MEDICAL CENTER PAVILION INC

| Power/Utility | Generator |
|--|--|
| <i>Last updated on 5/17/2006 4:27:38 PM by PROVIDER</i> | |
| Provider Has Generator(s): <input type="text" value="Yes"/> *To change generator status from Yes to No, just remove each previously entered generator using detail on the next screen. | |
| Person Most Knowledgeable of Generator: | <input type="text" value="My Name"/> Phone: <input type="text" value="(850)555-1212"/> (123)456-7890 |
| Plan for Generator Failure: | <input type="text" value="Repair generator on-site"/> |
| Plan Details (Include vendor name and phone for temporary generator, etc): | <input type="text"/> |
| Fuel Distributor: | <input type="text" value="unknown"/> Phone: <input type="text" value="(850)555-1212"/> (123)456-7890 |
| <input type="text"/> | |
| <input type="button" value="Continue"/> <input type="button" value="Back"/> | |

Generator Information – Event Open

[AHCA Emergency Resources](#) | [County Emergency Management](#) | [ESS Help](#) | [ESS Home](#) | [Log Out](#)

| | | | | | | | |
|----------------------------|-------------------------------------|-----------------------------------|---|--|---|-----------------------------------|------------------------|
| Navigation | License Information | Emergency Contact | Power/Utility Information | Resident Characteristics | Census / Available Beds | Evacuation Status | Impact |
|----------------------------|-------------------------------------|-----------------------------------|---|--|---|-----------------------------------|------------------------|

Instructions: Maintain Power/Utility status and generator information. Enter requested information and continue. Questions vary if an emergency event /storm is active.

Provider: JUPITER MEDICAL CENTER PAVILION INC

| Power/Utility | Generator |
|---|--|
| <i>Last updated on 5/17/2006 4:27:38 PM by PROVIDER</i> | |
| Provider Has Generator(s): | <input type="text" value="Yes"/> <small>*To change generator status from Yes to No, just remove each previously entered generator using detail on the next screen.</small> |
| Person Most Knowledgeable of Generator: | <input type="text" value="My Name"/> Phone: <input type="text" value="(850)555-1212"/> <input type="text" value="(123)456-7890"/> |
| Plan for Generator Failure: | <input type="text" value="Repair generator on-site"/> |
| Plan Details (Include vendor name and phone for temporary generator, etc): | <input type="text"/> |
| Fuel Distributor: | <input type="text" value="unknown"/> Phone: <input type="text" value="(850)555-1212"/> <input type="text" value="(123)456-7890"/> |
| Fuel Refill Status: | <input type="text" value="Distributor will deliver"/> |
| Fuel Delivery Expected: | <input type="text"/> |
| <input type="button" value="Continue"/> <input type="button" value="Back"/> | |

Generator Details List

[AHCA Emergency Resources](#) | [County Emergency Management](#) | [ESS Help](#) | [ESS Home](#) | [Log Out](#)

| | | | | | | | |
|----------------------------|-------------------------------------|-----------------------------------|---|--|---|-----------------------------------|------------------------|
| Navigation | License Information | Emergency Contact | Power/Utility Information | Resident Characteristics | Census / Available Beds | Evacuation Status | Impact |
|----------------------------|-------------------------------------|-----------------------------------|---|--|---|-----------------------------------|------------------------|

Instructions: Maintain Power/Utility status and generator information. Enter requested information and continue. Questions vary if an emergency event /storm is active.

Provider: JUPITER MEDICAL CENTER PAVILION INC

Record Updated Successfully.

| Power/Utility | Generator | | | | | | | | | | |
|--|-----------------|------------|--------|-----------------|-------------|-------------------|------------------------------------|-------------------------------------|-----------------------|--------------------------------------|--|
| Maintain generator details: Select Detail to edit or remove an existing generator, or select Add to add a new generator. | | | | | | | | | | | |
| Existing Generators | | | | | | | | | | | |
| | Generator Works | Size (KWs) | Phase | Voltage (Volts) | Fuel Type | Back Up Fuel Type | Fuel Capacity | Remaining Fuel Supply (Hours) | Date Refill is Needed | Generator Powers to | |
| Detail | Yes | 100 | Single | 120 | Diesel | | 100 Gallons | 100 | 05/13/2006 | Life Support Branch | |
| Detail | Yes | 100 | Single | 240 | Diesel | | 100 Gallons | 100 | 05/13/2006 | General Lighting, Food Refrigeration | |
| Detail | No | 100 | Single | 120 | Natural Gas | Diesel | | | | General Power (non-critical) | |
| | | | | | | | <input type="button" value="Add"/> | <input type="button" value="Back"/> | | | |

Generator Details – No Event Open

| | |
|---|--|
| Power/Utility | Generator |
| Modify Generator Information | |
| <i>Last updated on 5/11/2006 9:33:16 AM by AFFILIATE</i> | |
| Size: <input type="text" value="100"/> (KWs) | Fuel Type: <input type="text" value="Diesel"/> |
| Phase: <input type="text" value="Single"/> | Natural Gas Back Up Fuel Type: <input type="text" value="--Select--"/> |
| Voltage: <input type="text" value="120"/> (Volts) | On Site Fuel Capacity: <input type="text" value="100"/> Gallons |
| On Site Fuel Duration: <input type="text" value="100"/> (Hours) | Main Tank Location: <input type="text" value="Above Ground"/> |
| Generator Provides Power to (check all that apply): | |
| <input type="checkbox"/> Life Safety Branch | <input type="checkbox"/> General Lighting |
| <input checked="" type="checkbox"/> Life Support Branch | <input type="checkbox"/> Food Refrigeration |
| <input type="checkbox"/> Full HVAC (heat & air) | <input type="checkbox"/> Elevators |
| <input type="checkbox"/> Partial HVAC (heat & air) | <input type="checkbox"/> General Power (non-critical) |
| <input type="checkbox"/> Generator is protected from Debris (Inside or Protected Enclosure) | |
| <input type="button" value="Submit"/> <input type="button" value="Delete"/> <input type="button" value="Back"/> | |

Generator Details - Event Open

| | |
|---|--|
| Power/Utility | Generator |
| Modify Generator Information | |
| <i>Last updated on 5/11/2006 9:33:16 AM by AFFILIATE</i> | |
| Size: <input type="text" value="100"/> (KWs) | Fuel Type: <input type="text" value="Diesel"/> |
| Phase: <input type="text" value="Single"/> | Natural Gas Back Up Fuel Type: <input type="text" value="--Select--"/> |
| Voltage: <input type="text" value="120"/> (Volts) | On Site Fuel Capacity: <input type="text" value="100"/> Gallons |
| On Site Fuel Duration: <input type="text" value="100"/> (Hours) | Main Tank Location: <input type="text" value="Above Ground"/> |
| Generator Provides Power to (check all that apply): | |
| <input type="checkbox"/> Life Safety Branch | <input type="checkbox"/> General Lighting |
| <input checked="" type="checkbox"/> Life Support Branch | <input type="checkbox"/> Food Refrigeration |
| <input type="checkbox"/> Full HVAC (heat & air) | <input type="checkbox"/> Elevators |
| <input type="checkbox"/> Partial HVAC (heat & air) | <input type="checkbox"/> General Power (non-critical) |
| <input type="checkbox"/> Generator is protected from Debris (Inside or Protected Enclosure) | |
| Generator is Operational: <input type="text" value="Yes"/> | |
| Remaining Fuel Supply: <input type="text" value="100"/> (Hours) | Date Refill is Needed: <input type="text" value="05/13/2006"/> |
| <input type="button" value="Submit"/> <input type="button" value="Delete"/> <input type="button" value="Back"/> | |

Census/ Available Beds

[New Provider](#) | [AHCA Emergency Resources](#) | [County Emergency Management](#) | [ESS Help](#) | [ESS Home](#) | [Log Out](#)

| | | | | | | | |
|------------|---------------------|-------------------|---------------------------|--------------------------|-------------------------|-------------------|--------|
| Navigation | License Information | Emergency Contact | Power/Utility Information | Resident Characteristics | Census / Available Beds | Evacuation Status | Impact |
|------------|---------------------|-------------------|---------------------------|--------------------------|-------------------------|-------------------|--------|

Instructions: Maintain current Census and Available Beds for the selected provider. Enter or edit information in available boxes below. Shaded areas are view only. Totals are automatically calculated.

Selected Provider: HAMPTON COURT NURSING & REHABILITATION CENTER

Census and Available Beds

Census: Licensed Capacity:

Available Male Beds: # Available Female Beds: Non-Gender Specific Beds: Total Available Beds:

Special restrictions on available beds (Do not enter patients/residents names or confidential information).
Enter Note: **Previous Note:**

Census/ Available Beds - Hospitals

Census and Available Beds

Last Updated on 3/14/2006 4:09:33 PM by FLORIDA HOSPITAL ASSOCIATION

Census:

| | Capacity | # Available |
|------------------------------|----------------------------------|----------------------------------|
| Total | <input type="text" value="600"/> | <input type="text" value="0"/> |
| Acute Care: | <input type="text"/> | <input type="text" value="0"/> → |
| Adult Psychiatric: | <input type="text"/> | <input type="text"/> |
| Adult Substance: | <input type="text"/> | <input type="text"/> |
| Child Psychiatric: | <input type="text"/> | <input type="text"/> |
| Child Substance: | <input type="text"/> | <input type="text"/> |
| Comp Med Rehab: | <input type="text"/> | <input type="text"/> |
| IRTF: | <input type="text"/> | <input type="text"/> |
| SNU: | <input type="text"/> | <input type="text"/> |
| Long Term Acute Care: | <input type="text" value="100"/> | <input type="text" value="0"/> |
| NICU level 2: | <input type="text"/> | <input type="text"/> |
| NICU level 3: | <input type="text"/> | <input type="text"/> |

Beds Included in Acute Care

Burns:

Critical Care:

Med/Surg/Tele:

Obstetric:

Pediatric:

Special restrictions on available beds (Do not enter patients/residents names or confidential information).

Enter Note:

Previous Note:

Evacuation Status

| | | | | | | | |
|------------|---------------------|-------------------|---------------------------|--------------------------|-------------------------|-------------------|--------|
| Navigation | License Information | Emergency Contact | Power/Utility Information | Resident Characteristics | Census / Available Beds | Evacuation Status | Impact |
|------------|---------------------|-------------------|---------------------------|--------------------------|-------------------------|-------------------|--------|

Instructions: Maintain Evacuation status of Provider. Enter requested information and continue.

Provider: JUPITER MEDICAL CENTER PAVILION INC

Evacuation Status

Enter evacuation information and select continue to enter the Evacuation Destination.

Last Updated on 5/17/2006 4:32:21 PM by PROVIDER

| | | | |
|-----------------------------|---|-----------------------------|---|
| Evacuation Status: * | <input type="text" value="Planning"/> | Census: | <input type="text" value="94"/> |
| # Evacuees: | <input type="text" value="60"/> | Re-entry to Facility | |
| Start Date: | <input type="text" value="5/11/2006"/> <input type="button" value="Clear"/> | Start Date: | <input type="text"/> <input type="button" value="Clear"/> |
| Complete Date: | <input type="text" value="5/11/2006"/> <input type="button" value="Clear"/> | Completed Date: | <input type="text"/> <input type="button" value="Clear"/> |

Check here if this is a partial evacuation

Provider has special medical need residents (see Resident Characteristics tab)

Evacuation Destination Details

| | | | | | | | |
|------------|---------------------|-------------------|---------------------------|--------------------------|-------------------------|-------------------|--------|
| Navigation | License Information | Emergency Contact | Power/Utility Information | Resident Characteristics | Census / Available Beds | Evacuation Status | Impact |
|------------|---------------------|-------------------|---------------------------|--------------------------|-------------------------|-------------------|--------|

Instructions: Maintain Evacuation status of Provider. Enter requested information and continue.

Provider: JUPITER MEDICAL CENTER PAVILION INC

Evacuation Destinations

Evacuation Destination is the location to which residents/patients will be relocated during the evacuation. Select [Add AHCA Licensed Provider](#) if the destination is another licensed health care facility in Florida; the location will be selected using a search of AHCA licensed providers. Select [Add Other Location](#) if the destination is not licensed by AHCA, including out-of-state.

Total Evacuation Destinations: 2 Total Evacuees: 80

| | # Evacuees | Destination | Contact Name | Last Updated Date |
|------------------------|------------|--------------------------------|--------------|----------------------|
| Detail | 50 | JUPITER CARE CENTER | | 5/11/2006 9:38:38 AM |
| Detail | 30 | BROWARD GENERAL MEDICAL CENTER | | 5/11/2006 9:39:14 AM |

Impact List

| | | | | | | | |
|------------|---------------------|-------------------|---------------------------|--------------------------|-------------------------|-------------------|--------|
| Navigation | License Information | Emergency Contact | Power/Utility Information | Resident Characteristics | Census / Available Beds | Evacuation Status | Impact |
|------------|---------------------|-------------------|---------------------------|--------------------------|-------------------------|-------------------|--------|

Instructions: Maintain information related to the Impact on the selected provider as a result of the emergency event. Select Add to enter a new impact, or select Edit to edit an existing Impact. Select Out Of Service to enter Long Term Out Of Service impact.

Provider: JUPITER MEDICAL CENTER PAVILION INC

| Impact List | | | | | | |
|------------------------------------|---------------|-----------------------|----------------------|----------|----------------------|--------------------------------|
| | Impact | Severity | Start Date | Status | Last Update | |
| Edit | Flooding | Major | 5/17/2006 4:00:00 PM | Reported | 5/17/2006 4:34:56 PM | |
| Edit | Roads Blocked | Completely Impassable | 5/17/2006 4:00:00 PM | Reported | 5/17/2006 4:35:18 PM | |
| <input type="button" value="Add"/> | | | | | | Out of Service |

Impact and Severity

[AHCA Emergency Resources](#) | [County Emergency Management](#) | [ESS Help](#) | [ESS Home](#) | [Log Out](#)

| | | | | | | | |
|------------|---------------------|-------------------|---------------------------|--------------------------|-------------------------|-------------------|--------|
| Navigation | License Information | Emergency Contact | Power/Utility Information | Resident Characteristics | Census / Available Beds | Evacuation Status | Impact |
|------------|---------------------|-------------------|---------------------------|--------------------------|-------------------------|-------------------|--------|

Instructions: Maintain information related to the Impact on the selected provider as a result of the emergency event. Select Add to enter a new impact, or select Edit to edit an existing Impact. Select Out Of Service to enter Long Term Out Of Service impact.

Provider: JUPITER MEDICAL CENTER PAVILION INC

Edit Impact

Last Updated on 5/17/2006 4:35:18 PM by PROVIDER

| | |
|------------------------------------|---|
| Impact: Roads Blocked | Severity: Completely Impassable |
| Start Date: 05/17/2006 4 PM | End Date: Completely Impassable |
| Status: Reported | Date Entered: 5/17/2006 4:35:18 PM |

Submit Cancel

Emergency Status System - Provider List - Microsoft Internet Explorer

File Edit View Favorites Tools Help

Address http://ahcaxnetdev/essweb/providerlist.aspx

MyFlorida.com® AHCA agency for health care administration

AHCA Home Find an Agency Contact Us 411 Site Map Help

Monday, January 30, 2006

Emergency Status System - Provider List

The following information is currently on file for user : **Mike Barrow** [Log on as Different User](#) | [Manage Account](#)

User Information

Name: Mike Barrow
 Title: Contact Title
 Email: barrow@provider.com
 Phone: (850) 000-0000

[View Reports](#) [Enter Information for Provider](#)

Provider Type: Adult Family Care Home ← 1

County: Alachua
 Baker
 Bay
 Bradford
 Brevard ← 2

Reports: [Provider List Report](#)
[Available Beds Report](#)
[Current Power Outage Report](#)
[Unable to Contact Report](#) ← 3

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Local intranet

ESS Provider List / Emergency Contacts Report for All Providers

County: Dade

Print: **Provider Count: 1,257**
1/30/2006 5:02:58PM
Page 1 of 211

| Provider Information | Provider Phone | License Status | Out Of Service Start |
|----------------------|----------------|----------------|----------------------|
|----------------------|----------------|----------------|----------------------|

Adult Family Care Home

Dade County

| | | |
|---|--|--------|
| Provider: Bannister Michael (File #: 52961347) Address: 14636 S.W. 95 Lane City: Miami County: Dade Field Office: Field Office 11 State: FL Zip: 33186 Licensed Capacity: 5 | Provider Phone: (305) 752-2684 Emergency Contact: Michael Bannister (O)305-752-2684 (C)305-984-8312 | Active |
| Provider: Bellamy, Dora (File #: 52950282) Address: 7130 N.W. 21 Court City: Miami County: Dade Field Office: Field Office 11 State: FL Zip: 33147 Licensed Capacity: 4 | Provider Phone: (305) 836-3598 Emergency Contact: | Active |
| Provider: Bengochea, Hilda (File #: 52960911) Address: 335 Sw 22nd Road City: Miami County: Dade Field Office: Field Office 11 | Provider Phone: (305) 285-1933 Emergency Contact: | Active |

Export to Excel

Email as PDF

Available Beds Report for All Providers

County: ALL

Provider Count: 6 Total Beds Count: 46

Print: 1/30/2006 4:59:24PM
Page 1 of 2

| Provider Information | Available Beds | Male Beds | Female Beds | Providers Evacuating to This Location | Last Update |
|---|----------------|-----------|-------------|---------------------------------------|---------------------|
| Assisted Living Facility | | | | | |
| Manatee | | | | | |
| Browns Boarding Alf (File #: 11910009) 113 11th Avenue West Bradenton Manatee County Field Office 6 (941) 747-5102 Emergency Contact: Licensed Capacity: 18 Census: 3 | 7 | 1 | 6 | | 1/20/2006 1:12:29PM |
| Total available beds for Manatee County | 7 | 1 | 6 | | |
| Hospital | | | | | |
| Broward | | | | | |
| Atlantic Shores Hospital (File #: 110068) 4545 N Federal Hwy Fort Lauderdale Broward County Field Office 10 (954) 771-2711 | 3 | 0 | 0 | | 1/26/2006 3:52:32PM |

ESS Online Next Steps

- Education & Distribution
- User Account Enrollment
- Encourage Entries of Initial Information

ESS Information

- ESS Web Site: <http://ahcaxnet.fdhc.state.fl.us/essweb>
- AHCA Web Site: <http://www.ahca.myflorida.com>
- AHCA Health Quality Assurance:
 - Hospital and Outpatient Services Unit (850) 487-2717
 - Long Term Care Unit Programs (850) 488-5861
 - Assisted Living Unit Programs (850) 487-2515
 - Hospice Programs (850) 414-6010
 - Dialysis Programs (850) 487-3109
 - Bureau of Long Term Care Services (850) 414-9707