

New Jersey Healthcare Coalition (NJHCC) South Region Gap Analysis Budget Period 2 / 2025-2026

Top Five Hazards

The South Region New Jersey Healthcare Coalition (NJHCC) conducted its Budget Period 2 (2025–2026) Hazard Vulnerability Assessment (HVA) over the course of a few months and identified the **top five hazards of concern** for healthcare partners:

1. IT System Outage
2. Workplace Violence / Threat
3. Inclement Weather
4. Infectious Disease Outbreak
5. Hurricane

This gap analysis outlines current capabilities, areas of concern, and opportunities for improvement across member organizations—including, but not limited to, **Acute Care, Public Health, Homecare & Hospice, Offices of Emergency Management (OEM), Emergency Medical Services (EMS), Federally Qualified Health Centers (FQHC), and Long-Term Care** — to enhance preparedness and response capacity.

IT System Outage

IT System Outage was the highest rank hazard for the South Region’s HVA for BP2 (2025-2026). Throughout the region some of the current capabilities include that, most, if not all, acute care facilities maintain electronic health record (EHR) downtime procedures and paper documentation processes. In addition to this, larger organizations and networks have Information Technology (IT) redundancy, data recovery, and cybersecurity protocols. Another capability involves OEM partners being able to assist with situational awareness and coordination during prolonged outages.

Although there are capabilities in the realm of IT System Outages in the region, there also exist gaps. One of these gaps is that smaller providers like homecare agencies, smaller hospices, and independent EMS units have limited redundancy and lack robust continuity of operations (COOP) planning. Additionally, cybersecurity response and recovery capacity varies widely across partners. A final gap that can be identified is the limited regional coordination in communicating system and region-wide IT disruptions. Data from this year’s HVA tells us that only 52%, so just over half, of the South Region feels highly prepared for IT System Outages, while 35% of the region feels moderately prepared, and

the other 12% of the region are either poorly or not at all equipped to respond to IT System Outages.

With that being said, there are some opportunities that present themselves. One such opportunity would be to develop regional IT downtime standards and cross-training on paper-based workflows. Another opportunity would be to expand cyber hygiene training and tabletop exercises across the region and the state overall. A final opportunity could be to establish communication channels for rapid notification of IT outages across coalition members.

Workplace Violence / Threat

Workplace Violence was ranked as the second highest hazard on the South Region's HVA for BP2 (2025–2026), with 329 incidents reported. Vulnerability was assessed at 36%, and 71% of respondents indicated they feel highly prepared to respond to workplace violence incidents. Current capabilities include the implementation of the NJ Health Care Heroes Act and the ongoing work of the NJHCC Statewide Workplace Violence Committee. The committee provides a platform for healthcare partners to collaborate on best practices and share tools across the state. In the South Region, acute care and public health facilities are well integrated into coalition-wide trainings, and regional collaboration has been enhanced through guest speakers from Inspira Health, who shared their workplace violence program and security protocols as models for other facilities.

Gaps identified include limited engagement of smaller healthcare sectors, such as homecare, hospice, and outpatient practices, which often lack the infrastructure and staffing to implement comprehensive workplace violence prevention programs. Consistent integration of behavioral health, especially around high-risk populations, is still evolving across the South Region. While 71% of respondents feel highly prepared, there is a notable minority of facilities that remain only moderately prepared, demonstrating the need for more equitable access to resources and standardized policies across the healthcare continuum.

Opportunities for the South Region include building upon the momentum of coalition meetings and expanding training offerings to acute and non-acute healthcare providers. In 2025, the Workplace Violence Committee focused on relevant topics such as behavioral health, restraint practices, and healthcare worker resiliency, which can be adapted to fit regional needs. Future opportunities include expanding integration between security teams, EMS, and behavioral health providers, leveraging coalition communication tools

such as Juvare EMResource and Constant Contact for shared situational awareness, and continuing to feature regional best practices at future conferences.

Inclement Weather

Inclement Weather was ranked as the third highest hazard on the South Region's HVA for BP2 (2025-2026). Current capabilities within the region include but are not limited to most, if not all, sectors of healthcare maintaining basic emergency weather response protocols such as shelter-in-place or evacuation plans. Also, OEM provides forecasting, resource support, and emergency declarations when needed. Another strong capability that exists is acute care hospitals having backup power and supply stockpiles within the South Region.

Several gaps that exist as it pertains to Inclement Weather are that homecare & hospice and public health face challenges in reaching vulnerable patients and populations during road closures or power loss. Additionally, EMS surge capacity during large-scale weather events is limited and facilities experiencing diverts still experience significant patient surges. A final gap identified for the South Region is coordination between public health and healthcare facilities for resource allocation during long-duration events needs improvement. Overall, within the region, 50% of members that responded to the HVA feel highly prepared for inclement weather while the other 36% feel moderately prepared and the remaining 14% are poorly or not at all prepared for inclement weather events.

Opportunities do exist when it comes to Inclement Weather. One such opportunity is the expansion of patient tracking and wellness check systems for hospital and home-based populations. A second opportunity identified is to strengthen mutual aid agreements to address staffing and transportation gaps in all healthcare types. Finally, the enhancement of healthcare coalition-wide situational reporting during severe weather events through systems such as Juvare and/or D4H.

Infectious Disease Outbreak

The fourth hazard identified in the South Region is Infectious Disease Outbreaks. As per the HVA for this region, 60% of the region feels prepared to deal with Infectious Disease Outbreaks, while the other 40% feel as though they are moderately or poorly prepared. Several capabilities that exist in the region include, but are not limited to, public health partners having established surveillance, reporting, and outbreak investigation protocols,

especially post-COVID. On top of this, acute care hospitals maintain infection prevention programs and stockpiles of personal protective equipment (PPE).

Although capabilities are strong, there are some gaps that still exist when talking about Infectious Disease Outbreaks. For example, PPE and medical supply sustainment remains uneven across smaller healthcare settings. In this same vein, homecare and hospice face challenges in infection control training and PPE availability and EMS units have variable capacity for decontamination and staff protection during sustained outbreaks.

Where gaps exist, so do opportunities. One example of an opportunity is coalition-level coordination of PPE caches and resource requests. Another opportunity is the expansion of infection control training and just-in-time education across non-acute settings. A third and final opportunity that presents itself is the development of flexible surge staffing strategies to support healthcare operations during prolonged outbreaks. This can look like the continuation of training opportunities from NJHCC partners at NETEC/Bellevue.

Hurricane

Hurricanes were ranked fifth highest in the South Region HVA. Within the South Region, according to their HVA, 50% of the region feels very prepared, while another 43% feels moderately prepared, and the remaining 7% feel not at all prepared for Hurricanes. This poses many issues, especially given the significant increase in known Hurricanes over the past few years. One capability in the region is the usage of resources such as the National Hurricane Center (NHC) for the identification and tracking of hurricanes.

Gaps that exist in the realm of Hurricanes include lack of evacuation training, exercising, and overall education. Another gap that is present is the lack of consistent information sharing at a coalition-wide and statewide level when Hurricanes or their remnants impact our region and/or state.

Some opportunities that exist within the region as it pertains to Hurricanes is to bring together members to build out the Response Plan through meetings and workgroups sessions. Another opportunity that presents itself is the usage of subject matter experts that deal with hurricanes on the regular and response-personnel to these incidents to present on lessons learned at future meetings and workgroup sessions.