

TRIAD HEALTHCARE PREPAREDNESS COALITION STRATEGY FOR 2017-2022

Mission

The mission of the Triad Healthcare Preparedness Coalition is to facilitate coordination and cooperation throughout the Triad region to ensure stakeholders have the capability and capacity to mitigate, prepare for, respond to, and recover from emergent healthcare and community events, incidents, and disasters.

Vision

The coalition supports the regional healthcare preparedness, response, recovery, and mitigation efforts among a broad range of healthcare partners in order to protect, promote, and improve the health and prosperity of people in the Triad. The Triad HPC strives to build a sustainable coalition to support the development of a resilient healthcare system that has a strengthened medical surge capacity and capability. The Coalition shall demonstrate value to Coalition partners through the facilitation of preparedness, communication, and resource sharing.

Purpose

The purpose of this strategic plan is to guide the work of the Triad HPC over the Five year grant cycle based on the Assistant Secretary for Preparedness and Response (ASPR) Funding Opportunity Announcement (FOA). It is intended to be a fluid document, which will continue to evolve as necessary to ensure the Coalition is effective and able to sustain its efforts. The work activities listed in this strategic plan are aimed to complement each members' Emergency Operation Plan for the purpose of ensuring optimal utilization of resources and disaster support to the Triad health care community.

This plan is intended to provide Triad HPC leadership, staff, and Standing Committees with clear guidance on committee structure, committee activity and coordination, and project development.

The coalition will enhance the emergency preparedness and response capabilities and objectives of healthcare entities through:

- Building relationships and partnerships
- Facilitating communication, information and resource sharing
- Promoting situation awareness among HCC members
- Coordinating training, drills and exercises
- Strengthening medical surge capacity and capabilities
- Assisting emergency management and Emergency Support Function (ESF) #8 partners
- Develop and review the Healthcare Coalition Response Plan
- Inform training, exercise and supply management

Healthcare Member Organizations

Section A. Stakeholders to the Triad Healthcare Preparedness Coalition (THPC) includes (but are not limited to) the following:

Stakeholders

- Hospitals, Healthcare Agencies, EMS Systems, rescue squads, Fire Departments, Law Enforcement, Public Health, Long Term Care Facilities, Emergency Management Agencies, Hospice, Mental and Behavioral Health Services, private entities associated with healthcare, specialty service providers, support service providers, primary care providers, community health centers, tribal entities, federal entities and THPC Coordinator, based in the Triad region as outlined in the organizational description;

Associate Stakeholders

- Schools, social services, public works, transportation services, etc;

- Regional agencies and non-governmental organizations that would assist in healthcare response to an event, incident, or disaster;
- Healthcare and Emergency Management planning regions and associations that support healthcare preparedness. (i.e. Urban Area Security Initiative [UASI], NCEM Domestic Preparedness Regions [DPR], Public Health Preparedness & Response Regional Representatives, NC Association of EMS Administrators, NC Hospital Association, NC Emergency Management Association, NC Association - Long Term Care, NC Assisted Living Association, NC Law Enforcement Officers' Association, etc.)
- Any state agency (i.e. NC Department of Public Safety – Emergency Management, NC Office of EMS, NC Hospital Association, NC Public Health) that would assist in the planning or response to an event, incident, or disaster.

Section B. Stakeholder Responsibilities

1. Stakeholders shall designate a primary and secondary representative and update this information annually with the THPC Coordinator.
2. Associate Stakeholders may designate a non-voting primary and secondary representative.
3. Provide representation at coalition meetings and activities.
4. Participate in collaborative regional planning efforts.
5. Participate in the development of regional healthcare capabilities, mutual aid agreements, and collaborative emergency response plans.
6. Participate in regional information sharing to include best practices, emerging trends, and situational awareness.
7. Contribute to meeting coalition priorities, goals, and contractual deliverables.
8. Respond to events, incidents, and disasters in collaboration with other stakeholders, as requested.
9. Participate in sub-committees and workgroups as requested and organized by the THPC.

Summary of Risk

Triad Healthcare Preparedness Coalition Hazard Vulnerability Snapshot

The Triad HPC members completed a Hazard Vulnerability Analysis (HVA) on August 5th, 2017. The Triad HPC planning committee is responsible to review the plan at least annually or when revisions/changes are necessary. The committee will coordinate with the healthcare facilities and emergency response partners in the region in order to update the HVA, when necessary.

For the Triad region, the current HVA identified the top three events in each of the categories below:

Natural Hazards

1. Tornados
2. Temperature Extremes
3. Epidemic/Pandemic

Technological Hazards

1. Water Failure
2. Information Systems Failure/ Platforms
3. HVAC failure

Human Hazards

1. VIP situation
2. Mass Casualty Incident
(Trauma)

3. Mass Casualty Incident
(Medical/ Infectious)

Hazardous Materials

1. Chemical Release
2. Small (less than 5 victims) Casualty Hazmat Incident
3. Radiological Release

Work plan

The Triad Healthcare Preparedness Coalition Executive and Planning Committees review the strategic plan annually in January to determine the priority capability areas for the upcoming year. Capability prioritization is determined based on the annual gap analysis review. Capability priorities, objectives, work plan activities are proposed and vetted by the coalition membership. An approved work plan is required NLT June 15. The work plan is coordinated with the spending plan to determine if tasks require funding. This is the current year work plan and spending plan.

Priority Healthcare Preparedness Capabilities:

Based on gap analysis assessment and capability assessment findings, the following capability areas will be developed for the upcoming year. Please see the annual CPG for the full priority list.

1. High Priority: Capability 1 - Foundation for Health Care and Medical Readiness: The community's health care organizations and other stakeholders—coordinated through a sustainable HCC—have strong relationships, identify hazards and risks, and prioritize and address gaps through planning, training, exercising, and managing resources. Healthcare Coalition Members proposed activities, report progress, and process of accountability and completion should be reported to the coalition and reported to all coalition members.
2. Medium Priority: Capability 2 - Health Care and Medical Response Coordination: Health care organizations, the HCC, their jurisdiction(s), and the ESF-8 lead agency plan and collaborate to share and analyze information, manage and share resources, and coordinate strategies to deliver medical care to all populations during emergencies and planned events. Leverage HCC members' existing facility preparedness plans as required by the CMS Emergency Preparedness Rule: Medicare and Medicaid Programs; Emergency Preparedness Requirements for Medicare and Medicaid Participating Providers and Suppliers.
3. Medium Priority: Capability 3 - Continuity of Health Care Service Delivery: Health care organizations, with support from the HCC and the ESF-8 lead agency, provide uninterrupted, optimal medical care to all populations in the face of damaged or disabled health care infrastructure. Health care workers are well-trained, well-educated, and well-equipped to care for patients during emergencies. Simultaneous response and recovery operations result in a return to normal or, ideally, improved operations.
4. High Priority: Capability 4 - Medical Surge: Health care organizations—including hospitals, EMS, and out-of-hospital providers—deliver timely and efficient care to their patients even when the demand for health care services exceeds available supply. The HCC, in collaboration with the ESF-8 lead agency, coordinates information and available resources for its members to maintain conventional surge response. When an emergency overwhelms the HCC's collective resources, the HCC supports the health care delivery system's transition to contingency and crisis surge response⁶ and promotes a timely return to conventional standards of care as soon as possible.

**Strategic Action Plan
Progress Table**

Capability	Objective	Tasks	Notes	Status
Capability 1: Foundation for Health Care and Medical Readiness	Objective 1: Establish and Operationalize a Health Care Coalition	Activity 1. Define Health Care Coalition Boundaries		Complete
		Activity 2. Identify Health Care Coalition Members		Complete
		Activity 3. Establish Health Care Coalition Governance		Complete
	Objective 2: Identify Risk and Needs	Activity 1. Assess Hazard Vulnerabilities and Risks		Complete
		Activity 2. Assess Regional Health Care Resources		In progress
		Activity 3. Prioritize Resource Gaps and Mitigation Strategies		In progress
		Activity 4. Assess Community Planning for Children, Pregnant Women, Seniors, Individuals with Access and Functional Needs, Including People with Disabilities, and Others with Unique Needs		In progress
		Activity 5. Assess and Identify Regulatory Compliance Requirements		Complete
	Objective 3: Develop a Health Care Coalition Preparedness Plan	Preparedness Plan/ Support Cell Operational Plan		Complete
	Objective 4: Train and Prepare the Health Care and Medical Workforce	Activity 1. Promote Role-Appropriate National Incident Management System Implementation		Complete
		Activity 2. Educate and Train on Identified Preparedness and Response Gaps		Complete
		Activity 3. Plan and Conduct Coordinated Exercises with Health Care Coalition Members and Other Response Organizations		Complete
		Activity 4. Align Exercises with Federal Standards and Facility Regulatory and Accreditation Requirements		Complete

		Activity 5. Evaluate Exercises and Responses to Emergencies		Complete	
		Activity 6. Share Leading Practices and Lessons Learned		Complete	
	Objective 5: Ensure Preparedness is Sustainable	Activity 1. Promote the Value of Health Care and Medical Readiness		Complete	
		Activity 2. Engage Health Care Executives		In progress	
		Activity 3. Engage Clinicians		Complete	
		Activity 4. Engage Community Leaders		Planning	
		Activity 5. Promote Sustainability of Health Care Coalitions		Complete	
Capability 2: Health Care and Medical Response Coordination		Objective 1: Develop and Coordinate Health Care Organization and Health Care Coalition Response Plans	Activity 1. Develop a Health Care Organization Emergency Operations Plan		Complete
	Activity 2. Develop a Health Care Coalition Response Plan			Complete	
	Objective 2: Utilize Information Sharing Procedures and Platforms	Activity 1. Develop Information Sharing Procedures		Complete	
		Activity 2. Identify Information Access and Data Protection Procedures		In progress	
		Activity 3. Utilize Communications Systems and Platforms		Complete	
	Objective 3: Coordinate Response Strategy, Resources, and Communications	Activity 1. Identify and Coordinate Resource Needs during an Emergency		Complete	
		Activity 2. Coordinate Incident Action Planning During an Emergency		Complete	
		Activity 3. Communicate with Health Care Providers, Non-Clinical Staff, Patients, and Visitors during an Emergency		Complete	
		Activity 4. Communicate with the Public during an Emergency		Complete	
	Capability 3: Continuity of Health Care Service Delivery	Objective 1: Identify Essential Functions for Health Care Delivery			Complete
		Objective 2: Plan for Continuity of Operations	Activity 1. Develop a Health Care Organization Continuity of Operations Plan		Complete
			Activity 2. Develop a Health Care Coalition Continuity of Operations Plan		In Progress

		Activity 3. Continue Administrative and Finance Functions		Complete
		Activity 4. Plan for Health Care Organization Sheltering-in-Place		Complete
	Objective 3: Maintain Access to Non-Personnel Resources during an Emergency	Activity 1. Assess Supply Chain Integrity		Planning
		Activity 2. Assess and Address Equipment, Supply, and Pharmaceutical Requirements		
	Objective 4: Develop Strategies to Protect Health Care Information Systems and Networks			Complete
	Objective 5: Protect Responders' Safety and Health	Activity 1. Distribute Resources Required to Protect the Health Care Workforce		In progress
		Activity 2. Train and Exercise to Promote Responders' Safety and Health		Complete
		Activity 3. Develop Health Care Worker Resilience		Complete
	Objective 6: Plan for and Coordinate Health Care Evacuation and Relocation	Activity 1: Develop and Implement Evacuation and Relocation Plans		Complete
		Activity 2. Develop and Implement Evacuation Transportation Plans		Complete
	Objective 7: Coordinate Health Care Delivery System Recovery	Activity 1. Plan for Health Care Delivery System Recovery		Complete
		Activity 2. Assess Health Care Delivery System Recovery after an Emergency		Complete
		Activity 3. Facilitate Recovery Assistance and Implementation		Complete
Capability 4: Medical Surge	Objective 1: Plan for a Medical Surge	Activity 1. Incorporate Medical Surge Planning into a Health Care Organization Emergency Operations Plan		Complete
		Activity 2. Incorporate Medical Surge into an Emergency Medical Services Emergency Operations		Complete

		Plan		
		Activity 3. Incorporate Medical Surge into a Health Care Coalition Response Plan		In progress
	Objective 2: Respond to a Medical Surge	Activity 1. Implement Emergency Department and Inpatient Medical Surge Response		Complete
		Activity 2. Implement Out-of-Hospital Medical Surge Response		Complete
		Activity 3. Develop an Alternate Care System		Complete
		Activity 4. Provide Pediatric Care during a Medical Surge Response		In Progress
		Activity 5. Provide Surge Management during a Chemical or Radiation Emergency Event		Complete
		Activity 6. Provide Burn Care during a Medical Surge Response		Complete
		Activity 7. Provide Trauma Care during a Medical Surge Response		Complete
		Activity 8. Respond to Behavioral Health Needs during a Medical Surge Response		Complete
		Activity 9. Enhance Infectious Disease Preparedness and Surge Response		In progress
		Activity 10. Distribute Medical Countermeasures during Medical Surge Response		Complete
		Activity 11. Manage Mass Fatalities		Complete

Coalition Workgroup Structure

Standing Committees:

Various committees will be established to implement a preparedness strategy and address capability development. A member of the Steering Committee must be an active participant on at least one of the standing committees. All committees shall consist of a chairperson agreed upon by the standing committee members.

Members of committees shall be solicited depending on areas of expertise to ensure Subject Matter Experts are included in the composition of the committee. A chairperson may only chair one standing committee. Executive Committee members shall actively participate in no more than two standing committees. All standing committees will play a significant role in operational planning with the Steering Committee as the lead.

The planning strategy for all standing committees will be as follows:

1. Use the HVA to assess risk and determine gaps in readiness for operational planning.
2. Assemble Subject Matter Experts to provide input in to development of operational plans.
3. Complete a resource management assessment to identify gaps in resources

Steering Committee:

1. Develop and maintain the strategic plan for the THPC.
2. Coordinate a regional approach to community wide emergency planning, training, and response.
3. Specify the composition and direct the activities of sub-committees based upon information received from the THPC Coordinator or consensus of the THPC stakeholders.
4. Consider recommendations made by sub-committees and work groups for approval or revision.
5. Review regional projects for the ASPR HPP grant submissions as necessary.
6. Define and recommend processes and/or standard operating guidelines of the THPC to include, but not limited to, review of the THPC Regional Healthcare Support Cell Plan.
7. Assist the THPC staff with decisions regarding resource allocation, when requested.
8. Support, review, and carry out the THPC bylaws.
9. Additional activities as requested.

Exercise and Education Committee:

1. Make recommendations on topics for exercises to the stakeholder membership and assists in coordinating those events.
2. Provide up to date information regarding Assistant Secretary for Preparedness Response and the Homeland Security Exercise and Evaluation Program requirements.
3. Any workgroup action must first be approved by the Executive Committee before it may be forwarded to the General Membership
4. Develop and maintain a shared training and exercise calendar that lists all training and educational offerings.

Darin Manuel- Northern Hospital of Surry County
Steering Committee Chair

Steven Grose- Guilford County EM
Steering Committee Vice-Chair

Signature

Signature

Draft: November 2018

APPROVED:

Revised:

Reviewed:

DRAFT