ASPR TRACIE Technical Assistance Request

Request Receipt Date (by ASPR TRACIE): 19 April 2019
Response Date: 24 April 2019
Type of TA Request: Standard

Request:

The requestor asked for technical assistance in identifying any guidance on the roles and responsibilities of a hospital that serves as the lead of a regional healthcare coalition (HCC).

Response:

The ASPR TRACIE Team reviewed our Select Healthcare Coalition Resources page (which includes links to several existing Topic Collections, including the Coalition Administrative Issues, Coalition Models and Functions, and Coalition Response Operations Collections).

Section I in this document includes plans that identify the roles and responsibilities of hospitals that participate in HCCs. NOTE: While hospitals do not serve as the lead HCC organizations in all of these plans, we believe that the resources provided are still useful for this request. Section II includes additional relevant and valuable resources for hospitals that participate in HCCs.

A list of comprehensively developed Topic Collections can be found here: https://asprtracie.hhs.gov/technical-resources/topic-collection.

I. Resources Addressing Hospital Roles/Responsibilities in HCCs


This plan describes the roles and responsibilities of the Central Maine Regional Health Care Coalition (CMRHCC) in responding to a healthcare emergency. It is comprised of a Base Plan and Annexes (e.g., communication plan, medical surge, responder health and safety) and concludes with appendices that include a list of acronyms and forms that can be downloaded and printed (e.g., volunteer request form, resource request form).


This Emergency Operations Guide addresses protocols, procedures, and organizational structure necessary for the healthcare entities in the Eastern Region to prepare for, respond to and recover from emergencies as a collective whole, in partnership with other emergency response agencies.

This plan defines how healthcare and related organizations within this specific region will work together to prevent, mitigate, respond to and recover from a disaster that leads to a surge on healthcare facilities. It can be used by personnel in real emergencies and when conducting training, drills, and exercises. **NOTE:** The roles/ responsibilities of hospitals are addressed throughout the document.


This plan describes concept of operations, roles and responsibilities, and command structures for ESF-8 members in Illinois that may be useful to coalitions in developing coordination structures and plans for their communities. This plan can be used as a guidance or template for regional healthcare coalitions. Illinois has seven Public Health and Medical Service Response Regions with a state-wide population of approximately 12.8 million. **NOTE:** Pages 26-27 identify the roles and responsibilities of hospitals in a HCC.

Kansas City Metropolitan Area. (2016). *ESF 8: Public Health and Medical Services: Kansas City Metropolitan Area Regional Coordination Guide.* (Attachment provided.)

This comprehensive (318 page) annex to the Regional Coordination Guide describes how public health and medical services capabilities from metropolitan areas surrounding Kansas City would be coordinated in the event of a natural or human-caused disaster. It details planning for every aspect of disaster medical response and may be a useful reference for metro area planners. It is not public but available on request for official use. **NOTE:** Section V, Concept of Operations, addresses the roles and responsibilities of hospitals and other agencies and emphasizes the significant role hospitals have in Medical Surge Coordination and Operations. In addition, Section VI, Organization and Assignment of Responsibilities, includes a table that identifies roles and responsibilities of hospitals and other agencies.

Nevada Division of Public and Behavioral Health. (2016). *Nevada Statewide Medical Surge Plan.*

This state-level plan provides guidance for healthcare facilities in Nevada, allowing them to prepare to respond to planned and unexpected events that may necessitate a surge of hospital and other healthcare resources within the state. It outlines roles and responsibilities of each entity during the response phase.


This webpage includes links to plans, tools, and services provided by this healthcare coalition. Links to other resources (e.g., active shooter, pandemic influenza, and Ebola) are also included. **NOTE:** The Regional Healthcare System Emergency Response Plan
identifies the responsibilities for healthcare organizations and other agencies starting on page 19.


This document spells out Santa Barbara County's healthcare coalition member roles and responsibilities during disaster response and recovery. Planners may be particularly interested in the table and accompanying narrative that detail agency/discipline roles and responsibilities during response.


The SE Region Healthcare Coalition Communications Plan provides information to support interoperability and effective communication among coalition partners during all phases of disaster.


This webpage includes links to plans, templates, and tools that can help planners draft reports, conduct hazard vulnerability analyses, develop family reception centers, and the like.

St. Louis Area Regional Response System. (2014). St. Louis Area Regional Hospital Evacuation and Transportation Plan.

This plan focuses on emergencies and disasters requiring immediate response from regional partners and the St. Louis Medical Operations Center. It outlines a system to coordinate patient evacuation and establishes an organizational structure to facilitate communication and cooperation between the evacuating facilities, the St. Louis Medical Operations Center (SMOC), receiving facilities, alternate care sites, and transportation resources.


This plan describes how the healthcare organizations in the St. Louis Area region will conduct re-entry operations following evacuation or operational interruption as a result of a disaster and includes the role of the medical operations center in coordinating this effort. It also includes information on managing identification, credentialing, and granting access management for healthcare facility personnel after an incident.


This webpage includes links to county-specific plans and annexes (e.g., multi-casualty incident plan; mutual aid evacuation annex; and family service center annex). NOTE: Several of these plans address the roles and responsibilities of hospitals in HCCs.
II. Additional Relevant Resources


This planning tool is intended to assist health care coalitions and their partners in assessing their preparedness for an influenza pandemic. It may also be used to orient the response as a pandemic begins. This checklist can help healthcare coalitions assess, create, and improve their pandemic preparedness and response plans. NOTE: A list of hospitals and healthcare activities begins on page 14.


This template provides general headers and descriptions for a sample health care coalition (HCC) Preparedness Plan Template. The resources used to develop this template include sample HCC plans and the Health Care Preparedness and Response Capabilities.


This template provides general headers and descriptions for a sample health care coalition (HCC) Response Plan Template. The resources used to develop this template includes sample HCC plans and the Health Care Preparedness and Response Capabilities.


This document provides guidance on the specific processes, procedures, and technology related to the communication systems utilized by the DC Emergency Healthcare Coalition during incident response. The information management needs during response require the ability to share information within the Coalition as a group of healthcare organizations, with jurisdictional agencies, with other external partners (e.g., Suburban Maryland Hospital Communication Center), and potentially federal entities (e.g. HHS, DHS).


This plan describes the organizational structure and emergency response processes used by participating healthcare organizations in Washington, DC to collectively respond to and recover from an incident that severely challenges or exceeds normal day-to-day healthcare system management and/or healthcare delivery operations.


This annex to the DC Emergency Healthcare Coalition (DCEHC) EOP provides guidance to Healthcare Coalition public information officers (PIOs) and/or their staff during a pre-
planned event or no-notice incident of significance to assist in providing timely, accurate, and consistent information to hospital personnel, external response partners (police, fire, EMS, public health, and emergency management), and the public.


This is a useful matrix that compares and contrasts a number of different healthcare coalition models.


This article describes the Healthcare Facilities Partnership of South Central Pennsylvania and the effect of the coalition on enhancing surge capacity for optimization of access to hospital beds during mass casualty events over a 24-month evaluation period that used exercises and communications among partners to measure success.