

T R A C I E HEALTHCARE EMERGENCY PREPAREDNESS INFORMATION GATEWAY

Coalition Response Operations Topic Collection 11/27/2017



Topic Collection: Coalition Response Operations

In addition to working together to prepare the local medical system for disasters, healthcare coalitions (HCC) must also plan to support and carry out effective, comprehensive, and coordinated response operations to a variety of emergencies. HCC response to emergencies differ vastly across the U.S. It is recommended that healthcare organizations connect and collaborate with their local HCC to better understand response and resource capabilities in their area. In some areas, HCCs have a direct role in coordinating ESF-8 operations, while in others, they serve as information sharing and coordinating entities (e.g., patient tracking). In other areas, the coalitions themselves have the responsibilities for coordinating the response. In any case, all coalition partners have response roles, and the roles and the coordination between disciplines is what each coalition needs to define in its response plan, regardless of the degree of direct involvement by designated HCC personnel during a response.

The resources in this Topic Collection include plans, checklists, and guidance specific to coalition response operations. Additional coalition-specific resources can be found in the <u>Coalition Administrative Issues</u> and <u>Coalition Models and Functions</u> Topic Collections. Access ASPR TRACIE's <u>Select Health Care Coalition Resources page</u> for links to related plans, tools, templates (including a coalition response plan template with links to "best practice" documents), Topic Collections, and webinars. The rest of our <u>comprehensively-developed Topic Collections</u> contain information on select threats and other public health emergency categories.

Each resource in this Topic Collection is placed into one or more of the following categories (click on the category name to be taken directly to that set of resources). Resources marked with an asterisk (*) appear in more than one category.

<u>Must Reads</u> <u>Education and Training</u> <u>General Guidance</u> <u>Guidance: Coalition Medical Surge</u> <u>Plans, Tools, and Templates</u> <u>Specialty Plan, Education, and Training Topics</u> <u>Agencies and Organizations</u>

Must Reads

ASPR TRACIE. (2017). <u>Healthcare Coalition Response Plan</u>. U.S. Department of Health and Human Services, Office of the Assistant Secretary for Preparedness and Response.

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.

T R A C I E MEALTHCARE EMERGENCY PREPAREDNESS INFORMATION GATEWAY ASPR TRACIE. (2017). <u>Select Health Care Coalition Resources</u>. U.S. Department of Health and Human Services, Office of the Assistant Secretary for Preparedness and Response.

While ASPR TRACIE strives to ensure all of our resources are applicable to Healthcare Coalitions and other stakeholders, the resources on this page can be particularly helpful to coalitions in achieving the Health Care Preparedness and Response Capabilities. Resources on this page include ASPR TRACIE- and locally-developed plans, tools, and templates.

Barbera, J.A. and Macintyre, A.G. (2009). <u>Medical Surge Capacity and Capability: The</u> <u>Healthcare Coalition in Emergency Response and Recovery</u>. U.S. Department of Health and Human Services.

This follow up to the landmark Medical Surge Capacity and Capability (MSCC) Handbook covers all aspects of a healthcare coalition and its role in response and recovery. Though slightly dated, this remains a "must read" for all coalition leaders and planners.

Central Maine Regional Health Care Coalition. (2016). <u>All Hazards Emergency Operations Plan:</u> <u>November 2016</u>.

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).

DC Emergency Healthcare Coalition. (2010). MOU for Hospitals in the District of Columbia.

This Mutual Aid & Cooperative Assistance Memorandum of Understanding describes the relationship and the associated procedures which participating healthcare organizations can use to share resources in supporting each other during response to potential or real emergencies or disasters. It may be used as a reference by other healthcare coalitions for developing coalition-specific memoranda of understanding.

DC Emergency Healthcare Coalition. (2014). <u>Emergency Operation Plan (EOP) for the DC</u> <u>Emergency Healthcare Coalition</u>.

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.

Fisher, S., Biesiadecki, L., and Schemm, K. (2014). <u>Responding to Medical Surge in Rural</u> <u>Communities: Practices for Immediate Bed Availability</u>. National Association of County and City Health Officials.

This report highlights the promising practices being used by healthcare coalitions to plan and increase immediate bed availability in rural communities.

Hanfling, D. (2013). <u>Role of Regional Healthcare Coalitions in Managing and Coordinating</u> <u>Disaster Response</u>.

The author provides an overview of the history of coalition development in the National Capital Region, describes the "optimal framework for coordinating response between existing healthcare coalitions and emergency management infrastructure," and explains how regional networks can bolster communications and situational awareness.

Healthcare Preparedness Coalition of Utah/Wasatch Counties. (2014). <u>Regional Medical Surge</u> <u>Plan: Expanding Local Healthcare Structure in Mass Casualty Events.</u>

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.

Porth, L. and Gatz, J. (2013). <u>Healthcare Coalitions: An Emergency Preparedness Framework for</u> <u>Non-Urban Regions</u>. Missouri Hospital Association.

This guidance is targeted to non-urban communities in Missouri developing regional healthcare coalitions. It provides guidance on coalition membership, structure, governance, and roles/ responsibilities during a response (including coordination with city, county, regional, and state partners).

Santa Barbara County. (2017). <u>Santa Barbara County Disaster Healthcare Partners Coalition</u> <u>Governance Document</u>.

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.

SE Minnesota Disaster Health Coalition. (2016). <u>Healthcare Multi-Agency Coordination Center</u> (MACC).

This document can serve as a template for healthcare coalitions interested in creating a Healthcare Multi-Agency Coordination Center (H-MACC). The scope of this document involves H-MACC activities; information should be integrated within organizational and community operational documents as applicable.

St. Louis Area Regional Response System. (2014). <u>St. Louis Area Regional Hospital Evacuation</u> 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.

St. Louis Hospital Preparedness Committee. (2015). <u>St. Louis Area Regional Hospital Re-Entry</u> <u>Plan.</u>

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.

U.S. Department of Health and Human Services, Office of the Assistant Secretary for Preparedness and Response. (n.d.). <u>From Hospitals to Healthcare Coalitions:</u> <u>Transforming Health Preparedness and Response in Our Communities</u>. (Accessed 11/20/2017.)

This report provides an overview of the Hospital Preparedness Program (HPP), shares profiles of grant awardees, and includes a chapter on the future of HPP.

U.S. Department of Health and Human Services, Office of the Assistant Secretary for Preparedness and Response. (2012). <u>2.3 The Healthcare Coalition Response Team</u>.

This webpage explains the composition, scope, management strategy, and requirements for a healthcare coalition response team.

U.S. Department of Health and Human Services, Office of the Assistant Secretary for Preparedness and Response. (2015). <u>Strategic Development for Building Operational</u> <u>Healthcare Coalitions</u>.



In this webinar, speakers share information on operationalizing healthcare coalitions and summarize requests for technical assistance received by ASPR TRACIE on healthcare coalition models and roles in response and recovery.

U.S. Department of Health and Human Services, Office of the Assistant Secretary for Preparedness and Response. (2016). <u>2017-2022 Health Care Preparedness and Response Capabilities.</u>

These capabilities can help the healthcare delivery system, including healthcare coalitions, hospitals, and emergency medical services, better understand their roles in preparing for and responding to emergencies that impact the public's health.

U.S. Department of Health and Human Services, Office of the Assistant Secretary for Preparedness and Response. (2016). <u>Healthcare Coalition Involvement in Mass</u> <u>Gatherings</u>.

This presentation discusses how planning for and responding during mass gatherings can serve as proxy for a real response, and describes how healthcare coalitions can be involved in mass gathering planning and execution. A link to the archived webinar is included.

U.S. Department of Health and Human Services, Office of the Assistant Secretary for Preparedness and Response. (2016). <u>Health Care Coalition Resource and Gap Analysis</u> <u>Tool</u>.

This tool is designed to help health care coalition (HCC) partners develop a common understanding of their resources and existing gaps, and strategies for prioritizing which gaps to close. Gaps may include inadequate plans or procedures, staffing, equipment and supplies, skills and expertise, and/or services. HCCs are encouraged to modify the template to reflect their coalition members, resources, and unique community attributes. A companion HCC Aggregator Tool allows information from multiple HCCs to be summarized to present an overall picture of a larger geographic area, including an entire state. (For a 508 compliant version of this tool, copy and paste this link into your browser: <u>https://asprtracie.s3.amazonaws.com/documents/aspr-tracie-healthcarecoalition-resource-and-gap-analysis-pdf.pdf</u>.)

U.S. Department of Health and Human Services, Office of the Assistant Secretary for Preparedness and Response. (2017). <u>HPP Coalition Surge Test Webinar</u>.

This presentation describes the Coalition Surge Test, an annual grant requirement for healthcare coalitions (HCCs) that tests a simulated evacuation for 20% of the HCCs acute care bed capacity. Lessons learned and best practices from HCCs that participated during a pilot phase, and guidance for using exercise tools, are also reviewed including the role of HCC in coordination of evacuation activities. A link to the archived webinar is included.

U.S. Department of Health and Human Services, Office of the Assistant Secretary for Preparedness and Response. (2017). <u>Hospital Preparedness Program</u>.

ASPR's Hospital Preparedness Program (HPP) seeks to improve communities' abilities to prepare for and respond to disasters and public health emergencies. HPP provides guidance and funding through cooperative agreements to awardees (states, territories, and select cities). HPP field project officers provide awardees with support and technical assistance to improve healthcare preparedness and response capabilities in eight different areas.

Education and Training

Center for Domestic Preparedness. (n.d.). <u>Healthcare Coalition Response Leadership Course</u>. (Accessed 11/20/2017.)

This three-day course provides instruction and facilitated discussion in healthcare coalition preparedness, best practices, and lessons learned in establishing an effective healthcare-coalition framework and conducting healthcare-coalition planning. Participants will learn about developing indicators, triggers, and tactics for proactive coalition planning as well as strategies for leading coalition response and recovery.

Center for Domestic Preparedness. (n.d.). <u>Healthcare Leadership for Mass Casualty Incidents</u>. (Accessed 11/20/2017.) Federal Emergency Management Agency.

This four-day residential course for healthcare leaders focuses on critical disaster emergency preparedness decision making, management of different facets of the hospital response, and considerations for the community. The course applies to any incident with multiple casualties requiring surge capacity implementation.

Federal Emergency Management Agency. (n.d.). <u>Framework for Healthcare Emergency</u> <u>Management</u>. (Accessed 11/20/2017.)

This four-day (32-hour) course is geared towards people responsible for emergency in healthcare facilities. It covers standards, regulations, and organizations; integration with stakeholders and other agencies; the Incident Command System; plans/the planning process; facility and personnel preparedness; exercises and training; mass casualty and surge issues; recovery; and finances.

General Guidance

Hanfling, D. (2013). <u>Role of Regional Healthcare Coalitions in Managing and Coordinating</u> <u>Disaster Response</u>.

The author provides an overview of the history of coalition development in the National Capital Region, describes the "optimal framework for coordinating response between

existing healthcare coalitions and emergency management infrastructure," and explains how regional networks can bolster communications and situational awareness.

Hupert, N., Biala, K., Holland, T., et al. (2015). <u>Optimizing Health Care Coalitions: Conceptual Frameworks and a Research Agenda</u>. Disaster Medicine and Public Health Preparedness. 9(6): 717-723.

The authors provide an overview of the Hospital Preparedness Program and healthcare coalitions in general. This is followed by a description of two frameworks they created to give coalition leaders improved insight into "how different enterprises achieve similar ends relevant to emergency response." The authors also provide a research agenda related to coalition contribution to the healthcare system.

*Porth, L. and Gatz,, J. (2013). <u>Healthcare Coalitions: An Emergency Preparedness Framework</u> for Non-Urban Regions. Missouri Hospital Association.

This guidance is targeted to non-urban communities in Missouri developing regional healthcare coalitions. It provides guidance on coalition membership, structure, governance, and roles/ responsibilities during a response (including coordination with city, county, regional, and state partners).

U.S. Department of Health and Human Services, Office of the Assistant Secretary for Preparedness and Response. (n.d.). <u>From Hospitals to Healthcare Coalitions:</u> <u>Transforming Health Preparedness and Response in Our Communities</u>. (Accessed 11/20/2017.)

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U.S. Department of Health and Human Services, Office of the Assistant Secretary for Preparedness and Response. (2016). <u>2017-2022 Health Care Preparedness and Response</u> <u>Capabilities.</u>

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Guidance: Coalition Medical Surge

Barbera, J.A. and Macintyre, A.G. (2009). <u>Medical Surge Capacity and Capability: The</u> <u>Healthcare Coalition in Emergency Response and Recovery</u>. U.S. Department of Health and Human Services.

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This report highlights the promising practices being used by healthcare coalitions to plan and increase immediate bed availability in rural communities.

Nevada Division of Public and Behavioral Health. (2016). <u>Nevada Statewide Medical Surge</u> <u>Plan.</u>

This 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. Planners from other states may use this as a template for their facilities.

Terndrup, T., Leaming, J., Adams, R., and Adoff, S. (2012). <u>Hospital-Based Coalition to</u> <u>Improve Regional Surge Capacity</u>. The Western Journal of Emergency Medicine. 13(5):445-52.



The authors examined the effect of a newly-developed regional healthcare coalition (in south Central Pennsylvania) on six surge capacity-related objectives. In a two-year period, the healthcare coalition improved areas under all objectives, which focused on situational awareness of capabilities and assets among members; exercising of plans across the region; augmentation of mutual aid agreements; development and strengthening of partnerships among members; ensuring NIMS compliance; and development and testing of a volunteer plan.

U.S. Department of Health and Human Services, Office of the Assistant Secretary for Preparedness and Response. (2016). <u>Healthcare Coalition Involvement in Mass</u> <u>Gatherings</u>.

This presentation discusses how planning for and responding during mass gatherings can serve as proxy for a real response, and describes how healthcare coalitions can be involved in mass gathering planning and execution. A link to the archived webinar is included.

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Plans, Tools, and Templates

ASPR TRACIE. (2017). <u>Health Care Coalition Preparedness Plan</u>. U.S. Department of Health and Human Services, Office of the Assistant Secretary for Preparedness and Response.

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.

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Central Florida Disaster Medical Coalition. (n.d.). <u>Healthcare Coalitions in Florida: Frequently</u> <u>Asked Questions</u>. (Accessed 11/20/2017.)

This document provides answers to some of the most commonly-asked questions about healthcare coalitions and serve as a checklist and help new coalition leaders in the early phases of their work.

Central Maine Regional Health Care Coalition. (2016). <u>All Hazards Emergency Operations Plan:</u> <u>November 2016</u>.

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).

DC Emergency Healthcare Coalition. (2014). <u>DC Emergency Healthcare Coalition</u> <u>Communications Support Annex: A Support Annex to the DC EHC Emergency</u> <u>Operations Plan for Coalition Members.</u>

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).

DC Emergency Healthcare Coalition. (2014). <u>Emergency Operation Plan (EOP) for the DC</u> <u>Emergency Healthcare Coalition</u>.

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.

DC Emergency Healthcare Coalition. (2010). MOU for Hospitals in the District of Columbia.

This Mutual Aid & Cooperative Assistance Memorandum of Understanding describes the relationship and the associated procedures which participating healthcare organizations can use to share resources in supporting each other during response to potential or real emergencies or disasters. It may be used as a reference by other healthcare coalitions for developing coalition-specific memoranda of understanding.

DC Emergency Healthcare Coalition. (2014). Public Information Functional Annex.

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 preplanned 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.

Delmarva Regional Healthcare Mutual Aid Group. (2015). <u>Emergency Operations Standard</u> <u>Operating Guideline</u>.

This document was written to help group members with operations during an incident that exceeds capacity and capability of individual members. In addition to traditional sections (e.g., concept of operations, roles and responsibilities, training and exercises), it includes a description of the Coalition Coordination Cell (CCC) functions as well as a job action sheet for the CCC lead.

This plan describes the steps the Eastern Virginia Healthcare Coalition will take following a disaster to ensure that it is able to return to normal operations as quickly as possible in order to fulfill its mission of supporting its healthcare community in response and recovery. It may be used as a reference to assist other coalitions with developing their Continuity of Operations plans.

Eastern Virginia Healthcare Coalition. (2016). <u>Eastern Virginia Healthcare Coalition Emergency</u> <u>Operations Guide</u>.

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.

Eastern Virginia Healthcare Coalition. (2016). <u>Continuity of Operations Plan (COOP): Guide for</u> <u>Disaster Avoidance, Preparation, and Recovery.</u>

Healthcare Preparedness Coalition of Utah/Wasatch Counties. (2014). <u>Regional Medical Surge</u> <u>Plan: Expanding Local Healthcare Structure in Mass Casualty Events.</u>

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.

Illinois Department of Public Health. (2014). <u>Illinois Department of Public Health Emergency</u> <u>Support Function (ESF) 8 Plan</u>.

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 when integrated into ESF-8. 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.

Metropolitan Emergency Managers Committee. (2016). ESF 8: Public Health and Medical Services: Kansas City Metropolitan Area Regional Coordination Guide. (Contact ASPR TRACIE via email at <u>askasprtracie@hhs.gov</u> for access to this document).

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.

Louisiana Hospital Association. (2013). Louisiana ESF-8 Health and Medical Preparedness and Response Coalition.

This plan describes the structure, functions, and planning frameworks of the Louisiana ESF-8 Health and Medical Preparedness and Response Coalition. Coalition membership is primarily those that have a preparedness and response function under ESF-8 such as public health, pre-hospital, and hospital assets. This plan includes sections such as ESF-8 Network Information Sharing; communication hardware/ modalities; planning framework; and cross-cutting activities/processes.

Northern Utah Healthcare Coalition. (n.d.). <u>Resource Management and Sharing</u>. (Accessed 11/20/2017.)

The Northern Utah Healthcare Coalition created this guidance to help members have the right resources available at the right time and place after an incident. It describes protocols for resource requests, as well as reimbursement among members.

*Porth, L. and Gatz,, J. (2013). <u>Healthcare Coalitions: An Emergency Preparedness Framework</u> for Non-Urban Regions. Missouri Hospital Association.

This guidance is targeted to non-urban communities in Missouri developing regional healthcare coalitions. It provides guidance on coalition membership, structure, governance, and roles/ responsibilities during a response (including coordination with city, county, regional, and state partners).

Region 1 NW Oregon Health Preparedness Organization. (2015). <u>Health/ Medical Multi-Agency</u> <u>Coordination (MAC) Group Handbook.</u>

This Health/Medical Multi-Agency Coordination (MAC) Group Handbook provides the framework for MAC Group activities during a public health emergency with significant regional impacts. The handbook also includes a section entitled "Ethical Framework and Criteria" and a facility mutual aid memorandum of understanding.

Northwest Healthcare Response Network. (2017). Plans and Resources.

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.

NW Oregon Health Preparedness Organization. (2015). <u>Memorandum of Understanding:</u> <u>Hospital/Health System Facility Emergency Mutual Aid</u>.

This Memorandum of Understanding (MOU) is a voluntary agreement among the hospital/health system facilities in Northwest Oregon Healthcare Preparedness Region 1 (and Southwest Washington) with the goals of: 1) coordinating emergency planning; 2) preparing for a coordinated response to large-scale emergencies; 3) facilitating communications; and 4) providing mutual aid during a medical disaster. It may be used as a reference by other healthcare coalitions for developing coalition-specific memoranda of understanding.

Public Health-Seattle and King County, Washington. (2015). <u>ESF 8 Basic Plan-Health, Medical</u> <u>and Mortuary Services</u>.

This plan describes concept of operations, roles and responsibilities, and command structures for ESF-8 members in King County, Washington that may be useful to coalitions in developing coordination structures and plans for their communities. This plan includes concept of operations and roles and responsibilities that involve the Northwest Healthcare Response Network (healthcare coalition).

Santa Barbara County. (2017). <u>Santa Barbara County Disaster Healthcare Partners Coalition</u> <u>Governance Document</u>.

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.

SouthEast Texas Regional Advisory Council. (n.d.). <u>Catastrophic Medical Operations Center</u>. (Accessed 11/27/2017.)

This webpage describes the Catastrophic Medical Operations Center (referred to as "the operational arm of the Regional Healthcare Preparedness Coalition) and highlights the four levels of activation. A link to frequently asked questions is located at the bottom of the page.

SouthEast Texas Regional Advisory Council. (n.d.). Regional Plans. (Accessed 11/17/2017.)

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.

SE Minnesota Disaster Health Coalition. (2016). <u>Healthcare Multi-Agency Coordination Center</u> (MACC).

This document can serve as a template for healthcare coalitions interested in creating a Healthcare Multi-Agency Coordination Center (H-MACC). The scope of this document involves H-MACC activities; information should be integrated within organizational and community operational documents as applicable.

SE Minnesota Disaster Health Coalition. (2016). Communications Guidelines.

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

St. Louis Hospital Preparedness Committee. (2015). <u>St. Louis Area Regional Hospital Re-Entry</u> <u>Plan.</u>

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.

Uintah Basin Region Healthcare Preparedness Coalition (Utah). (n.d.). Inter-Healthcare Provider Master Mutual Aid Agreement. (Accessed 11/20/2017.)

This agreement facilitates the sharing of staff, equipment, supplies, and pharmaceuticals, and the transfer of patients during disasters affecting the rural Uintah Basin region. It may be used as a reference by other healthcare coalitions for developing coalition-specific memoranda of understanding.

U.S. Department of Health and Human Services, Office of the Assistant Secretary for Preparedness and Response. (2016). <u>Health Care Coalition Resource and Gap Analysis</u> <u>Tool</u>.

This tool is designed to help health care coalition (HCC) partners develop a common understanding of their resources and existing gaps, and strategies for prioritizing which gaps to close. Gaps may include inadequate plans or procedures, staffing, equipment and supplies, skills and expertise, and/or services. HCCs are encouraged to modify the template to reflect their coalition members, resources, and unique community attributes. A companion HCC Aggregator Tool allows information from multiple HCCs to be summarized to present an overall picture of a larger geographic area, including an entire state. (For a 508 compliant version of this tool, copy and paste this link into your browser: <u>https://asprtracie.s3.amazonaws.com/documents/aspr-tracie-healthcarecoalition-resource-and-gap-analysis-pdf.pdf</u>.)

Washoe County, Nevada. (2017). Emergency Medical Services Regional Plans.

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).

Specialty Plan, Education, and Training Topics

DC Emergency Healthcare Coalition. (2014). <u>The Active Shooter in a Healthcare Facility: A</u> <u>Template for Response Procedures</u>.

This document serves as a planning guide for healthcare coalition member organizations wishing to establish response plans for an active shooter incident (defined as any individual with a firearm threatening harm or engaged in the process of causing harm in a facility or on a campus; other definitions are included in the plan).

T R A C I E HEALTHCARE EMERGENCY PREPAREDNESS

DC Emergency Healthcare Coalition. (2014). <u>DCEHC Acute Care Facilities Decontamination</u> <u>Planning Template</u>.

This planning template can help acute care facilities prepare for and respond to a hazardous material incident.

DC Emergency Healthcare Coalition. (2014). <u>DCEHC Disaster Behavioral Health Planning</u> <u>Template</u>.

This template provides planning guidance that allows healthcare facilities prepare for and respond to the behavioral health needs of patients, staff, and loved ones impacted by a disaster or other emergent situation.

DC Emergency Healthcare Coalition. (2014). <u>Healthcare Facility Evacuation Incident Specific</u> <u>Annex</u>.

This annex to the Washington, DC Emergency Healthcare Coalition Emergency Operations Plan provides guidance to personnel supporting an incident in which a single or multiple healthcare facilities in the District of Columbia require evacuation.

This template was designed to provide guidance to healthcare coalition member organizations that provide residential healthcare services (e.g., acute care, long, and short term care) regarding effective management of mass fatality situations.

East-West Gateway Council of Governments. (2016). <u>East-West Gateway Council of</u> <u>Governments Regional Alternate Care Site Plan</u>.

This plan contains documents that fully detail the St. Louis Area Regional Response System (STARRS) approach to Alternate Care Sites (ACS). It highlights how ACS can be used to alleviate the burden caused by a surge of patients entering the healthcare system.

Salt Lake, Summit, and Tooele County Healthcare Preparedness Coalition. (2014). <u>SST Regional</u> <u>Mass Surge & Alternate Care Plan</u>.

This comprehensive plan explains how alternate care facilities will be used in the Salt Lake, Summit, and Tooele County (UT) Region to help increase the capacities and capabilities of public health and healthcare facilities in the event of a mass casualty incident that leads to a surge in patients.

South Dakota Department of Health. (2015). ESF #8 Sturgis Rally Plan.

This plan incorporates various stakeholders from healthcare and related agencies and was developed in advance of the 75th Sturgis Motorcycle Rally.

St. Louis Area Regional Response System. (2014). <u>St. Louis Area Regional Hospital Evacuation</u> and Transportation Plan.



DC Emergency Healthcare Coalition. (2014). <u>Residential Healthcare Facility Mass Fatality</u> <u>Procedures Template</u>.

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.

U.S. Department of Health and Human Services, Office of the Assistant Secretary for Preparedness and Response, and the Centers for Disease Control and Prevention. (2014). Ebola Training Webinar for Healthcare Coalitions and Healthcare Workers.

This webinar presents lessons learned and other best practices for healthcare workers and coalitions as a result of the Ebola epidemic.

U.S. Department of Health and Human Services, Office of the Assistant Secretary for Preparedness and Response. (2017). <u>Healthcare Coalition Influenza Pandemic Checklist.</u>

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.

Agencies and Organizations

- ASPR TRACIE. <u>Select Health Care Coalition Resources</u>. U.S. Department of Health and Human Services, Office of the Assistant Secretary for Preparedness and Response.
- U.S. Department of Health and Human Services, Office of the Assistant Secretary for Preparedness and Response. <u>Hospital Preparedness Program</u>.

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