

Healthcare Emergency Management and Disaster Planning – A Capabilities Based Model

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ASPR HPP

- ▶ **Purpose** – To improve the healthcare system's preparedness and response capacity for all hazards through equipping, training, and the development of shared planning and communication activity
- ▶ **Partners** – UDOH Preparedness, UDOH EMS, Local Health Departments, hospitals, LTC, outpatient providers, DoD, VA, local and state emergency management, others

HPP Funding Purpose

- ▶ Improving Infrastructure
- ▶ Capability Based Approach to Planning
- ▶ Development of Healthcare Coalitions
 - Goal 1 – Maximize surge capability within the community for each HCO
 - Goal 2 – Maximize community capacity and capability
 - Goal 3 – Maximize regional, State, and national capabilities and capacity
- ▶ Align and coordinate with CDC Public Health Emergency Preparedness program

PAHPA Program Benchmarks

- ▶ Awardees submit timely and complete data for all reports
- ▶ Report available and staffed beds by sub-state regions to HHS within 4 hours or less of a request, during an incident or exercise at least once during the current grant year. At least 75% of participating hospitals in the state
- ▶ Submit exercise plans with proposed exercise schedule, plans for healthcare entity exercise development, conduct, evaluation, and improvement planning. Demonstrate healthcare coalition and hospital involvement by including relevant participating organizations and anticipated capabilities to be tested
- ▶ Provide inventory that lists each of the participating hospitals by name and by National Provider Identifier (NPI) and identifies each of the 11 NIMS implementation activities that have been achieved and each activity still in progress. Provide plans to address gaps for identified hospitals that are not 100% compliant with NIMS requirements

Handout Description

- ▶ Capability – Applies to HCO, Region, State
- ▶ Performance Measure - tool used to determine program effectiveness; all Coalition-based this year to develop a working baseline
- ▶ Function –Activities to occur to achieve Capability
- ▶ Resource Elements – What is needed to perform a Function
 - Planning (P,p) – EOP/SOP components, protocols
 - Skills (S,s) – Competencies/training needed for personnel to deliver a Capability
 - Equipment (E,e) – Assets, resources, technology
 - Capital letters are required, lower case secondary

Healthcare System Preparedness

Tiered, scalable, and flexible approach to response and recovery

Timely monitoring and management of resources

Allocation of response resources

Information on the status of the incident and HCO

Planning, organizing and equipping, training, exercises, evaluations and corrective actions

Healthcare System Recovery

Develop efficient processes and advocate for the rebuilding of public health, medical, and mental/behavioral health systems

Comparable to pre-incident levels and improved levels where possible

Effective and efficient return to normalcy or a new standard of normalcy for the provision of healthcare delivery to the community

Emergency Operations Coordination

Engage with EOC or with on-scene incident management to coordinate information and resource allocation for affected HCO

Multi-agency coordination representing HCO

Plans and protocols that guide incident management to make the appropriate decisions to support HCO

HCO, incident management, and the public have relevant and timely information about incident and HCO services

Coordinate HCO and community response using National Incident Management System (NIMS)

Fatality Management

Coordinate with law enforcement, healthcare, emergency management, and medical examiner to ensure the proper handling, identification, transportation, and storage of human remains and personal effects; certify cause of death

Facilitate access to mental/behavioral health services for family members, responders, and survivors of an incident

Proper and culturally sensitive storage of human remains during periods of increased deaths at healthcare organizations during an incident

Information Sharing

Conduct multijurisdictional exchange of public health and medical information and situational awareness between the healthcare system and public and private partners

Sharing healthcare information through the Joint Information System for dissemination to partners and the community

Medical Surge

The ability to provide adequate medical evaluation and care during incidents that exceed the limits of the normal medical infrastructure within the community

This encompasses the ability of healthcare organizations to survive an all-hazards incident, and maintain or rapidly recover operations that were compromised

Responder Safety and Health

The ability of HCO to protect the safety and health of healthcare workers from a variety of hazards during emergencies and disasters.

Includes processes to equip, train, and provide other resources needed to ensure healthcare workers at the highest risk for adverse exposure, illness, and injury are adequately protected from all hazards during response and recovery operations

Volunteer Management

The ability to coordinate the identification, recruitment, registration, credential verification, training, engagement, and retention of volunteers to support healthcare organizations with the medical preparedness and response to incidents and events

Thanks Again!
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