

WCMHPC Bi-Monthly All Coalition Virtual Meeting
January 25, 2024
0900-1030



Agenda



- **0900** **Introduction**
- **0910** **HVA Review/Update**
- **0930** **Coalition Sustainability/Future planning**
 - **Review of deliverables from ASPR**
 - **Activities scheduled/in the works**
 - **Goals/ideas/wants/needs**
- **1000** **Governance/advisory committee**

Coalition update



- LTC Workshop registration is going GREAT!!!
 - Two dates as options (May 7 or May 9)
 - Open to SNF, AL, HH – LPH and EM are more than welcome to register
- Surge Exercise registration is very slow.....reminder to the hospitals – there is financial reimbursement for your participation. This won't happen again for at least 5 years.....
 - Remember – hospitals that are participating are STRONGLY encouraged to invite their local public health, local EM, EMS to participate in the exercise AT your facility command center
- All future meetings/trainings will require pre-registration so that we can plan for the appropriate amount of food.
- Deadlines are deadlines – we respectfully ask that you pay attention to the weekly updates and specifically look at the deadlines --- we are not able to be flexible

HVA Update



Regional HVA review

- Last years HVA was sent out with the agenda for today's meeting
- Let's look at the Vulnerabilities first:
 - Weather (hot and cold)
 - Communications
 - Lack of coordination between ALL healthcare and LPH/EM/State partners
 - Power outages
 - Resource acquisition/sharing
 - Coalition funding
 - Coalition Staffing
 - Transportation
 - Distance to higher level of care
 - Space for surge
 - Staff wearing multiple hats



Now let's review the Threats to healthcare delivery:

- Tornado
- Winter weather
- Flood
- Loss of power
- Long term loss of utilities
- Security Incidents
- Pandemic/Endemics
- Fire
- Hazmat spill
- Staffing shortage
- Cybersecurity
- Chemical/biological exposure
- Communications
- Transportation
- Structural compromise



How to mitigate

- COOP training
- ICS 101
- Update the Regional Health Care Assets and Essential Services guide and post it on the coalition website
- Update the LTC Transportation Assets and post it on the website
- Evaluate trainings and exercises for BP1 2024-2025



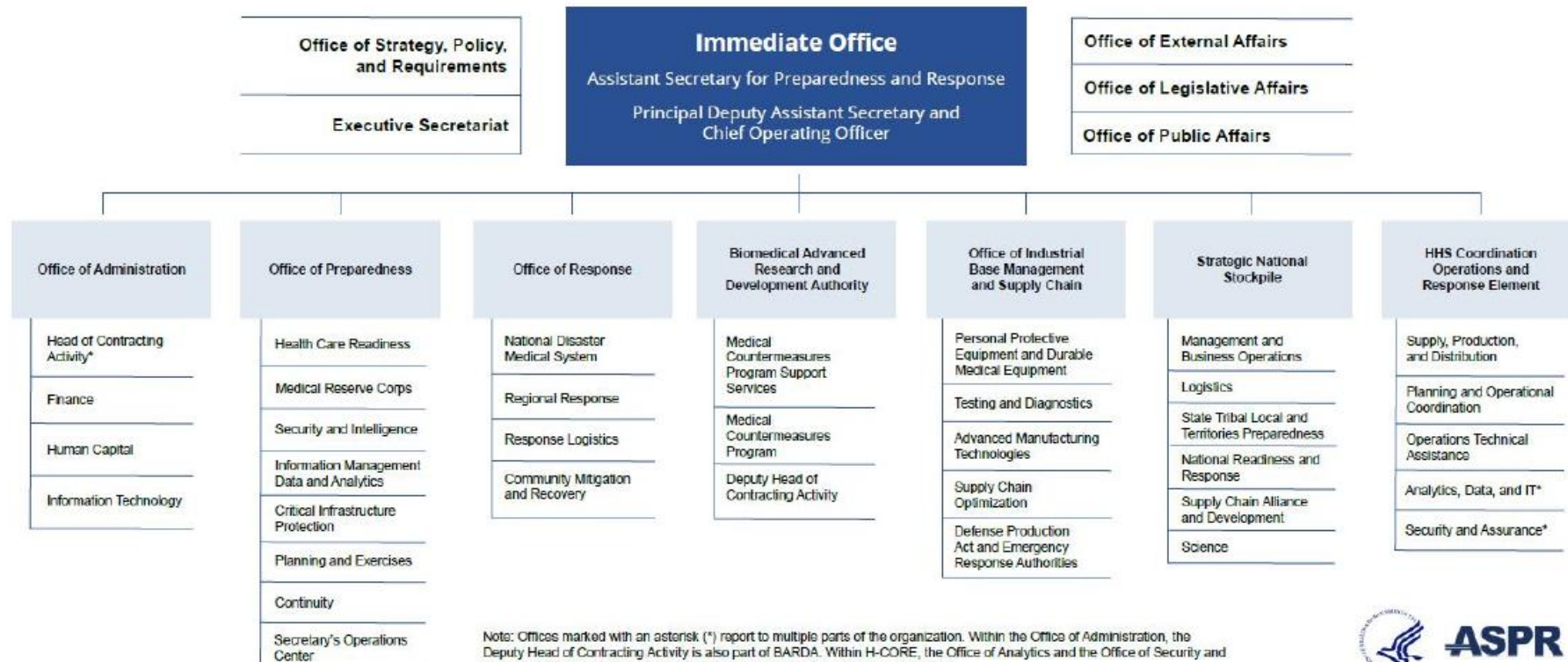
ASPR Update



BP1 2024-2025 ASPR Update

ASPR's Reorganization

Department of Health and Human Services Administration for Strategic Preparedness and Response (ASPR)



Department of Health and Human Services
Administration for Strategic Preparedness and Response

Office of Health Care Readiness

Programs and Activities

- Hospital Preparedness Program (HPP)
- Regional Disaster Health Response System (RDHRS)
- National Special Pathogen System (NSPS)
- Regional Emerging Special Pathogen Treatment Centers (RESPTCs)
- National Emerging Special Pathogens Training and Education Center (NETEC)
- Hospital Associations (HAs)
- Workforce Capacity and Capability

Immediate Office

Assistant Secretary for Preparedness and Response
Principal Deputy Assistant Secretary and
Chief Operating Officer

Office of Strategy, Policy,
and Requirements

Executive Secretariat

Office of Administration

Head of Contracting
Activity*

Finance

Human Capital

Information Technology

Office of Preparedness

Health Care Readiness

Medical Reserve Corps

Security and Intelligence

Information Management
Data and Analytics

Critical Infrastructure
Protection

Planning and Exercises

Continuity

Secretary's Operations
Center

Office of Response

National Disaster
Medical System

Regional Response

Response Logistics

Community Mitigation
and Recovery

Office of Biological Advanced
Research and
Development Authority

Medical
Countermeasures
Program Support
Services

Medical
Countermeasures
Program

Deputy Head of
Contracting Activity

Office of Industrial
Base Management
and Supply Chain

Personal Protective
Equipment and Durable
Medical Equipment

Testing and Diagnostics

Advanced Manufacturing
Technologies

Supply Chain
Optimization

Defense Production
Act and Emergency
Response Authorities

Business Operations

Logistics

State Tribal Local and
Territories Preparedness

National Readiness and
Response

Supply Chain Alliance
and Development

Science

Manufacturing and Distribution

Planning and Operational
Coordination

Operations Technical
Assistance

Analytics, Data, and IT*

Security and Assurance*

Note: Offices marked with an asterisk (*) report to multiple parts of the organization. Within the Office of Administration, the Deputy Head of Contracting Activity is also part of BARDA. Within H-CORE, the Office of Analytics and the Office of Security and Assurance are part of the Office of Preparedness but provide support to H-CORE.



ASPR

Overview of The National Health Care Preparedness and Response Capabilities

The National Health Care Preparedness and Response Capabilities (the Capabilities) provide strategic guidance for health care to save lives and maintain function in advance of, during, and after disasters.

ADVANCING HEALTH CARE READINESS

- The Capabilities illustrate the range of preparedness and response activities that, when conducted, can improve health care readiness in the United States.
- The Capabilities are intended to be used by audiences to:
 - refer to key functions of health care readiness;
 - guide development of plans, training, and exercises; and
 - connect partners to resources.




THE EIGHT CAPABILITIES

- 1 Incident Management and Coordination
- 2 Information Management
- 3 Patient Movement and Distribution
- 4 Workforce
- 5 Resources
- 6 Operational Continuity
- 7 Specialty Care
- 8 Community Integration





Evolution of The Capabilities

The Capabilities complement and build upon the foundational knowledge provided in the Health Care Preparedness and Response Capabilities for Health Care Coalitions (HCCs) (formerly known as the 2017-2022 Health Care Preparedness and Response Capabilities).

The New Capabilities **Aim** to:

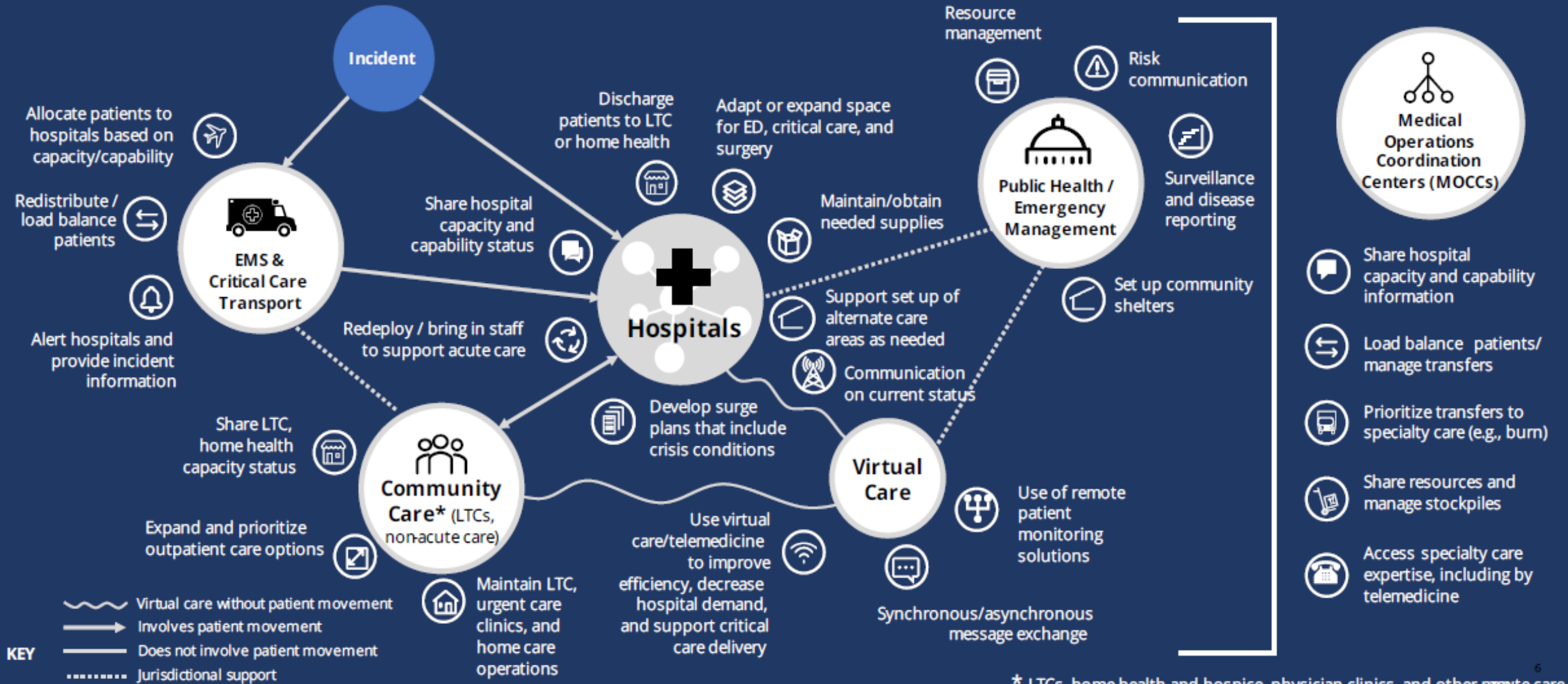
-  Address **insights** learned during **COVID-19**, while maintaining an all-hazards approach
-  Speak to all entities with **health care preparedness and response** functions
-  **Foster equity** in preparedness, response, and recovery functions, and address the needs of at-risk individuals

The New Capabilities **Focus** on:

-  Addressing **health care workforce** challenges
-  Promoting **health equity** and access
-  Monitoring and managing **patient distribution** to ensure optimal use of existing resources
-  Mitigating the consequences of **extreme weather events**

Mitigating Surge

Key Actions



Strategic Planning Survey



Process



*Thank
You*

- Survey sent out in the weekly update
- Date sent out – January 2, 2024
- Deadline for response – January 15, 2024
- Responses were confidential
 - Total responses received – 6 (combined for both regions)

The Why.....



WE WANT TO BE THE BEST THAT WE CAN BE!!

WE WANT TO MEET THE NEEDS OF OUR MEMBERS!!

#1 Do you feel that the roles and responsibilities within the coalition are clearly defined? Do you understand your role and responsibilities within the coalition? Why/Why not?



Yes, I
believe
so

Yes, there is clear
communication from
coalition leadership.

yes I understand our roles and responsibilities.
The coalition is always keeping us apprised of our
responsibilities and input we need to provide and
exercises we should be a part of. We value this
collaboration and are a vested partner.

#2 Do you feel coalition fulfills their roles and responsibilities? If no, please list a gap you see.



Yes

Yes we do

It would be very helpful to LTC if the coalition provided the required 2 exercises per year. Even if the coalition just provided the materials for 1 of them and didn't host, that would help.

#3 What benefit or value do you see that the coalition brings to your organization/and or the community



training opportunities,
opportunities for
collaboration and
sharing, connecting to
resources

Knowledge and helpful
in emergencies

Up-to-date
education/information re:
emergency preparedness
topics;
participation/coordination
of required exercises.

#4 How engaged do you feel you are in our coalition? If you are not participating in meetings, drills, exercises, trainings, how can we engage you?



we participate when the exercises pertain to our agency and/or how we can collaborate better with our other community partners

I participate in drills and exercises but could be more engaged

engaged

#5 What type of training and education is needed for you and other members of the coalition? How would you like this education to be delivered?



ICS refresher or ICS 101 for new staff may be nice (or staff that don't normally work in emergency preparedness but could be asked to respond). It would be nice to have a list of who the representatives are for each partner who is part of the coalition in our region (or maybe there is and I don't know where it is located), i.e. nursing home partners and their contacts, hospital partners and contact info, etc. That way, when we see an exercise that is for a hospital, we could directly reach out to the hospital in our community and see if they want our presence at their exercise, etc.

Training for
hospital
leadership

LTC yearly exercises that are
required.

#6 How can the coalition members spread more awareness about what the coalition is and its purpose?



Maybe a flyer-share
out with community
groups we attend as
relevant

Word of Mouth

Unsure

#7 Have we created sustainability for future growth of the coalition?



your depth of knowledge is a great resource to us and we feel well supported.

Unsure

Yes

#8 Decisions for the coalition are made by the Advisory Group, which is made up of representatives from hospitals, emergency management, long term care representatives, emergency medical services and regional partners. Do you have any concerns with this model? If so, what alternatives would you suggest? Would you be willing to serve on this group?



Possibly

No

Is there a list of who is currently on this advisory group? Does it always stay the same people or agencies? I would be willing to serve if and when needed.

Who is on the advisory committee?

- One hospital representative from each facility,
- One LPH representative (currently Shelley with Horizon),
- One Emergency Manager (we have 2 – Dona and Lynn),
- One EMS (Lynn, or Scott),
- One LTC representative (currently vacant)
- Our PHPC, Regional EMS and region EM (Non voting members)



Role of the advisory committee



- Review and provide feedback on the budget
- Review and provide feedback on plans and any updates to the plans
- If there is a situation where there are multiple requests for resources that exceed what is available – the advisory committee would be convened to determine where those resources would be deployed.

#9 Do you feel the communication and decisions being made by the coalition are meeting the needs of the coalition?



Yes

Yes

Yes

#10 How should we best market our purpose and value to create awareness prior to an emergent need? Should we explore other options within our communities to share our purpose and value?



continued
involvement and
communication with
facility EM exercises,
etc.

Unsure

I think the trainings, exercises
and real life examples you share
of responses and how you
assisted help demonstrate and
show your value.

#11 Are there other concerns or topics you would like to discuss that is not covered in this survey?



None at this time. Thanks for all your work. The healthcare coalition is a great resource and we are grateful for your partnership!

Next steps

- Use the information gathered here to assist with future exercise/training planning.
- Review our existing meeting/outlook invitations and try to clean them up so that they reduce confusion.
- Ensure that as a coalition we are thinking of the 'whole' and not being focused on the hospitals only.



Our ask.....



- Please do not hesitate to reach out to any of the coalition staff with questions/concerns/feedback.
- If you have any needs, want to invite us to your facility/exercise – please do not hesitate to reach out.

The coalition is not about the coalition staff – it is about the coalition members ---- we want to be a resource for you.

Goals/IDEAS/Wants & Needs

- We ask you to do a deep dive and think of areas where the coalition can support you and your emergency preparedness needs



Partner Updates





*Thank
You*

