

Medical Surge: Health Care Coalitions, Tier Response, and Disaster Medical Coordination

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Outline

- **WHEPP Background**
- **Healthcare Coalition Concept**
- **Tier Coordination and Disaster Medical Coordination Centers**
- **Role of EMS**

Wisconsin Hospital Emergency Preparedness Program

- **Supports hospital emergency preparedness planning and response to mass casualty incidents or pandemic events**
- **Funded by the Office of the Assistant Secretary for Preparedness and Response (ASPR) in the U.S. Department of Health and Human Services. (DHHS)**

Wisconsin Hospital Emergency Preparedness Program (WHEPP)

- **Wisconsin Department of Health Services**
 - **Division of Public Health**
 - **Office of Preparedness and Emergency Health Care**
 - **Preparedness Section**
 - WHEPP
 - Public Health Preparedness
 - **Emergency Medical Services Section**
 - **Trauma Section**

Time of Transition

- Guidance from ASPR based on recent events (e.g. Joplin Tornado, Hurricane Sandy) now focuses on the development of Healthcare Coalitions
- Shift from funding specific agencies/entities to focusing on strengthening regional response and recovery using an Healthcare Coalitions
- Moving focus toward all of healthcare sector (and not just hospitals)

Wisconsin Gaps

- Coordinated health plans for large scale disasters
- Formal regional medical coordination structure
- Regional system for “off-loading” and “on-loading” patients in mass-casualty incidents
- Established indicators for crisis standards of care when resources are exhausted and systems are overwhelmed
- Evacuation and patient tracking capability

Health Emergency Priorities

- Improved system for medical surge
- Patient transport and evacuation plans in disasters
- Health surveillance and information sharing
- Ability to mobilize and coordinate medical resources
- Build situational awareness of medical resources
- Improve alerting and communication coordination
- Bed availability and patient tracking

Healthcare Coalitions (HCC)

- **Group of healthcare organizations, public safety and public health partners that join forces for the common goal of making their communities safer, healthier and more resilient**
- **Support communities before, during and after disasters and other health-related crises**
- **Development is required by ASPR as condition of continued funding**

HCC Purpose

- Coordinate how public health, healthcare institutions, and first responder agencies will manage their efforts to enact a uniform and unified response to an emergency, specifically the medical surge aspect of an event (ESF-8)
- **Does not replace day-to-day functioning of individual agencies/organizations**

Healthcare Coalitions in WI

- **At state level, coordinated by Preparedness Section in DHS**
- **Regions have been defined by the Department of Health Services**
- **Regions are developing their own coalitions**
- **Initial discussions just starting**
- **Goal is to have initial regional HCC's established with basic structure by July 1, 2015**

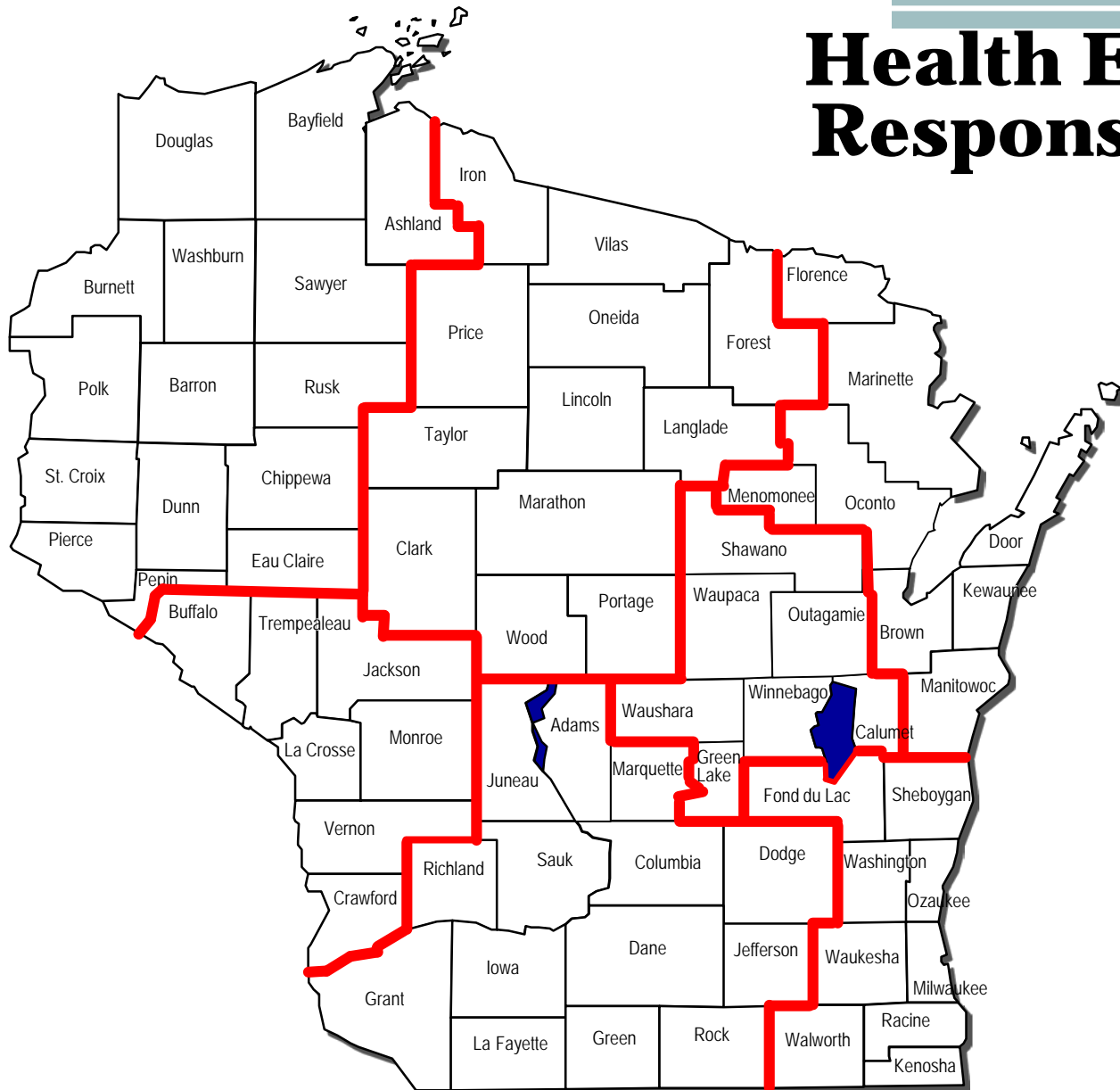
Healthcare Coalition Partners

- Emergency Medical Services
- Hospitals and Clinics
- Trauma
- Emergency Management
- Public Health
- Long Term Care
- Mental and Behavioral Health
- Community and Faith Based Organizations
- Volunteer Organizations
- Businesses
- Human Services
- Medical Examiners and Coroners
- And many, many more!

Health Emergency Response Regions

- **Seven Regions in state**
- **Determined at state level by DHS**
- **Based on previous WHEPP regions, which had been developed based on patient referral patterns**
- **Will be RTAC regions going forward**
- **Public Health and Emergency Management will participate and support region structure**

Health Emergency Response Regions



Key Components of HCC

- **Regional Board of Directors***
- **Regional HCC coordinator***
- **Regional Trauma coordinator***
- **HCC Medical Advisor***
- **Medical Coordination Centers**

*** Comprise the HCC Leadership Team**

Regional Board of Directors

- Responsible for overall function of HCC
- Accountable to DHS, HCC state leadership, and HCC member organizations
- Exact size and membership at HCC discretion
- Composition should be representative of organizations, disciplines, and localities that form region and HCC
- Must include at least:
 - One representative from a hospital/hospital system
 - One representative from a public health department/organization
 - One representative from an emergency management department/organization
 - One representative from emergency medical services
 - One representative from trauma

Tiered Coordination

- **ASPR and WHEPP have developed a tier response concept**
 - **Modular, bottom-up approach**
 - **Consistent with Incident Command System principles**
 - **Locally driven - each tier decides when to activate the next level**
 - **Area or Regional Medical Coordinating Centers only assume coordination function when tier below requests it (or if tier below is obviously incapacitated)**

Disaster Medical Coordination

- **Purpose:** Help to close critical gaps in medical surge capacity, continuity of operations, and enhance coordination
- **Components include:**
 - **Collection and collation of regional health information**
 - **Situation awareness**
 - **Monitoring of health care system performance and capacity**
 - **Support to health care system logistic requests in coordination with state and local agencies**

Disaster Medical Coordination Centers

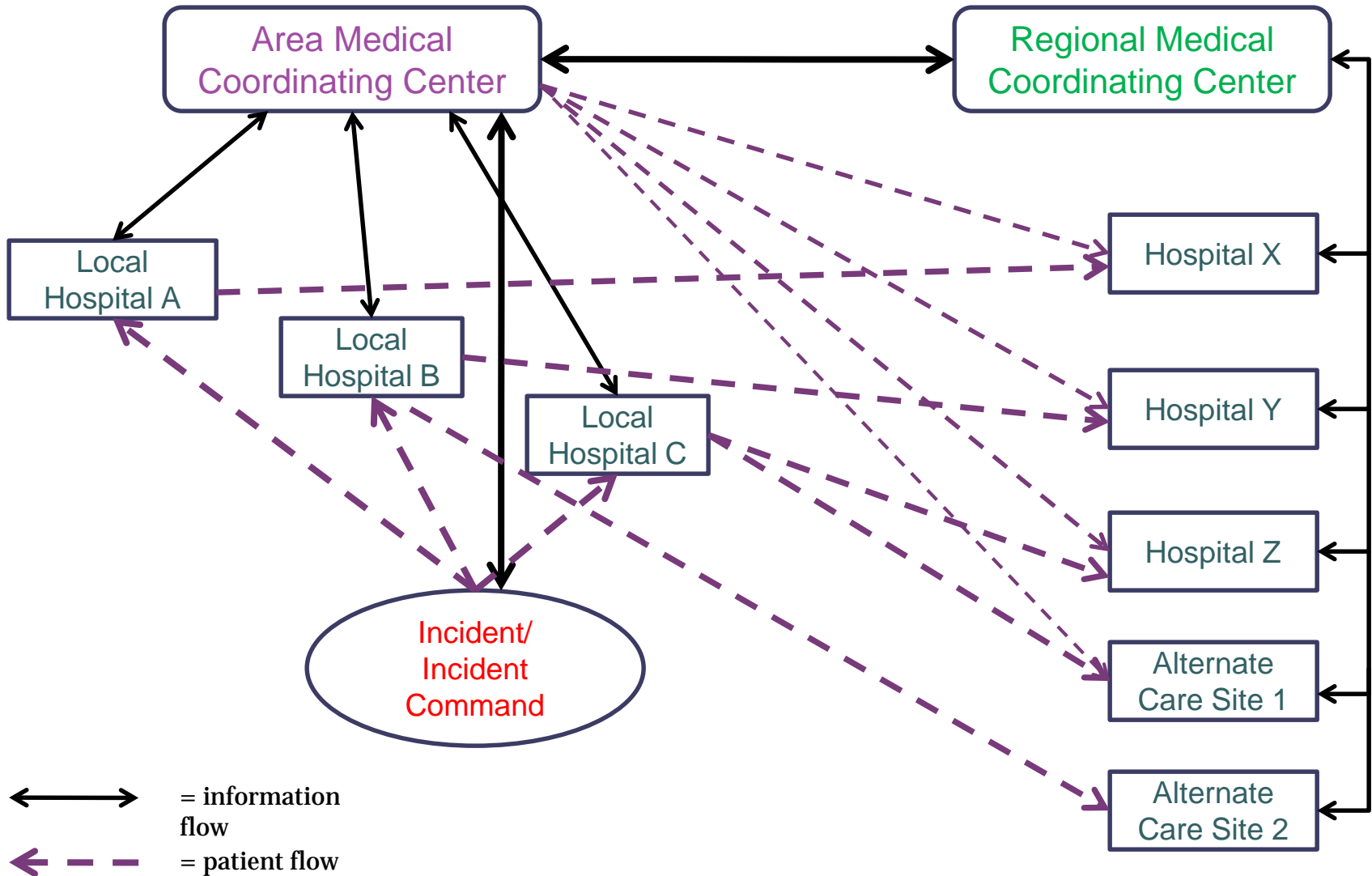
- Designated healthcare or healthcare- related entity serving an area with the pre-determined ability to support the area or coalition as a whole
- Serve as the “response” arm of the healthcare coalition

Disaster Medical Coordination Centers

- **Two levels of Disaster Medical Coordination Centers within HCC**
 - **Area Medical Coordination Centers**
 - Located geographically in the area of an incident
 - Likely multiple area centers within a region
 - **Regional Medical Coordination Center**
 - Designated entity serving a Health Emergency Region's coalition
 - One per region

Regional Medical Coordination Centers

- **Activities may include:**
 - **Monitoring and alerting healthcare coalition partners in an emergency**
 - **Coordination of:**
 - **Information**
 - **Hospital beds**
 - **Patient Movement**
 - **Providing situational awareness during a disaster to all response partners**
 - **Providing clinical consultation and coordination**



RMCC Pilot Projects

- **WHEPP is currently finding two pilots on RMCC development: Rural and Urban**
- **Medical Directors for each pilot serve as WHEPP Medical Advisors**
 - **Rural: Michael Clark, MD - Ministry Health Care/Ministry St. Clare's Hospital/Ministry Spirit Medical Transportation**
 - **Urban: Jason Liu, MD - Medical College of WI/Froedtert Hospital/Childrens Hospital of WI/Milwaukee County EMS**

Objectives of Pilot Project

- **Development and testing of policies/procedures for tiered disaster coordination**
 - **Outline for a database of bed capacity and medical capabilities**
 - **Disaster/special incident medical consultation expert panel**
 - **Information collection/situational awareness indicators**
 - **Alerting and notification processes**
- **Assistance/technical consultation to DHS and WHEPP in on-going preparedness projects**
- **Assistance/technical consultation to the Department of Health Services (DHS) and the Wisconsin Hospital Emergency Preparedness Program (WHEPP) Leadership as needed**

How does HCC participation benefit an EMS agency (healthcare organization)?

- **Gateway to all partners involved in a healthcare emergency/special incident**
 - Able to reach all receiving hospitals and other coalition partners more efficiently
 - Receiving hospital(s) able to off-load patients in order to receive additional incident patients
 - Allows scene Incident Command to have information to better coordinate patient distribution/transport
 - Healthcare sector able to collectively work with government and private partners
- **Provides enhanced resources**
 - Knowledge resources – clinicians/providers, HCC Medical Advisor, regional experts, etc.
 - Physical resources –equipment, supplies, medications, bed space, etc.

How does HCC participation benefit an EMS agency (healthcare organization)?

- **Streamlined information flow**
 - Surveillance/intelligence
 - Treatment recommendations
 - Situational awareness/updates
 - Public and media information
- **Translation of recommendations into treatment delivery**
 - Receive information and translate into care actions
 - Ability to reach multi-disciplinary healthcare providers across region

Potential Roles of an EMS Agency in HCCs

- **Planning**
 - Provide EMS/field perspective
 - Assist with HCC area and regional plan development
 - Participation in training/education and exercises
- **Response**
 - Patient transport (scene response and inter-facility)
 - EMS's distribution of patients from scene to hospitals sets stage for entire healthcare system response to an incident
 - Personnel support of HCC partners

How does HCC participation benefit a Trauma Center (healthcare organization)?

- **Gateway to all partners involved in a healthcare emergency/special incident**
 - Able to reach all hospitals, EMS, and other coalition partners more efficiently
 - Receiving hospital(s) able to off-load patients in order to receive additional incident patients
 - Allows partner to have information to better coordinate patient distribution/transport
 - Healthcare sector able to collectively work with government and private partners
- **Provides enhanced resources**
 - Knowledge resources – clinicians/providers, HCC Medical Advisor, regional experts, etc.
 - Physical resources –equipment, supplies, medications, bed space, etc.

How does HCC participation benefit a Trauma Center (healthcare organization)?

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 - Ability to reach multi-disciplinary healthcare providers across region
- **HCC enhance ability to meet regulatory requirements**
 - Joint Commission
 - CMS
 - ASPR grant requirements

Potential Roles of a Trauma Center in HCCs

- **Planning**

- Provide trauma system perspective
- Assist with HCC area and regional plan development
- Day-to-day procedures/infrastructure represent foundation of response to MCI events
- Participation in training/education and exercises

- **Response**

- Trauma centers serve as central role in the healthcare system response to an MCI incident
- Personnel support of HCC partners

Additional Resources & Documents

- <http://www.dhs.wisconsin.gov/preparedness/hospital/>