



SOUTHEASTERN HEALTHCARE
PREPAREDNESS REGION

PREPAREDNESS PLAN

March 2018

Southeastern Healthcare Preparedness Region Preparedness Plan

This Plan is hereby approved for implementation, and supersedes any and all previous editions.

Date Preparedness Plan Approved:

This plan has been approved by the governing bodies of the Southeastern Healthcare Preparedness Region, in accordance with their respective bylaws and guidelines.

Revised plans will be distributed electronically annually.

**Southeastern Healthcare Preparedness Region
Preparedness Plan
Record of Distribution**

To Whom: Person/Title/Agency	Method of Delivery	Date

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Southeastern Healthcare Preparedness Region

PREPAREDNESS PLAN

INTRODUCTION

The Healthcare Preparedness Program (HPP), which is managed by the NC Office of Emergency Medical Services (NCOEMS), utilizes eight healthcare coalitions to facilitate and support local and regional partners in developing the following capabilities:

- Foundation for healthcare and medical readiness,
- Healthcare and medical response coordination,
- Continuity of healthcare service delivery, and
- Medical surge.

This plan describes the roles and responsibilities of the Southeastern Healthcare Prepared Region (SHPR) in responding to regional health care emergencies primarily within Southeastern North Carolina including the counties of Brunswick, New Hanover, Columbus, Bladen, Pender, Duplin and Onslow. The coalition can further support response activities in other regions of the state if needed.

When effectively implemented, the health care coalition provides the mechanisms for individual health care organizations to coordinate information sharing and other response capabilities using efficient response processes and procedures.

PURPOSE AND SCOPE OF PLAN

The purpose of this preparedness plan is to establish and describe the emergency response framework that will guide the Southeastern Healthcare Preparedness Region (SHPR) as it activates to protect the health, safety and well-being of the citizens and visitors of Southeastern North Carolina.

The work activities listed in this plan are aimed to complement and enhance each coalition members' emergency management program for the purpose of ensuring optimal utilization of resources and disaster support to the Southeastern Healthcare Preparedness Region.

This plan is intended to provide SHPR leadership, steering committee members, and other coalition members with clear guidance on committee structure, committee coordination efforts, and project development. This plan is not intended to supersede any municipal, private agency, county or state emergency preparedness plans.

ADMINISTRATIVE SUPPORT

This plan will be reviewed and distributed at least annually to ensure that it meets the intended scope, purpose and goals of the Coalition. This plan is a living document and will be updated as necessary after training exercises as well as planned and real-world incidents.

This plan has been approved by the governing bodies of the Southeastern Healthcare Preparedness Region, in accordance with their respective bylaws and guidelines. Revised plans will be distributed electronically annually.

COALITION OVERVIEW

MISSION & VISION

The mission of the Southeastern Healthcare Preparedness Region is to facilitate coordination and cooperation throughout the Southeastern region to ensure partners have the capability and capacity to mitigate against, prepare for, respond to, and recover from emergent health and medical events that affect the residents and guests of North Carolina.

The coalition will enhance the emergency preparedness and response capabilities of healthcare entities through:

- Building relationships and partnerships
- Facilitating communication, information and resource sharing
- Promoting situation awareness among HCC members
- Coordinating training, drills and exercises
- Strengthening medical surge capacity and capabilities
- Assisting emergency management and Emergency Support Function (ESF) #8 partners

COALITION BOUNDARIES

The Southeastern Healthcare Preparedness Region is composed of Brunswick, New Hanover, Columbus, Bladen, Pender, Onslow and Duplin in southeastern North Carolina. The region has a full time population of approximately 761,400 people with about 5296 square miles of coverage area.

COALITION MEMBERS

Southeastern Healthcare Preparedness Region members include a diverse membership to ensure a successful whole community response. A current roster of member organizations, including core or partner designation and contact information, will be maintained. (*Refer to Appendix A*)

- Core Coalition members include the following agencies from the seven SHPR counties:
 - Hospitals
 - EMS Systems
 - Emergency Management Agencies
 - Public Health Agencies
- Additional Coalition members may include, but are not limited to, the following:
 - Behavioral health services
 - Community Emergency Response Team (CERT) and Medical Reserve Corps (MRC)
 - Dialysis centers and CMS-funded end-stage renal disease (ESRD) networks
 - Federal facilities (US Dept. of Veterans Affairs and military treatment facilities)
 - Jurisdictional partners including cities and counties
 - Home health and Hospice agencies
 - Non-governmental organizations (American Red Cross, VOADs)
 - Outpatient health care delivery (free-standing emergency rooms, clinics, ambulatory care)
 - Skilled nursing, nursing, and long-term care facilities
 - Intermediate care facilities for individuals with intellectual disabilities

ORGANIZATIONAL STRUCTURE/GOVERNANCE

The Southeastern Healthcare Preparedness Region operates as an independent coalition of healthcare partners and stakeholders charged with facilitating healthcare preparedness in the region that is determined serves the same designated area as the Southeastern Regional Advisory Committee on Trauma. This coalition is charged with identifying the health care disaster preparedness and response needs and facilitating the development of projects, plans and educational programs to mitigate those needs. The SHPR Bylaws are located in Appendix ____.

ROLES AND RESPONSIBILITIES OF COALITION PARTNERS

Agencies that participate in the Southeastern Healthcare Preparedness Region may request educational programming offered by the SHPR; seek consultative services of SHPR staff, particularly in the areas of disaster preparedness & response; and utilize disaster response assets managed by SHPR.

Individuals and organizations working collaboratively across a spectrum of disciplines to develop and maintain disaster health and medical capabilities will help to clarify roles, responsibilities and assumptions about response and recovery.

HOSPITALS

- Provide community and regional medical care and support in response to a disaster.
- Develop and maintain a disaster preparedness plan and program.
- Participate in the statewide Hospital Mutual Aid Agreement.
- Plan and prepare for medical surge incidents
- Develop and maintain standard operating guidelines for mental health operations during emergency/ disaster situations.
- Plan for coordination of triage operations with EMS systems and other response agencies.
- Coordinate transport of patients and bed capacity with other hospitals in the region.
- Identify alternate care facilities, plan for staffing of facilities, and maintain resource capabilities for these facilities.
- Provide support to SMAT II, including providing staffing to alternate care sites and extended care sites.

EMS AGENCIES

- Provide out-of-hospital acute medical care to patients with injuries and illnesses within their respective counties.
- Transport to definitive care facilities patients with illnesses and injuries.
- Participate in mutual aid in support of other counties within the region or state.
- Develop and maintain standard operating guidelines for emergency medical service activities during emergency and disaster situations.
- Plan for coordination of ambulance/rescue activities including medical surge throughout the region during disasters and mass casualty incidents.

- Identify equipment and manpower limitations.
- Develop mutual aid agreements for needed resources during emergency and disaster events.
- Coordinate with regional hospitals concerning receipt of mass casualties during emergency and disaster events.
- Coordinate with the county health director and social services director to determine emergency transportation needs for special needs populations.
- Support regional or state ambulance strike team initiatives.

EMERGENCY MANAGEMENT AGENCIES

- Serve as the lead agency within the local emergency operations center.
- Serve as the requesting agency for resources and support.
- Initiate local state of emergency declarations.
- Activate and manage local emergency operations centers.
- Coordinate emergency sheltering operations with human service agencies for general and functional/special needs populations.
- Provide support to cities and towns in their respected Counties.
- Coordinate implementation of a county plan for medical evacuation and local medical support shelters.
- Support SMAT III when applicable.

PUBLIC HEALTH AGENCIES

- Respond to disease outbreaks by characterizing the outbreak, implementing containment actions, providing treatment and protection methods including PPE and pharmaceutical interventions, providing guidance on these measures, and implementing recovery plans for individual and community health.
- Protect and improve the health of their respective county.
- Assist with coordination of clinical healthcare in such areas as children’s health, maternity care, communicable diseases, immunizations, women’s health, and family planning.
- Develop and support a public health response to natural or human-made disasters.
- Provide sheltering support during disasters.

ANCILLARY HEALTH CARE ORGANIZATIONS AND OTHER STAKEHOLDERS

With proper training, coordination and planning, Ancillary Health Care Agencies and other stakeholders can provide local situational awareness, surge capability, and staffing resources.

SUMMARY OF RISK

SHPR members assisted the vendor EnviroSafe with the completion of a full regional Hazard Vulnerability Analysis (HVA) in 2013 and most recently completed an update in 2018. The Coalition is responsible to review the plan at least annually or when revisions/changes are necessary. The committee will coordinate with the healthcare facilities and emergency response partners in the region in order to update the HVA, when necessary.

Most recently, SHPR took a broad look at the hazards that were identified as being “High Risk Hazards” from both county and healthcare facility partners, along with conducting an internal Hazard Vulnerability Assessment, measured the results of all three assessments to conclude the following as to be the hazards that pose the highest risk to the SHPR region.

- Hurricane
- Tornado
- Ice Storm
- Patient Surge/Mass casualty
- Electrical/Generator failure
- Communications failure/IT failure
- Supply interruption
- Violence in the facility
- HazMat Incident

GAPS

SHPR assisted vendor EnviroSafe with the completion of a Current Regional Status Analysis in 2013 which included a regional situational assessment and an operational gap analysis.

An in-depth gap analysis and capability assessment is encouraged for SHPR to gain a full understanding of assets and resources and how to utilize those more efficiently and effectively based on the risks and hazards identified in this assessment and on the identified needs of SHPR.

COMPLIANCE REQUIREMENTS/LEGAL AUTHORITIES

The HCC is informed of state and federal emergency management resources and support, as well as the authorities under which response operations may be conducted. The HCC, in collaboration with the lead ESF-8 agency, the NC Office of EMS, have assessed and identified the regulatory compliance requirements that are applicable to day-to-day operations and may affect planning for, responding to, and recovering from emergencies. The HCC will leverage members’ existing facility preparedness plans as required by various regulatory agencies (NC Division of Health Service Regulation, Centers for Medicare and Medicaid (CMS) Emergency Preparedness Requirements for Medicare and Medicaid Participating Providers and Suppliers, The Joint Commission Standards).

The HCC and NCOEMS understand the legislation and related programs that will allow for response during times of crisis knowing that certain liabilities have been waived, and much-needed human and material resources will be more readily available.

COALITION STRATEGIC PLAN & OBJECTIVES

The Southeastern Healthcare Preparedness Coalition meets annually to review and update its strategic plan and objectives. The following have been identified by regional staff and partner stakeholders as the priority for the Coalition:

- Continuity of Health Care Service Delivery
- Healthcare System Delivery Integration
- At Risk Populations Identification and Planning
- Medical Surge Planning
- Healthcare Coalition Enhancement and Sustainability

(Refer to the SHPR Strategic Plan for FY2017-2022)

COALITION SUPPORT PLAN

The Southeastern Healthcare Preparedness Region Support Plan provides a basic organizational structure with operational guidelines for the provision of ESF #8 support across the Healthcare Coalitions in in central North Carolina. It is built upon a scalable, flexible, and adaptable coordinating structure to align key roles and responsibilities of the Healthcare Coalition and its partners. The plan details how they share information, coordinate activities and resources during an emergency and plan for recovery.

The goals of the Southeastern Healthcare Preparedness Coalition are to:

- Facilitate information sharing among healthcare organizations and jurisdictional authorities to promote common situational awareness.
- Facilitate resource support by expediting the mutual aid process or other resource sharing arrangements among Coalition members, and supporting the request and receipt of assistance from local, State, and Federal authorities.
- Facilitate the coordination of incident response actions for the participating healthcare organizations so incident objectives, strategy, and tactics are consistent for the healthcare response.
- Facilitate the interface between the Healthcare Coalition and relevant jurisdictional authorities to establish effective support for healthcare system resiliency and medical surge.

(Refer to the SHPR Support Plan for full content)

WORKPLAN

The Southeastern Healthcare Preparedness Region membership will review the strategic plan annually in February to determine the priority capability areas for the upcoming year. Capability prioritization is determined based on the annual gap analysis review. Capability priorities, objectives, workplan activities are proposed and vetted by the coalition membership. A work plan is required no later than May 15 each year. The workplan is coordinated with the spending plan to determine if tasks require funding.

FY17 Work Plan and Spending Plan

	Budget Amount	Budget Details
Program Administration	\$178,475.00	<ul style="list-style-type: none"> Regional staff salaries, benefits, travel and office supplies
Capability 1 – Foundation for Health & Medical Readiness	\$39,607.00	<ul style="list-style-type: none"> Regional Stakeholder Travel Regional Governance Update Licensed Care Facility Education & Outreach Eastern North Carolina Disaster Symposium
Capability 2 – Healthcare and Medical Response Coordination	\$4,700.00	<ul style="list-style-type: none"> Regional Communications Testing Situational Awareness and Information Sharing
Capability 4 – Medical Surge	\$206,990.00	<ul style="list-style-type: none"> Regional Exercise Development & Conduct SMRS Operational Readiness Warehouse Lease & Utilities SMRS Operational Readiness SMAT II Sustainment SMRS Operational Readiness SMAT III Sustainment SMRS Operational Readiness Ambulance Strike Team Sustainment SMRS Operational Readiness Part-time Logistics Technician SMRS Operational Readiness Maintenance and replacement of equipment SMRS Operational Planning Regional Response Plan Update Healthcare Emergency Response Training Decontamination Capability Assessment
TOTAL FY17 Budget	\$429,772.00	

ATTACHMENT A: SHPR MEMBERSHIP AGENCIES

The following Hospitals, EMS Systems, and Public Health are listed as Essential Stakeholders for SHPR Region:

<u>County</u>	<u>Hospital</u>	<u>EMS</u>	<u>Emergency Management</u>	<u>Public Health</u>
Bladen	Cape Fear Valley, Bladen Hospital	Bladen EMS	Bladen County EM	Bladen County Public Health
Brunswick	J.A. Doshier Hospital	Brunswick EMS	Brunswick County EM	Brunswick County Public Health
	Brunswick – Novant Medical Center			
Columbus	Columbus Regional Medical Center	Columbus EMS	Columbus County EM	Columbus County Public Health
Duplin		Duplin EMS	Duplin County EM	Duplin County Public Health
New Hanover	New Hanover Regional Medical Center	NHRMC EMS	New Hanover County EM	New Hanover County Public Health
Onslow		Onslow EMS	Onslow County EM	Onslow County Public Health
	Naval Hospital Camp Lejeune	Camp Lejeune Fire and EMS	Camp Lejeune EM	Camp Lejeune Public Health
Pender	Pender Memorial Hospital	Pender EMS and Fire	Pender County EM	Pender Public Health

