

Secure Commonwealth Panel

<http://www.vdh.virginia.gov/OEP/SecureVaSubpanel.htm>

Health and Human Resources Subpanel
Update

July 8, 2014

History of the Subpanel

- Formed in 2002 as *Health and Medical*
- Transitioned to *Health and Human Resources* in 2006
- Opportunity for significant emergency preparedness collaboration among government, providers and first responders in addition to other key health and medical stakeholders
- Numerous legislative initiatives arising from subpanel member efforts
- Convenes at least twice a year

Attendees

- Secure Commonwealth Panel Members
- Health Care System Representatives
- Private Health Practitioners
- Medical Society Representatives
- Local and State EMS
- Emergency Managers
- General Assembly
- Other State Agencies
- Academia
- Cabinet Members
- Dr. / Del John O'Bannon has chaired since inception.

Key Objectives

- Engage the private provider in emergency planning and response
- Track and identify status of liability legislation for health care providers during emergencies
- Medical surge - overcoming gaps between perceived responsibilities and roles of private sector hospitals and local governments to deal with medical surge

Other Issues of Concern

- Health and medical-related legislation
- Local best practices
- Communications / interoperability
- Public information
- Mass emergency medical countermeasures distribution and dispensing
- IT preparedness initiatives
- Utilities preparedness
- Health care volunteers during emergencies: process, credentialing, in / out-of-state deployment
- State radiologic/nuclear planning expansion

HHR Emergency Preparedness and Response Workgroup

Mission

To coordinate inter-agency emergency planning and response activities within the HHR secretariat. The ultimate goal of such coordination is to promote community resiliency so that an “all needs, all hazards” approach to planning and response becomes the standard within the Secretariat.

Scope of Authority

An advisory and coordinating committee which makes recommendations to each represented agency lead and identifies cross-agency and cross-Secretariat issues to the appropriate administrative liaison. The committee has no authority to create or implement policies.

Vulnerable Populations

“ALL” Needs Categories

- Special medical considerations
- Sensory, behaviorally and physically / mobility impaired
- Economically disadvantaged
- Limited language competence
- Cultural, religious and/or geographic isolation
- Age

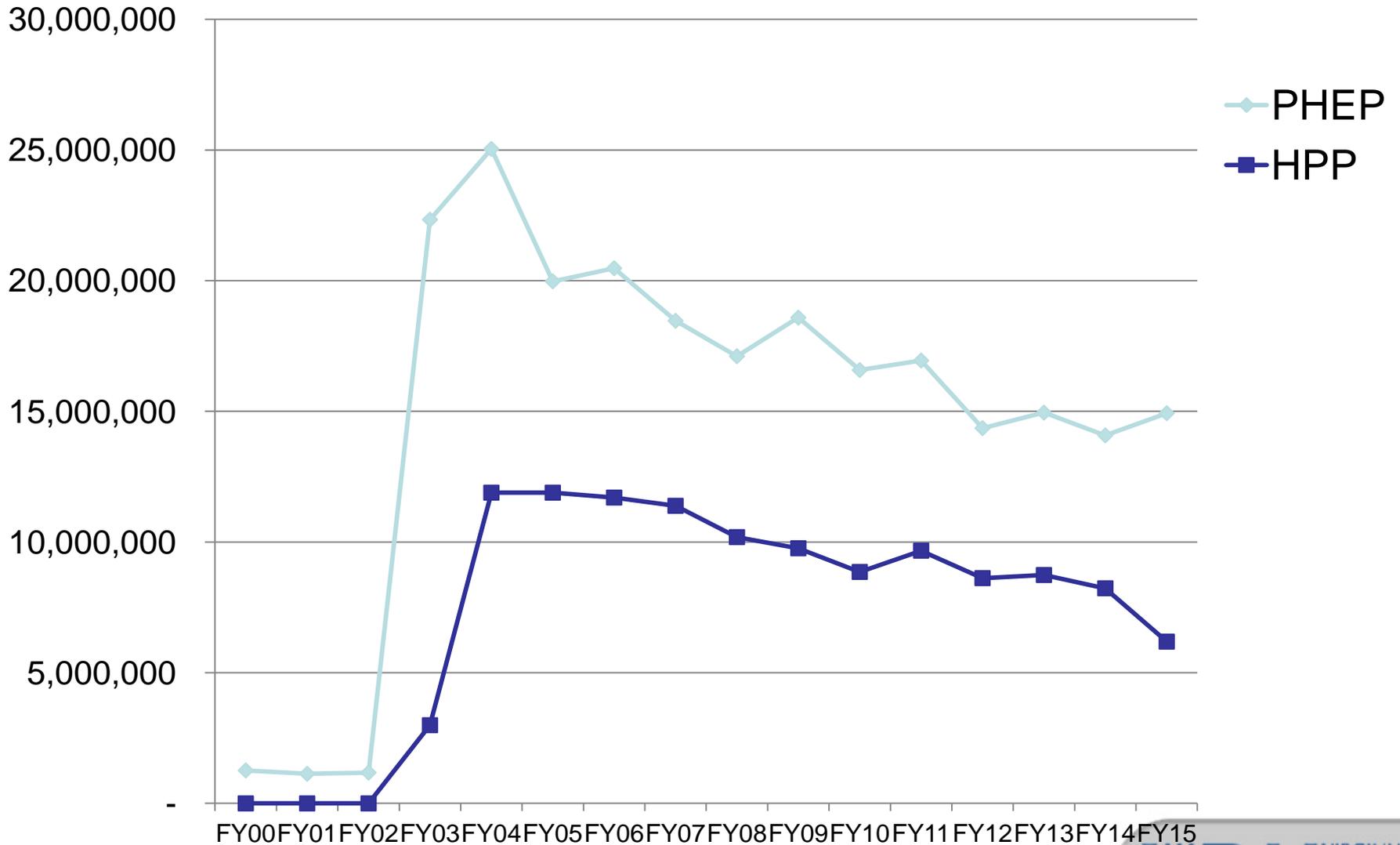
“ALL” Needs Initiatives

- VDH: HHR coordinating agency
 - Identify applicable grants
 - Establish communications study group
 - Establish research group to consolidate all previous applicable initiatives and recommendations

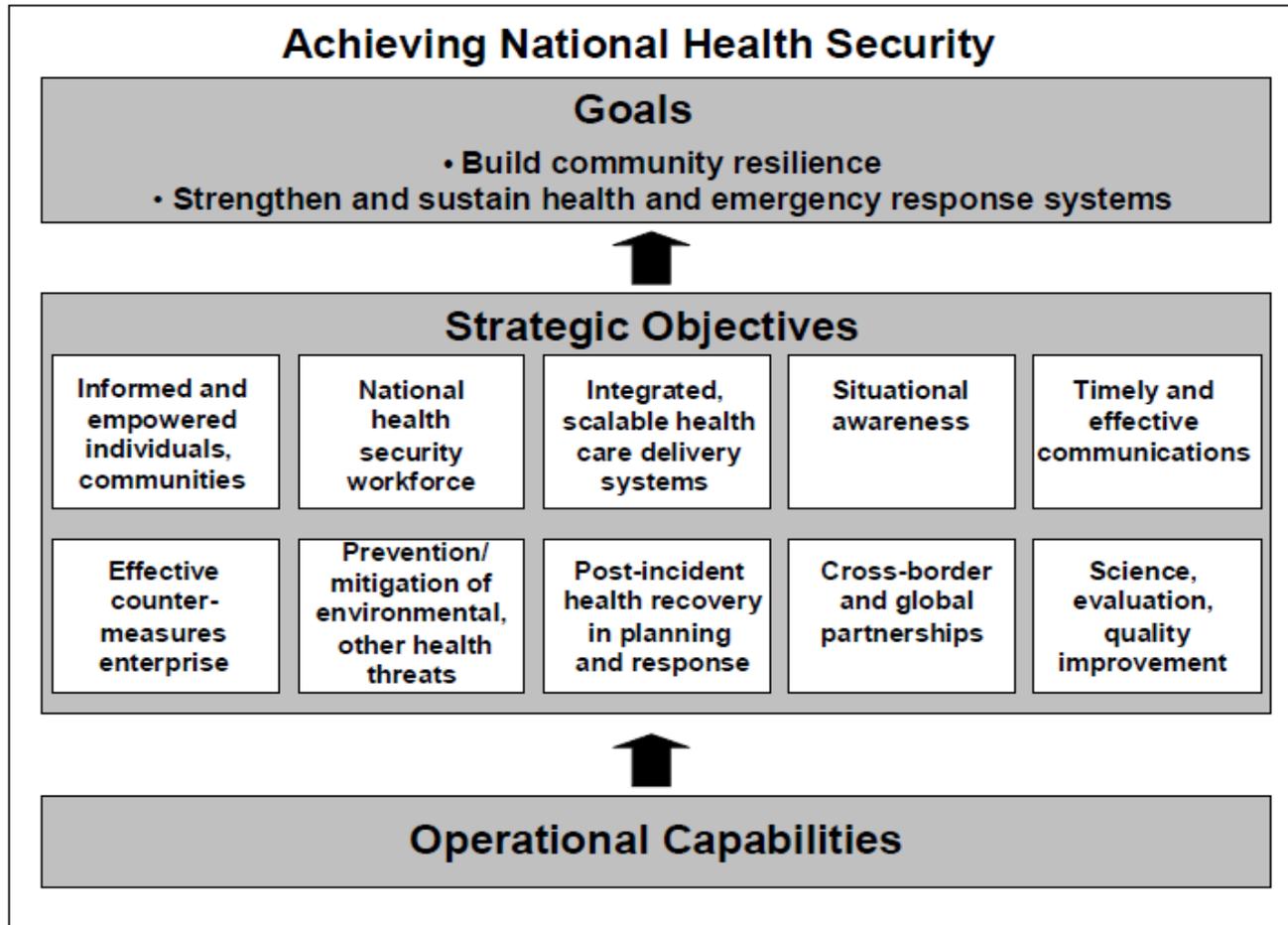
VDH Preparedness Grant Funding

Period	BP1	BP2	Incr(Decr)	% Change	BP3	Incr(Decr)2	% Change
PHEP-Base	12,528,696	11,785,642	(743,054)	-6%	12,574,657	789,015	7%
PHEP-CRI	1,584,715	1,456,814	(127,901)	-8%	1,517,289	60,475	4%
PHEP-Chem Lab	838,795	838,795	0	0%	838,795	0	0%
Total PHEP	14,952,206	14,081,251	(870,955)	-6%	14,930,741	849,490	6%
HPP	8,739,318	8,231,128	(508,190)	-6%	6,188,517	(2,042,611)	-25%
Total Funding	23,691,524	22,312,379	(1,379,145)	-6%	21,119,258	(1,193,121)	-5%

Funding Trends



National Health Security Strategy



Performance Tracking

- National Health Security Preparedness Index (HHS)
- Centers for Disease Control and Prevention (CDC)
 - Medical Countermeasure Dispensing Technical Assistance Review
- National Association of County and City Health Officials
 - Project Public Health Ready
- Commonwealth of Virginia
 - Governor's Agency Preparedness Assessment
 - Annual Continuity Plan Review

Hazard – Vulnerability Analysis

- A systematic approach to recognizing hazards that may affect public health and health care.
 - Analyze risks associated with each hazard to prioritize planning, mitigation, response and recovery activities.
 - Serve as a needs assessment for the Emergency Management program.
- Process involves community partners and is communicated to community emergency response agencies.
- Now feeds into State / Regional, Local **Threat – Hazard Identification and Risk Assessments (THIRA)**

Capability Crosswalk

DHS / FEMA	HHS / CDC
Planning	1. Community and Healthcare System Preparedness
Public Information and Warning	4. Emergency Public Information / Warning
Operational Coordination	3. Emergency Operations Coordination
Forensics and Attribution	12. Public Health Laboratory Testing
Intelligence and Information Sharing	6. Information Sharing 13. Public Health Surveillance and Epidemiologic Investigation
Screening, Search and Detection	13. Public Health Surveillance and Epidemiologic Investigation
Physical Protective Measures	11. Non-pharmaceutical Interventions
Supply Chain Integrity and Security	9. Medical Material Management / Distribution
Community Resilience	1. Community and Healthcare System Preparedness 2. Community and Healthcare System Recovery

**** This is a singular approach. NO formal crosswalk has been dictated.***

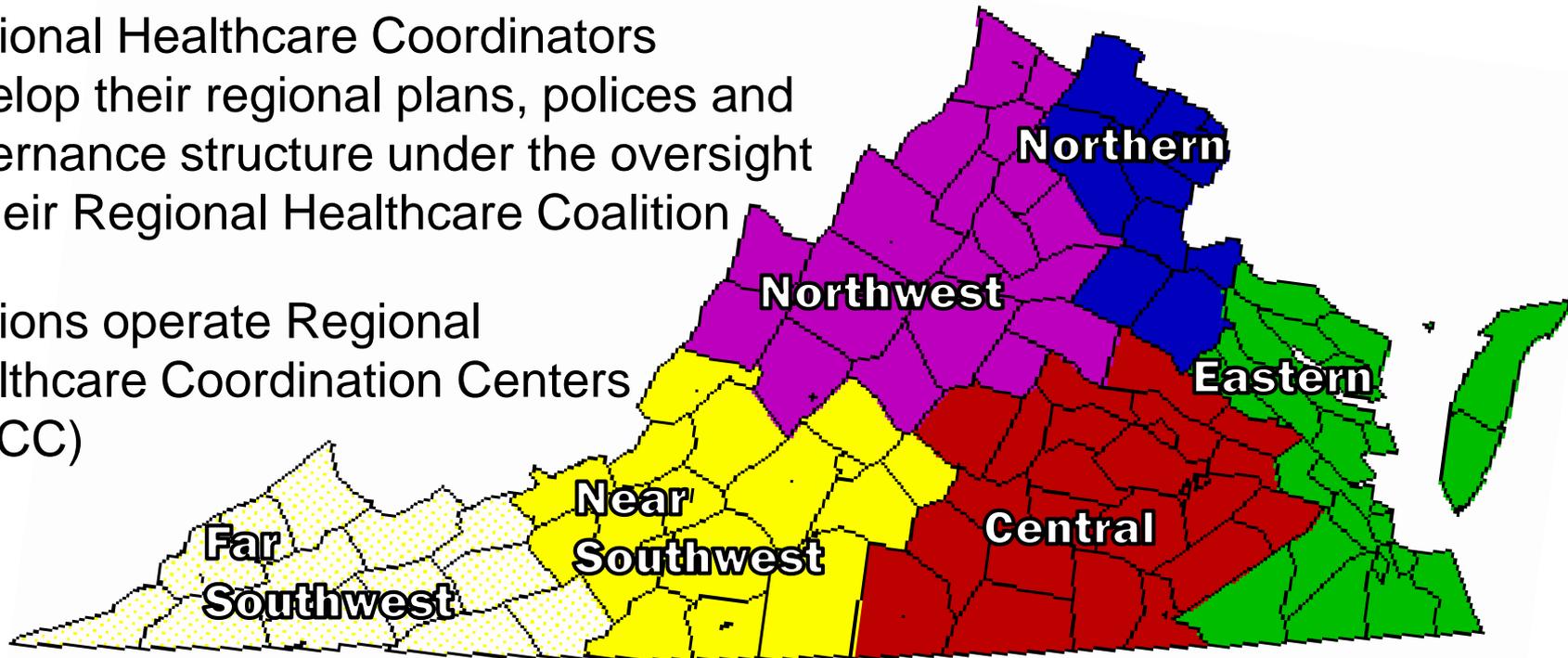
Capability Crosswalk (cont'd)

DHS / FEMA	HHS / CDC
Long-Term Vulnerability Reduction	8. Medical Countermeasure Dispensing
Environmental Response / Health and Safety	14. Responder Safety and Health
Fatality Management Services	5. Fatality Management
Environmental Response / Health and Safety	11. Non-pharmaceutical Interventions
Mass Care	7. Mass Care
Public Health and Medical Services	10. Medical Surge
Health and Social Services	7. Mass Care
Economic Recovery	8. Medical Countermeasure Dispensing 2. Community and Healthcare System Recovery
Long-Term Vulnerability Reduction	11. Non-pharmaceutical Interventions
_____	15. Volunteer Management

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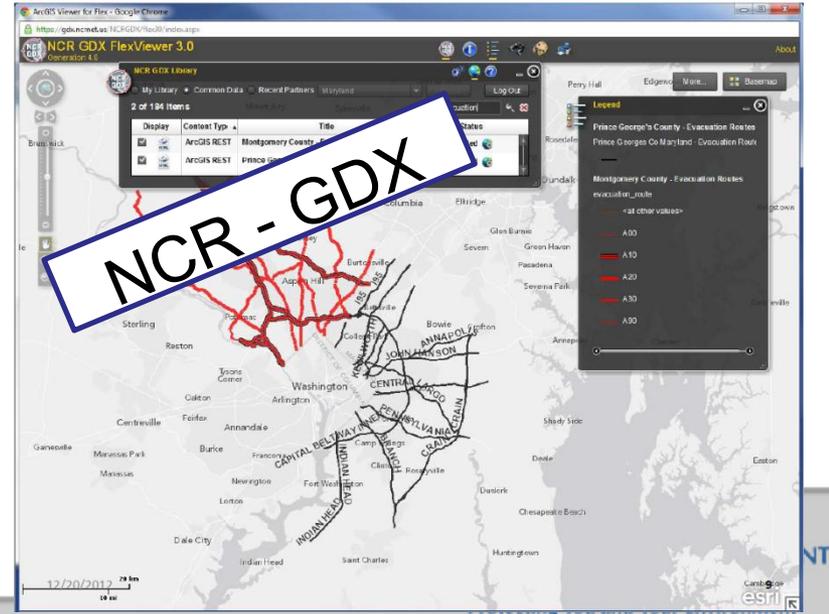
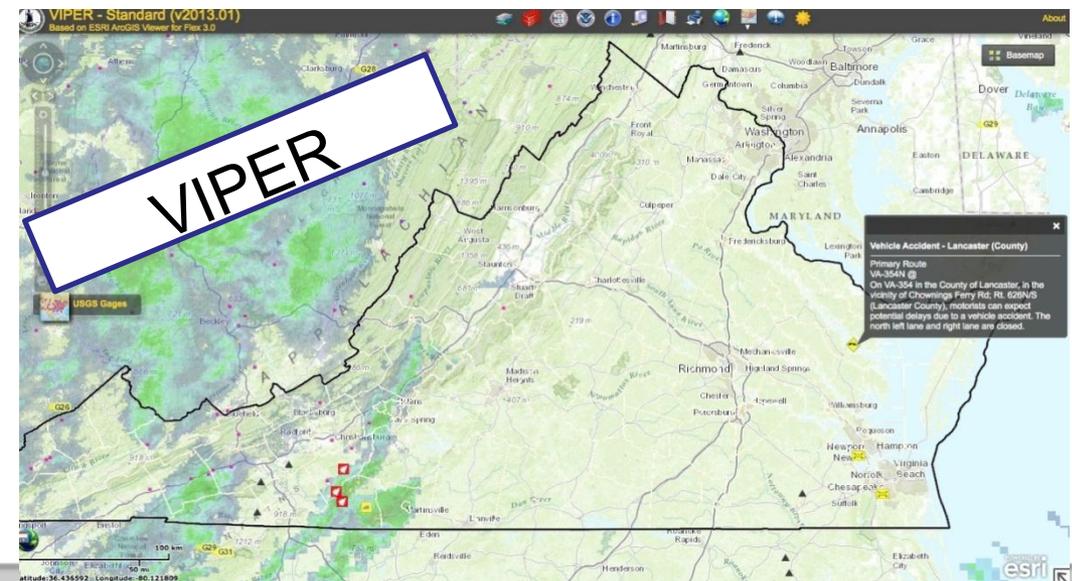
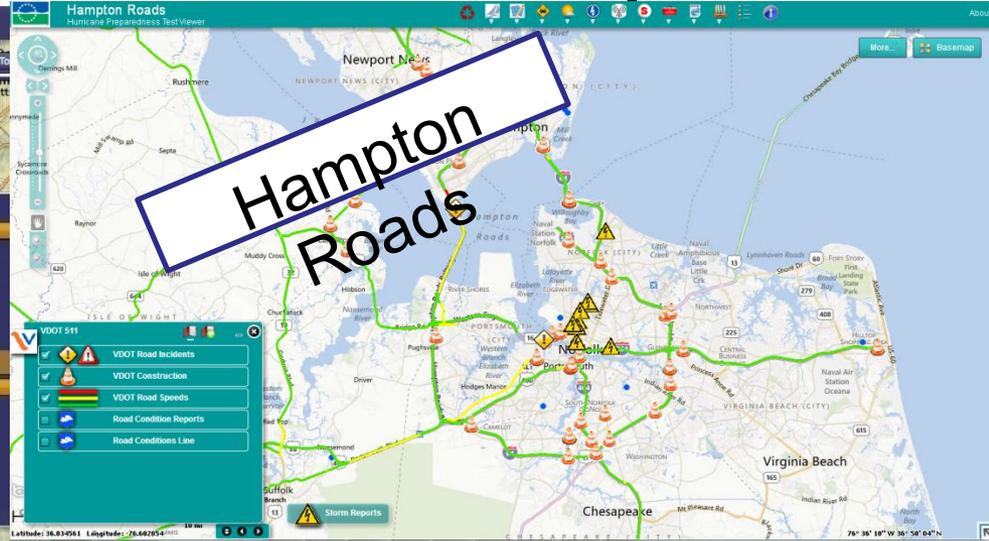
Statewide Hospital Preparedness Program

- VDH provides the framework for statewide administration of HPP
- VDH works through the Virginia Hospital and Healthcare Association (VHHA) to coordinate governance and initiatives to **6 Healthcare Coalitions** with **300+ participating facilities**
- Regional Healthcare Coordinators develop their regional plans, policies and governance structure under the oversight of their Regional Healthcare Coalition
- Regions operate Regional Healthcare Coordination Centers (RHCC)



Health Care Organizations in Coalitions	Total HCOs	HCOs in HCC	% HCOs in HCC
24-hour Acute Care HCOs (Non-Federal)			
Acute Care Hospitals	78	78	100%
Children’s Hospitals	4	3	75%
Rehabilitation Hospitals	12	8	67%
Psychiatric Hospitals	10	8	80%
Critical Access Hospitals (CAHs)	7	7	100%
24-hour Sub-Acute or Long Term Care HCOs (Non-Federal)			
Skilled Nursing Facilities (SNFs) (aka Rehabilitation facilities)	283	283	100%
Assisted Living Facilities	542	27	5%
Intermediate Care Facilities for Persons with Mental Retardation	53	5	9%
Programs for All-Inclusive Care for the Elderly (PACE)	12	0	0%
Hospice (Medicare-Medicaid)	124	0	0%
Outpatient HCOs (Non-Federal)			
Ambulatory Surgical Centers (ASCs)	58	0	0%
Health Agencies (HHAs)	703	0	0%
Organ Procurement Organizations (OPOs)	2	0	0%
Rural Health Clinics (RHCs)	2	2	100%
Federally Qualified Health Centers (FQHCs)	114	114	100%
Community Health Centers (that are not FQHCs)	5	5	100%
End Stage Renal Dialysis (ESRDs) Facilities	145	145	100%
Hospitals (Federal)			
Veteran’s Administration (VA) Medical Centers	3	3	100%
Department of Defense (DoD) Hospitals	3	3	100%

Capability 3: Emergency Operations Coordination CASAWG Projects



VHASS Dashboard

Pending Approvals: [Linked Accounts \(1\)](#) [Organizations \(2\)](#) [Members \(3\)](#)

[Home](#) > Dashboard

- [Dashboard](#)
- [Emergency Operations](#)
- [Documents](#)
- [Calendar](#)
- [Post Office](#)
- [Resource Management](#)
- [Reports](#)
- [Helicopter EMS](#)
- [HPP Reports](#)
- [Administration](#)
- [Third Party Connections](#)
- [Settings](#)

- Diversion Status
- Hospital Status Boards
- LTC Status Board
- WebEOC
- Alerting System
- Patient Tracking
- GIS Mapping

Alert/Post Office Messages [Send Alert](#)

WebEOC Incident, Half Marathon [view](#)
8/05/13 9:15 AM, Jennifer Foster

Communications Test [view](#)
8/04/13 4:15 PM, Dan Gray

VHHA Post Office Message [view](#)
8/01/13 5:00 PM, Erin Shrader

Emergency Operations (WebEOC)

Select Incident:

[Login to WebEOC](#) [+ Create Incident](#)

Note! Pop up blocker must be disabled.

My Organization Contacts

[Samantha Stone](#) (540) 345-0098
[John Rogers](#) (540) 345-0099

[Contact my Region Coordinator\(s\)](#)

[Members](#) [My Organization](#)

Diversion Status [Hospital Status Boards](#)

Diversion Status: Open

Comments:

[Update](#)

Last updated 8/08/13, Sam Stone

Events [View Calendar](#)

8/10/2013 10:00 AM - 12:00 PM	NW HEMC <i>Contact: Ron Clineinst (540) 555-5555</i>	view
8/10/2013 10:00 AM - 1:00 PM	Regional Coordinators Meeting Regional Coordinators Meeting to be held. Agenda and conference call information to be distributed/posted before the meeting. <i>Contact: Erin Shrader (540) 555-5555</i>	view
8/10/2013 1:30 PM - 3:00 PM	NSPA Healthcare Prep Meeting <i>Contact: Daniel Lissberger (540) 555-5555</i>	view

Recent Documents

All | [Statewide](#) | [My Region](#)

HEMC Membership Listing	08/06/13	E. Shrader	STWD
Active Shooter Drill Materials...	08/02/13	E. Shrader	STWD
2013-2014 HEMC Meeting Schedule	07/13/13	E. Shrader	STWD
Northern VA Marathon	07/02/13	J. Engle	NOVA

Emergency Operations Dashboard

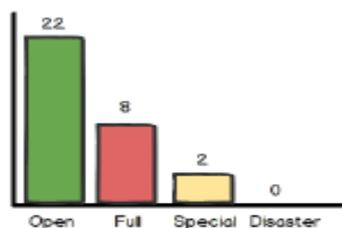
Home > Emergency Operations

- Diversion Status
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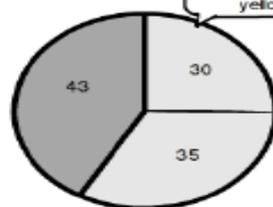
EO Status

Near Southwest From To

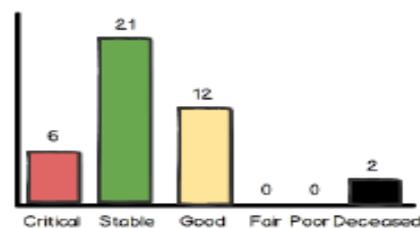
Diversion Status



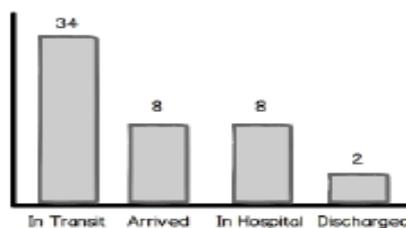
Patient Triage Category



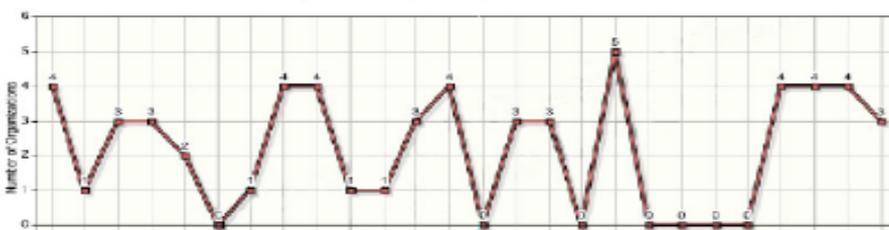
Patient Status



Patient Disposition



Bed Counts



Third Party Data Feeds

We have the ability to read data from other 3rd party data feeds as well as spatial data from the map application.

Sample data feeds: VDEM, CDC, National Weather Service. We can even display data from WebEOC.

Emergency Operations (WebEOC)

Select Incident:

Note! Popup blocker must be disabled.

Alert Messages Send Alert

- WebEOC Incident, Half Marathon 8/05/13 9:15 AM, Jennifer Foster [view](#)
- Communications Test 8/04/13 4:15 PM, Dan Gray [view](#)
- VHHA Post Office Message 8/01/13 5:00 PM, Erin Strader [view](#)

Diversion Status Hospital Status Boards

Diversion Status:

Comments:

Updated 8/08/13, S. Stone

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Virginia Medical Reserve Corps

“Force Multiplier”

31 Units

13,500+ Volunteers

**5,600+ Health Care
Volunteers**

**\$890,000 in volunteer time
for 2013**



***Volunteers Protecting
Virginia's Health***

VIRGINIA





Questions?

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