

Duke Healthcare Preparedness Coalition Update



April 28, 2017

FUNDING / WORK PLAN UPDATE

FEBRUARY 2017

- *7-9 February* Geographic Regional Planning at Quarterly Meeting
Preliminary Program Budget Forecast at Quarterly Meeting
- All Month* HPR&R Program Technical Assistance Visits (*Minimum of one per region*)

MARCH 2017

- *1 March* HPR&R Program Component Budget Finalized
- All Month* HPR&R Program Technical Assistance Visits (*Minimum of one per region*)

APRIL 2017

- All Month* HPR&R Program Technical Assistance Visits (*Minimum of one per region*)

MAY 2017

- *5 May* **Regional Work Plan Submitted (NLT)**
- *23-25 May* Work Plan Evaluation/Approval at Quarterly Meeting

JUNE 2017

- *15 June* **Final Regional Work Plans Submitted (NLT)**

JULY 2017

- *1 July* Work Plans & Contracts Execute

PROJECT REQUEST PROCESS

1. The requestor completes this Project Request Document and email it to kennerth.a.shaw@duke.edu .
Anyone can initiate a request. The Project Request document contains information such as:
 - o Description of the project.
 - o Description of the project scope, regional impact, assumptions, & constraints
 - o List of the project costs.

2. The Coalition Steering Committee evaluates the Project Request and makes decision to accept (approve) or deny the request based on the following criteria:
 - o Value to the region
 - o Criticality (priority)
 - o Estimated effort and resource availability
 - o Risks
 - o Impact and/or dependence on other projects
 - o Any other criteria relevant to the region/project

3. If the Coalition Steering Committee grants approval:
 - o The requestor is notified.
 - o A DHPC Staff Project Leader is assigned if required
 - o The project moves to the Planning phase (Work Plan submission to the State for final approval).

4. If the associated subcommittee/s do not approve the project:
 - o The requestor is notified.
 - o The project request is placed on the “Not Approved Projects” list.

Healthcare Preparedness Program (HPP) Metrics:



ASPR Performance Measure

PM3: Percent participation rate of HCC core (acute care Hospitals, EMS, Emergency Management, Public Health) and additional member organizations by member type.

PM4: Percent of HCCs that have a complete Preparedness Plan.

PM5: Percent of HCCs that have a complete Response Plan

PM9: Percent of HCCs engaged in their awardees jurisdictional risk assessment

PM10: Percent of HCC member organizations participating in the table top portion during the first 90 minutes of the Coalition Surge Test Exercise

PM11: Percent of HCC member organizations and their executives participating in a post Coalition Surge Test exercise lessons learned event (Facilitated discussion, hot wash) during the last 2.5 hours of the exercise.

PM12: Percent of HCC member organizations that have shared lessons learned from facility-level drills or exercises with the HCC

PM13: Time (in minutes) for evacuating facilities in the HCC to report the total number of evacuating patients.

ASPR Performance Measure

PM14: Time (in minutes) for receiving facilities in the HCC to report the total number of beds available to receive patients.

PM15: Time (in minutes) for the HCCs to identify a clinically appropriate and available transportation asset for each evacuating patient.

PM16: Percent of HCCs that have exercised their redundant communications plan and systems and platforms at least bi-annually.

PM17: Percent of HCC member organizations that responded during a communications drill by system and platform used.

PM18: Percent of patients discharged to home from evacuating facilities in 90 minutes.

PM19: Percent of patients needing to be evacuated to another health care facility with a bed identified at a receiving facility in 90 minutes.

PM20: Percent of patients with clinically appropriate transportation needs identified in 90 minutes.

PM21: Percent of HCCs where areas for improvement have been identified from exercises of real world events and the preparedness strategy has been revised to reflect improvements

Duke Healthcare Preparedness Coalition General Meeting



April 28, 2017

SECRETARY REPORT

TRESURER REPORT

	Approved/Revised Budget	Reimbursement to Date (February)	Balance	Committed	Projected	Unallocated
Administration = Salaries, fringes, travel, office supplies, and utilities	\$ 260,734.00	\$124,602.61	\$136,131.39	\$ 83,529.62	\$ 6,051.84	\$ 46,549.93
Capability 1 - Healthcare System Preparedness	\$ 32,400.00	\$ 2,607.44	\$ 29,792.56	\$ 22,409.48	\$ 4,621.08	\$ 2,762.00
Capability 2 - Healthcare System Recovery	\$ -	\$ -	\$ -	\$ -	\$ -	-
Capability 3 - Emergency Operations Coordination	\$4,111.00	\$ -	\$ 4,111.00	\$ 511.00	\$ 3,140.00	\$ 460.00
Capability 5 - Fatality Management	\$ -	\$ -	\$ -	\$ -	\$ -	-
Capability 6 - Information Sharing	\$1,296.00	\$ 357.86	\$ 938.14	\$ -	\$ -	\$ 938.14
Capability 10 - Medical Surge	\$ 56,000.00	\$ 34,488.10	\$ 21,511.90	\$ 824.24	\$ 14,464.00	\$,223.66
Capability 14 - Responder Safety and Health	\$ -	\$ -	\$ -	\$ -	\$ -	-
Total	\$ 354,541.00	\$162,056.01	\$192,484.99	\$107,274.34	\$ 28,276.92	\$ 56,933.73
Total Award	\$ 354,541.00	Per Cent Expended	45.71%			
Expended to Date	\$ 162,056.01					
Balance	\$ 192,484.99					
Committed	\$ 107,274.34					
Projected	\$ 28,276.92					
Unallocated Funds	\$ 56,933.73					

BUDGET PERIOD ONE (July 2017 – June 2018)

*Personnel Salaries	\$187,964.68
*Fringe	\$42,295.76
*Office Supplies and Materials	\$5,000.00
*Regional Administrative Travel	\$10,000.00
*Administrative Communications	\$8,000.00
*Regional Stakeholder Travel	\$15,000.00
*Program Communications	\$2,000.00
*Warehouse Lease	\$30,000.00
*Warehouse Utilities	\$1500.00
*SMAT II Sustainment	\$10,000
*SMAT III Sustainment	\$3,500
Administrative Base	\$315,261.00
Regional Risk Allocation	\$33,405.00
Total	\$348,666.00

VICE-CHAIR REPORT

CHAIRMAN'S REPORT

CAUCUS REPORTS

SUB-COMMITTEE REPORTS

Healthcare Coalition Sub-Committees:

Health Care Coalition Development and Sustainment (Ken Shaw)

- Program Management
- Organizational and Community review
- Strategic Planning

Communication and Outreach (Courtney Polomsky)

- NC Triangle Coalition
- Triangle J Council of Governments
- NC Community Healthcare Center Association (NCCHCA)
- NC Home and Hospice Association
- Durham County Services for Access and Functional Emergency Needs Committee

Exercise and Training (Jim Starlin)

- NC Triangle Coalition "Operation Safe Corridor"
- SMAT II / II

SPECIAL COMMITTEE REPORT

SPECIAL ORDERS

TRESURER REPORT

GOOD & WELFARE

ADJORNMENT

PROGRESS REPORT ON GRANT EXPENDITURES



....A SUSTAINABLE, COMPREHENSIVE,
TIERED, AND RESILIENT PREPAREDNESS AND
RESPONSE SYSTEM THAT IS ABLE TO
ADDRESS PUBLIC HEALTH AND MEDICAL
NEEDS DURING A CATOSTROPIC EVENT