Medical Preparedness and Response Systems in Utah

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Utah Department of Health

Bureau of EMS and Preparedness

Utah Department of Health

The Utah Department of Health's mission is to protect the public's health through preventing avoidable illness, injury, disability, and premature death; assuring access to affordable, quality health care; and promoting healthy lifestyles.

Our vision is for Utah to be a place where all people can enjoy the best health possible, where all can live and thrive in healthy and safe communities.

Utah Department of Health

Healthiest People – The people of Utah will be among the healthiest in the country.

Optimize Medicaid – Utah Medicaid will be a respected innovator in employing health care delivery and payment reforms that improve the health of Medicaid members and keep expenditure growth at a sustainable level.

A Great Organization – The UDOH will be recognized as a leader in government and public health for its excellent performance. The organization will continue to grow its ability to attract, retain, and value the best professionals and public servants.

Why plan?

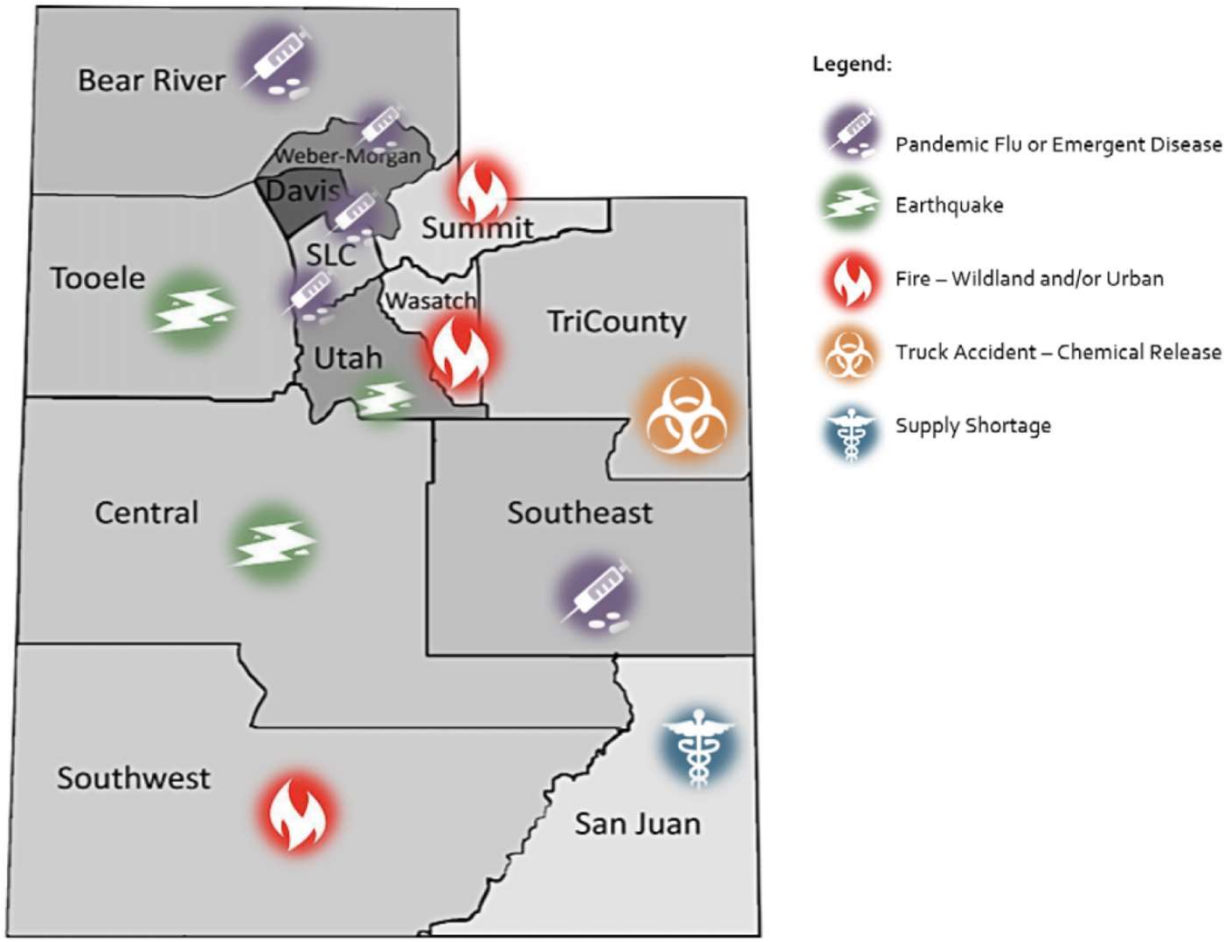
Natural	Medical	Intentional
Earthquake	Pan Flu	Mass Shooting
Wildfire	Ebola	Vehicle Ramming
Floods	High-Consequence Pathogens	Cyberterrorism
Windstorms	“Disease X”	Bombing
Severe Weather		

Why plan?

Utah's Public Health Jurisdictional Risk Assessment (JRA)

1. Pandemic Influenza
2. Mass Casualty Hazmat Incident
3. Communicable Disease Outbreak
4. Emergent Disease
5. Earthquake – Major

FIGURE 12. LOCAL HEALTH DISTRICT # 1 HAZARDS



Why plan?

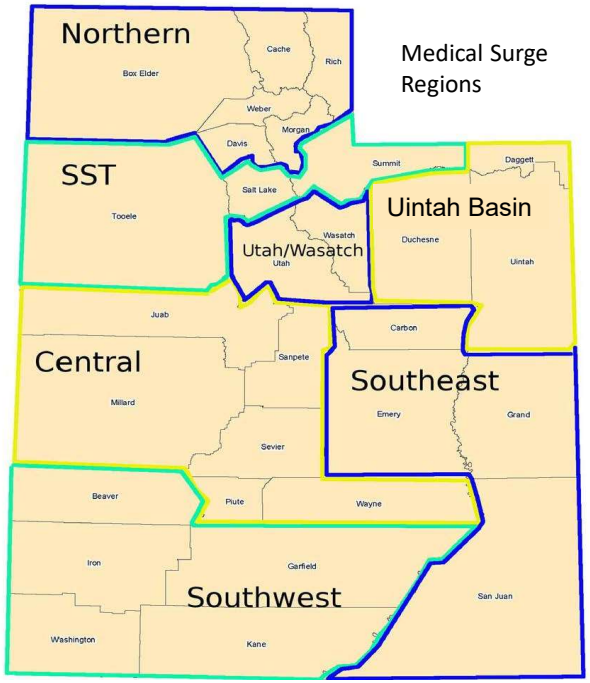
Utah's Emergency Management Threat, Hazards and Risk Assessment (THIRA)

- 7.0 Wasatch Fault earthquake
- Snowmelt flooding + burn scars
- Summer wildfires
- Human pandemic 1918-like
- Transportation accident/HAZMAT
- Cyber-terrorism/grid attack
- Biological attack/aerosolized agent

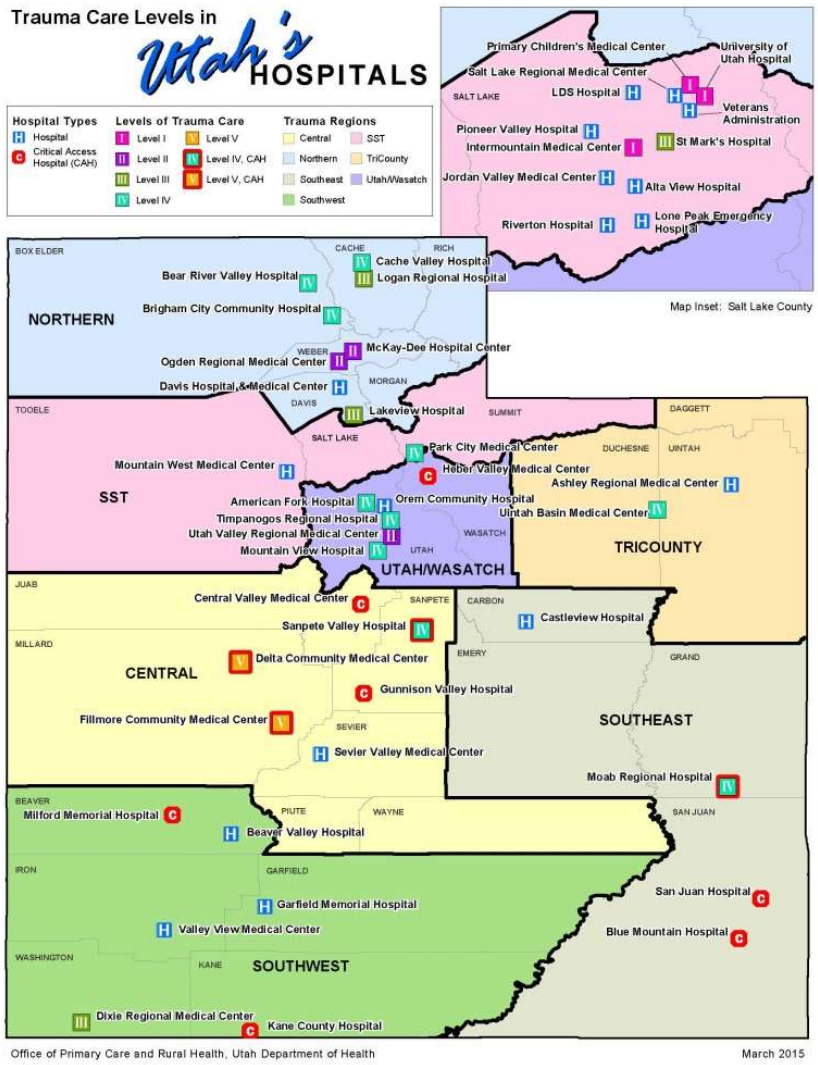
History of Health and Medical Preparedness

- 9/11 and the Anthrax attacks – Hospital preparedness program started with a focus on intentional acts and bioterrorism
- Olympics and Chemical Stockpile Emergency Preparedness Program (CSEPP) – Utah has a long history of medical system preparedness, improved through these projects
- Katrina – Creation of the Assistant Secretary for Preparedness and Response (ASPR), focus increased on all-hazards preparedness and facility critical infrastructure
- Sandy – The impact to non-hospital medical facilities was significant, began looking at health system preparedness and creation of Regional Healthcare/Medical Surge Coalitions

Geography of Health Preparedness



Medical Surge Regions



Regional Healthcare Coalitions

Preparedness

Planning for coordinated response

Organizing community and partners

Equipping caches and resources

Training and building skills

Exercising to test plans and response

Space Stuff Staff Comms

Medical Surge Management and Response

Capacity	Vs. Capability
Medical surge capacity refers to the ability to evaluate and care for a markedly increased volume of patients—one that challenges or exceeds normal operating capacity. The surge requirements may extend beyond direct patient care to include such tasks as extensive laboratory studies or epidemiological investigations.	Medical surge capability refers to the ability to manage patients requiring unusual or very specialized medical evaluation and care. Surge requirements span the range of specialized medical services (expertise, information, procedures, equipment, or personnel) that are not normally available at the location where they are needed (e.g., pediatric care provided at non-pediatric facilities). Surge capability also includes patient problems that require special intervention to protect medical providers, other patients, and the integrity of the HCO

https://www.phe.gov/preparedness/planning/mscc/handbook/documents/mscc080626.pdf

Regional Healthcare Coalitions Membership

Core Members - Emergency Management; Emergency Medical Services; Acute Care Hospitals; Local Public Health – *Refinement of MCI/special situation planning and multiple facility impact events*

Additional Members - Skilled nursing/LTC; outpatient; dialysis; home health; behavioral health; support services and others – *Building continuity and resiliency in these systems for continued operations*

Regional Healthcare Coalitions in Response

-Situational awareness of health/medical

-Information sharing between members

-Resource acquisition and management

-Mutual aid between local members

-Healthcare liaison to local jurisdictions

-Eyes/ears for state/federal asset deployment

-Serve as a MACC Multi-Agency Coordination Center

Regional Healthcare Coalitions Moving Forward

-Increased clinical presence/clinical advisor for each Coalition

-Increased coordination with Federal partners/NDMS

-Develop specialty care response plans

pediatric, burn, outbreak, chem/rad/bio

-Comprehensive local resource awareness

Regional Healthcare Coalitions Specialty Care Planning - Burn

http://ameriburn.org/wp-content/uploads/2018/03/westernregionmciplan-1.pdf

https://asprtracie.hhs.gov/technical-resources/28/burns/27

https://crisisstandardsofcare.utah.edu/

Regional Healthcare Coalitions Specialty Care Planning - HCP

http://health.utah.gov/epi/diseases/ebola/

https://healthcare.utah.edu/ebola/

https://asprtracie.hhs.gov/technical-resources/MasterSearch?qt=ebola&limit=20&page=1&CurTab=0

https://site.utah.gov/bemsp/wp-content/uploads/sites/34/2018/11/IDER_2018.pdf

Crisis Standards of Care

Utah Crisis Standards of Care
Guidelines
Version 2 June, 2018

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UHA Utah Hospital Association

Utah Department of Health

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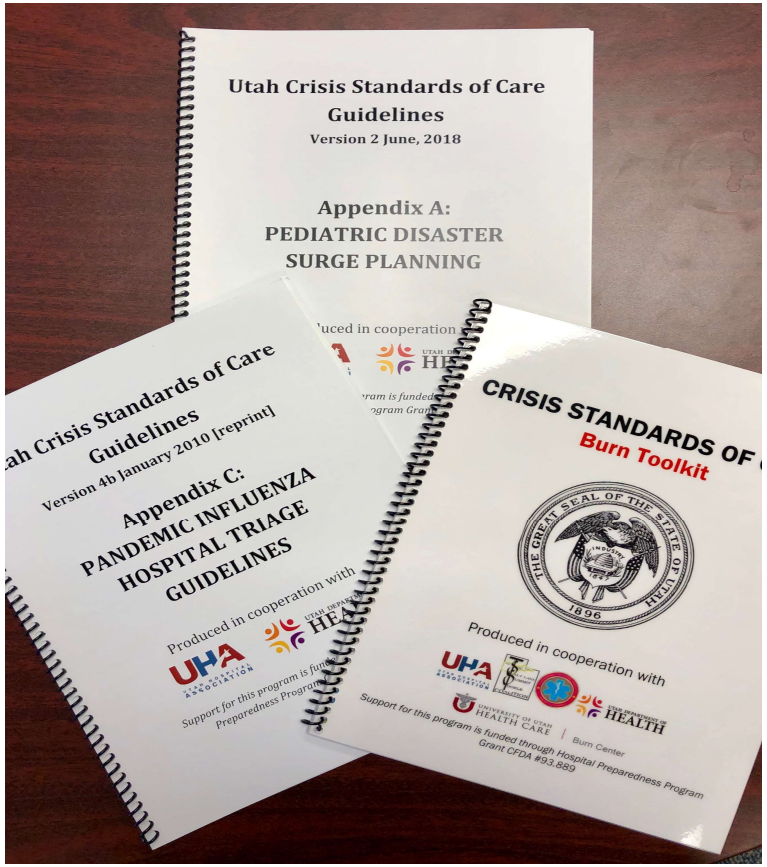
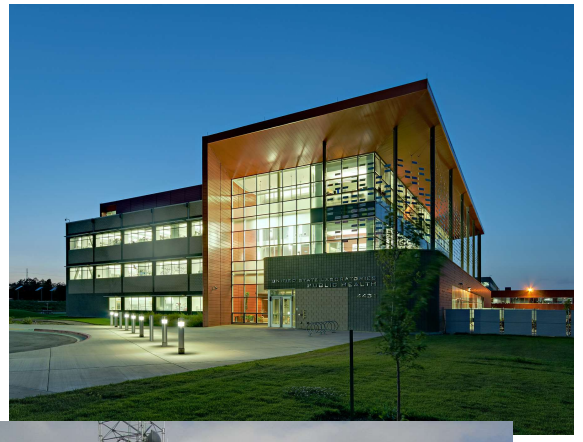


Utah Department of Health Response

- Passing through funding to LHD/Coalition partners
- Incident coordination
- Information management
- Countermeasures and mitigation
- Biosurveillance
- Resource management
- Coordination with State DEM and leadership

Utah Department of Health Response



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