



United States Department of

Health & Human Services

Office of the Assistant Secretary for Preparedness and Response



Strategies for Medical Surge Capacity

**Public Health and Medical Response Briefing
Evergreen Earthquake Exercise Seminar
December 22, 2011**

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HHS/ASPR/ Region X**



Agenda



- HHS Medical Surge Planning
- National and Regional HHS Capabilities
- Command, Control and Communication



Medical Surge Planning



- HHS Grant Programs
- HHS Natural Disaster – Major Earthquake Playbook
- HHS Concepts of Operations (CONOPS) and Standard Operating Procedures (SOPs)
- HHS/FEMA Regional Earthquake Planning
- Cascadia Subduction Zone Earthquake and Tsunami Planning

HHS Grant Programs

- Hospital Preparedness Program (HPP)
 - Administered by the Assistant Secretary for Preparedness and Response (ASPR)
- Public Health Emergency Preparedness (PHEP)
 - Administered by the Centers for Disease Control (CDC)





HHS Natural Disaster Playbook



- Major Earthquake Playbook
 - Assist the Secretary of HHS and the Office of the ASPR in monitoring and directing earthquake response activities.
 - Coordinates the participation of all ESF #8 supporting agencies
 - Structure
 - Plausible scenario and relevant CONOPS
 - Table of actions and issues by phase
 - Decision papers to provide to the Secretary and ASPR
 - Briefing papers to provide guidance
 - Essential Elements of Information
 - Pre-scripted Statements of Works outlining interagency activities



HHS CONOPS/SOPs



- Incident Response Coordination Teams CONOPS
- National Veterinary Response Teams CONOPS
- Special Event and National Special Security Event Response Operations SOP
- ASPR Field Operations Framework



Regional EQ Planning



- HHS/ FEMA Regional Earthquake
- Cascadia Subduction Zone Earthquake and Tsunami
 - **DRAFT** Analytical Baseline Study Analysis

SHORTFALLS

REQUIREMENTS

<p>Ambulance and emergency medical support will be inadequate for need.</p>	<ul style="list-style-type: none"> •Activation of National Ambulance contract •Air Ambulance •Medical Strike Teams •DMAT
<p>Definitive medical treatment facilities will be significantly damaged and unable to medically support the number of casualties created by the event.</p>	<ul style="list-style-type: none"> •Activation of NDMS •Evacuation of Patients out of Area •Deployment of Federal Mobile Medical Facilities •Augmentation of personnel ,equipment and supplies to remaining MTFs
<p>Medical support to chronically ill will not be available within the degraded medical system. To keep these patients from de-compensating pharmaceutical and other medical services will be required.</p>	<ul style="list-style-type: none"> •Strategic National Stockpile and other pharmaceutical support to affected population •Identification and evacuation of these patients to areas where required support is available •Mental health and other medical support will be needed to augment shelter operations and the general public.



National HHS Capabilities



- Command and Control
 - National
 - Regional
- NDMS
 - Medical Response
 - Patient Movement
 - Definitive patient care
- FEMA Ambulance Contract
- Federal Medical Stations
- Strategic National Stockpile

Secretary's Operations Center

- 24/7 capability to coordinate services within and between public health agencies and organizations
- Provides initial command and control to all HHS assets through the Incident Management Group





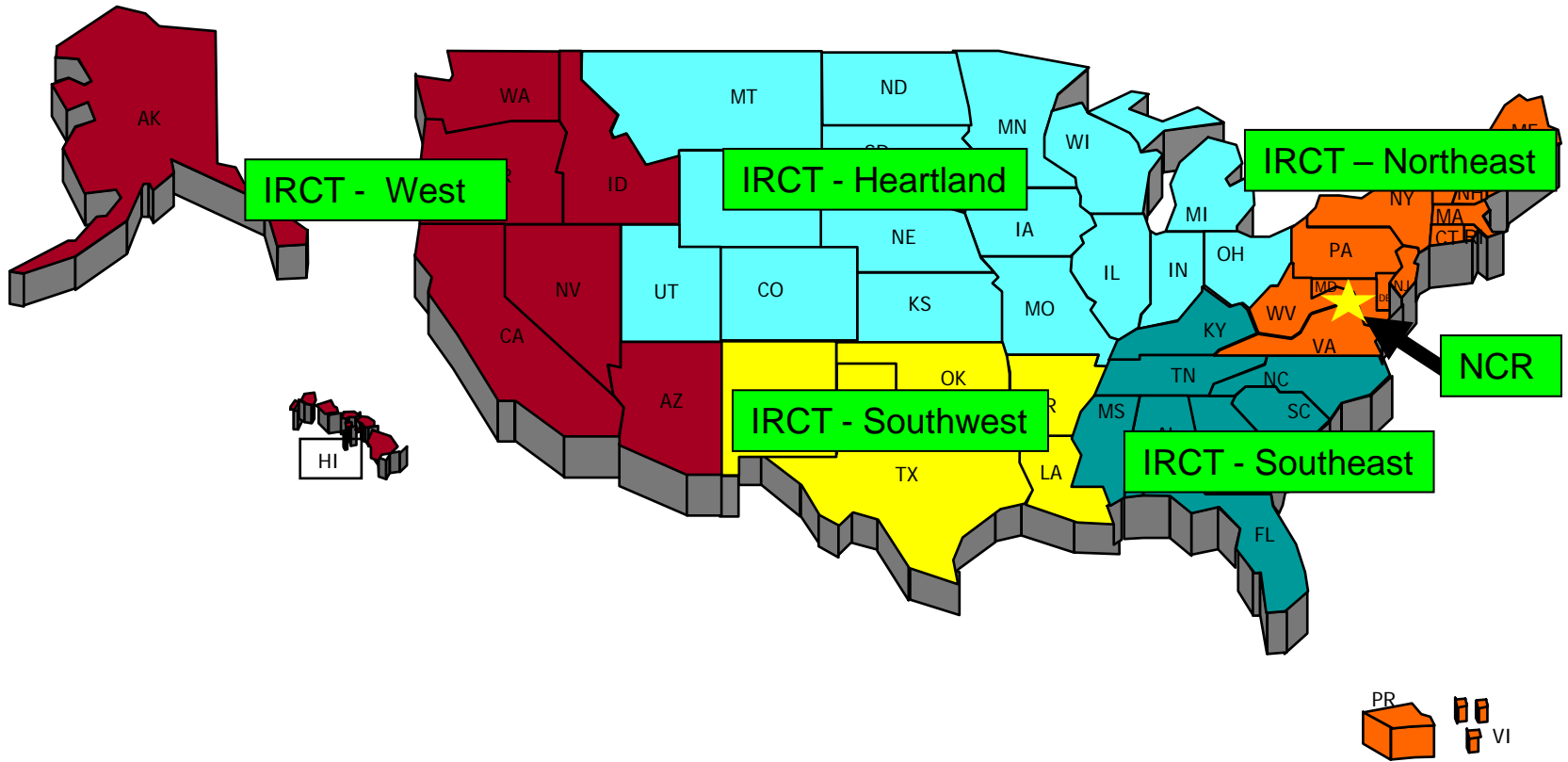
Command and Control



Incident Response Coordination Team (IRCT)

- Regional Emergency Coordinators – Region X
 - Rick Buell, Andy Stevermer, and David Kerschner
 - Responsible for regional planning and command of IRCT
- Incident Response Coordination Team (IRCT)
 - 5 teams nationally
 - On call each month
 - Coordination of ESF 8 assets
 - Integrated into overall federal response
 - Can activate portion or entire team

Incident Response Coordination Teams





National Disaster Medical System

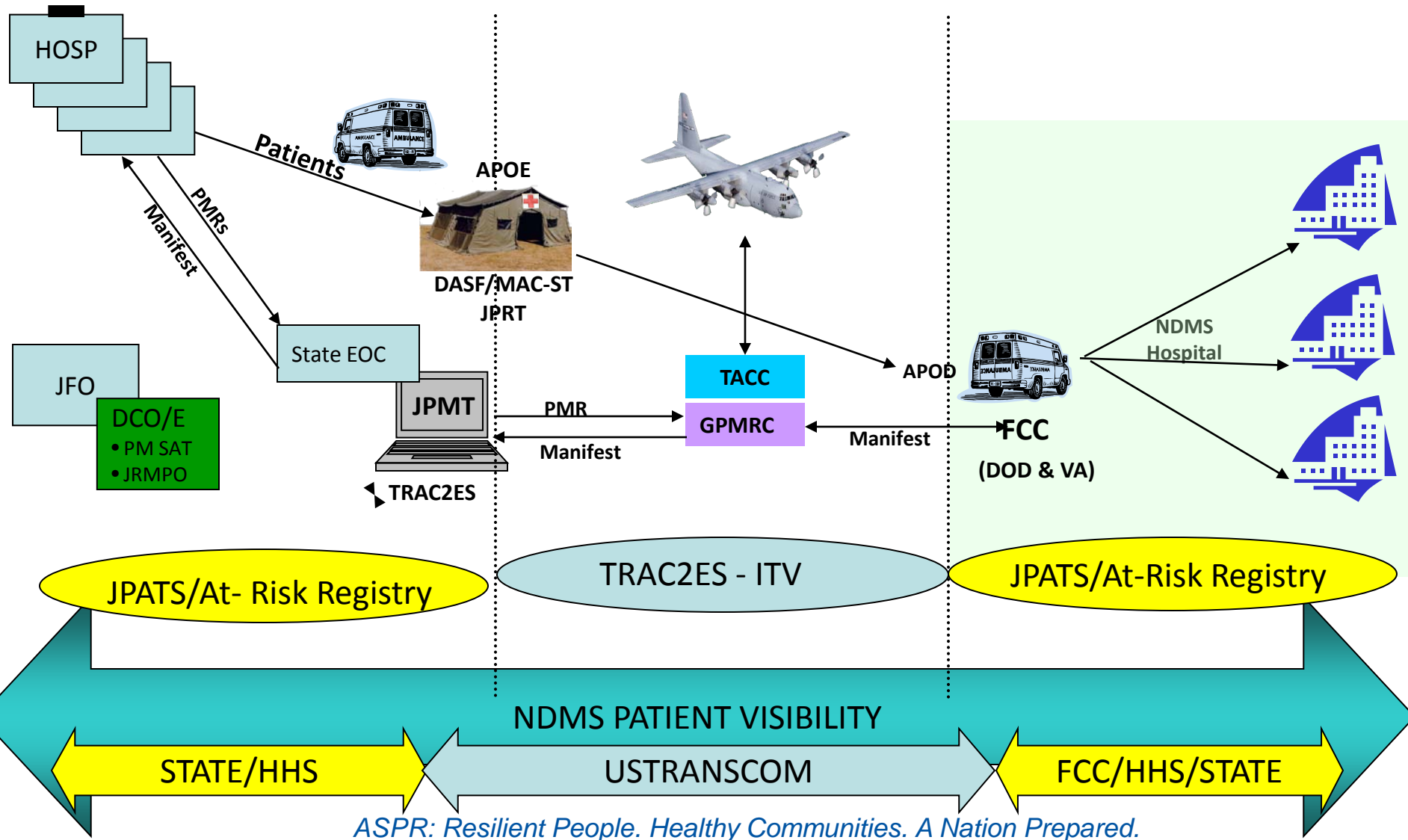


- **Medical Response**
- **Patient Evacuation**
- **Definitive Medical Care**

- **Disaster Medical Assistance Teams (DMAT)**
 - DMAT Caches
- **National Medical Response Teams (NMRT)**
- **International Medical Surgical Teams (IMSurT)**
- **National Veterinary Response Teams (NVRT)**
- **Disaster Mortuary Teams (DMORT)**
 - Disaster Portable Morgue Unit (DPMU) Cache



NDMS DoD PATIENT MOVEMENT SYSTEM





TRANSCOM Patient Movement Enablers

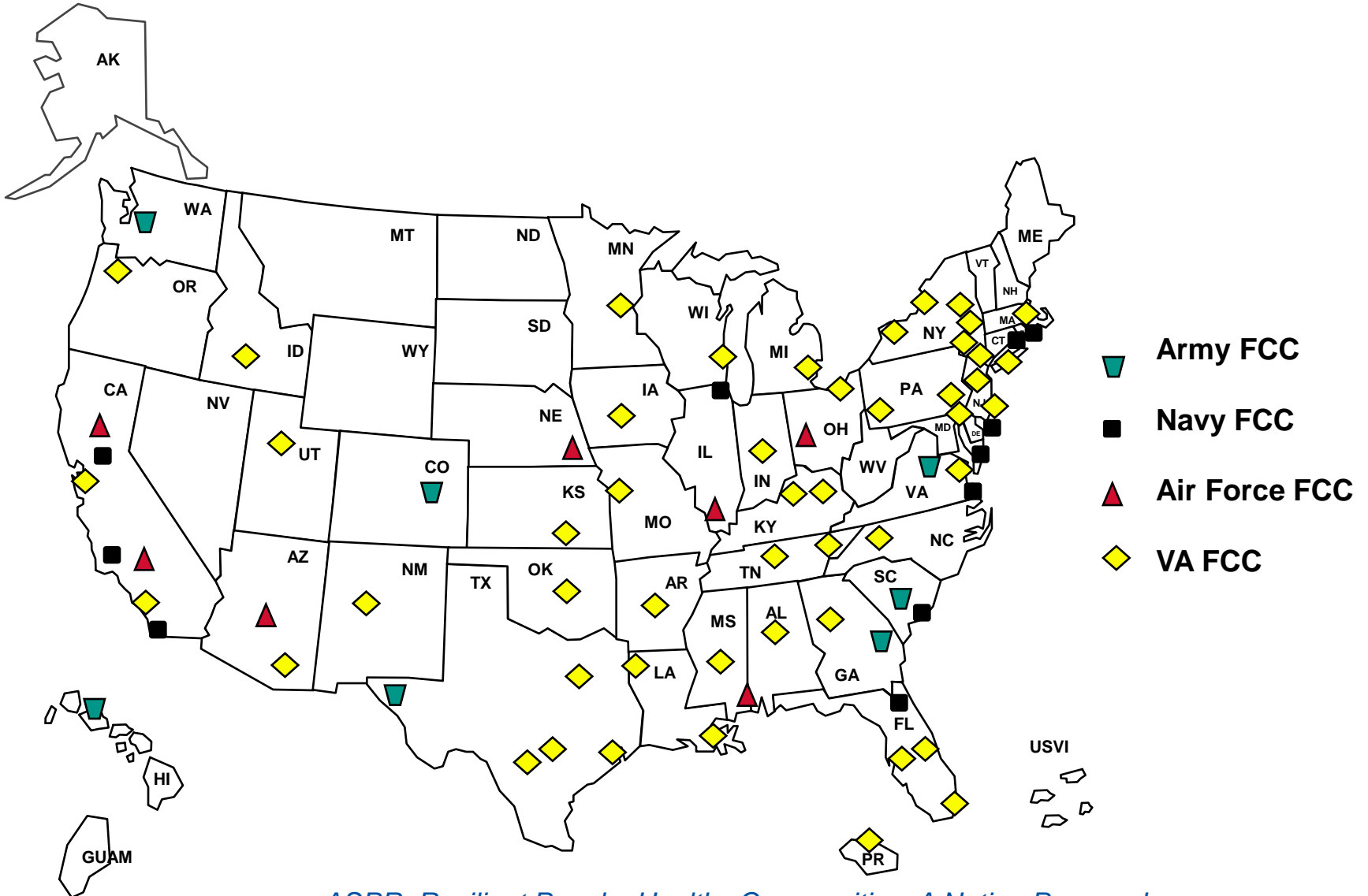


Patient Movement Situational Awareness Team (PM SAT) to the Joint Field Office as part of the Defense Coordinating Element

Joint Patient Movement Team (JPMT) to the State EOC or State Department of Health to coordinate submission of Patient Movement Requests (PMRs)

Joint Patient Reporting Team (JPRT) to the APOE to support reporting of patient information and submission of PMRs

NDMS Federal Coordinating Centers (FCCs)



FEMA Ambulance Contract

- **GROUND AMBULANCE**

- 300 ground ambulances (ALS & BLS)
- Typically a 70%/30% ALS/BLS split

- **AIR AMBULANCE**

- 25 air ambulances, helicopter and/or fixed wing

- **PARA-TRANSIT**

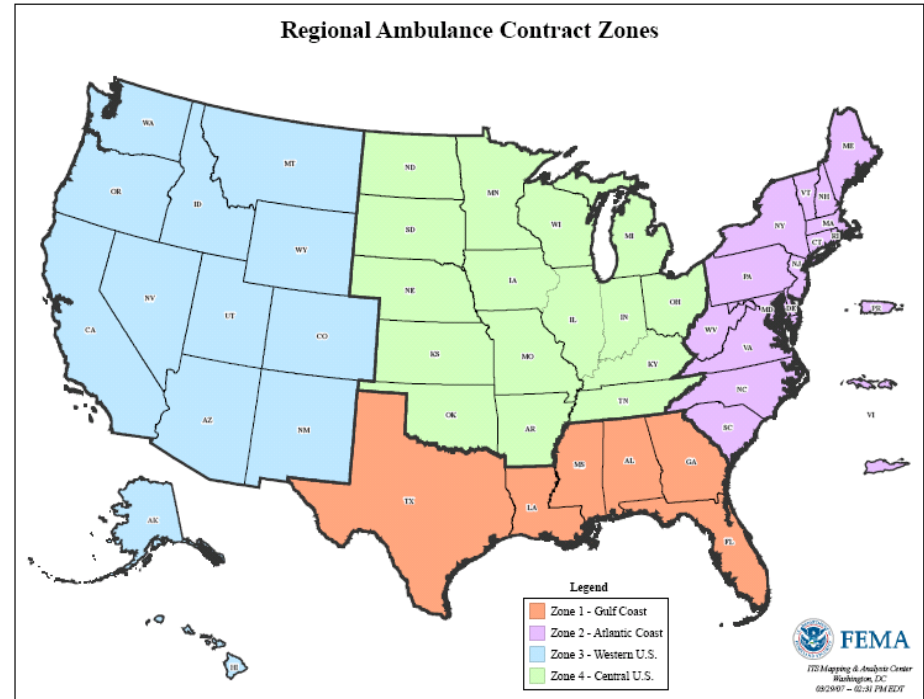
- Ability to Transport 3,500 individuals
- Not 3,500 vehicles

- **Ambulances start moving**

- Within 6 hours of Task Order
- In place within 24 hours of Task Order (within zones)

- **Check-in at Mob Center, FOSA or other location**

- **Turned over for tactical control by FEMA Logistics in concert with ESF #8 LNO.**





Commissioned Corps of the USPHS



- **Response Teams**

- **Tier 1 – Respond in 12 hours**
 - Rapid Deployment Force (RDF) -105 personnel
 - Incident Response Coordination Teams (IRCT) – 30 Personnel

- **Tier 2 – Respond in 36 hours**
 - Applied Public Health Team (APHT) - 47 personnel
 - Mental Health Team (MHT) - 26 personnel
 - Service Access Team (SAT) - 10-20 personnel

- **Tier 3 – Respond in 72 hours**
 - Remainder of Corps

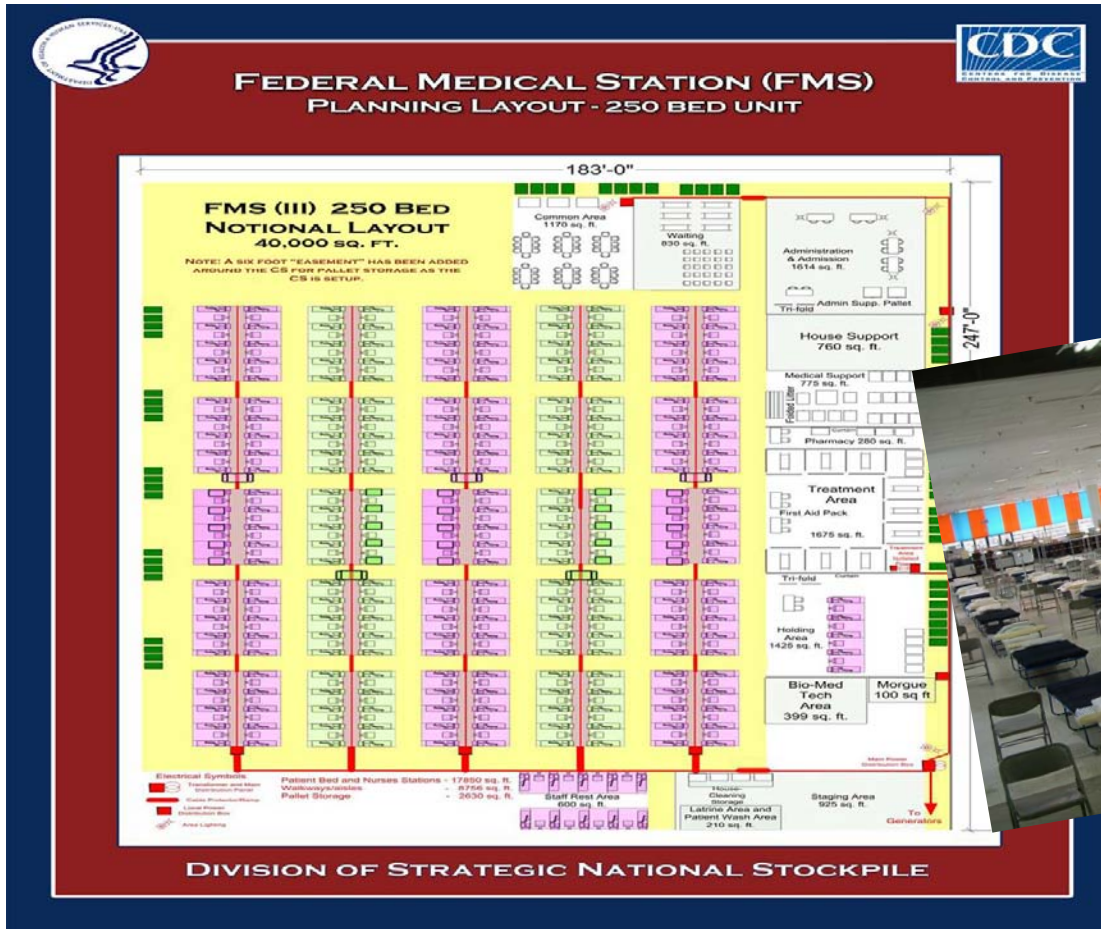


Strategic National Stockpile

- **Strategic National Stockpile (CDC)**
 - Drugs and medical supplies to supplement local resources
 - Delivered within 12 hours



Federal Medical Stations



DoD Resources

Self-Contained Field Response Assets – LOTS OF THEM!



Questions ?

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