

Annex C

Regional Coordination Plan

For Surge Incidents

Region H Healthcare Preparedness Coalition

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1. Introduction

1.1. Purpose

The purpose of the Coalition Surge Coordination Plan is to:

- A. Identify the roles, responsibilities and actions required of local healthcare community organizations (HCOs) and other agencies in preparing for and responding to incidents that exceed the medical surge capabilities of individual health care facilities. Medical surge capability is the ability to provide adequate medical evaluation and care during incidents that exceed the limits of the normal medical infrastructure within the community.
- B. Ensure that a response to medical care surge is coordinated among Emergency Medical Services (EMS), hospitals, other healthcare community organizations, local and district public health, and local, state and federal government agencies.
- C. Provide a framework within which the Coalition can demonstrate, through exercise or real incident, its ability as a region to deliver appropriate levels of care to all patients and provide immediately available surge capacity region-wide equal to no less than 20% of staffed members' beds within 4 hours of a disaster. This is known as immediate bed availability.

1.2. Scope

The scope of the Coalition Surge Coordination Plan includes the Coalition's role in the process to respond to a healthcare community incident where a facility's surge capacity and surge capabilities have been met or exceeded, and patient movement may be necessary through coordination within the Coalition region and inter-regionally.

It has been developed to complement rather than duplicate the Coalition Emergency Operations Coordination Plan, the Regional Hazard Vulnerability Assessment (HVA), the roles of the Regional Coordinating Hospital, and plans for multi-agency coordination.

2. Assumptions

- 2.1. This Coalition Surge Coordination Plan will be used in conjunction with the Region H Healthcare Preparedness Coalition EOP and will operate alongside individual facility plans for medical care surge and other individual facility emergency plans that are activated to respond to the incident.
- 2.2. Regardless of the size or location of the affected healthcare facility(s), regional coordination may occur.
- 2.3. If the Regional Coordinating Hospital needs outside assistance to handle a medical surge incident, an unaffected Regional Coordinating Hospital may coordinate the Coalition regional response.
- 2.4. Release of any information will be governed by existing legal obligations and internal policies of each facility.
- 2.5. In a large event requiring federal or mutual aid assistance, Georgia Department of Public Health will work with counterparts from such entities to seek, plan, and direct use of those assets.

3. Levels of Surge Events

During an incident that meets or exceeds a facility’s medical surge capability, individual facilities in the region expand services according to their facility surge plan. The regional surge plan is activated when the level of the surge event warrants a regional response. The role of the Coalition is determined by the level of surge:

Level of Surge Event	Role of the Coalition
1. The surge can be handled by the affected HCOs without outside assistance.	If requested, monitor the event for a change in level that would require assistance.
2. The surge can be handled by the affected HCOs by using non-patient care areas to provide patient care.	Monitor the event; activate regional surge plan if assistance is requested.
3. The surge can be handled by the affected HCOs, but outside assistance is required.	Activate regional surge plan and provide requested assistance.
4. The surge requires the use of mobile medical assets / alternate care sites deployed to community locations not part of a medical facility	Activate the regional plan for the specific temporary capacity to be deployed.

4. Operations

Plans and protocols for medical care surge exist at the individual healthcare organization level. This Surge Coordination Plan provides a framework for coordination of medical care surge response and recovery at the regional level for events that are beyond the capabilities of a single facility.

Individual facilities activating their surge plans do not necessarily trigger the Surge Coordination Plan.

Individual healthcare facilities who are exceeding their surge capacity/capabilities and are in need of outside assistance should notify their local EMA and the RCH. The RCH will activate the Surge Coordination Plan when warranted by the size or location of the event, if specialized capabilities are required, or if a regional response is required for other reasons.

Immediate Bed Availability (IBA) is the most relevant surge capacity for short term events, when the majority of patients are placed for treatment relatively quickly. Individual acute care partners provide IBA by canceling elective admissions, identifying inpatients that are ready for discharge, establishing discharge areas for patients waiting for transportation, etc. These techniques are referred to as decompression.

When region hospitals are implementing decompression procedures, the RCH will assist if the particular decompression strategies being used involve transfer / transportation of patients to other health care organizations, or if there is a need for resources stored in regional caches.

Most of the region's hospitals can activate additional surge capacity beyond what can be achieved with decompression strategies. This surge capacity may take more time to activate and would not be considered IBA. This capacity is useful for longer term events such as a pandemic, or for receiving patients from planned evacuations, as for a hurricane.

In many events there may be large numbers of patients who can be treated and released, causing a much greater demand for outpatient services than for inpatient services. Some of this demand can be met by other healthcare organization members of the coalition.

If further assistance is needed, the RCH may call on other regions or request state assistance. If necessary the state may request federal resources.

When the RCH activates the Surge Coordination Plan, subsequent Coalition notifications and communications will follow procedures as outlined in the Coalition EOP.

5. Resource Management/Logistics

Equipment and supplies that need to be moved in support of the incident will be handled according to Resources and Assets procedures outlined in the EOP.

6. Public Information

Individual organizations should refer to their respective public information plans and policies when determining what information to share publicly. The Coalition shall not speak on behalf of any individual member organization and will defer to the individual organization's Public Information Officer.

Any multiagency/multi-jurisdictional event will necessitate the creation of a Joint Information Center (JIC) in order to better coordinate public messaging.

7. Psychosocial Support of Patients and Staff

Provision of psychosocial support to patients, patient families and the staff is handled by individual facilities. Additional coordination of resources may be available through the Coalition.