Indiana

DISTRICT 7

Healthcare Coalition

Recovery Plan Annex

Annex Revision Information

VERSION	DATE	CHANGES	AUTHOR
1.0	4/24/23	Original Annex	MESH

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Introduction

Purpose

The purpose of the Indiana District 7 Healthcare Coalition (D7 HCC) ***Recovery Plan Annex*** is to establish pre-incident disaster recovery planning and post-incident disaster recovery objectives and roles and responsibilities in accordance with the concepts and principles recommended from the National Disaster Recovery Framework (NDRF).

Recovery includes the restoration and strengthening of key systems and resource assets that are critical to a community's continued viability. Recovery planning should be distinguished from continuity of operations (COOP) planning which seeks to maintain functions during, and following, an incident through response and mitigation activities

Scope

The scope of the D7 HCC Recovery Plan is limited to supporting the participating Core 4 (eight Emergency Management Agencies; eight Health Departments; seven Hospitals; seventy-five Emergency Medical Services providers) and ancillary member organizations strategic preparedness planning efforts and causing a universal understanding of cooperation and effort within the Indiana District 7 region.

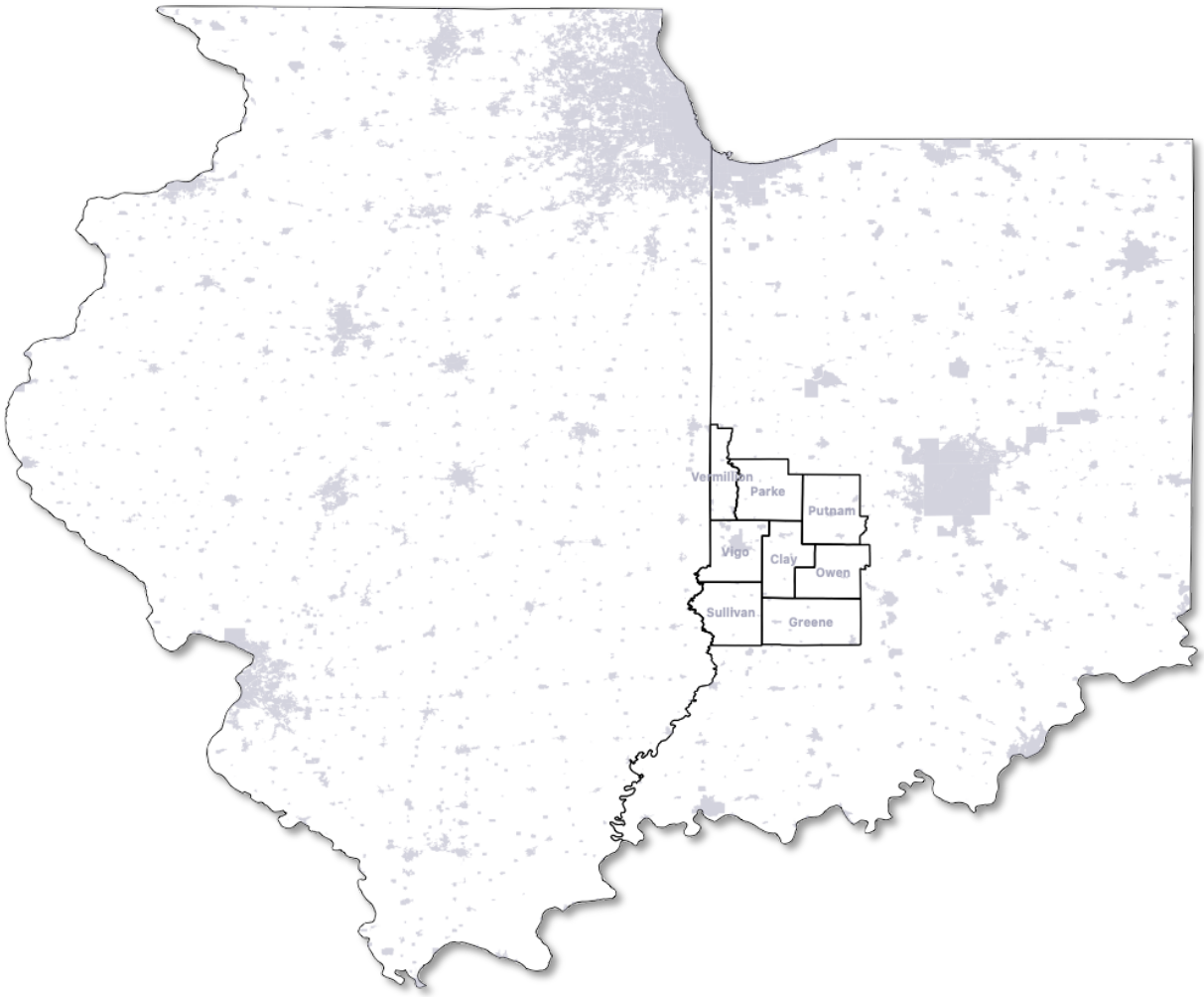
The objectives of this plan and the D7 HCC disaster recovery roles and responsibilities are:

- Effective implementation of the D7 HCC Sustainability plan to ensure the coalition can sustain their role in recovery
- Encourage D7 HCC members and constituents to plan for recovery activities as early as possible in their incident responses
- Participate (or lead) in health and social services reconstitution/restoration planning

- Assist members with documenting costs, losses, and interfacing with local, state, and federal partners and recovery reimbursement, grant, and other programs
- Advocate for full heath care service delivery restoration for member facilities and organizations within coalition boundaries
- Advocate for members to receive priority critical infrastructure restoration and reconstruction (including utilities and information technology/communications systems and assist with prioritization as needed)
- Provide a forum for health and social services recovery strategic discussions
- Support or coordinate a health and social services system impact assessment
- Support or coordinate a long-term community behavioral health impact needs analysis
- Continue to interface with volunteer groups and staffing agencies to monitor and assess the needs of member organizations to supplement their workforce during the recovery phase
- Demobilize and replenish regional supply caches and resources maintained by the coalition
- Support or supervise demobilization or return procedures for any loaned or transported assets within the coalition
- Assist with preparing After Action Reports (AARs), Corrective Action, and Improvement Plans (IPs)

The D7 HCC encompasses 8 counties within west-central Indiana. The coalition is open to all identified member partner types as identified by the Assistant Secretary for Preparedness and Response.

Indiana District 7 HCC Counties



(Map: *MESH Coalition* | Data Source: *US Census Bureau, 2021*)

This document is designed to serve as a supplement to participating organizations, and does not supplant, effective emergency management and/or emergency preparedness programs for each participating organization. Nor does this document supersede any local, county, regional, state, or federal entities preparedness plan.

The District 7 Executive Board Chairperson or designee is responsible for serving as the primary on-call point of contact for the coalition. The Chairperson or designee is responsible for communicating incident emergency status to the coalition as well as to the Indiana Department of Health (IDOH).

The D7 Executive Board Chairperson, the Healthcare Coalition Readiness & Response Coordinator, or their designee shall assume the role of Healthcare Coalition Coordination Center (HCCCC) Manager representing the District 7 HCC. As the HCCCC Manager, the D7 Executive Board Chairperson shall assign HCCCC staff positions as needed.

In the event the D7 Executive Board Chairperson is unavailable or voluntarily relinquishes command, the Vice Chairperson will assume all roles and responsibility with all given authority of the D7 Executive Board Chairperson as the HCCCC Manager.

In like fashion, the Secretary/Treasurer will assume the role of HCCCC Manager given the absence of the aforementioned officers with one exception. An executive session shall be called by the Secretary/Treasurer, for either live attendance in a common place or by virtual meeting, and an interim plan shall be put in place by majority vote for any further succession needs. These provisions will be upheld only for as long as necessary to complete the event or the re-assumption of Management by a higher-level Officer, if possible.

Administrative Support of Annex Review

The District Coalition will review this annex annually to ensure valid and current information. Additionally, the D7 HCC will review this annex after an activation of the annex, whether in response to a real-world incident or exercise.

District 7 Healthcare Coalition Overview and Situation

Overview and Situation

The D7 HCC geographically includes eight counties in west-central Indiana: Clay, Greene, Owen, Parke, Putnam, Sullivan, Vermillion, & Vigo.

Seven hospitals are located within the D7 HCC: Terre Haute Regional, Union Hospital Terre Haute, (and the five Critical Access Hospitals) Ascension St. Vincent-Clay, Greene County General, Putnam County, Sullivan County Community, and Union Hospital Clinton.

Terre Haute Regional Hospital and Union Hospital are verified Level III Trauma Centers in District 7. Indiana relies upon the American College of Surgeons-Committee on Trauma (ACS-COT) to verify trauma centers.

Seventy-five Indiana registered Emergency Medical Services providers are located within the district.[1] The Indiana Department of Homeland Security EMS District Manager actively participates in district meetings.

District 7 Healthcare Coalition Membership

The Indiana District 7 Healthcare Coalition consists of members that contribute to the planning, identification of gaps and mitigation strategies, operational planning and response, information sharing, and resource coordination and management. The District will collaborate with a variety of stakeholders to ensure the community has the necessary medical equipment and supplies, real-time information, communication systems, and trained educated health care personnel to respond to an emergency. The following members are essential in this effort:

- Hospitals

[1] Indiana Department of Homeland Security: EMS Providers list. Accessed May 26, 2020

- Emergency Medical Services
- Emergency Management Agencies
- Public Health
- Long Term Care Providers
- Mental/Behavioral Providers
- Specialty Services Providers
- Support Service Providers
- Non-Governmental Organizations
- Schools/Universities

The Indiana District 7 Healthcare Coalition consists of a variety of healthcare organizations and membership. A full list of participating organization and members can be found in ***Response Plan Appendix A – Healthcare Organizations and Coalition Members***. In general, membership is consistent with the following ASPR requirements:

District 7 Healthcare Coalition Core Members

The District 7 Healthcare Coalition ensures it includes the following Core 4 Membership:

- Hospitals (a minimum of two hospitals)
- Emergency Medical Services (including inter-facility and other non-EMS patient transport systems)
- Emergency management Agencies
- Public health Agencies

District 7 Healthcare Coalition Ancillary Members

Additional Ancillary District 7 Healthcare Coalition members may include, but are not limited to, the following:

- Behavioral health services and organizations
- Community Emergency Response Team (CERT) and Medical Reserve Corps (MRC)
- Dialysis centers and regional Centers for Medicare & Medicaid Services (CMS)-funded
- End-stage renal disease (ESRD) networks
- Federal facilities (e.g., U.S. Department of Veterans Affairs (VA) Medical Centers, Indian Health Service facilities, military treatment facilities)

- Home health agencies (including home and community-based services)
- Infrastructure companies (e.g., utility and communication companies)
- Jurisdictional partners, including cities, counties, and tribes
- Local chapters of health care professional organizations (e.g., medical society, professional society, hospital association)
- Local public safety agencies (e.g., law enforcement and fire services)
- Medical and device manufacturers and distributors
- Non-governmental organizations (e.g., American Red Cross, voluntary organizations active in disasters, amateur radio operators, etc.)
- Outpatient health care delivery (e.g., ambulatory care, clinics, community and tribal health centers, Federally Qualified Health Centers (FQHCs), urgent care centers, freestanding emergency rooms, stand-alone surgery centers)
- Primary care providers, including pediatric and women's health care providers
- Schools and universities, including academic medical centers
- Skilled nursing, nursing, and long-term care facilities
- Support service providers (e.g., clinical laboratories, pharmacies, radiology, blood banks, poison control centers)
- Other (e.g., child-care services, dental clinics, social work services, faith-based organizations)

District 7 Healthcare Coalition Demographics

The population of the eight counties included in the Indiana District 7 Healthcare Coalition is:

POPULATION (2022) [2]	
DISTRICT 7	**274,664**
CLAY	26,379
GREENE	31,006
OWEN	21,482
PARKE	16,369
PUTNAM	37,301
SULLIVAN	20,670
VERMILLION	15,451
VIGO	106,006

[2] http://www.stats.indiana.edu

The number of individuals in District 7 counties by age is:

POPULATION BY AGE (2021 ESTIMATE) [3]

AGE	CLAY	GREENE	OWEN	PARKE	PUTNAM	SULLIVAN	VERMILLION	VIGO
UNDER 5 YEARS	1,603	1,679	1,182	962	1,795	1,216	778	5,909
5 TO 9 YEARS	1,562	1,916	1,263	992	2,016	1,157	964	5,846
10 TO 14 YEARS	1,863	1,897	1,242	1,000	2,185	1,195	1,012	6,370
15 TO 19 YEARS	1,678	1,929	1,271	888	2,964	1,085	1,027	8,172
20 TO 24 YEARS	1,369	1,620	1,043	881	3,349	1,216	813	11,455
25 TO 29 YEARS	1,545	1,828	1,105	994	2,395	1,498	902	7,299
30 TO 34 YEARS	1,602	1,710	1,190	1,068	2,197	1,381	791	6,306
35 TO 39 YEARS	1,314	1,873	1,503	755	2,359	1,392	853	6,856
40 TO 44 YEARS	1,943	1,649	847	1,042	1,899	1,380	980	5,727
45 TO 49 YEARS	1,696	2,006	1,304	1,110	2,201	1,458	1,065	6,135
50 TO 54 YEARS	1,667	2,220	1,545	1,026	2,470	1,402	1,028	6,276

[3]https://data.census.gov/table?t=Populations+and+People&g=050XX00US18153,18021,18119,18167,18133,18055,18121,18165&tid=ACSST5Y2021.S0101

55 TO 59 YEARS	1,950	2,190	1,879	1,117	2,404	1,341	1,255	6,141
60 TO 64 YEARS	1,806	2,466	1,716	1,348	2,516	1,446	927	6,757
65 TO 69 YEARS	1,668	1,639	1,410	897	1,872	1,280	1,1174	6,084
70 TO 74 YEARS	1,220	1,842	1,221	1,017	1,635	908	667	3,978
75 TO 79 YEARS	827	1,279	775	661	1,163	723	554	2,929
80 TO 84 YEARS	465	671	373	278	666	340	333	2,034
85 AND OVER	619	510	411	280	752	396	345	2,249

Assumptions

- Potential hazards for all Core and Ancillary members are outlined in detail in the ***D7 HCC Hazard Vulnerability Analysis***.
- District 7 Healthcare Coalition Core and Ancillary Members will have primary responsibilities for response and recovery.
- District 7 Healthcare Coalition Core and Ancillary Members should follow their respective recovery plans and protocols.
- District 7 Healthcare Coalition Core and Ancillary Members should establish their own recovery goals and strategic priorities.
- District 7 Healthcare Coalition Core and Ancillary Members should establish their incident command with a finance section for tracking cash expenditures, increases in staffing costs, equipment/supply purchases, etc. Each member agency/organization/hospital/facility should maintain an inventory of materials and manpower used during an incident. The inventory should include those items and man-hours that were distributed to another agency/organization/hospital/facility.
- District 7 Healthcare Coalition Core and Ancillary Members should integrate their plans with pre-incident assessments, community health needs assessments, and the ***D7 HCC Hazard Vulnerability Analysis.***
- The D7 HCC district plan can be reactivated at any time if the conditions warrant.
- The D7 HCC may assist with facilitating the replenishment of vital supplies and request to the appropriate agencies for reimbursement.
- After Action Reports (AAR) are valuable tools for improving upon disaster plans.
- The D7 HCC may assist with facilitating an After Action Review.

Recovery Concept of Operations

District 7 Healthcare Coalition Activation and the Healthcare Coalition Coordination Center

In the event there is an incident that has or will have an effect on the ability of the member Healthcare Coalitions/coalition partners to respond, the D7 Healthcare Coalition may activate and identify all appropriate parties that will be providing assistance, support and services from a District level. The Activation, Notification and Roles and Responsibilities processes are outlined in detail in the ***D7 HCC Response Plan***. This plan follows the ICS/NIMS framework.

The District 7 HCC, when activated as needed, may support each affected coalition member facility by establishing a Healthcare Coalition Coordination Center (HCCCC) for coordination of district wide resources and information sharing.

The D7 Healthcare Coalition Coordination Center (HCCCC) may assist the individual facilities command structure in the planning process by providing real-time information related to resources and coordinate with D7 support elements such as the Indiana Department of Health, the Indiana Homeland Security Department and local Emergency Management Agencies.

The D7 Healthcare Coalition Coordination Center (HCCCC) provides district healthcare coordination assistance in support of core four coalition members in ensuring life safety, scene stabilization and property preservation.

D7 Healthcare Coalition staff serve in the Healthcare Coalition Coordination Center (HCCCC) as the need arises during simulated or real-world incidents/events.

When it is determined that an incident no longer requires district-wide response, the District 7 Hospital Commander will announce that the district response is no longer being utilized.

The D7 Healthcare Coalition Coordination Center (HCCCC) may assist the individual facilities command structure in the recovery process by providing real-time information related to ongoing needs and resources and may coordinate with

D7 support elements such as the Indiana Department of Health, the Indiana Homeland Security Department and local Emergency Management Agencies.

District 7 Healthcare Coalition Notifications

The activation, notification and roles and responsibilities processes are outlined in detail in the ***D7 HCC Response Plan***. This plan follows the ICS/NIMS framework.

The priority of the D7 HCC is to maintain life and prevent further injury or illness. During the recovery phase the D7 HCC may assist Core and Ancillary members in returning to normalized operations based on their own internal recovery plans.

Monitoring and Situational Awareness

The D7 Healthcare Coalition Coordination Center (HCCCC) may assist its members' assessment of emergency-related structural, functional, and operational impacts including:

- Data collection and analysis to identify priorities in the reconstitution and delivery of healthcare services at the outset of an emergency
- What types of assessment and data gathering will be conducted?
- Are there predetermined guidelines and forms to be used for data collection? And if so, is everyone aware of and been trained on the guidelines?
- Collect situational assessment data from member healthcare organizations on their ability to provide patient care as well as the capabilities of other stakeholders responsible for reconstituting healthcare operations
- Collect individual facility data to generate coalition healthcare service delivery situational report
- Disseminate healthcare service delivery data to federal and state health authorities and jurisdictional stakeholders

Impact Assessment / Evaluation

The D7 Healthcare Coalition Coordination Center (HCCCC) may provide the following assistance:

- Conduct healthcare workforce shortage assessment within coalition boundaries
- Communicate local/regional disruptions of critical infrastructure that affect the public health and medical sector
- Determine regional disruption of or threats to the healthcare supply chain
- Determine specific medical and non-medical supply needs of members
- Determine extent of disruption of communication/information technology capabilities within coalition boundaries and to critical partners
- Determine the expected barriers to recovery for the facility, the staff, the operations, and the supply chain

Facilitate Recovery Assistance and Implementation

The D7 Healthcare Coalition Coordination Center (HCCCC) may assist members in gathering information needed to integrate with state and federal government processes for reimbursement, reconstitution, and resupply in coordination with emergency management organizations and ESF partners.

In order for the D7 Healthcare Coalition Coordination Center (HCCCC) to provide efficient support, healthcare organizations should ensure their ICS prepares for a return to normal operations. The D7 Healthcare Coalition Coordination Center (HCCCC) may provide the following assistance to their members:

- Identify and prepare documentation necessary for government assistance
- Assess damaged infrastructure and impacted patient care services to restore functionality
- Maintain patient lists during repatriation activities (i.e., patient tracking)
- Support the physical and behavioral health needs of affected patients, staff, and families
- Connect patients and staff with case management, social, and financial services

Healthcare Workforce

The D7 Healthcare Coalition Coordination Center (HCCCC) may assist members in the ability to deploy a credentialed health workforce to support healthcare service delivery in all environments. The D7 Healthcare Coalition Coordination Center (HCCCC) may provide the following assistance to their members:

- Identify areas of the local healthcare system that have not returned to normal operations and that may require assistance with staffing from partners to resume normal operations
- Support staff sharing between facilities and at community sites (e.g. alternate care sites)- please note that credentialing issues/barriers should be addressed in applicable preparedness planning efforts
- Coordinate with volunteer groups to supplement medical and non-medical personnel
- Disseminate reports of regional staffing shortages to local and state health authorities
- Convene events (e.g., workshops, trainings, exercises) to identify what the healthcare community's needs are or to provide forums to educate healthcare employees on available disaster recovery resources for themselves and their households (e.g., Psychological First Aid training, crisis counseling, disaster case management, FEMA Individual Assistance, disaster unemployment assistance, transitional sheltering assistance, Small Business Administration disaster loans)
- Consider non-traditional forms of support to impacted staff (e.g. temporary billeting, meals, laundry facility access, childcare, etc.)
- Communicate organizational plans for operations and the status of payroll as quickly as possible to allow staff to make appropriate plans

Community / Facility Critical Infrastructure

The D7 Healthcare Coalition Coordination Center (HCCCC) may assist members in maintaining or restoring power, water, sanitation, environmental remediation, etc. to support patient care environments. The D7 Healthcare Coalition Coordination Center (HCCCC) may provide the following assistance to their members:

- Collect reports on critical infrastructure disruption and remediation
- Disseminate reports to state health authorities
- Advocate for priority service resumption for healthcare facilities/infrastructure through continuity operations
- and recovery phase

- Delineate roles/responsibilities for debris management and environmental remediation

Healthcare Supply Chain

The D7 Healthcare Coalition Coordination Center (HCCCC) may assist members in supporting activities including obtaining and delivering or re-allocating medical and non-medical supplies, pharmaceuticals, blood products, fuel, medical gases etc. The D7 Healthcare Coalition Coordination Center (HCCCC) may provide the following assistance to their members:

- Coordinate with local/regional/state health authorities and/or federal partners, as appropriate, to distribute cache contents to healthcare organizations
- Coordinate, as appropriate, with private sector vendors on distribution and resumption of normal supply delivery
- Disseminate supply chain disruption Situation Reports (SitReps) to state health authorities and jurisdictional stakeholders
- Establish mutual aid agreements with other HCCs or facilities who are less likely to be equally impacted by the same hazard

Medical / Non-Medical Transportation System

The D7 Healthcare Coalition Coordination Center (HCCCC) may assist members in identifying fully functional medical and non-medical transportation systems that can meet the operational needs of the healthcare sector during the response and recovery phases of an event. The D7 Healthcare Coalition Coordination Center (HCCCC) may provide the following assistance to members:

- Determine regional medical transportation needs during response and recovery operations
- Determine specific needs of member healthcare organizations and capabilities of EMS agencies
- Coordinate with pre-identified regional transportation providers (e.g., EMS/Air Ambulance) to close gaps in
- system transportation needs
- Advocate for coalition members for medical transportation assistance

Healthcare Information System

The D7 Healthcare Coalition Coordination Center (HCCCC) may assist members in establishing a fully functional information technology and communications infrastructure that supports the healthcare sector's data management and information sharing capability. HCCs should enable, support, promote and facilitate data sharing with key non-health partners. The D7 Healthcare Coalition Coordination Center (HCCCC) may provide the following assistance to members:

- Establish or support communication and information-sharing forum(s) for Health and Social Services RSF stakeholders within the state and/or community
- Activate redundant communication capabilities, if necessary and available
- Coordinate with local/state emergency management to secure priority service restoration to communication/information technology and critical infrastructure capabilities
- Coordinate with state health authorities to disseminate critical response and continuity operations information

Communications

The D7 Healthcare Coalition Coordination Center (HCCCC) may assist members in promoting clear communications and healthcare/ public health messaging for both internal and external audiences to provide accurate, appropriate, and accessible information to the population regarding health and social services and threats. The D7 Healthcare Coalition Coordination Center (HCCCC) may provide the following assistance to members:

- Integrate use of previously developed/canned messages which can be easily updated
- Assist in public messaging through multiple venues, with considerations for cultural competency, limited English
- proficiency, multiple languages, and 508 compliance
- Promote information sharing with partners and key stakeholders
- Promote effective information sharing with the community about recovery efforts and available medical services

Healthcare Administration / Finance

The D7 Healthcare Coalition Coordination Center (HCCCC) may assist

members in maintaining and updating patient records, adapting to disaster recovery program requirements (if applicable), payroll continuity, supply chain financing, claims submission, losses covered by insurance, and legal issues. The D7 Healthcare Coalition Coordination Center (HCCCC) may provide the following assistance to members:

- Collect disaster response data and issues to be used in AARs
- Keep coalition members informed of disaster recovery program requirements and changes
- Keep coalition members informed about available disaster assistance from federal, state, and local sources
- Support cost and damage tracking activities by stakeholders

System Operations Restoration

The D7 Healthcare Coalition Coordination Center (HCCCC) may, in coordination with its partners, support members in the post-emergency recovery process by facilitating system operations restoration. The D7 Healthcare Coalition Coordination Center (HCCCC) may provide the following assistance to members:

- Convene a platform to identify long-term healthcare and community health recovery gaps, and develop potential strategies to address them
- Support and/or develop and communicate short- and long-term priorities to the jurisdiction's government and emergency management functions (e.g., ESF-6, ESF-8, and the Health and Social Services Recovery Support Function)
- Plan and execute the after-action learning and improvement processes for coalition stakeholders
- Collaborate with emergency management organizations and government officials to identify opportunities for
- future mitigation strategies or initiatives to enhance the resilience of the physical healthcare infrastructure and
- systems of care
- Collaborate with federal infrastructure and insurance assessment teams to enhance knowledge of disaster
- impacts on physical healthcare infrastructure and inform future risk mitigation strategies
- Perform or support emergency management organizations' disaster impact assessments to enhance knowledge of
- disaster impacts on physical infrastructure and public health or access to care and inform future risk mitigation
- strategies
- Participate in healthcare service delivery restoration decision-making in

the community during longer-term events

Transition and Return to Steady State Operations

The D7 Healthcare Coalition Coordination Center (HCCCC) may assist members in ensuring healthcare service delivery is maintained or restored in all inpatient and outpatient environments. The D7 Healthcare Coalition Coordination Center (HCCCC) may provide the following assistance to members:

- Promote self-sufficiency and continuity of the health and well-being of affected individuals, particularly the needs of children, seniors, people living with disabilities who may have additional functional needs, people from diverse origins, people with limited English proficiency, underserved populations, and other at-risk populations
- Reconnect or provide displaced populations with essential health and social services
- Assess and mitigate health threats to the population and response and recovery workers in the post-disaster environment
- Assess and mitigate factors that prevent healthcare personnel from returning/continuing to work

Deactivation and Recovery

The demobilization process begins at the onset of the disaster as the Incident Command System is established.

Demobilization is the release and return of resources that are no longer required and may occur at any time during or after the incident.

The Incident Commander may either assign a member of the response team (Planning Section if established) to coordinate the demobilization process or manage it themselves.

The responsible person for demobilization can utilize the ICS demobilization check-out form 221 as a guideline for the process.

Demobilization of an incident involving pediatric surge should ensure that the pediatric perspective and issues are addressed, and address roles and responsibilities for continued pediatric and school behavioral health support, and assistance with reimbursements as applicable.

Refer to the ***D7 HCC Response Plan*** for additional guidance on the demobilization and continuity process.

Indiana

DISTRICT 7

Healthcare Coalition

Recovery Plan Annex

Appendix A

Inventory and Sustainability Resources and Assets

Indiana

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Recovery Plan Annex

Appendix B

Healthcare Facility Safety Evaluation Templates/Resources

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Appendix C

Sample Regulatory Waiver Requests

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Appendix D

Recovery Support Contact Information