MESSAGE FROM DIRECTOR & HEALTH OFFICER
Looking back at the history of the King County Healthcare Coalition, I’m pleased and gratified by all we have accomplished in seven short years. What started with a single meeting of healthcare leaders and Public Health – Seattle & King County in late 2005 has grown into a regional collaboration of partners from across the continuum of healthcare. Together, we’ve worked on significant emergency issues confronting our communities, from the 2006 wind storms to the H1N1 influenza pandemic to our current whooping cough epidemic. Throughout, the systems and collaborations we are developing and refining have had a tremendous positive impact on our region’s ability to respond to emergencies.

Across the country, people are noticing the King County Healthcare Coalition’s great work. The Coalition has become a national model—so much so that we were recently recognized with the 2012 Homeland Security Award for Outstanding Regional Partnership. This award is shared among all of our Coalition partners and reflects the contribution each of you has made to make our region as a whole more prepared.

Special thanks go to Johnese Spisso, who has served as Chair of the Coalition since its inception in 2005. Johnese has been an exceptional leader—working countless hours to mobilize her peers across health systems around a single goal: strengthening our ability to meet the health and medical needs of our community during an emergency. As Johnese steps down from her role as Chair this summer, we welcome Dr. David Grossman as our new Chair. Dr. Grossman will lead the Coalition through a period of growth and expansion, as we work to make our model more scalable and efficient. This is an exciting time, and we’re grateful for Dr. Grossman’s leadership.

As you read this report, I hope you will enjoy reflecting on the events and milestones that have brought the King County Healthcare Coalition to this point. Thanks to the many extraordinary contributions of our partners, our health system is better prepared to plan for, respond to, and recover from disasters. I look forward to our continued partnership.

David Fleming, MD
Director and Health Officer
Public Health – Seattle & King County

VISION
A coordinated response across the continuum of healthcare that meets the health and medical needs of the community during an emergency.

WHO WE ARE
The King County Healthcare Coalition is a network of healthcare organizations and providers working together to strengthen emergency preparedness and response. With coordination before, during and after an emergency, we help build a more resilient community. Administered by Public Health – Seattle and King County, the Coalition is open to all organizations and individuals who provide healthcare services in King County.

Together, over 300 healthcare organizations participate in planning, training, and exercise activities to build response capabilities. Our participants include ambulatory, behavioral health, hospital, in-home service, long-term, palliative, pediatric, safety net, and specialty care providers.

BEFORE THE COALITION
We are fortunate to have always benefited from a collaborative spirit among local healthcare providers, Public Health – Seattle & King County, the state hospital association, the City of Seattle, and other partners. Critical events such as the 1999 World Trade Organization riots in Seattle, the 2001 Nisqually earthquake, and 9-11 terrorist attacks demonstrated the need for an organized Coalition to enhance healthcare preparedness and response.

2004
February – Public Health – Seattle & King County launches the Healthcare Preparedness Program to support hospital preparedness.

2005
March – Public Health hosts a healthcare providers-only planning event to address regional planning needs.

2002
January – The U.S. Health and Human Services, Health Resources and Services Administration (HRSA) launches the Hospital Preparedness Program (HPP) Grant, releasing funds to states to support hospital preparedness.

2005
October – Hospitals in King County pool their HPP Grant resources and regional priorities and additional regional planning staff. This sets an important tone for how we manage our grant funding going forward.
MESSAGE FROM OUR HEALTHCARE LEADERS

The relationships we have built through the King County Healthcare Coalition give us the confidence and trust that our organizations can count on one another, Public Health, and our emergency response partners in the event of a disaster.

This year, our community response to the January snow and ice storms validated that while we still have more work to do, we are certainly “More Prepared Than Ever.” Within each of our healthcare sectors, we saw examples of improved emergency readiness and resilience, reinforcing that King County healthcare organizations are better positioned to keep patients safe and maintain healthcare services during extended power outages and cold temperatures.

Reaching our emergency preparedness goals requires that we continue to innovate and expand our partnerships. In this spirit, the Coalition launched the King County Disaster Clinical Advisory Committee, a nationally unique multi-disciplinary group of clinical leaders who will provide critical input into our regional plans and support disaster response. Thanks to the generosity of the healthcare organizations and community partners who supported our inaugural sponsorship campaign, our Coalition is also stronger financially. Their sponsorships reflect a commitment to our mission and help ensure that our Coalition resources continue to be available in our community.

We are truly optimistic about the future of our Coalition. The timeline running along the bottom of this report reminds us all how the King County Healthcare Coalition came to fruition and the milestones we have achieved together. Our success and growth over the years has only been possible through the commitment of our participants, our partners, our staff, and now our sponsors. Because of you, we are building a healthcare community that is “More Prepared Than Ever.” Thank you for being a part of our team.

ANNUAL LEADERSHIP AWARD

TO JOHNESI SPISSO, EXECUTIVE COUNCIL CHAIR (2005 - 2012)

As the first and only Chair of the Executive Council during the Coalition’s first seven years, Johnese has provided strong leadership to the Coalition since its inception. She has been an effective champion for local healthcare emergency preparedness among her peers, fostering programming to improve patient and emergency communication systems between health systems and launching the Coalition’s first sponsorship campaign. We have been so fortunate over the years to rely on her for her enthusiasm, focus and guidance.

“Johnese has been an exceptional leader–working countless hours to mobilize her peers across health systems around a single goal: strengthening our ability to meet the health and medical needs of our community during an emergency.” David Fleming, MD, Director and Health Officer, Public Health – Seattle & King County

Johnese Spisso

Chair, King County Healthcare Coalition Executive Council
Chief Health System Officer, UW Medicine

Jean Robertson

Assistant Director, King County
Internal Medicine, Chemical Abuse
& Dependency Services

Jeff Scoursy, Exp.
Senior Vice President and General Counsel,
Seattle Children’s Hospital

Gayle Ward

Vice President of Nursing,
Northwest Hospitals

Debbie Wilkinson

Chief Operating Officer, HealthPoint

*New in FY11

2005 – Public Health and over 20 local hospital and major medical group leaders launch the King County Healthcare Coalition (the Coalition) to collaborate on planning, timely information sharing, and effective resource coordination during disasters.


2006 – The Coalition launches its first webpage as part of the Public Health website.

2006 – The Coalition and hospital surge capacity–strategically to quantify and expand hospital surge capacity in King County.

2006 – August – in support of healthcare partners, Public Health and the Coalition work with the Washington Poison Center to create a regional call center capability that includes nurse triage.
“Without question, the October Coalition exercise made us more ready for the January winter storm.”

Pete Rigby, Emergency Manager, UW Northwest Hospital and Coalition Hospital Committee Chair

ACHIEVEMENTS IN 2011-2012

HONORED WITH NATIONAL HOMELAND SECURITY AWARD

Thanks to the dedication of our participants, partners, leadership, and staff, the Coalition was recognized with the 2012 Homeland Security Award for Outstanding Regional Partnership. This prestigious award, granted to only one organization nationwide, recognizes the Coalition for being “a best practice model built on collaboration, innovation, and productivity” and bringing together a diverse set of healthcare organizations to better serve our community during catastrophic events. Cynthia Dold, Coalition Program Manager, and Peter Rigby, Emergency Manager at UW Northwest Hospital & Medical Center and Chair of the Coalition’s Hospital Preparedness Committee, were present in Ohio to receive the award from representatives of the Federal Emergency Management Agency, the National Urban Areas Security Initiative, the National Homeland Security Association, Inc., and Emergency Management Magazine.

REGIONAL EXERCISE PREPARES FOR JANUARY WINTER RESPONSE

King County hospitals and healthcare providers participated in “Winter Blast” on October 18, 2011, a regional exercise to test components of their inclement weather plans and their ability to communicate with Health and Medical Area Command. Through the exercise, healthcare providers practiced implementation of emergency plans during the evening shift. Participants reported feeling more prepared for the anticipated “La Nina” winter as a result of walking through the scenario in October. When a heavy snow storm and severe ice hit the region in January 2012, it caused prolonged power outages and health risks. The event utilized our work over the years, including the formation of Health and Medical Area Command, regional Coalition plans, and healthcare organization business continuity plans. In particular, hospitals, local nursing homes, and dialysis services demonstrated that they have strengthened business resiliency and continuity of patient care services during extended power outages and cold weather. Evacuation capabilities and mutual aid were leveraged, and communication channels between Public Health, utility, transportation, and emergency management partners were exceptional.

DID YOU KNOW?

President Obama signed a federal disaster declaration for the January winter storms, to support reimbursement for over $32.2 million in damages and costs, including property repair, debris removal and emergency protective measures.

December – The Pandemic and All Hazards Preparedness Act (PAHPA) establishes the U.S. Assistant Secretary for Preparedness and Response (ASPR) and moves the Hospital Preparedness Program out of HHS.

2007

January – Public Health and the Coalition initiate the Critical Care Workgroup to discuss how to manage critical care resources in a resource-constrained environment.

March – Local healthcare executives from the Coalition’s Executive Council meet for the first time as the Coalition’s governing body.
**DCAC SNAPSHOT:**
- 36 members
- 20 organizations
- 23 DCAC roles

**EXAMPLE ROLES:**
- Ambulatory Care Physician
- Clinical Operations Nurse
- Emergency Medicine Physician
- Ethicist
- Infection Control Specialist
- Mental Health Clinician
- Pediatrician

**DISASTER MEDICAL SURGE CAPACITY ENHANCEMENTS**

Disasters cause more patients to seek medical care and can strain medical resources. Recent national and international disasters, including local experiences with the 2009 H1N1 influenza pandemic, have highlighted the importance of effective healthcare strategies for medical surge. Limited medical resources may force healthcare to provide altered standards of care. This year the Coalition embarked on a new phase of planning to tackle the complex challenges of medical surge capacity, beginning with the Crisis Standards of Care Workshop in July 2011. Over 134 participants at the one-day symposium set the stage for a shared vision and framework. Ongoing planning efforts aim to develop a shared concept of operations for managing medical surge at the institutional level for all healthcare sectors and across the region. When the project is complete, Coalition participants and regional partners will have guidelines for medical resource management and conservation, indicators and triggers for implementing surge capacity, and regional guidelines for altering the standards of care in a resource-constrained environment.

**NEW DISASTER CLINICAL ADVISORY COMMITTEE**

This year the Coalition embarked on a new effort to expand our ability to leverage clinical expertise and guidance, both before and during a disaster response, through the formation of the King County Disaster Clinical Advisory Committee (DCAC), one of the first groups of its kind in the country. The DCAC is a multi-disciplinary group of clinical providers representing specialties from hospital, ambulatory, home care, long term care and behavioral health. Representatives with legal and ethical healthcare expertise also participate in the group, as well as emergency medical services, Public Health, and the Medical Examiner’s Office. The DCAC will serve an important role in both emergency preparedness and response by providing clinical input on key issues such as medical surge strategies, resource conservation and management, and altering standards of care.

2007 – Hospitals begin randomized 800 MHz radio tests to strengthen radio reliability in the event that telephones and the internet fail during a disaster.
2007 – Regional efforts to coordinate home health, home care and behavioral health planning begin.
2007 – The Coalition launches a web-based toolkit through the National Association of City and County Health Officials Advanced Practice Program to assist other jurisdictions to build their own coalitions.
2007 – August – The Coalition launches a web-based toolkit through the National Association of City and County Health Officials Advanced Practice Program to assist other jurisdictions to build their own coalitions.
2007 – September – Public Health, the Coalition, and local emergency management partners meet and create King County’s Health and Medical Area Command (HMAC) structure to manage health, medical and mortuery operations for disaster response.

“It is a privilege to be a part of such a dedicated group of clinicians, working to develop strategies which will optimize our ability to serve our community in the event of a disaster.”

Curtis Veal, MD, Medical Director, Pulmonary, Critical Care and Cardiac Medicine, The Polyclinic, Swedish Health Services, and Coalition DCAC Chair
NEW NURSING HOME RESPONSE TEAM HAS A HUGE IMPACT

A pillar of the Coalition’s King County Nursing Home Evacuation and Mutual Aid Plan is that dedicated nursing home representatives have committed to form a response team to coordinate patient evacuation and resource sharing. In 2012 the team was incorporated into our regional response structure as a unit within Health and Medical Area Command (HMAC). To test our plan and the skills of our new team, the Coalition hosted a Nursing Home Evacuation Workshop and Tabletop exercise in April 2012. The event brought together representatives from nursing homes, public health, emergency medical services, local emergency management, and state and federal departments of health and social and human services. The tabletop tested the strategies involved in patient triage and transport preparation at an evacuating facility and the responsibilities of patient accepting facilities. Team members also experienced the June 2012 Evergreen exercise onsite at HMAC’s command center. They tested decision-making and distribution associated with a nursing home evacuation. It was clear in both exercises that incorporation of the nursing home team into the response structure will result in a more efficient and effective operation.

MASS FATALITY TOOLS & WORKSHOP

When disasters strike, healthcare organizations need to be ready to provide care to the sick and injured, but they also need to be prepared to manage deaths that occur at their facilities. Effective management of deaths during emergencies serves two important functions: it supports the overall fatality management response that is led by the medical examiner, and it serves the living survivors by ensuring proper care, respectful handling and appropriate documentation of death for their loved one. This year the Coalition partnered with Public Health and the King County Medical Examiner’s Office to enhance our regional healthcare fatality management guidelines, and developed additional tools and templates to assist healthcare organizations in operationalizing their own capabilities. Both hospitals and ambulatory care organizations participated in Coalition planning workshops that addressed body identification, storage, and reporting. Our long term care providers will receive the same workshop in 2013.
PHARMACEUTICAL MANAGEMENT DURING DISASTERS

Effective management of pharmaceuticals such as vaccines and antibiotics are key components of medical surge and ensuring adequate protection and treatment of responders and patients during a disaster. This year, in partnership with Public Health, the Coalition facilitated efforts to enhance regional coordination with healthcare and EMS providers on strategies for managing key pharmaceuticals. Pharmacists and emergency managers from local healthcare organizations were convened to discuss Public Health's Regional Countermeasures Plan and organizational expectations related to drug dispensing and mass vaccination. Efforts have also started to develop strategies and priorities for caching and supply management of key pharmaceuticals that may be needed during a disaster and potentially could be in short supply. The Coalition and Public Health are also working with local partners to improve regional response strategies for hosting, managing and deploying federal CHEMPACK resources.

hospital workshop takes care of kids

In September 2011, more than 100 participants from 18 hospitals in King, Pierce, Snohomish and Kittitas Counties attended a day-long pediatric workshop, hosted by Valley Medical Center and sponsored by the Coalition, Public Health and the Central Region Trauma Council. Pediatric clinicians led workshop participants through discussions of emergency triage of infants and children, and available techniques and tools to simplify management decisions to ensure accuracy and consistency. Hands-on exercises included triage of pediatric mock victims of trauma, clinical management decision-making using the length-based color-coding system and quiz games. According to evaluations, the workshop was a great success. A “second annual” workshop in September 2012 will expand engagement with pre-hospital and pediatric ambulatory care providers.

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BOMB CONFERENCE AND REGIONAL EXERCISE

The Seattle metropolitan area is a critical economic and transportation hub for both the Pacific Northwest and the United States, making our community a potential target of terrorism. With over 616,000 citizens and 55,000 businesses calling Seattle home, preparing for potential terrorist bombs and health impacts is a necessity. In November 2011, the Coalition and Public Health partnered with the Washington State Department of Health, and U.S. Centers for Disease Control and Prevention to host the Tale of Our Cities Conference on medical emergency management challenges created by bomb-based terrorism. The Coalition and local hospitals furthered preparedness efforts in the March 2012 regional exercise, by successfully testing a bomb-based terrorism scenario and surge capacity to accept 300 patients across the county. Participants also tested coordination with UW Harborview Medical Center as the Disaster Medical Control Center (DMCC), security plans, blood ordering, and redundant communication systems. The combination of the two events helped advance planning in our community by highlighting some critical gaps that need to be addressed in our local plans.

PARTNERSHIP TO ADDRESS THE PSYCHOLOGICAL IMPACTS OF DISASTERS

One of the most important – yet often neglected – consequences of disasters is the psychological impact on individuals and the community. The aftermath of a disaster can create stress on all community members, but can also have disproportionate impacts on children, emergency responders, and those who have experienced direct impacts of the disaster. We know that limited mental health resources will be available to meet the demand, so a regional disaster behavioral health plan is in development to better equip our community to deal with these issues. This year, the Coalition, the King County Mental Health, Chemical Abuse Dependancy Services Division, and Public Health completed the first phase of the regional plan. Elements include frameworks for mental health response coordination, disaster mental health triage, situational awareness on mental health impacts, and managing resources. In the year ahead, the Coalition, Public Health, healthcare and community partners will work toward acquiring PsySTART, an innovative tool for rapid mental health triage and incident management. We are at the beginning stages of what could be one of our most important regional capabilities.

Recovery from the Japan earthquakes reminds us that support for psychological impacts is crucial during and after disasters to promote hope and healing for victims and responders.

DID YOU KNOW?

The Coalition hosts two regional exercises each year to test coordination and medical response capabilities.

2009

February – The Coalition works with King County Metro to create Metro Snow Route 90, a snow-only bus route for staff and patient transportation to healthcare facilities in First Hill.

2009

January – Hospice and Palliative care providers sign onto a King County regional mutual aid agreement.

2009

April – The H1N1 pandemic occurs. Public Health confirms 615 hospitalized and 2 deceased people infected with H1N1. HMAC activates for 15 days to support resource requests and to provide the region with information on the impacts to healthcare.

2009

May – The Coalition launches regional nursing home evacuation planning with long-term care providers through funding from the Department of Homeland Security Regional Catastrophic Preparedness Grant Program.
COLLABORATION AWARD WINNERS
CELEBRATING OUR VERY BEST

EXCELLENCE IN COLLABORATION AWARD
TRANSFUSION SERVICES EMERGENCY PLANNING GROUP

LEAD: CASSIE GLECKLER, SUPERVISOR, PUGET SOUND BLOOD CENTER

Blood transfusion services are critical in major disasters when hundreds or thousands of patients may be injured. During a disaster the Puget Sound Blood Center (PSBC) and local hospitals will need to coordinate closely on blood inventory and blood product orders to ensure that patients receive the critical blood resources that they need.

This year, the PSBC, local hospital transfusion services representatives, and emergency management partners launched a collaborative planning initiative to tackle these challenges. The group outlined processes and guidelines for coordination of these activities in emergency situations, particularly when normal communication and blood ordering systems are disrupted.

Through this collaboration, the PSBC and local hospitals developed new standardized tools and communication strategies to strengthen the blood management in King County. These strategies were exercised in two drills this year and the group has identified future improvements to sustain coordination of the blood supply in an emergency. This collaborative undertaking has engaged 16 hospitals and partners, and reflects an important effort that will support blood continuity during a disaster.

COLLABORATION AWARDEES:
Auburn Regional Medical Center
Dynacare Laboratories
EvergreenHealth
Highline Medical Center
Overlake Hospital Medical Center
Puget Sound Blood Center
Seattle Cancer Care Alliance
Seattle Children’s Hospital
Swedish Medical Center
U.S. Department of Veterans Affairs
UW Harborview Medical Center
UW Medical Center
UW Northwest Hospital & Medical Center
UW Valley Medical Center
Virginia Mason Hospital & Medical Center

EXCELLENCE IN INNOVATION AWARD
TIMBER RIDGE AT TALUS – “FIRES, EARTHQUAKES: SAFETY IS OUR GOAL!”

Timber Ridge at Talus, a continuing care retirement community that serves many physically or cognitively challenged seniors, earns this year’s innovation award for their creative fire and earthquake survival training for staff and residents of nursing and retirement communities. Timber Ridge staff and residents joined forces with Eastside Fire and Rescue and Station 72 to script, film, and produce a three-part DVD training series and facilitator toolkit.

Highlights of the three 30-minute videos include R-A-C-E procedures, the Drop, Cover and Hold technique, fire extinguisher demonstration, and a defend in place strategy. The fire-awareness video addresses three scenarios: fires in the health center, kitchen, and independent living community. The videos provide general safety guidelines with time for facilitators to pause the video to discuss procedures specific to the facility. In Timber Ridge’s training delivery, the fire department added realism by using a smoke machine to imitate a fire in a health center room as staff demonstrated correct procedures, and a structural engineer reviewed building integrity.

IN MEMORIAM: DR. WILLIAM ROBERTSON

In November 2011, we lost a dear member of our healthcare community, Dr. William Robertson, pediatrician and founder of the Washington Poison Center. Dr. Robertson supported the Coalition as an active participant of the hospital preparedness committee, and was the legendary advocate of “Mr. Yuk,” now the universal poison warning symbol. Dr. Robertson will be remembered for his invaluable contributions, within and beyond King County. We are grateful to him for making our community healthier and safer, and will miss him tremendously.

LEARN MORE ABOUT THESE AWARD WINNERS AND THEIR WORK ON THE COALITION WEBSITE:
www.kingcountyhealthcarecoalition.org

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SUPPORTING OUR PARTNERS

The King County Healthcare Coalition is proud to support our partners in the development, dissemination, and implementation of plans for regional response. Examples of projects we support include:

ALTERNATE CARE FACILITIES

Led by Public Health with support from the Coalition, fire/EMS, emergency management, and healthcare

An ACF is a non-medical facility repurposed to deliver healthcare during a disaster. It can be activated to receive patients from healthcare evacuations, and shelter people with medical needs. Capabilities include acute care, palliative care, and medication dispensing.

CHEMPACK

Led by Public Health with support from the Coalition, emergency management, fire/EMS, Harborview Medical Center as DMCC, and healthcare

Terrorist attacks may include the use of chemical weapons. Our health department and select hospitals participate in the federal CHEMPACK program to manage and store nerve agent antidotes locally so they are immediately accessible for the treatment of affected citizens.

FAMILY ASSISTANCE CENTER

Led by Public Health and the Medical Examiner with support from the Coalition, fire/EMS, the American Red Cross, and law enforcement

Reunifying families and identifying deceased loved ones are two of the most important and difficult challenges after disasters. The Family Assistance Center capability can be activated to aid the process and provides a place for families to reunite or mourn.

WATRAC

Co-Led by Public Health and the Washington State Department of Health, with support from healthcare, fire/EMS, and healthcare coalitions throughout Washington State

WATrac is the emergency alert and communications tool used by healthcare organizations across Washington State for disaster response. Regional status screens, online chat rooms, and data-tracking features in WATrac provide essential support for multi-agency coordination.

REGIONAL CALL CENTER

Led by Public Health with support from the Coalition and the Washington Poison Center

The regional call center receives and answers questions from the general public relating to health safety concerns and provides nurse triage when necessary. Call center staff provide guidance on how citizens can access resources such as food and water, medical resources, and medical shelter.

2010
October – Sound Shake 2010 engages Coalition participants and over 25 other public and private agencies to exercise joint planning for an earthquake scenario.

2011
June – The Coalition partners with the Foundation for Healthcare Quality, a 501(c)(3) organization, to launch a sponsorship campaign to support Coalition programs.

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2011
July – The Coalition hosts the decisive “Crisis Standards of Care in our Community, Establishing the Path Forward” workshop on regional medical surge planning, which establishes the need for a King County Disaster Clinical Advisory Committee and regional medical surge plan.

2010
October – Sound Shake 2010 engages Coalition participants and over 25 other public and private agencies to exercise joint planning for an earthquake scenario.

2010
November – The Coalition and the King County Mental Health and Chemical Abuse and Dependency Services (MHCADS) Division partner to coordinate mental health response during disasters, awareness on mental health impacts, and resource management.

2010
December – The Coalition is hosting over 20 trainings and exercises each year, including business resiliency, facility evacuation, H1N1 briefings, and vaccine management.

2011
June – Ambulatory care providers approve the King County Ambulatory Care Emergency Response Plan.

2011
June – In-home services providers approve the King County In-Home Services Response Plan.

2011
June – The Coalition partners with the Foundation for Healthcare Quality, a 501(c)(3) organization, to launch a sponsorship campaign to support Coalition programs.
The King County Healthcare Coalition supports healthcare organizations in the improvement cycle of planning, training and exercising by convening experts, facilitating learning opportunities, and developing user-friendly tools for implementation.

2011-2012 TRAININGS AND EXERCISES

- Advanced Hazmat Life Support
- Ambulatory Care Mass Fatality Management Workshop
- Business Resiliency Workshops
- Coalition Forum: Emergency Water Planning
- Coalition Forum: Radiation Planning
- Coalition Forum: Tale of Our Cities Terrorism Conference
- Coalition Orientations
- Crisis Standards of Care Workshop
- Distribution of Vaccines & Medications During a Disaster
- Harborview Medical Control Center Seminar
- Healthcare Mass Fatality Workshop
- Nursing Home Evacuation Plan Tabletop Exercise & Workshop
- Pediatric Disaster Workshop
- Regional Coordination of Pharmaceuticals in Disasters
- WATrac

In 2011-2012, over 800 individuals engaged in Coalition-sponsored trainings and exercises. 98% of participants reported that Coalition trainings were valuable to their organizations.

PROGRAM OPERATIONS

The Coalition’s mission to build regional response capabilities, improve operational efficiencies, and strengthen our collaborative network continued to drive program activities in 2011-2012.

2011
- November – The Coalition partners with the CDC, Public Health and Seattle & King County to host “Tale of Our Cities,” a conference to prepare for terrorist use of explosives.
- December – A week-long wind, snow, and ice storm triggers power outages to one-third of King County homes and over two dozen healthcare facilities, including a hospital, clinics, nursing boarding homes, a dialysis center, and pharmacies. HMAC activates for five days to serve the needs of healthcare, conduct welfare checks, and support a long-term care facility evacuation.

2012
- January – A week-long wind, snow, and ice storm triggers power outages to one-third of King County homes and over two dozen healthcare facilities, including a hospital, clinics, nursing boarding homes, a dialysis center, and pharmacies. HMAC activates for five days to serve the needs of healthcare, conduct welfare checks, and support a long-term care facility evacuation.
- February – The Coalition forms the National Disaster Clinical Advisory Committee (DCAC) to provide clinical expertise for regional plans and disaster response.
- March – The Coalition’s Long-Term Care Steering Committee transitions into a response team as part of the King County HMCEC response structure.
- May – The Coalition is honored with the U.S. Assistant Secretary for Preparedness and Response Security Catastrophic Grant.

In previous years, our mission has been 100% funded by government grants. Our Executive Council and Coalition staff embarked on a new initiative this year to diversify Coalition funding sources by launching a sponsorship opportunity through a partnership with the Foundation for Healthcare Quality, a 501(c)(3) organization. Thanks to our generous sponsors, including many healthcare participants and community partners, our inaugural sponsorship program raised $146,500 in contributions, accounting for 11% of our total annual revenue. The Coalition also received grants from the Johns Hopkins School of Public Health and the Department of Homeland Security, and continues to receive the majority of our funds (86%) through a grant from the U.S. Assistant Secretary for Preparedness and Response.

In 2011-2012, 86% of Coalition expenses were dedicated to program services, such as regional planning, training, exercise, and evaluation activities. Program support, such as program management, program communications, development, and general expenses accounted for 21% funds for special projects, such as our regional contact state-wide WATrac efforts, and strategic equipment purchases for CHEMPACK and disaster communication systems accounted for 15%.

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FINANCIAL SPONSORSHIP

THANK YOU TO OUR SPONSORS

We are grateful and proud to recognize the generous financial sponsorships from Coalition healthcare participants and community partners. Each of these organizations has made a financial commitment to support coordinated planning, training, exercise, and response activities offered by the Coalition. Sponsor contributions ensure that our local healthcare community will be better able to deliver medical care to those in need when disaster strikes.

$25,000+ SPONSORS: Providence Heritage House

$10,000+ SPONSORS: Providence Hospice of Seattle

$5,000+ SPONSORS: Providence Infusion and Pharmacy Services

$1,000+ SPONSORS: Providence Mt. St. Vincent

UP TO $1,000 SPONSORS: Providence Marianwood

Providence Healthcare Partners

Providence Health Care

Proamine Children’s Hospital

Providence Children’s Home

ProHealth

Sea Cliff Community Health Centers

Sea Salt Home Health Care

Seattle Cancer Care Alliance

Seattle Children’s Hospital

Seattle Children’s Home

Seattle Counseling Service

Seattle Indian Health Board

Seattle AIDS Community Health Centers

Seattle Medical & Rehabilitation Services

Seattle Mental Health

Shoreline Health and Rehabilitation Services

Sierra Nevada Tribal Health Services

Skagit Valley Hospital

Solid Ground

Sound Health & Rehabilitation Services

SoundCare Home Services

Southwest Youth & Family Services

Spain Adult Family Home

Special Care Agency, Inc.

Snohomish Central Pine Lake

Springs at Pacific Regent Nursing Home

StreetHealth

Summit at First Hill Boarding Home

Sunrise Adult Family Home

Sunrise Haven

Sunrise of Mercer Island Boarding Home

Swedish Home Health & Hospice

Swedish Medical Center

Swedish Physicians Division

Tollstot Center for Rehabilitation & Healthcare

Tremont at Skyline

The ALS Assocation

The Compass Center

The Duck Pond Group

The Great Ships; Adult Family Home

The Hearthstone

The Kennedy

The Lutheran Home of Greater Seattle

The Summit at First Hill

Therapeutic Health Services

Touraine Syndrome Association

Transitional Resource

U.S. HealthWorks Medical Group

UVU Madisonville Medical Center

UVU Medicine

UVU Neighborhood Clinics

UVU Northwest Hospital & Medical Center

UVU Physicians Network

UVU Valley Medical Center

Valley Cities Counseling and Consultation

Washington Community Care Center

Washington Island Youth & Family Services

Veterans Administration Hospital

Vista Maple Place

Vineyard at Bothell Landing Boarding Home

Virginia Mason Hospital & Medical Center

Vision House - Visiting Nurses Services of the Northwest

Vista Healthcare, Inc.

Washington Cancer Care Center

Washington Center for Comprehensive Rehabilitation

Washington Junior Center

Weatherby on Nail Lake Mendon

Wellness Group Home

Weltzheimer Home Inc.

Whiskey Home Health Center

Wilma Gayden Adult Family Home

Woodinville Pediatrics

Women of the Wilderness

Youth Eastside Services

Zienni Services, Inc.

“Young the Coalition builds capabilities that cannot be achieved by a standalone system. Together we can achieve so much more and better serve our community during disasters.”

Anita Geving, Chief Operating Officer, The Polyclinic
THANK YOU!

One of the reasons our community has been so successful in building and maintaining the Coalition is that we are able to leverage the expertise of our healthcare organizations, public health, emergency management, fire/EMS, and critical infrastructure partners. Thank you to all of those individuals and organizations who have contributed their time and expertise to our committees and projects. Your involvement has had a direct impact on our collective success.

2011-2012 COALITION COMMITTEES:
- Ambulatory / Ancillary Care Providers Committee
- Disaster Clinical Advisory Committee
- Hospital Preparedness Committee
- Hospital Strategy Workgroup
- In-Home Service Providers Committee
- Nursing Home Steering Committee
- Pediatric Committee and Taskforce

2011-2012 COALITION REGIONAL PROJECTS:
- Coalition financial sustainability
- Crisis standards of care
- Disaster mental and behavioral health planning
- Dispensing medications and vaccines
- Fatality management planning
- Health system coordination
- Healthcare accreditation support
- Healthcare business resiliency
- Healthcare facility evacuation
- King County WATrac implementation
- Medical surge
- Patient movement and distribution
- Patient tracking
- Pediatric disaster response planning
- Redundant communications
- Resource management
- Trainings and exercises

OUR TEAM IN 2011-2012

COALITION STAFF:
- Cynthia Dold, MPH, MPP
  Coalition Program Manager
- Lydia Bristol
  Administrator/Business Manager
- Jennifer Cho, MS
  Development Manager
- Sarah Cox
  Administrative Staff Support
- Kay Koelsmay, MD
  Clinical Planner
- Onora Lien, MA
  Health Systems Response Planner
- Adam Lin
  Workstudy
- Rebecca Liu
  Planning Support Manager
- Danica Little
  Training and Exercise Manager

The work of the Coalition would not be possible without the ongoing collaboration and support of leadership and staff from the following departments at Public Health – Seattle & King County:
- Communicable Disease
- Epidemiology and Immunization
- Communications
- Community Health Services
- Emergency Preparedness
- Emergency Medical Services
- Environmental Health
- Office of the Director
- Medical Examiner

The Coalition sponsorship program is made possible through our partnership with The Foundation for Healthcare Quality, a 501(c)(3) organization.

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TO LEARN MORE about the King County Healthcare Coalition’s participants, programs, and sponsors, please visit our website at www.kingcountyhealthcarecoalition.org

Or contact:

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