



Expanded Coalition Counties: July 1, 2018

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The Northwest Healthcare Response Network, which now serves King, Pierce and Kitsap counties, will begin serving most of Western Washington on July 1.

The state Department of Health made this decision after more than a year of engaging with stakeholders, including the Network and health care providers. The Eastern Washington coalitions are also combining, which means that the state will be served by two, instead of six, healthcare coalitions.

Our goal is to better support Western Washington with a strong, resilient healthcare system that fosters local relationships and can coordinate beyond local boundaries.

Our mission hasn't changed. We will continue to work collaboratively to prepare for, respond to and recover from emergencies. Our work helps keep hospitals and other healthcare facilities open and operating during and after disasters.

The reconfiguration of coalitions doesn't change the fundamental structures of disaster response. What it does do is help bring emergency response and healthcare together in new ways.

We begin with listening.

The changes to the coalition boundaries is effective July 1, but we've already started visiting leaders in our new service area. Our plan is to work with you to meet the needs of the community and the region, now and in the future. It's a perpetual cycle of improvement based on learning from each other to meet emerging needs.

Here are the answers to some FAQs, but don't feel limited: Please call the Network at 425-988-2898 or email info@nwhrn.org with questions. Especially if you are in a community new to the Network, we look forward to speaking with you and introducing you to our staff.

What prompted this change?

Healthcare emergency preparedness work has always depended on federal funding, and the federal funding approach and requirements for healthcare coalitions have significantly changed. The needs of healthcare systems and organizations are also changing. The Washington State Department of Health determined that changes to the healthcare coalition structure were necessary to meet federal program requirements for coalition response capabilities and the geographic scope of patient movement patterns across the state.

The Department of Health believes this new structure will be both more effective (developing and sustaining response capability, quicker spreading of best practices across the state, and greater leverage of existing expertise) and more efficient (by concentrating financial resources to achieve greater results, and reducing duplicative administrative functions).

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When was the decision to change the structure of healthcare coalitions announced?

The Department of Health announced the change to coalitions on March 8, 2018. The decision was made by the Secretary of Health, based on the recommendations of a statewide workgroup.

What counties will become part of the Northwest Healthcare Response Network (the Western Washington coalition)?

King, Pierce and Kitsap counties are in the Network now. In July, they will be joined by Clallam, Grays Harbor, Jefferson, Island, Lewis, Mason, Pacific, San Juan, Skagit, Snohomish, Thurston, and Whatcom counties.

How will the Network foster local relationships?

Local relationships among emergency responders, public health and clinical healthcare providers are the most essential component of effective disaster response. To maintain and foster local relationships, the coalition will have four districts:

- Central: King, Pierce
- North: Island, San Juan, Skagit, Snohomish, Whatcom
- Northwest: Clallam, Jefferson, Kitsap
- West: Grays Harbor, Lewis, Mason, Pacific, Thurston

Will there be changes to the Network office location and staff?

The Network's main office will remain in Tukwila, Washington. Staff will be added to support at the local district level to address local interests, ensure continuity, successful integration and coordination of our coalition efforts.

Will the health departments in each county continue to coordinate and support regional healthcare response during disasters?

Yes. Local health departments are still the lead for countywide health and medical planning and response within their counties (also sometimes known as Emergency Support Function 8). The Network helps them coordinate with healthcare providers so that there is good sharing of information and resources, especially across county lines. In a crisis, the Network will work with the local and state health departments to support each county's health and medical incident management structure.

What are the benefits of the new structure?

The restructure will not replace or interfere with local relationships between healthcare, public health departments and emergency management organizations. But because disasters rarely respect county borders, a single coalition will be better able to do regional and cross-jurisdictional planning. The benefits of this approach include:

- Smaller communities will have access to more planning, training and exercises.
- Standardized resources, plans and protocols will make it easier to deploy people to where trouble is.
- Data from healthcare organizations can be more easily gathered and shared (for example, monitoring flu-related patient surges and resource needs).
- New opportunities emerge for health departments to collaborate with (and in support of) healthcare.

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What are the challenges?

We want to do everything we can to make it an easy transition, and to be ready to respond to a disaster as quickly as possible. While many organizations are familiar with us, there are a lot of new stakeholders to inform and engage as well, including public health departments, EMS, and healthcare providers.

The good news is that while the service-area change is effective July 1, we plan to spend the next year exploring other opportunities to improve coordination with healthcare. While some aspects of the work will adapt easily to a regional response, we also want to maintain and improve the local practices and relationships that have been working.

Will the Network's board change?

Yes, but not right away. Changes to the governance structure take time and we want to learn more about needs of the new organizations and communities. In the meantime, representatives from the new counties will be advising the board and joining the program committees who are charged with ensuring that the Network is meeting the needs of our preparedness and healthcare partners. [Click here to learn more about the staff or current board of directors.](#)

How is the Network funded and how does the Network's membership model work for the new counties?

The Network will continue to be funded through a contract with the Washington State Department of Health, primarily with federal funding from the Assistant Secretary of Preparedness and Response Hospital Preparedness Program. However, the Network also relies on healthcare memberships, corporate sponsorships and other philanthropic and earned revenue to fulfill its broad mission. Organizations choose to join the Network as a member in order to support that mission and access additional services. [Click here to learn more about the value of membership.](#)

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