



The National Connection for Local Public Health

The Hospital Preparedness Program (HPP), administered by The Office of the Assistant Secretary for Preparedness and Response (ASPR), provides grant funding to States to support sustainable community healthcare coalitions (HCCs) that collaborate on emergency planning, resource sharing during disasters, and meeting the health and medical needs of their communities. Through participation in various meetings and focus groups, HPP awardees have informed ASPR that HCCs would like to engage in peer-to-peer learning, especially in the topic areas of governance models, sustainability, and the role HCCs have during a response. As a result, ASPR, The Association of State and Territorial Health Officials (ASTHO), and the National Association of County & City Health Officials (NACCHO) collaborated on the creation of a September 4, 2014 webinar highlighting the promising governance and sustainability practices of six HCCs titled: *Healthcare Coalitions: Governance and Sustainability*.

Recognizing that local health departments (LHDs) and communities vary throughout the United States and that HCCs are in various stages of development, the webinar features healthcare coalitions that are diverse in their governance models, geography, and more. The matrix below, as well as the frequently asked questions document, provide a snap shot of the information provided during this presentation. It is intended that this chart will serve as a tool allowing for the comparison of different healthcare coalition sustainability models and the identification of healthcare coalition elements that may be considered for implementation of coalition sustainability practices in your community.

	Local Coalitions		State Coalition Networks				
	Northwest Healthcare Response Network (NWHRN)	Healthcare Emergency Response Coalition (HERC) of Palm Beach County	Bureau of EMS and Preparedness, Utah Department of Health	Michigan Department of Community Health	Texas Department of State Health Services	Pennsylvania Department of Health	
Jurisdiction	King and Pierce Counties, Washington	Palm Beach County, Florida	Utah	Michigan	Texas	Pennsylvania	
Number of Coalitions	1	1	7	8	22	9	
Population Characteristics	Urban	Urban	75% of population in urban setting, remainder in rural and frontier settings	Vary from rural to large urban	Vary from rural to large urban	Vary from rural to large urban	
Type of Organization	Independent Non-Profit 501(c)(3)	Independent Non-Profit 501(c)(3) <sup>i</sup>	Hosted by Local Health Departments (LHDs)	Quasi-Governmental structure <sup>ii</sup>	<ul> <li>20 Healthcare Coalitions (HCCs) are Non-Profit 501(c)(3)</li> <li>2 HCCs are hosted by LHDs</li> </ul>	Coalitions mandated by PA Act 227 and were developed from nine regional task forces created in 1998	
Documents Necessary for Coalition Creation	<ul> <li>Articles of Incorporation</li> <li>Business Plan</li> <li>Bylaws</li> </ul>	Memorandum of Agreement	<ul> <li>Base Response Plan</li> <li>Bylaws</li> <li>Charters</li> <li>Communication Plans</li> <li>Signed Memorandums of Understanding (MOU)</li> <li>Resource Management Plan</li> </ul>	<ul> <li>Bylaws</li> <li>Michigan Emergency Management Plan</li> <li>Michigan Medical Emergency Plan</li> <li>Regional Medical Coordination Center text written into State Mass Casualty Incident Protocol</li> </ul>	<ul> <li>All HCCs</li> <li>Lead agencies require successful proposal to host</li> <li>Sub award/Sub contract agreements for funding</li> <li>501(c)(3) HCCs</li> <li>Membership charters</li> <li>By-laws</li> <li>LHD Hosted HCCs</li> <li>Governance charters</li> <li>By-laws</li> </ul>	<ul> <li>Bylaws</li> <li>Regional and cross- regional MOUs</li> </ul>	
Organizational Structural Elements	<ul> <li>Board of Directors</li> <li>Executive Director</li> <li>Various Staff</li> <li>Contract positions such as: legal, IT, and accounting</li> </ul>	<ul> <li>HERC Representative on PBCMSS Board</li> <li>PBCMSS provided staff, including: Administration, Accounting, and Audit Support</li> </ul>	<ul> <li>HCC Level</li> <li>1/2, 2/3, or Full-Time Employee (FTE)</li> <li>Administrative Assistant</li> </ul>	State Level Planning Board Advisory Committee Medical Control Authority Fiduciary HCC Level Part-time Medical Director Regional and Assistant Regional Coordinators	Operational activities are contracted to lead agencies by the State	<ul> <li>Organizational structures vary</li> <li>Members of HCCs are volunteers</li> </ul>	

Funding Model	<ul> <li>Federal funding</li> <li>Membership dues</li> <li>Charitable giving</li> <li>Fee-for-service</li> <li>Event revenue</li> </ul>	<ul> <li>Membership dues</li> <li>Vendor presentations</li> <li>Publications</li> <li>Foundational support</li> <li>County Commissioners</li> <li>In-kind support</li> </ul>	<ul> <li>40% of Hospital Preparedness Program (HPP) funding goes towards coalition support</li> <li>Regional fund for cache, training, and exercise</li> </ul>	<ul> <li>100% funded by state</li> <li>Allocations determined by Planning Board</li> </ul>	<ul> <li>100% funded by state. About 70-80% through HPP funding.</li> <li>Allocations determined by formula developed by state</li> </ul>	Transitioning from individual healthcare facility funding model to regional coalition funding model
Promising Practices	<ul> <li>Consider different business models</li> <li>Shape governance models through solid financial planning</li> <li>Consider non-federal funding for the management of operations</li> <li>Demonstrate HCC value and ROI to encourage further financial contributions</li> <li>Utilize legal and fiscal experts</li> </ul>	Use multiple funding streams to ensure financial health, including: • Membership dues • Vendor presentations • Publications • Foundational support • County Commissioner support • In-kind support	<ul> <li>Leverage existing champions in communities to create HCC buy-in</li> <li>Customize projects to the community served</li> <li>Demonstrate HCC value to responder agencies through annual exercises as well as through coordinated local, inter-regional, state, and interstate level planning initiatives</li> </ul>	Consider transitioning to 501(c)(3) status to reduce federal income taxation and allow for the acceptance of tax- deductible charitable donations and other funding	Use HCCs as the basis for state Emergency Medical Task Force (EMTF) teams to demonstrate the value of coalitions to the community	<ul> <li>Consider transition to 501(c)(3) to address sustainability concerns</li> <li>Develop cross-regional statewide MOUs</li> </ul>
Available Resources	<ul> <li><u>Coalition Website</u></li> <li><u>Facebook Page</u></li> </ul>	Available by Request - Contact John James, Administrative Coordinator MOU Operational Guidelines/Bylaws Annual Community Report Marketing Postcard Protocols Communications Templates Training Needs Survey Teller's Committee Summary Form HERC Book: "Establishing a Healthcare Emergency Response Coalition"	<ul> <li>Available by Request</li> <li>Regional Coalition Workbook</li> <li>Priority Resource Element Checklist</li> <li>Yearly Top-level goals</li> <li>Shared Regional equipment, training, exercise budget</li> <li>Sustainability, strategic, and satisfaction assessments</li> </ul>	<ul> <li>MI Essential Elements Information Template</li> <li>MI Evacuation Guidelines</li> <li>Patient Tracking Decision Tree</li> <li>HCC Bylaws Template</li> <li>Regional HCC Operational Guidelines Template</li> <li>Available by Request</li> <li>Mass Casualty Incident Burn Surge Plan</li> </ul>	<ul> <li>Available by Request</li> <li>HCC Contract Templates</li> <li>Sample HCC Charters and By-laws</li> <li>Sample Membership sub-agreements</li> <li>HPP EMTF Overview</li> </ul>	Documents have not yet been made available to public

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 <sup>&</sup>lt;sup>i</sup> HERC is a program of Palm Beach County Medical Society Services (PBCMSS)
 <sup>ii</sup> Transitioning to a Non-Profit 501(c)(3) in 2015