Strategic Plan (2022-2024)

Implementation Date: March 4, 2022



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Background

The Vermont Healthcare Emergency Preparedness Coalition (VHEPC was established in 2007 and is the only health care coalition (HCC) in the state of Vermont. Health care coalitions are defined as a group of individual health care and response organizations [e.g., acute care hospitals, emergency medical services (EMS), emergency management agencies (EMA), public health agencies (PHA), etc.] in a defined geographic location. HCCs play a critical role in developing health care delivery system preparedness and response capabilities. The Hospital Preparedness Program (HPP), a division of the federal Office of the Assistant Secretary for Preparedness and Response (ASPR), enables the health care delivery system to save lives during emergencies and disaster events that exceed the day-to-day capacity and capability of existing health and emergency response systems through the development of Health Care Coalitions (HCCs).¹

There has been tremendous change and growth of the VHEPC in the past few years and in FY 2021-2022, VHEPC Executive Committee supported the development of a 3-Year Strategic Plan. The purpose of strategic planning is to set overall goals and to develop a plan to achieve them. *Strategic planning involves stepping back from the day-to-day operations and asking where the Coalition is headed and what its priorities should be*. Clearly knowing our priorities will help the Coalition to focus our efforts in areas that will meet our mission.

Healthcare Coalition Mission

Our Mission: The Vermont Healthcare Emergency Preparedness Coalition (VHEPC) is a multidisciplinary partnership that collaborates with its members, stakeholders, and surrounding communities to improve and expand emergency preparedness, response, and recovery capabilities.

Our Tagline: We are better prepared when we prepare together

Why does VHEPC Exist? VHEPC exists to be a multidisciplinary consortium of professionals who work together to plan, train and exercise so that we can be better prepared to respond to emergencies resulting from natural, human, and technological hazards that may impact or activate the healthcare system. We bring together healthcare partners to help solve issues that we might not be able to solve on our own.

Our Members: The VHEPC is an inclusive body open to all organizations and entities that provide health services in the fourteen (14) counties of Vermont. Coalition membership is comprised of healthcare organizations, emergency medical services providers, emergency management agencies, public health professionals, jurisdictional entities, business, and volunteer organizations within the State of Vermont. Coalition members will support health and medical response and recovery activities in the parameters of statutory authority, jurisdictional and/or organizational Emergency Operations Plans and as defined in within the principles of emergency management.

Strategic Plan Purpose

The intent of this strategic planning process is to clarify the Coalition's priorities and promote coordination of the health and medical components of preparedness, response, and recovery. This plan will identify clear paths forward to grow and strengthen the capabilities and capacity of the Coalition.

This strategic plan takes a differentiation strategy approach, delivering products or services that are distinct in the minds of consumers (coalition members), focusing on **four (4) strategic priorities** identified throughout the planning process to provide distinct support areas for the VHEPC.

The strategic plan is specifically designed to establish the role and value of the VHEPC among health care providers within Vermont and to set a plan for sustained operation in the coming years. This strategic plan as set forth is considered a living document, to be evaluated and updated at least annually and to be responsive to the dynamic environment of emergency preparedness in Vermont.

VHEPC engaged in the following processes to develop this 3-Year Strategic Plan.

Strategic Planning Process

The VHEPC Executive Committee championed the planning process and established a strategic planning team to help guide the process and engage relevant stakeholders. *For a full list of participating stakeholders in each of the planning process steps, please see <u>Appendix A.</u> The VHEPC Readiness and Response Coordinator led overall project management, meeting facilitation and plan writing. Over the course of several weeks, an environmental scan was conducted, and three planning meetings were facilitated as means of discovery and planning related to the strategic plan development.*

Strategic Planning Meetings

Strategic Planning Kick Off Meeting #1, 11/4/2021

Prior to this meeting, strategic planning member survey was drafted. During this initial meeting, the overall goals and outcomes of the Strategic Plan Project were identified, and the planning team was confirmed. The proposed project plan for the VHEPC Strategic Plan Development and the draft survey were reviewed. After the meeting, VHEPC Readiness and Response Coordinators utilized feedback from this meeting to revise the survey, and the revised survey was approved by the planning team. The survey was then distributed to coalition members.

Distribution of Strategic Planning Survey

The intent of the online survey was multi-fold: to obtain information regarding current internal and external factors, identify the strengths, weaknesses, opportunities, and threats (SWOT) as they relate to the impact on the Coalition's operations and growth, and to ascertain Coalition

members feedback on the Coalition's purpose as well as identifying what they felt were the top 3 priorities moving forward. The results of the survey formed the foundation of this plan and set the stage for the ideas and insights generated during the following strategic planning meetings.

The survey was open from Monday 11/15/2021 to Monday 12/6/2021; 3 reminder emails were sent and VHEPC received a total of 11 responses. Responses were received from all 4 core member types as defined by ASPR (EM, EMS, Hospitals, and PH).

For First Round Survey	
Behavioral/Mental Health	1
Coalition Coordinator	2
Emergency Management	1
Home Health/Hospice	1
Hospital	2
Hospital Emergency Medical Services Emergency Management Behavioral Health/Mental Health	1
Public Health	2
State Healthcare	
Associations	1
Total	11

Response by Healthcare Sector For First Round Survey

Response by Healthcare Sector For Second Round Survey

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During the second strategic planning meeting held on 12/9/2021, the Executive Committee felt it necessary to re-open the survey to allow for more responses. The survey was reopened for an additional two weeks and a total of 19 responses were received.

Strategic Planning Meeting #2, 12/9/2021

Prior to this meeting, the survey results were analyzed and grouped by survey question. During this meeting survey results were preliminary reviewed, but due to both low participant engagement from the Strategic Planning team and overall responses received from the survey, the VHEPC Executive Committee decided that it was necessary to reopen the survey and hold an additional planning meeting to complete the environmental scan and SWOT activities.

Strategic Planning Meeting #3, 1/7/2022

During this meeting, the Executive Committee and Strategic Planning Team worked through each of the questions to validate the results and add additional feedback. Based on the validated survey results and input from the planning team, the content was then sorted by key findings in order to identify the top four (4) priorities and goals associated with achieving the priorities. The following action items were completed during this meeting:

- Reviewed and validated the proposed strategic priorities
- Reviewed and confirmed the proposed goals to achieve strategic priorities
- Brainstormed actionable tasks that will make progress towards goals
- Conducted Initial Ranking of Tasks (short-term/Year 1, mid-term/Year 2, long-term/Year 3)

Please see <u>Appendix B</u> for a list of the Environmental Scan questions and answers Please see <u>Appendix C</u> for the SWOT Analysis.

Development of Strategic Plan

Once the strategic planning meetings were complete, VHEPC Readiness and Response Coordinators completed the initial ranking of tasks and sent to the Executive Committee and Strategic Planning Team for additional input. VHEPC Readiness and Response Coordinators compiled all of the concepts and tasks into a finalized Strategic Plan outlining the action items for implementation over the next three years.

Plan Maintenance

This three (3)-year strategic plan is considered a living document, to be evaluated and updated at least annually in collaboration with the VHEPC Executive Committee. The VHEPC Readiness and Response Coordinator is responsible for plan maintenance and tracking progress. See <u>Appendix F</u> for Work Plan-level tasks, VHEPC Staff assigned to the respective task, and the quarter(s) that the task is scheduled to be completed.

Strategic Priority Overview

Throughout the planning process common themes were identified that resulted in four (4) strategic priorities. These priorities were refined, goals were identified, and activities were associated with each of the goals. These priorities will further enhance regional partnerships and providing effective coordination with state and federal agencies.

- Strategic Priority One: Mission, Role and Responsibility Identification
- Strategic Priority Two: Membership Engagement and Recruitment
- Strategic Priority Three: Information Sharing
- Strategic Priority Four: Multi-Disciplinary Planning, Training and Exercising

The identified focus areas of the VHEPC over the next three (3) years will be as follows:

Year One (2022)	Year Two (2023)	Year Three (2024)
Focus: Defining the roles	Focus: Engaging partners	Focus: Full integration of
and responsibilities of the	and increasing VHEPC	VHEPC HCC members and
VHEPC Staff, Executive	membership through the	systems into preparedness
Committee and Clinical	development of a	and response efforts.
Advisors.	marketing plan.	
Focus: Identify roles and	Focus: Develop a	Focus: Developed a
responsibilities of the	formalized VHEPC	formalized VHEPC
VHEPC in preparedness	Communications Plan	Information Sharing Plan
and response and ensure		that aligns with State
these are communicated to	Focus: Support and	Partners to support a
and align with state	Design Multi-Disciplinary	common operating picture.
partner plans	Emergency Exercises.	
		Focus: Participate in Multi-
Focus: Defining and		Disciplinary Emergency
identifying internal and		Exercises designed by
external partners to		state partners.
increase VHEPC		
membership.		

ASPR Healthcare Preparedness and Response Capabilities

The following 2017 – 2022 ASPR Health Care Preparedness and Response Capabilities provide guidance for what the health care delivery system, including HCCs and their partners, must do to effectively prepare for and respond to emergencies that impact the public's health.

Capability 1. Foundation for Health Care and Medical Readiness

This capability focuses on a foundation for readiness built through engaged Health Care Coalitions, identification of community risks and needs, the development and coordination of coalition preparedness plans, the training of our health care workforce, and by working to ensure coalition efforts are sustainable.

Capability 2: Health Care and Medical Response Coordination

This capability focuses on the development of coordinated response plans, including the identification and use of information sharing platforms and procedures, determining the coordinated response and communication strategies, and ensuring the coordination of resource needs during emergencies.

Capability 3: Continuity of Health Care Service Delivery

This capability focuses on member agencies requirement to identify their essential functions and develop a continuity of operations plan for their organization. It also addresses the need to obtain non-personnel resources and ensure supply chain integrity while also protecting information and the health and safety of responders.

Capability 4: Medical Surge

This capability focuses on planning for and responding to a medical surge as the result of various incident types.

Each of the goals listed below are associated with a Health Care Preparedness and Response Capability to ensure the VHEPC is aligning its activities with the ASPR requirements.

Strategic Priority #1: Mission, Role and Responsibility Identification

For this strategic priority, the overall goal is to clarify and update the roles and responsibilities of VHEPC Staff and VHEPC Executive Committee as they pertain to daily operations (readiness) and a response. In doing so, it is the intent of the VHEPC to situate themselves within a response in a manner in which there is not a duplication of efforts by response partners and in a manner which is of value to the health care community.

	Strategic Priority #1: Mission, Role, and Responsibility Identification				
Priority	Goal	Strategies (High Level)	2022	2023	2024
1		Clearly identify roles and responsibilities of the Coalition in preparedness and response and ensure these are communicated to and align with VDH and VEM	х		
	Defined and Updated Roles and Responsibilities	Review and revise the roles of the coalition's Readiness and Response Coordinators.	Х		
		Review and revise the roles of the Executive Committee.	Х		
		Review and revise the roles of the Coalition's Clinical Advisors.	х		
		Update the coalition Mission/Vision statement to reflect the actual roles and responsibilities that have been identified.		х	
2	Improved VHEPC Leadership	Assess current executive committee member types- aim to include all 4 core member types/provide a recommendation to re-organize the exec committee org structure	х		
	and Staffing	Provide value to/compensate executive committee for their participation		Х	

Strategic Priority #2: Membership Engagement and Recruitment

VHEPC identified a critical need to proactively expand membership by engaging groups that have not traditionally been involved in coalition work. The goal of this strategic priority is to bring the VHEPC member organizations together to advance the work of the coalition through a more diverse membership pool.

	Strategic Priority #2: Membership Engagement and Recruitment				
Priority	Goal	Strategies (High Level)	2022	2023	2024
1	Recruitment of New	Develop a Membership Recruitment/Engagement Action Plan	х	х	
	Organizations	Targeted outreach to EMS and other partners not currently participating in VHEPC	Х	Х	
		Develop a VHEPC Marketing Plan	х		
2	Development of a Marketing Strategy for the Health Care	Increase online presence of VHEPC	x		
	Coalition	Clearly define the VHEPC benefits to be able to conduct outreach at various partner meetings		х	
3	Provide Networking Opportunities to Engage Non-core Member Types	Conduct Membership/Partner Survey	x		
4	Offer Grant Funding Opportunities for Members in Good Standing	Implement grant funding processes for members in good standing, focusing on planning, training, and exercises.	x		

Strategic Priority #3: Information Sharing

During times of readiness and response, information sharing can assist in increasing the state's capacity and capability to quickly share situational awareness needed to make informed decisions. Throughout this strategic planning process, both the VHEPC and the Executive Committee member organizations identified the need to formalize an information sharing process that is beneficial to all response partners, specifically as it relates to information the Coalition can acquire and share. The goal of this strategic priority is to assess the information sharing practices and responsibilities of the Coalition.

		Strategic Priority #3: Information Sharing		When		
Priority	iority Goal Strategies (High Level)					
1	Identification of Information	Develop formalized VHEPC information sharing protocol as part of the VHEPC Emergency Operations Plan			х	
1 Sharing Roles and Responsibilities	Develop formalized VHEPC communications plan as part of the VHEPC Preparedness Plan	Х				
		Partner with Radio Amateur Civil Emergency Services (RACES) to enhance RACES capabilities in Coalition Member facilities	Х			
2	Create a Common Operating Picture	Operationalize VHEPC Alert (the coalition's mass notification system)		х		
	Support Vermont Department of Health (VDH) in recruiting non-hos utilize EMResource.	Support Vermont Department of Health (VDH) in recruiting non-hospital partners to utilize EMResource.			х	
	Increase 3 Situational Awareness	Facilitate Healthcare Situational Awareness meetings, as needed.	Х	Х	Х	
3		Develop healthcare situation reports and disseminate, as needed.	х	х	x	

Strategic Priority #4: Multi-Disciplinary Planning, Training and Exercising

There was an overarching theme that a main purpose, priority, strength, and value to the Coalition member organizations is for the VHEPC to provide multi-disciplinary planning, training and exercises to enhance our preparedness and response capabilities. This priority directly aligns with the coalition mission.

	Strategic Priority #4: Planning, Training and Exercises					
Priority	iority Goal Strategies (High Level)					
		Provide one coalition-wide training per quarter	x	х	х	
	Offer and	Promote additional training opportunities	х	х	х	
1	Support Advanced Coalition Training	Provide opportunities for members to attend conferences	Х	Х	Х	
		Assist VDH in additional promotion of the Vermont Crisis Standards of Care			х	
		Revise the VHEPC Integrated Preparedness Plan (IPP) Annually	х	х	х	
	Support, Plan, and Participate in Multi-Disciplinary Emergency Exercises	Create yearly goals/objectives to ensure HPP grant requirements and coalition priorities for exercises are met	х	х	х	
2		Conduct Annual Medical Response and Surge Exercise (MRSE)	Х	Х	Х	
		Participate in State Partner exercises		Х	Х	

Appendix A: Strategic Planning Team

Last Name	First Name	Organization	Coalition Member Type	Job Role	Strategic Planning Role
Bynum	Jennifer	Vermont Healthcare Emergency Preparedness Coalition	Health Care Coalition	Readiness and Response Coordinator	Project Manager
Corbett	Pamela	Vermont Department of Health	Public Health	Public Health EP Specialist	Public Health Representative
Deasy	Chip	Vermont Emergency Management	Emergency Management	Deputy Director	EM Representative
Gosselin	Jason	Vermont Agency of Human Services	Agency of Human Services	Emergency Management Director	AHS Representative
Hammond	Kate	University of Vermont Medical Center	Hospital	Emergency Management Director	Hospital Representative & Current Coalition Leadership
Harrigan	Emma	Vermont Association of Hospital and Health Systems	Professional Association	Director of Policy Analysis and Development	Hospital Association Representative
Heilbrunn	Hannah	Vermont Healthcare Emergency Preparedness Coalition	Health Care Coalition	Readiness and Response Coordinator	Project Manager
Holway	Jim	Living Well Group	Long-Term Care	President/Chair of the Board	Long-Term Care Representative & Current Coalition Leadership
Moran	Will	Vermont EMS/Vermont Department of Health	Emergency Medical Services	EMS Chief	EMS Representative
Myrvang	Diana	Vermont Department of Health	Public Health	Public Health EP Specialist	Public Health Representative & Former Coalition Leadership

Last Name	First Name	Organization	Coalition Member Type	Job Role	Strategic Planning Role
Nelson	David	University of Vermont Medical Center	Hospital/ VHEPC Clinical Advisor	Pediatric Physician, VHEPC Clinical Advisor	Clinical Advisor Representative & Hospital Representative
Perry	Sarah	Vermont Department of Health	Public Health	HPP Coordinator	Public Health Representative
Rosenbauer	Erik	Brattleboro Retreat	Hospital	EP Coordinator, Past VHEPC Chair	Hospital Representative & Former Coalition Leadership
Smith	Lauren	Vermont Healthcare Emergency Preparedness Coalition	Health Care Coalition	Interim Assistant Readiness and Response Coordinator	Deputy Project Manager
Schwartzer	Ginny	All Clear Emergency Management Group	Consulting Agency	CEO, Owner	Project Support
Sexton	Ryan	Northeastern Vermont Regional Hospital	Hospital	ED Manager, Emergency Physician, VHEPC Clinical Advisor	Clinical Advisor Representative & Hospital Representative
Wesley	Deb	Addison County Home Health and Hospice	Home Health/Hospice	Executive Director	Home Health/Hospice Representative & Current Coalition Leadership

Appendix B: Environmental Scan

Question	Survey Results
In your own words, what is the purpose of the Coalition?	 Collaboration to Plan, Train and Exercise Across Disciplines To bring together different sectors of healthcare in response to an emergency or to plan for an emergency event. Their purpose is to develop State regional and local planning, preparedness, and communications around natural, human and technological activities that may impact or activate the healthcare system. exists to be a multidisciplinary consortium of professionals who work together to plan, train and exercise so that we can be better prepared to respond to a public health/healthcare emergency. Collaborate and Coordinate with the goal of creating a more resilient healthcare system for the benefit of our community. bring together key partners in the medical field that will help plan and exercise so they this partnership is better able to respond when an event happens. Information Sharing and Resource Coordination serves an important role in networking health care emergency preparedness staff across the State. Its purpose is also to share information and resources and to provide a framework for the VT Dept. of Health to accomplish HHS requests and deliverables. We bring together healthcare partners to help solve issues that we might not be able to solve on our own. Networking and Clearinghouse of Resources for Emergency Preparedness The coalition is the coordination tool used to bring emergency resources together in the community while providing experienced direction. serves as a clearing house of important resources that are valuable in planning for or managing actual emergency situations.
Who are the partners the Coalition works with?	 foster engagement of emergency preparedness processes and systems with all of the hospitals and other emergency response entities across VT and NH Respondents agreed that the Coalition works (or should work with) diverse partners including: Acute care hospitals (10) Behavioral Health services and organizations (7) Community Emergency Response Team/Medical Reserve Corps (9) Dialysis Centers and regional Centers for Medicare & Medicaid Services (CMS)-funded (4) EMS (including inter-facility and other non-EMS patient transport systems) (10) Emergency Management (9) Federal facilities (e.g., U.S. Department of Veterans Affairs Medical Centers, Indian Health Service facilities, military treatment facilities) (9) FQHCs (8) Local public safety agencies (e.g., awe nforcement and fire services) (5) Outpatient health care providers (8) Upublic health agencies (10) Public nealth agencies (10) Public nealth agencies (10) Schools and universities, including academic medical centers (3) Skilled nursing, nursing, and long-term care facilities Specialty patient referral centers (e.g., pediatric, burn, trauma, and psychiatric centers) (9) Support service providers (e.g., clinical laboratories, pharmacies, radiology, blood banks, poison control centers) (3) As of 12/8/2021, VHEPC had 48 unique Partner Organizations with signed member agreements As of 12/8/2021, VHEPC had 48 unique Partner Organizations with signed member agreements

Question	Survey Results
What services does the Coalition provide and how are those services valued by your community? Consider: Service lines and individual projects.	• provides critical trainings and exercises that many members do not do if they are not part of this coalition.
	 Funding for statewide projects and initiatives Shared Resources- equipment such as fit testing distribution point for grant funding to Coalition members, and a general resource for policies, processes and exercise information and documentation. provides funding opportunities for Coalition Members to continue to enhance preparedness and response capabilities. The Coalition has a funded staff (Coordinator, Fiscal Agent, Clinical Advisors) to ensure all grant deliverables are met, financials are managed appropriately, and that the coalition is collaborating with our clinical community.
	 Coordination and Preparedness Expertise coordination and expertise, each partner has limited resources, the coalition fills that void. Liaison to Department of Health; Support to Members [Coalition provides] a common point of contact for statewide emergency planning and communication.
	 Bringing Healthcare Partners Together for Information Sharing and Communications The best overall service that the coalition provides is that it provides a forum where partners can get together and collaborate on similar challenges each partner may be facing. meetings to gather information and develop common operating picture data to populate EMResource situational awareness and collaboration as two key pillars of service Networking and figuring out who is missing in this coalition helps to grow these capabilities <i>Important to note: HPP Deliverables were not mentioned as a service the coalition provides</i>
What brings you to the table to participate in the Coalition?	 Networking and Information Sharing The shared knowledge base of Coalition members. They are subject matter experts and willing to share that information broadly. First and foremost, operational picture brings me to the table to participate. I represent a number of the types named above and can provide input or access to those experts. By participating in the Coalition, it provides us a seat at the table wealth of knowledge that can be leveraged from the Coalition
	 Creating a Common Operating Picture Creating a common operating picture and sharing information is critical to a coordinated response, and the Coalition aims to bring partners together to do just that. This Coalition is one of the most effective parts of our state healthcare response system. I saw this over the last 18 months of pandemic. The Coalition shows us our strengths and weaknesses within the state-wide system handling a very large pandemic affecting all walks of life. with the diverse array of member types, the Coalition allows for the development of a common operating picture for healthcare emergency preparedness with state-level partners.
	 Planning, Training and Exercising statewide emergency planning, after action reports

Question	Survey Results
	• We share plans, we advocate for trainings to be brought to the Coalition and the Coalition sponsors/designs exercises throughout the year for healthcare partners to exercise together.
What major changes have occurred in healthcare emergency preparedness in the past two years? Consider: Staffing or structural changes as well as process changes.	 Incidents Requiring Multi-Disciplinary Coordinated Response COVID has been a real-life emergency that. Emergencies are not just a concept anymore. COVID-19 has forever changed the landscape of healthcare and public health preparedness and response. we have acknowledged that we need a different response to maintain EP work through ongoing public health crises that we haven't encountered before. Pilans have been activated and we are testing even State and federal capabilities that Vermont has not had a chance to test before. We talk about it, but we've never made it have to work in a real situation. COVID has shown how splintered state-level partners can be in a healthcare response: it doesn't make sense to change usual communication pathways; State agencies could do more to coordinate their response activities and communications across all healthcare partner types Resource Challenges PPE levels will be much higher at the Federal, State and Facility Level Staffing shortages and how to manage them have become part of emergency management Staffing has become even more scarce with human resources stretched beyond sustainability. The last two years have shown us that our system can have cracks, but the coalition can help to fix those cracks. For example, when lack of mental health beds is compromising the hospital's abilities to have ICU beds available, the Coalition. This has brought in funded staff who can dedicate time to advancing the mission of the Coalition. VDH has contracted All Clear Emergency Management Group to coordinate the Coalition. This has brought in funded staff who can dedicate time to advancing the mission of the Coalition. Funding has shifted in the last two years. Before All Clear, HPP funds were passed to hospitals. There have been some questions from the hospitals if they were going to receive funds in the future. Loss of fu
What factors (population growth, industry changes, policy changes, etc.) will impact healthcare emergency preparedness in Vermont in the next 3 years?	 Healthcare Changes/Regionalization changes to healthcare providers with mass staff departures; solutions for staffing crises will have a definite impact on healthcare emergency preparedness in the coming years. Another policy change that has had impacts and could continue is the COVID-19 vaccine mandate. Could factor into ongoing staffing shortages. Healthcare policy changes have been rapid through the COVID-19 response. The Coalition could play a role in message amplification to ensure members and partners know these changes and the potential implications of these changes. I believe we will need to look at healthcare from more of a regional view than we have in the past. more regional collaboration with Mass General's RDHRS will be instructive for how Vermont balances/leverages its very limited resources during an emergency. Frequency of disasters COVID will likely drive policy changes as well ongoing response to covid Another item that can impact preparedness is just how long this pandemic has gone on far; it has drained and burnt out the public health and healthcare workforce.

Question	Survey Results
What factors (population growth, industry changes, policy changes, etc.) will impact healthcare emergency preparedness in Vermont in the next 3 years?	 How will we continue to meet the demands in healthcare preparedness with potentially even less staff? Changes to healthcare preparedness initiatives adopted by state and federal agencies. I am unsure what is coming as far regulatory mandates or initiatives but their does seem to be nationwide regression of hands-on employment. So many are preferring remote less contact jobs I wonder what the impact will be for healthcare and emergency services. Industry and policy changes will impact healthcare emergency preparedness. Funding/Budget Reductions Requirements will likely increase while operating funds may decrease Challenges we will face are how do we fund and maintain the readiness posture that we would feel good about with the lack of funding we know we have. lack of investment in EP activities. Stakeholder Engagement We will need to involve more diverse partners in our Coalition including mental health providers, FQHC's and Infusion centers and outside healthcare providers. This pandemic helped us see how the future will need to be more integrated in our response planning. Population Population Growth- likely more immigration Vermont has an aging population and as we have seen in the COVID-19 pandemic, they are one of our most vulnerable populations. Shifts in populations centers Uncertainty factors that would impact healthcare emergency preparedness in the next three years can't be defined until we move forward from the pandemic. how will we (the Coalition, and its partners) adjust to what the "new norm" will be? We will need to be observant to all factors in order to be successful.

Appendix C: SWOT Analysis

In conducting this analysis, an organization can link the interaction between internal organizational factors in the external environment in which the organization exists. In general, strengths and weaknesses are described as internal factors whereas opportunities and threats are external factors (Figure 1).² Additionally, strengths and opportunities are potentially helpful, while weaknesses and threats are thought to be potentially harmful.



Figure 1: SWOT

Strengths: What does the Coalition do well? What resources can the Coalition draw on? What do others perceive as the Coalition's strengths?

Question	Survey Results
What are the strengths of the Coalition?	 Platform for collaboration and communication Good at inviting the partners to the table and providing excellent awareness and resources. The Coalition is great at showing Vermont entities what works in other regions.
	 Information sharing Coalition is excellent at networking and sharing resources within its membership, including training and exercise needs and documents and ways to make the system work more cohesively to problem solving Coalition sitreps and communications during a response are extremely valuable. central resource point We communicate well. This has been a great opportunity to share resources and even coordinate on policies across the State. Welcoming policies across hospitals have been one such topic we all engaged on early on. Coalition has excelled in being a conduit to bring members together to share situational awareness across the hospitals and public health We meet on a regular basis.
	 Subject Matter Expertise Expertise high degree of expertise, able to convene stakeholders across healthcare
	 Increased representation The Coalition continues to make efforts to expand membership For the most part, all partners contribute Variety of membership, strong leadership, and vision.
	 Ongoing planning, training and exercise efforts Making and reinforcing connections through training, exercising, and planning is a key strength of the Coalition. Coalition documents meetings, both preparedness and response, well so there is a true and accurate account of meeting proceedings. Coalition worked with its partners to completely revise the Coalition's Emergency Operations Plan to reflect what the true capabilities and scope of the Coalition are during a response.
	 Staffing The staff are fabulous at follow-through as well as helping members feel welcome and engaged. Our Readiness & Response Coordinator is awesome and keeps us organized. Coalition has become much more organized in the past two years- more structure- Contracting with All Clear appears to be very successful quickly mobilized Coalition is well organized in its approach to managing multiple coalition projects.

Weakness: What can the Coalition improve? Where does the Coalition have fewer resources than others? What are others likely to see as the Coalition's weaknesses?

Question	Survey Results
What are the weaknesses of the Coalition?	 Limited representation from all healthcare areas not a lot of healthcare diversity-it's still mostly hospitals, disconnect between State and Federal health departments and the supply needs of coalition members EMS needs to get involved. Disasters in a rural state depend on transportation and it is a significant gap. LTCFs need to be a part of the discussion as they are a vital extension of the hospital system and we are seeing that now. We have not been able to engage EMS We have only minimally engaged Long Term Care/Ancillary Health partners. Sometimes the focus seems skewed to hospitals because they have been a cornerstone partner. Coalition still feels like a hospital coalition that needs to invite the cousins over for a holiday. This is not for lack of asking but more helping them realize the value of the coalition to them. This pandemic has helped to bring more partners and members into the folds. This takes time. I think it would be a good time to pull more mental health players and other healthcare entities into the mix.
	 Further definition of operational roles and capabilities We make it sound like we have more capability that we really do. When it comes to response, we need to align plans We do not have any real authority in response. Our scope is limited to information sharing. We do not have enough staff to be a 24/7 response entity. Coalition staffing is limited in its current bench depth. lack of clear guidance on information sharing protocol Lack of state and healthcare leadership engagement is sometimes an obstacle in planning.
	 Limited awareness of the coalition's goals, mission and responsibilities not enough people know about VHEPC. Or at least not a lot of people knew about VHEPC before COVID that should have. Other the VT Department of Health benefits more from having All Clear administer the Coalition than the other Coalition members do We do not know yet what things have not been learned, or what we are not as prepared for as we might hope. But I am sure the Coalition will respond appropriately as lessons are learned Limited site-specific education A butterfly designed by a large committee often becomes an elephant.

Opportunities: Are there anticipated needs in the healthcare community the Coalition may meet? What opportunities might the Coalition take advantage of to grow?

Question	Survey Results
What are the opportunities for the Coalition?	 Better Understanding Roles and Capabilities Helping each partner site to understand what each brings to the table. Need to reach out to organizations that are not participating in the coalition and show them how it benefits everyone. Continue to expand the list of contacts that are potentially useful to Healthcare Emergency Managers as well as potentially valuable new members I do think we must still help the State of Vermont and all the players understand and recognize the value of the Coalition and what it brings to the table. The SEOC and the HOC understood the value of the Coalition but don't really understand what it is or how to best access and utilize. Some of this is training and time as well. Great opportunity to continue this education and outreach. Being able to advocate for various aspects of the healthcare system at the State level. Based on their understanding of the healthcare system's needs, being able to provide a reality check between the system and unreasonable non-value-added requests from the State.
	 Expand Membership Continue to expand membership through additional healthcare partners Grow Modify the coalition weekly response meetings to incorporate LTC. Potentially re-engage with VHCA to attend their preparedness meetings as a first step in reconnecting with LTC. best opportunity is to continue to have the regular meetings, grow membership and at some point, merge the efforts of the Medical Operating Workgroup, or MON / MOW. More engagement from membership
	 Expand Executive Committee develop leadership beyond VDH and VEM. EMS and LTCFs. More engagement with VAHHS and bringing them into the Executive Team would be a valuable opportunity.
	 Staffing Hire additional VHEPC Staff who can assist in building up response capabilities (Medical operations network, regional response, specialty surge annexes and TTXs)
	 Continue to Offer Training and Exercises revisit the annual training that is heavily weighted towards EMS vs. other emergency response entities educational series for new members, refreshers for healthcare workers on EP work, MON development, MON facilitation, further defining the role of VHEPC and other statewide response efforts
	 Plan alignment Work with VDH and VEM to ensure Coalition Plans align with their plans. Clearly define how VHEPC is built into their plans. Clearly identify roles and responsibilities. Define where the Coalition sits in the HOC org structure at VDH. Work with VDH to formalize information sharing procedures/protocols. Incorporating VHEPC planning into Vermont's Medical Operations Network planning could help bridge more response communications.

Threats: What could negatively impact the Coalition's operations? What are potential resource drains on the Coalition? What regulatory changes may impact the Coalition?

Question	Survey Results
What are the threats to the Coalition?	 Lack of Time/Incentives to Participate Time constraints- health care staff only having enough time to do so many things. Can they concentrate appropriate time to the Coalition?
	 Reduced/diminishing funding funding? reduction in Federal grant funding increased costs in funding the Coalitions administrative component reduces the funding to Coalition members Sole funding provided by HPP grant, subcontracted by VDH to All Clear. If funding is reduced or does not meet the level to hire a full time Coordinator, much work and progress could be lost.
	 Diminished participation participation fatigue and burnout Staff burnout and low morale. Partners may no longer want to be engaged / they might not see the value of the Coalition waning membership, lack of engagement from the executive committee
	 Lack of Buy-In Promising more than we can deliver. The MON concept feels empty still. Lack of buy-in from VDH leadership on the value of VHEPC. As Public Health gets larger again, will the Coalition serve the same role for the State? Do our hospitals value the Coalition in the same way that we do at the State level?
	 Other Corporate Health Care Companies (probably not a threat in Vermont right now?

	Strategic P	riority #1: Mission, Role, and Resp	onsibility Identification			
HPP Capability	Goal	Strategy (High Level)	Task (Coalition Work Plan Item)	2022	2023	2024
			Differentiate the role of VHEPC versus MON	Х		
		Clearly identify roles and responsibilities of the Coalition in	Clearly define the scope of readiness and response for VHEPC	Х		
		preparedness and response and ensure these are communicated to and align	Update VHEPC Emergency Operations Plan with updated roles and responsibilities	Х		
		with VDH and VEM	Distribute updated VHEPC EOP with record of changes to members and partners			
		Deview and review the relate of the	Revise scope of work for additional VHEPC staff	Х		
Capability 1: Foundation for	Defined and Updated Roles and Responsibilities	Review and revise the roles of the coalition's Readiness and Response Coordinators.	Revise roles and responsibilities in governance document. Ensure roles and responsibilities also meet ASPR HPP requirements	Х		
Health Care		dated Roles and tesponsibilities Revise and revise the roles of the Coalition's Clinical Advisors. Revise roles and responsibilities in e document for Executive Committee. Er responsibilities also meet ASPR HPP r Ensure roles and responsibilities also requirements Update the coalition Mission/Vision statement in governance document to Update all Coalition materials/product	Revise scope of work for clinical advisors	Х		
and Medical Readiness			Revise roles and responsibilities in governance document for Executive Committee. Ensure roles and responsibilities also meet ASPR HPP requirements. Ensure roles and responsibilities also meet federal requirements	х		
			Update all Coalition materials/products to reflect updated mission/vision (i.e., brochures, flyers, website, etc.)	х		
		Based on defined roles, regularly assess staffing needs	Internal Budget Review with Executive Committee to determine staffing needs and funding		Х	
Foundation for Health Care and Medical Readiness	Improved VHEPC	are Improved VHEPC member types/provide a	Complete a gap assessment utilizing grant requirements and current response roles. Research how other HCCs structure their executive committees	х		
	Leadership and Staffing	recommendation to re-organize the exec committee org structure	Add standing executive committee members who do not have voting privileges (advisory members)		Х	
		Provide value to/compensate executive committee for their participation	Research whether/how HCCs compensate their Executive Committees/Coalition Leadership		Х	

Appendix E: Strategic Priorities - Detailed Task Roadmap

	Strategic Prior	rity #2: Membership Engagen	nent and Recruitment		When	
HPP Capability	Goal	Strategy (High Level)	Task (Coalition Work Plan Item)	2022	2023	2024
			Identify new members (especially non-core member types) that are not currently engaged or participating with the VHEPC.	х		
		Develop a Membership	Invite and engage partners to attend VHEPC meetings.	х		
		Recruitment/Engagement Action Plan	Finalize Membership Recruitment/Engagement Action Plan with evaluation metrics	х		
Foundation for Health Care and Medical	Recruitment of New Organizations		Review current coalition membership by type and set recruitment goals for ancillary healthcare/Long-term care and EMS		х	
Readiness		Targeted outreach to EMS and other partners not currently participating in VHEPC	Attend other meetings where VHEPC partners participate to increase coalition visibility	х		
			Identify outreach goals in the membership recruitment/engagement plan		х	
			Offer CE credits for trainings/exercises where possible		х	
			Provide Coalition Overview Presentations to EMS and other partners		х	
			Identify baseline and performance metrics for the marketing plan	Х		
		Develop a VHEPC Marketing Plan	Update VHEPC Membership Benefits	Х		
Foundation for	Development of		Develop "Elevator Speech" to be able to clearly describe VHEPC during outreach	Х		
Health Care and	a Marketing Strategy for the		Update the VHEPC website	Х	Х	Х
Medical Readiness	Health Care Coalition	Health Care	Identify baseline measurements of current views on the webpage/determine which pages get the most traffic	х		
				Identify targets to increase views on webpage	Х	х

	Strategic Priority #2: Membership Engagement and Recruitment					
HPP Capability	Goal	Strategy (High Level)	Task (Coalition Work Plan Item)		2023	2024
		Conduct outreach at various partner meetings utilizing updated VHEPC Member Benefits	Prioritize which partner meetings that VHEPC can attend		x	
Foundation for Health Care and	Provide Networking Opportunities to	Conduct Membership/Partner	Build upon existing survey to see what types of activities or events would draw people together	х		
Medical Readiness	Engage Non- core Member Types	Survey	Reimplement meeting evaluations to continuously receive member/partner feedback	х		
Foundation for Health Care and Medical Readiness	Offer Grant Funding	Implement grant funding process for members in good standing,	Set aside funding for this line item in the VHEPC Budget	х	х	х
	Opportunities for Members in Good Standing	focusing on planning, training, and exercises.	Administer the grant funding process	х	х	х

	Strategic Priority #3: Information Sharing					
HPP Capability	Goal	Strategy (High Level)	Task (Coalition Work Plan Item)	2022	2023	2024
		Develop formalized VHEPC communications plan as part of the VHEPC Preparedness Plan	Prioritize and outline the information sharing responsibilities of VHEPC during steady state.	х		
Health Care and Medical	Identification of Information Sharing		Prioritize and outline the information sharing responsibilities of VHEPC staff during response in the EOP	Х		
Response Coordination	Roles and Responsibilities	Develop formalized VHEPC information sharing protocol as part of the VHEPC Emergency Operations Plan	Identify the processes related to sharing any of the identified information or resources			х
			Establish and update standard and incident specific Essential Elements of Information			х
Health Care and Medical	Create a Common Operating Picture	Partner with Radio Amateur Civil Emergency Services	Fund upgrades to radio systems in existing Coalition Member Facilities	Х		

	Stra	ategic Priority #3: Information Sha	aring		When	
HPP Capability	Goal	Strategy (High Level)	Task (Coalition Work Plan Item)	2022	2023	2024
Response Coordination		(RACES) to enhance RACES capabilities in Coalition Member facilities	Partner with RACES to conduct communications drills and trainings	х	Х	х
			Maintain current quarterly communications drills, focusing on increasing response rates	x	х	x
			Update new membership request form to include at a minimum these communication pathways- business email, business phone, business cell, business SMS)	x		
	Operationalize VHEPC Alert, the coalition's mass notification system	Build redundant communication pathways in VHEPC Alert for each Coalition Member (at a minimum- business email, business phone, business cell, business SMS)		х		
			Determine what messages can be sent in VHEPC Alert without prior approvals		х	
			Collaborate with VDH to determine how VHEPC will be utilized during response		х	
			Build out message and notification templates in VHEPC Alert			Х
		Support VDH in recruiting non-hospital partners to utilize EMResource	include EMResource materials in marketing plan			х
Health Care and Medical	Increase Situational	Facilitate Coalition-Level Healthcare Situational Awareness meetings, as needed	Maintain Coalition Distribution Lists, calendar invites and agendas	x	х	х
Response	Awareness		Produce Situation Reports	Х	Х	Х
Coordination		Develop healthcare situation reports and disseminate, as needed	Revise Situation Report Template in Emergency Operations Plan, annually	Х	Х	х

	Strategic Priority #4: Planning, Training and Exercises					
HPP Capability	Goal	Strategy (High Level)	Task (Coalition Work Plan Item)	2022	2023	2024
			Utilize VHEPC IPP to schedule trainings throughout the grant year	Х	х	Х
		Provide one coalition-wide training per quarter	Obtain CE credits for training where applicable	Х	х	Х
			Continue VHEPC newsletter to highlight training opportunities	Х	х	Х
		Promote additional, externally offered training opportunities	cross promote upcoming trainings from VEM, VDH and other partners on VHEPC Website	х	х	х
		Provide opportunities for members to attend conferences	Identify VHEPC-approved conferences with approval from Executive Committee	х	х	x
Health Care and	Assist VDH in additional promotion		Administer application/reimbursement process for VHEPC membership conference attendance	х	x	x
Medical Response Coordination			Provide support to the annual VT EMS and Healthcare Preparedness Conference	Х	x	x
		Assist VDH in additional promotion of the Vermont Crisis Standards of Care	cross-promote VT CSC on VHEPC Website	Х	x	x
	Plan for Training and	Maintain Annual Revision the	Plan and conduct an IPP Workshop annually	Х	х	х
	Exercises VHEPC Integrated Preparedr Plan (IPP)		Participate in state partner IPP workshops Annually	Х	х	Х

	Strategic Priori	ty #4: Planning, Training and E	xercises		When	
HPP Capability	Goal	Strategy (High Level)	Task (Coalition Work Plan Item)	2022	2023	2024
Health Care and Medical Response Coordination	Support, Plan, and Participate in Multi- Disciplinary Emergency Exercises	Create yearly goals/objectives to ensure HPP grant requirements and coalition priorities for exercises are met	Revise the VHEPC IPP	х	х	x
Madical Currae	Support, Plan, and Participate in Multi-	Conduct Annual Medical Response	Modify ASPR exercise documents as needed to design MRSE	Х	х	х
Medical Surge	Disciplinary Emergency Exercises	and Surge Exercise (MRSE)	Include Ancillary Care partners in annual ASPR HCC MRSE	х	х	х
Health Care and Medical	Support, Plan, and	Participate Planning and Playing in	Participate in VDH-sponsored exercises			Х
Response Coordination	Participate in Multi- Disciplinary Emergency Exercises	State Partner exercises, as applicable	Participate in VEM-Sponsored exercises			х

Appendix F: Strategic Priorities - Task Action Plan by Quarter

	Priority #1: Mission, Role sponsibility Identification	e, and	Who					W	nen				
Strategy	Task (Coalition Work Plan	Work Plan			21-)22		2022	-2023			2023 [.]	-2024	
Strategy	Item)	Deliverable		Qtr 3	Qtr 4	Qtr 1	Qtr 2	Qtr 3	Qtr 4	Qtr 1	Qtr 2	Qtr 3	Qtr 4
Clearly identify	Differentiate the role of VHEPC versus MON	Response Plan	Readiness and Response Coordinator		x								
roles and responsibilities of the Coalition in	Clearly define the scope of readiness and response for VHEPC	Response Plan	Readiness and Response Coordinator		x								
preparedness and response and ensure these are communicated to	Update VHEPC Emergency Operations Plan with updated roles and responsibilities	Response Plan	Readiness and Response Coordinator		x				х				х
and align with VDH and VEM	Distribute updated VHEPC EOP with record of changes to members and partners	Response Plan	Readiness and Response Coordinator		x				х				х
Review and revise	Revise scope of work for VHEPC staff	Governance	Fiscal Manager			х				х			
the roles of the coalition's Readiness and Response Coordinators.	Revise roles and responsibilities in governance document. Ensure roles and responsibilities also meet ASPR HPP requirements	Governance	Assistant Readiness and Response Coordinator			x				x			
	Revise scope of work for clinical advisors	Governance	Fiscal Manager			х				х			
Review and revise the roles of the Coalition's Clinical Advisors.	Revise roles and responsibilities in governance document for Executive Committee. Ensure roles and responsibilities also meet ASPR HPP requirements. Ensure roles and responsibilities also meet federal requirements	Governance	Readiness and Response Coordinator			x				х			

	Priority #1: Mission, Role sponsibility Identification	e, and	Who					w	nen				
	Task (Coalition Work Plan	Work Plan			21- 22		2022	-2023			2023	-2024	
Strategy	Item)	Deliverable		Qtr 3	Qtr 4	Qtr 1	Qtr 2	Qtr 3	Qtr 4	Qtr 1	Qtr 2	Qtr 3	Qtr 4
Update the coalition Mission/Vision statement in governance document to reflect the actual roles and responsibilities that have been identified.	Update all Coalition materials/products to reflect updated mission/vision (i.e., brochures, flyers, website, etc.)	Marketing/ Governance	Assistant Readiness and Response Coordinator			x				x			
Based on defined roles, regularly assess staffing needs	Internal Budget Review with Executive Committee to determine staffing needs and funding	Governance/ Budget	Fiscal Manager			x				x			
Assess current executive committee member types- aim to include all 4 core	Complete a gap assessment utilizing grant requirements and current response roles. Research how other HCCs structure their executive committees	Governance	Assistant Readiness and Response Coordinator			x							
types/provide a recommendation to re-organize the exec committee org structure	Add standing executive committee members who do not have voting privileges (advisory members)	Governance	Assistant Readiness and Response Coordinator			x							
Provide value to/compensate executive committee for their participation	Research whether/how HCCs compensate their Executive Committees/Coalition Leadership	Governance	Fiscal Manager			x							

Strategic Priorit	ty #2: Membership Engage Recruitment	ement and	Who					W	hen				
Strategy	Task (Coalition Work Plan	Work Plan			21-)22		2022	-2023			2023	-2024	
Strategy	Item)	Deliverable		Qtr 3	Qtr 4	Qtr 1	Qtr 2	Qtr 3	Qtr 4	Qtr 1	Qtr 2	Qtr 3	Qtr 4
	Identify new members (especially non-core member types) that are not currently engaged or participating with the VHEPC	Membership	Assistant Readiness and Response Coordinator			x							
	Invite and engage partners to attend VHEPC meetings	Membership	Assistant Readiness and Response Coordinator				x						
Develop a Membership Recruitment/	Finalize Membership Recruitment/Engagement Action Plan with evaluation metrics	Membership	Assistant Readiness and Response Coordinator				x						
Engagement Action Plan	Evaluate Progress on Membership/Recruitment Engagement Action Plan	Membership	Assistant Readiness and Response Coordinator						x		х		x
	Review current coalition membership by type and set recruitment goals for ancillary healthcare/Long-term care and EMS	Membership	Assistant Readiness and Response Coordinator			x							
	Evaluate Progress on New Member Organizations	Membership	Assistant Readiness and Response Coordinator				x	x	x	x	x	x	x
	Attend other meetings where VHEPC partners participate to increase coalition visibility	Meetings	Readiness and Response Coordinator			x	x	x	x	x	х	x	x
Targeted outreach to EMS and other partners not currently participating in VHEPC	Identify outreach goals in the membership recruitment/engagement plan	Membership	Assistant Readiness and Response Coordinator				x						
	Evaluate targeted outreach efforts for EMS and other partners	Membership	Assistant Readiness and Response						х		х		x

Strategic Priori	ty #2: Membership Engage Recruitment	ement and	Who					W	hen				
Churche and	Task (Coalition Work Plan	Work Plan			21-)22		2022	-2023			2023	-2024	
Strategy	Item)	Deliverable		Qtr 3	Qtr 4	Qtr 1	Qtr 2	Qtr 3	Qtr 4	Qtr 1	Qtr 2	Qtr 3	Qtr 4
			Coordinator										
	Offer CE credits for trainings/exercises where possible	Training	Readiness and Response Coordinator					x					
	Documents CE Offered	Training	Readiness and Response Coordinator						x	x	х	x	x
	Provide Coalition Overview Presentations to EMS and other partners	Meetings	Readiness and Response Coordinator					x					
	Document Coalition Overview Presentations to EMS and Other Partners	Meetings	Readiness and Response Coordinator						x	x	х	х	х
	Identify baseline and performance metrics for the marketing plan	Marketing	Assistant Readiness and Response Coordinator				x						
Develop a VHEPC Marketing Plan	Update VHEPC Membership Benefits	Membership	Assistant Readiness and Response Coordinator				x						
	Develop "Elevator Speech" to be able to clearly describe VHEPC during outreach	Marketing	Assistant Readiness and Response Coordinator				x						
Increase online	Update the VHEPC website	Marketing	Readiness and Response Coordinator	x	x	x	x	x	x	x	х	х	х
Prescence of VHEPC	Identify baseline measurements of current views on the webpage/determine which pages get the most traffic	Marketing	Assistant Readiness and Response Coordinator			x							

Strategic Priorit	ty #2: Membership Engage Recruitment	ement and	Who					W	hen				
Christianu	Task (Coalition Work Plan	Work Plan			21-)22		2022	-2023			2023	-2024	
Strategy	Item)	Deliverable		Qtr 3	Qtr 4	Qtr 1	Qtr 2	Qtr 3	Qtr 4	Qtr 1	Qtr 2	Qtr 3	Qtr 4
	Identify targets to increase views on webpage	Marketing	Assistant Readiness and Response Coordinator				x						
Conduct outreach at various partner meetings utilizing updated VHEPC Member Benefits	Prioritize which partner meetings that VHEPC can attend	Meetings	Readiness and Response Coordinator		x								
Conduct Membership/Partner	Build upon existing survey to see what types of activities or events would draw people together	Membership	Assistant Readiness and Response Coordinator			x				x			
Survey	Reimplement meeting evaluations to continuously receive member/partner feedback	Meetings	Assistant Readiness and Response Coordinator			x	x	x	x	x	х	х	x
Implement grant funding process for members in good	Set aside funding for this line item in the VHEPC Budget	Budget	Fiscal Manager		x	x				x			
standing, focusing on planning, training, and exercises	Administer the grant funding process	Fiscal Management	Fiscal Manager		x			x	x			х	х

Strategic	Priority #3: Informati	on Sharing	Who					W	nen				
	Task (Coalition Work				21- 22		2022	-2023			2023	-2024	
Strategy	Plan Item)	Work Plan Deliverable		Qtr 3	Qtr 4	Qtr 1	Qtr 2	Qtr 3	Qtr 4	Qtr 1	Qtr 2	Qtr 3	Qtr 4
Develop formalized VHEPC communications plan as part of the VHEPC Preparedness Plan	Prioritize and outline the information sharing responsibilities of VHEPC during steady state	Preparedness Plan	Assistant Readiness and Response Coordinator				x						
Develop formalized VHEPC information	Prioritize and outline the information sharing responsibilities of VHEPC staff during response in the EOP	Response Plan	Readiness and Response Coordinator				x						
sharing protocol as part of the VHEPC Emergency Operations Plan	Identify the processes related to sharing any of the identified information or resources	Response Plan	Readiness and Response Coordinator								x		
Fidit	Establish and update standard and incident specific Essential Elements of Information	Response Plan	Readiness and Response Coordinator								х		
Partner with Radio Amateur Civil Emergency Services	Fund upgrades to radio systems in existing Coalition Member Facilities	Budget/Fiscal Management	Fiscal Manager		х				х				x
(RACES) to enhance RACES capabilities in Coalition Member facilities	Partner with RACES to conduct communications drills and trainings	Redundant Communications Drills	Assistant Readiness and Response Coordinator		x		х		x		x		x
Operationalize VHEPC	Maintain current quarterly communications drills, focusing on increasing response rates	Redundant Communications Drills	Assistant Readiness and Response Coordinator	x	x	х	х	x	x	x	x	x	x
Alert, the coalition's mass notification system	Update new membership request form to include at a minimum these communication pathways- business email, business phone, business cell, business SMS)	Membership/Redundant Communications Drills	Assistant Readiness and Response Coordinator			Х							

Strat <u>egic</u>	Priority #3: Informati	on Sharing	Who					W	nen				
Stratogy	Task (Coalition Work	Work Plan Deliverable			21- 22		2022	-2023			2023	-2024	
Strategy	Plan Item)	WORK Plan Denverable		Qtr 3	Qtr 4	Qtr 1	Qtr 2	Qtr 3	Qtr 4	Qtr 1	Qtr 2	Qtr 3	Qtr 4
	Build redundant communication pathways in VHEPC Alert for each Coalition Member (at a minimum- business email, business phone, business cell, business SMS)	Redundant Communications Drills	Assistant Readiness and Response Coordinator							x			
	Determine what messages can be sent in VHEPC Alert without prior approvals	Redundant Communications Drills/VHEPC Alert SOP	Assistant Readiness and Response Coordinator							x			
	Collaborate with VDH to determine how VHEPC will be utilized during response	Response Plan	Readiness and Response Coordinator								х		
	Build out message and notification templates in VHEPC Alert	Redundant Communications Drills	Assistant Readiness and Response Coordinator									x	
Support VDH in recruiting non-hospital partners to utilize EMResource	Include EMResource materials in marketing plan	Marketing Plan	Assistant Readiness and Response Coordinator										
Facilitate Coalition- Level Healthcare Situational Awareness meetings, as needed	Maintain Coalition Distribution Lists, calendar invites and agendas	Meetings	Readiness and Response Coordinator	х	х	х	х	х	х	x	х	х	x
Develop healthcare	Produce Situation Reports	Meetings	Readiness and Response Coordinator	х	х	х	х	х	х	х	х	х	х
situation reports and disseminate, as needed	Revise Situation Report Template in Emergency Operations Plan, annually	Response Plan	Readiness and Response Coordinator			х				х			

Strategio	Priority #4: Planning, Trai Exercises	ning and	Who					W	nen				
	Task (Coalition Work Plan	Work Plan		_	21-)22		2022	-2023			2023	-2024	
Strategy	Item)	Deliverable		Qtr 3	Qtr 4	Qtr 1	Qtr 2	Qtr 3	Qtr 4	Qtr 1	Qtr 2	Qtr 3	Qtr 4
	Utilize VHEPC IPP to schedule trainings throughout the grant year	Training	Readiness and Response Coordinator	x	x	x	x	x	x	x	x	x	x
Provide one coalition-wide training per	Obtain CE credits for training where applicable	Training	Readiness and Response Coordinator	х	х	х	x	х	х	x	х	x	х
quarter	Continue VHEPC newsletter to highlight training opportunities	Newsletter	Assistant Readiness and Response Coordinator	х	x	x	x	x	x	x	х	x	x
Promote additional, externally offered training opportunities	Cross promote upcoming trainings from VEM, VDH and other partners on VHEPC Website	Marketing	Assistant Readiness and Response Coordinator	х	x	x	x	x	x	x	x	x	x
	Identify VHEPC-approved conferences with approval from Executive Committee	Training	Readiness and Response Coordinator			x				x			
Provide opportunities for	Promote VHEPC-approved conferences to coalition members	Training	Readiness and Response Coordinator			x	x	x	x	x	х	x	x
members to attend conferences	Administer application/reimbursement process for VHEPC membership conference attendance	Fiscal Management	Fiscal Manager				x			x	х		
	Provide support to the annual VT EMS and Healthcare Preparedness Conference	Training	Readiness and Response Coordinator		x			х	x			x	х
Assist VDH in additional promotion of the Vermont Crisis Standards of Care	cross-promote VT CSC on VHEPC Website	Marketing	Assistant Readiness and Response Coordinator		x				x				x
Maintain Annual Revision the VHEPC	Plan and conduct an IPP Workshop annually	Integrated Preparedness Plan	Readiness and Response Coordinator				x				х		

Strategio	: Priority #4: Planning, Tra Exercises	ining and	Who					Wł	nen				
Strategy	Task (Coalition Work Plan	Work Plan		20	21- 22	Ohr		-2023	01	01		-2024	0.
	Item)	Deliverable		Qtr 3	Qtr 4	Qtr 1	Qtr 2	Qtr 3	Qtr 4	Qtr 1	Qtr 2	Qtr 3	Qtr 4
Integrated Preparedness Plan (IPP)	Participate in state partner IPP workshops Annually	Integrated Preparedness Plan	Readiness and Response Coordinator			x							
Create yearly goals/objectives to ensure HPP grant requirements and coalition priorities for exercises are met	Revise the VHEPC IPP	Integrated Preparedness Plan	Readiness and Response Coordinator				x				x		
Conduct Annual Medical	Modify ASPR exercise documents as needed to design MRSE	MRSE	Readiness and Response Coordinator		x				х				x
Response and Surge Exercise (MRSE)	Include Ancillary Care partners in annual ASPR HCC MRSE	MRSE	Readiness and Response Coordinator		x				х				x
Participate Planning and	Participate in VDH-sponsored exercises	Integrated Preparedness Plan	Readiness and Response Coordinator										x
Playing in State Partner exercises, as applicable	Participate in VEM-Sponsored exercises	Integrated Preparedness Plan	Readiness and Response Coordinator										x

Appendix G: Acronyms

Acronym	Term
AAR	After-Action Review
ASPR	Assistant Secretary for Preparedness and Response
ASPR TRACIE	Assistant Secretary for Preparedness and Response - Technical Resources,
	Assistance Center, and Information Exchange
CDC	Centers for Disease Control
CDPHE	Colorado Department of Health and Environment
EMS	Emergency Medical Services
FOA	Funding Opportunity Announcement
HCC	Health Care Coalition
HPP	Healthcare Preparedness Program
HVA	Hazard Vulnerability Analysis
ICS	Incident Command System
IP	Improvement Plan
IPP	Integrated Preparedness Plan
LTC	Long Term Care
MON	Medical Operations Network
MYTEP	Multi-Year Training and Exercise Plan
NIMS	National Incident Management System
PHEP	Public Health Emergency Preparedness
PIO	Public Information Officer
SEOC	State Emergency Operations Center
SWOT	Strength, Weakness, Opportunity, Threat
ТТХ	Tabletop Exercise
VHEPC	Vermont Healthcare Emergency Preparedness Coalition

Appendix H: References

¹ U.S. Department of Health and Human Services Office of the Assistant Secretary for Preparedness and Response. (September 2020). 2019-2023 Hospital Preparedness Program: Performance Measures Implementation Guidance.

²Harris JM, Cwiek KA, Davis CN, Dubow MJ, Stuecher S (Harris et al. #). Healthcare Strategic Planning. 4th ed. Health Administrations Press; 2018.