



NORTHWEST HEALTHCARE  
**Response Network**®

# 2018 ANNUAL REPORT

PREPARE  
RESPOND  
RECOVER

## Mission

We lead regional healthcare collaboration to effectively respond and recover in emergencies and disasters.

## Vision

Our community gets the care it needs during and after an emergency or disaster.

## Values

### COLLABORATION

Working together as public and private partners.

### EFFECTIVENESS

Striving for excellence and continuous improvement.

### INNOVATION

Seeking fresh solutions to modern challenges.

### STEWARDSHIP

Using resources efficiently and equitably.

## Impact Focus Areas

We commit our expertise and resources to prepare and support a unified and coordinated healthcare community that will:

### → BE RESILIENT

Learn and adapt to prevent, withstand and mitigate impacts of future emergencies.

### → SUSTAIN CARE

Continue to provide patient care during an emergency.

### → SURGE CARE

Manage a surge in demand for patient care during an emergency.

### → RECOVER

Restore operations to meet patient care needs after an emergency.

# INSIGHT FROM OUR LEADERS

On the map, today's Northwest Healthcare Response Network looks very different than it did a year ago. In July 2018, the state consolidated three Western Washington healthcare coalitions into the Network, expanding our service area to 15 counties. Despite that growth, the heart of our organization remains the same: healthcare providers, first responders, local authorities and community partners working together to ensure our communities can get healthcare in disasters and major emergencies.

Along with the challenges that always accompany organizational change, the consolidation has enabled us to combine expertise, resources and partnerships in ways that better serve the entire region. We can now think more broadly about the threats Western Washington faces, and collectively develop the capabilities we need to save lives and respond effectively.

We're off to a great start. In addition to the achievements detailed in this report, in 2018 several new organizations signed on as sustaining members of our coalition, helping us to do more for Western Washington than the basic planning and training activities funded by limited federal grants. We also shared our story at two U.S. Congressional briefings, championing the value of engaging healthcare in emergency preparedness and the power of healthcare coalitions.

We begin 2019 with the development of a new strategic plan that will underscore our deep commitment to the health and safety of our communities. We look forward to building on the trust and tools developed in each corner of our region, and leveraging them together for a more resilient Western Washington.

*Onora Lien*  
Executive Director

*Kim Moore, MD*  
Chair, 2018 Board of Directors



## Serving the State's Medical Epicenter



**15** Counties and  
**25** Tribal Nations



**5.2 Million**  
Residents



**178,000**  
Healthcare Workers



Nearly **3,000**  
Healthcare  
Organizations



**64** Hospitals and  
**143** Skilled Nursing  
Facilities



Nearly **70%** of the  
State's Hospital and  
Skilled Nursing Beds

# OUR EXPANSION

Recognizing evolving patterns of patient movement and the growth of healthcare systems, in March 2018 the Washington State Department of Health announced the consolidation of the state’s six healthcare coalitions into two. On July 1, the Network became the coalition serving most of Western Washington, expanding from three counties to 15. The Network is now coordinated across four districts designed to honor strong local relationships while reaping the benefits of regional collaboration.

## NORTHWEST

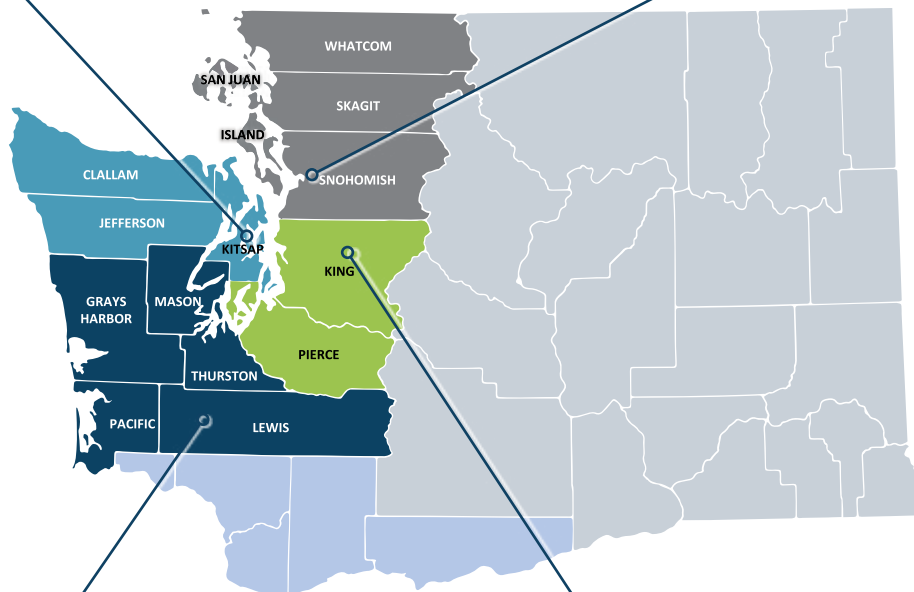
*“Public Health agencies don’t have a lot of resources, yet we are often the health and medical leads for emergency planning in our counties. Having a partner like the Network that understands how healthcare is changing and that actively has healthcare engagement is key to developing realistic plans to protect our communities.”*

**–Jessica Guidry, Kitsap Public Health District**

## NORTH

*“It is really important to me that the coalition has a special group focused on the unique challenges that skilled nursing facilities face in a disaster—our patient population is so vulnerable and often ignored. Now we have the ability to build relationships across regions and bring different ideas to the table.”*

**–Christine Bekkouri, Bethany at Silver Lake**



## WEST

*“Now if I have a healthcare-related problem here in Lewis County and I need help, I can call the Network duty officer, who has access to coordinate anything and everything in Western Washington, expanding my range for possible resources, assets and subject matter experts. That is of huge value.”*

**–Ed Mund, Lewis County Public Health & Social Services**

## CENTRAL

*“Evergreen has been part of the Network since the very beginning. They gave us the support to grow our emergency management capabilities from the bare bones into a mature, robust program. Now we’re taking the next step together, opening doors to connect county to county and building regional plans that intimately tie us to the entire western part of the state.”*

**–Barb Jensen, EvergreenHealth**

# HIGHLIGHTS FROM THE YEAR

## Network engages clinicians in disaster preparedness

When a sick child at a Seattle hospital in the fall required a specific dialysis machine that was not available at the facility, it turned to the Central District's Disaster Clinical Advisory Committee (DCAC) for rapid assistance in sourcing the equipment.

The Central District's DCAC began in 2012 as a body of clinicians jointly developing plans for the use of scarce medical resources in emergencies. Today it is one of the primary platforms for King and Pierce County healthcare providers to lend their vital clinical expertise to the full spectrum of disaster planning. "If you're on call when a disaster strikes, are you prepared to leverage the necessary resources and provide an adequate level of care?" said Dr. Vicki Sakata, the Network's Senior Medical Advisor. "The DCAC fills a huge gap for a lot of clinicians who worry about these things."

In 2018, the Network's Northwest District brought together nurses, mid-level providers, physicians and representatives of county and tribal public health agencies to build their own DCAC, which held its first quarterly meeting in January 2019. The group will likely begin with an inventory of regional clinical resources and a survey of patients with special medical needs that make them particularly vulnerable in disasters. As clinical engagement deepens in each district, the Network's goal is coalition-wide collaboration that will improve patient care during disasters across Western Washington.

## Capabilities assessment drives Network training and exercise plan

Training and exercising are integral to making sure patients receive the care they need in an emergency. In 2018, the Network adopted a new approach to selecting training and exercise priorities through a Healthcare Response Capabilities Assessment.

Often training and exercise plans are driven by requirements for accreditation and grant funding. In contrast, the Network's goal was to build a plan around the response capabilities that its members and partners identified as the most important for effective emergency management. In November, more than 130 healthcare organizations and response partners across the Network's 15 counties completed a survey of their capabilities to perform key response functions, from identifying the steps to take when law enforcement arrives to donning and doffing personal protective equipment. They also rated the priority of each capability.

The Network used the results to design a three-year training and exercise plan. For example, based on an identified gap for non-hospital facilities, the Network is developing a Basics of Healthcare Emergency Management training that will be offered twice a year in each of its four districts. The Network will conduct the Healthcare Response Capabilities Assessment annually to evaluate the impact of trainings and exercises and adjust the multi-year plan according to changing priorities and capability levels.

## HIGHLIGHTS FROM THE YEAR

### All counties agree to information sharing and patient tracking

When a natural gas pipeline exploded in British Columbia in October, Puget Sound Energy asked some Western Washington hospitals to temporarily limit their natural gas usage. The Network used a new framework for regional information sharing to keep the healthcare response community up to speed.

Regional healthcare, public health and emergency management partners have long recognized that if disasters are not confined to geographic boundaries, preparedness efforts should not be either. Through the winter of 2017-2018, these partners in counties across Western Washington collaborated to create concepts for moving patients and maintaining situational awareness when a disaster impacts multiple jurisdictions. Their efforts paved the way for several new response plans after the Network's July expansion.

In September, the Network published the first draft of its coalition-wide patient tracking plan. This document describes the process for tracking patients in a large emergency so that their loved ones can find them. In early 2019, the Network will finalize an updated regional situational awareness procedure that sets standards for the timely, consistent gathering and sharing of disaster indicators and impacts across the coalition. These plans build on work done by partners in each of the Network's member counties and support more effective coalition-wide responses.

### Network sponsors first coalition surge test

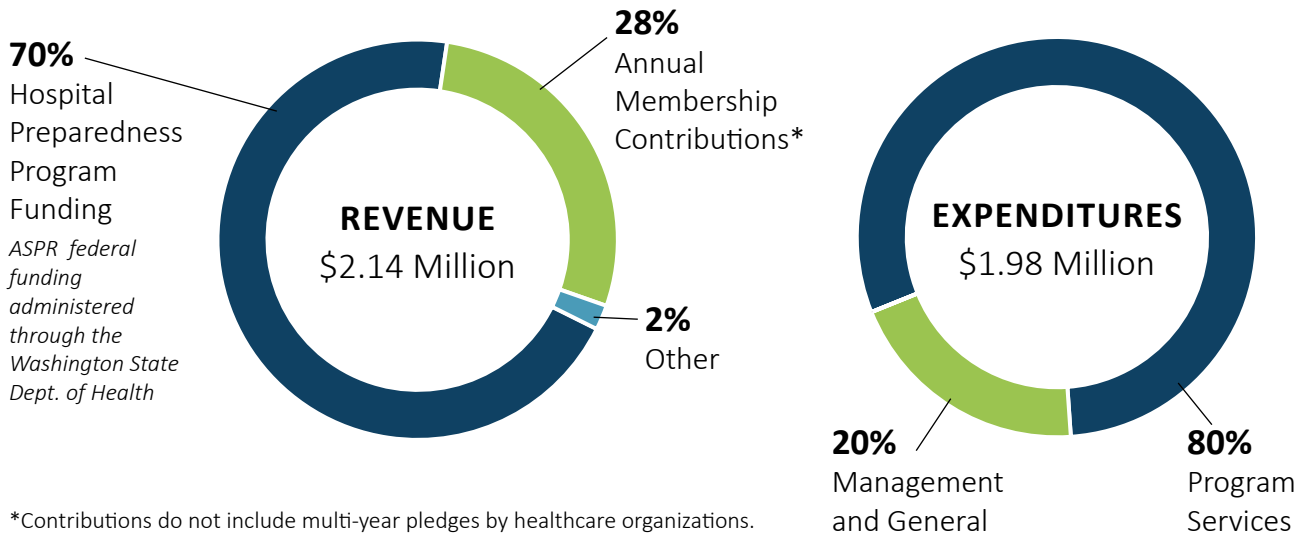
If an emergency required three of Seattle's largest hospitals to evacuate in a single morning, could the relevant agencies work together to find beds and transportation for their patients? On April 5, 2018, 66 healthcare organizations and response partners participated in the Puget Sound Coalition Surge Test, a no-notice functional exercise designed to evaluate the Network's emergency response plans.

The Coalition Surge Test is a new annual federal requirement that tests coalitions' abilities to locate the appropriate beds and transportation assets needed to evacuate 20 percent of hospital patients. In King, Pierce and Kitsap counties, that means planning to move 1,300 patients. During the April exercise, Seattle Children's Hospital, Swedish Medical Center—First Hill Campus and the University of Washington Medical Center simulated the discharge of as many patients as possible and coordinated with Harborview Medical Center, which serves as King County's Disaster Medical Control Center (DMCC), to match the remainder with beds in 27 Washington healthcare facilities and six in other Western states.

The successful placement of all evacuating patients demonstrated strong regional relationships, but the exercise also identified opportunities for increased training on the role of the DMCC and the procedures for requesting transportation support. Planning is under way for the 2019 Coalition Surge Test, which will engage healthcare and local partners in all 15 counties.

# Financial Overview 2017-2018

The Network's fiscal year is July 2017–June 2018.



## 2018 Board of Directors

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**Laura Rehrmann**, Independent Consultant, Former Foundation President, Group Health

**Nigel Turner**, RS, MPH, Ex-Officio, Division Director, Communicable Disease, Tacoma-Pierce County Health Department

# THANK YOU TO OUR 2018 SUSTAINING MEMBERS



## GET INVOLVED WITH NWHRN

Your engagement makes a difference.



### ENGAGE

in our community's  
disaster resilience



### JOIN

a committee or  
working group



### TAKE ADVANTAGE

of training opportunities  
found on our website

- ➔ **We need your organization's participation.** The more of the community we involve in planning, trainings and exercises, the better off we all will be when it is our turn to respond to a disaster.
- ➔ **We need your endorsement.** Spread the word about the Network's activities so we can maximize participation and make sure that anyone in our community who wants to get involved has the opportunity.
- ➔ **We need your financial support.** The Network is increasingly reliant on the membership of participating healthcare organizations, as well as support from local businesses and the community, to fund the work that benefits all of us.



### Get connected



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