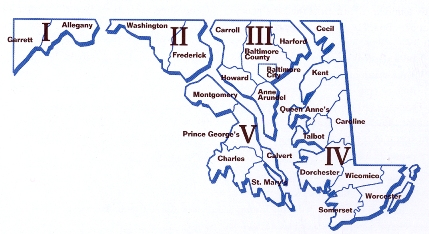


Region III Health and Medical Coalition Welcome Packet

A Regional Healthcare Preparedness Coalition serving Baltimore City and the counties of Anne Arundel, Baltimore, Carroll, Harford, Howard, and Annapolis

Region III Chair: Christina Hughes  
HPP Regional Coordinator: kathleen long

**Maryland Health and Medical Regions**



Region III



Annapolis

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# **Section I**

# Region III Health & Medical coalition

The Region III Health & Medical Coalition (previously called the Region III Health & Medical Task Force) was established in 2006 as a planning body devoted to addressing emergency preparedness issues facing the healthcare system in Region III. Maryland Region III consists of Baltimore City and the counties of Anne Arundel, Baltimore, Carroll, Harford, and Howard. Within this area there are 21 acute care hospitals, 7 Federally Qualified Health Centers (FQHCs), 6 DHMH State Facilities, 7 EMS jurisdictions, and 6 local health departments — not to mention many other healthcare providers, including urgent care facilities, long term care/skilled nursing facilities, and countless private providers. The Region III Health & Medical Coalition meets regularly to plan and allocate funding for initiatives related to public health and medical emergency preparedness. The group also assists in establishing priorities for future activities, and collaborates to improve disaster response capabilities throughout the region. Through this Coalition, Region III will become a more resilient community.

## Current Initiatives

* Region III Health & Medical Coalition Development
* Resource Management Plan Sustainment
* Allocation of Scarce Resources
* Hospital-Wide Evacuation
* Medical Surge Planning/Exercise
* Alternate Care Site Plan Development
* Active Assailant Kit Distribution

# Hospital Preparedness Program (HPP) Overview

The Hospital Preparedness Program provides leadership and funding to States, Territories, and eligible municipalities to improve surge capacity and enhance hospitals and other healthcare systems preparedness for public health emergencies. The funds are distributed to state and territory departments of public health to support the building of healthcare capabilities in the “Healthcare Preparedness Capabilities: National Guidance for Healthcare Systems Preparedness” document.

**Healthcare Preparedness Capabilities:**

Healthcare System Preparedness

Healthcare System Recovery

Emergency Operations Coordination

Information Sharing

Medical Surge

Fatality Management

Responder Safety and Health

Volunteer Management

Funding for Maryland is administered by the Maryland Department of Health and Mental Hygiene Office of Preparedness and Response. These funds help the state and local government, healthcare coalitions, ESF#8 and other healthcare partners identify gaps in preparedness, determine specific priorities, and develop plans for building and sustaining the 8 national healthcare specific capabilities. These activities support building community preparedness and resilient healthcare systems preparedness for all hazard events.

While HPP continues to encourage preparedness at the hospital level, evidence and real-world events have illustrated that hospitals cannot be successful in response without robust community healthcare coalition preparedness, thus the need to engage other critical partners. Critical partners include but not limited to emergency management, public health, mental-behavioral health providers, as well as community and faith-based partners. Together these partners make up a community’s Healthcare Coalition. A key goal of HPP moving forward is to strengthen the capabilities of the healthcare coalition, member organization, not just the hospital. Healthcare Coalitions are a cornerstone for the HPP and an integral component for community-wide planning for healthcare resiliency.

# Urban Areas Security Initiative (UASI) Overview

The Urban Areas Security Initiative program allocates funding every year to enhance regional preparedness in major metropolitan areas throughout the United States. The UASI program directly supports expanding regional collaboration and is meant to assist participants in their creation of regional systems for prevention, protection, response, and recovery. Again, in correspondence with the 9/11 Act, states are required to ensure that at least 25 percent of appropriated funding is dedicated to terrorism prevention planning, organization, training, exercise, and equipment. State Administrative Agencies (Department of Public Safety, State Office of Homeland Security, Emergency Management Agency, etc.) are the only groups eligible to apply directly to FEMA for UASI grants.

The Baltimore UASI region encompasses over 2.7 million residents, and includes Baltimore City (core city), City of Annapolis, and the counties of Anne Arundel, Baltimore, Carroll, Harford, and Howard.

Maryland’s risk from natural or man-made disaster is derived from the unique interplay of the state’s weather, economy, demographics, and geography.

Non-Natural Hazards - For its size and population, Maryland bears a disproportionate risk exposure to deliberate acts of terrorists. Targets include federal and private sector facilities of national and international import. These range from the National Security Agency to the Port of Baltimore and Baltimore/Washington International Airport.

Maryland’s role as a major air, land and sea transportation hub also brings with it concomitant responsibilities to track hazardous cargoes and respond decisively in event of an incident involving in transit hazardous materials.

Natural Hazards - Maryland's most significant natural risk is the landfall of a hurricane on its shores. The risk of harm from storms and flooding is significant because Maryland’s shorelines are densely populated and particularly susceptible to tidal surges and inland flooding due to their limited elevation and the funneling effect of the Chesapeake Bay.

Technological Hazards – Technological hazards for Maryland are both diverse and challenging. Of note is the presence of several nuclear power plants within and outside state borders and a major liquid natural gas terminal.

Recent incidents in the Baltimore UASI region:

Earthquake (5.8 magnitude) – August 23, 2011 Active Shooter (Student in High school) – August 27, 2012 Active Shooter (Johns Hopkins Hospital) – September 16, 2010 Hurricanes – Isabel, 2003; Irene, 2011; Sandy, 2012 Derecho – June, 2012 Tornado – November 16, 2010 Blizzard/Winter Storm – February, 2010 (multiple) Man-made threats – (Law Enforcement sensitive)

**Section II**

# 2017 MEETING CALENDAR Region iii health and medical Coalition

Monday, January 9th

Monday, February 13th

Monday, March 13th

Monday, April 10th

Monday, May 8th

Monday, June 12th

Monday, July 10th

Monday, August 14th

Monday, September 11th

Tuesday, October 10th

Monday, November 13th

Monday, December 11th

# Coalition Subcommittee

# Ongoing projects

1. Allocation of Scarce Resources:

-Projects lead: Howie Gwon

1. Communication/IT:

-Projects lead: Tom Jeffers

1. HPP Grants:

-Project lead: Kathleen Long

1. MIEMSS:

-Project lead: Lisa Chervon/ Jeff Huggins

1. Prophylaxis:

-Projects lead: Debra Curro

1. Triage Tags:

-Projects lead: Christina Hughes

1. UASI – THIRA:

-Projects lead: Cal Bowman

1. Ventilators:

-Projects lead: Todd Dousa

**SECTION III**

# Regional Mutual Aid memorandum of understanding

As in other parts of the nation, Region III is susceptible to disasters, both natural and man-made, that could exceed the resources of any individual facility. The possibly of an act of terrorism in the region is considerably higher than other places in the United States due to its geographic proximity to important government, military and high profile public institutions. A disaster could result from incidents generating an overwhelming number of patients, or a smaller number of patients whose specialized medical requirements exceed the resources of the impacted facility.

The Region III Health and Medical Coalition and its partners have signed an MOU that is an agreement to aid healthcare facilities in their emergency management by authorizing the Healthcare Facilities Mutual Aid System (HFMAS), which address the loan of medical personnel, pharmaceuticals, supplies, and equipment, or assistance with emergent healthcare facility evacuation, including accepting transferred patients. The MOU adopted by Region III healthcare facilities for the purpose of providing mutual aid at the time of a medical disaster. Through this document, the Region III partners augment each facility’s disaster plan or MOUs between or among healthcare systems.

The MOU also provides the framework for healthcare facilities to coordinate as a single HFMAS in actions with the Regions Health Department’s Office of Public Health Preparedness and Response, and supplements the rules and procedures governing interaction with other organizations during a disaster.

By signing the Region III MOU, each healthcare facility is stating its intent to undertake a reasonable effort to abide by the terms of the MOU in the event of a medical disaster as described above. The terms of the MOU are to be incorporated into the healthcare facility’s Emergency Management plans.

**SECTION IV**

# Contact Information

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Region III Health & Medical Coalition** | | | | | | |
| Agency | Member | Phone | Email | Alternate | Alt Phone | Alt Email |
| AA County Health | Debbie Saylor | 410-222-4495 | Hdsayl99@aacounty.org | Debra Curro | 410 222-7187 | Hdcurr11@aacounty.org |
| Annapolis Fire/EMS | Dan Grimes | 410 263-7978 | dagrimes@annapolis.gov | Richard Butler | 443-336-2949 | rdbutler@annapolis.gov |
| Anne Arundel County Hospitals | Patty Sherman | 443-481-1297 | psherman@aahs.org | Marsha Hora | 410-553-2926 | mhora@bwmc.umms.org |
| Anne Arundel Fire/EMS | James Wilkison | 410-222-8398 | Fdwilk10@aacounty.org | Mark Dubel | 443-534-6417 | fddubel@aacounty.org |
| Balt. City Health | Kim Eshleman | 443-984-2620 | Kimberly.eshleman@baltimorecity.gov | Jennifer Martin | 443 984-2618 | jennifer.martin@baltimorecity.gov |
| Baltimore City Fire/EMS | Mark Fletcher | 410.365.2339 | mark.fletcher@baltimorecity.gov | Jim Matz | 410-365-6212 | james.matz@baltimorecity.gov |
| Baltimore City Hospitals (Hopkins) | Howie Gwon (Vice Chair) | (410) 502-6122 | hgwon@jhmi.edu | Dianne Whyne | 410-735-6438 | [dwhyne@jhmi.edu](mailto:dwhyne@jhmi.edu) |
| Baltimore County Fire/EMS | Christian Griffin | (410) 887-4860 | Cgriffin@Baltimorecountymd.gov | Shift Commander | 410 887-4860 | [rschenning@baltimorecountymd.gov](mailto:rschenning@baltimorecountymd.gov) |
| Baltimore County Health | Terry Sapp | 410-887-2428 | tsapp@baltimorecountymd.gov |  |  |  |
| Baltimore Co Hospitals (Franklin Sq) | Christina Hughes (Chair) | 443-777-7380 | christina.hughes@medstar.net | Loreal Froat | 443-777-2479 | [loreal.froat@medstar.net](mailto:loreal.froat@medstar.net) |
| Carroll CCVESA | David Coe | 443-375-0642 | dcoe@nwfd10.org | Curtis Wiggins | 410-848-1488 | [emstc@ccvesa.org](mailto:emstc@ccvesa.org) |
| Carroll County Health | Cheryl Webb | 410-876-4817 | Cheryl.webb@maryland.gov |  |  |  |
| Carroll County Hospitals | Tom Jeffers | 410 871-6756 | TJeffers@carrollhospitalcenter.org | Joe Brown | 410-887-4860 | [jbrown@baltimorecountymd.gov](mailto:jbrown@baltimorecountymd.gov) |
| DHMH State Facilities | TBD |  |  | Al Romanosky | 410-767-6631 | [al.romanosky@maryland.gov](mailto:al.romanosky@maryland.gov) |
| Harford County EMS | Linda Dousa | 410-808-1553 | ldousa@verizon.net |  |  |  |
| Harford County Health | Lisa Swank | 410 877-1028 | lisa.swank@maryland.gov | Susan Kelly | 410-877-1010 | [susan.kelly@maryland.ogv](mailto:susan.kelly@maryland.ogv) |
| Harford County Hospitals | Karen Goodison | 443-643-2327 | KGoodison@uchs.org | Amy Myers | 443-643-3120 | [amyers@uchs.org](mailto:amyers@uchs.org) |
| Howard County DFRS | Jimmy Brothers | (410) 313-0649 | jbrothers@howardcountymd.gov | Mike Stoner | 443-398-0484 | fd2184@howardcountymd.gov. |
| Howard County Health | Lee Cornwell | 410-313-6306 | hcornwell@howardcountymd.gov | Shantu Scatliffe | 410-313-6293 | sscatliffe@howardcountymd.gov |
| Howard County Hospitals | Gene Mellin | 410 740-7617 | gmellin@jhmi.edu |  |  |  |
| Region III EMS Council | Alex Perricone | 443-865-0664 | Alex.perricone@baltimorecity.gov |  |  |  |
| MHA | Meghan Allen | 443-878-6112 | mallen@mhaonline.org |  |  |  |
| MEMA | John Dulina | 443 865-8638 | john.dulina@maryland.gov |  |  |  |
| MIEMSS Reg III | Lisa Chervon | 410-706-3996 | lchervon@miemss.org | Jeff Huggins | 410-706-3996 | jhuggins@miemss.org |
| MIEMSS Reg III Medical Director | Tim Chizmar | (443) 643-2000 | tchizmar@umem.org |  |  |  |
| Baltimore UAWG | Cal Bowman | 410 396-6179 | calvin.bowman@baltimorecity.gov | Joe Herr | 410-292-3838 | josephherr@verizon.net |
| CDC/SNS | TBD |  |  |  |  |  |
| Baltimore VAMC/Veterans Affairs | Dave Csernak | 202-258-8448 | david.csernak@va.gov |  |  |  |
| Region III ACS at GBMC | Michelle Tauson | 443-849-3036 | mtauson@gbmc.org |  |  |  |
| DHMH/HPP | Kathleen Long | 443-388-6290 | Kathleen.Long@maryland.gov | Corinne Edds | 410-767-8105 | Corinne.edds@maryland.gov |