



Tri-Cities Medical Response System

Strengthening Emergency Response through Collaboration

An Introduction

The Tri-Cities Medical Response System (TRIMRS) is one of seven healthcare coalitions located in Nebraska. A health care coalition is a group of healthcare organizations, medical response, public safety and public health partners that join forces for the common cause of making their communities safer, healthier and more resilient.

Healthcare coalitions have been formed across the United States for the purpose of coordinating the medical response to a terrorist incident, public health or medical emergency event in which a large number of casualties, or casualties involving unique care, must be treated. This is accomplished by enhancing local planning efforts through:

- Assisting in the development and testing of individual organization, community, and regional plans, processes and procedures
- Identifying roles and responsibilities of organizations in a disaster or public health emergency for a unified response
- Identifying staffing, equipment, supply and communication resource needs and assisting in the acquisition of resources required during a response
- Developing or facilitating joint, multi-agency training and exercise opportunities

TRIMRS was formed to serve a 23-county area in central and south-central Nebraska. All seven healthcare coalitions are funded in whole or in part by the Department of Health & Human Services through the National Bioterrorism Hospital Preparedness Program, CFDA 98.889.

TRIMRS Geographic Coverage

County	Hospital(s) within the County	Health Dept.	Emergency Mgmt.
Adams	Mary Lanning Healthcare	South Heartland District Health Department	Adams County Emergency Management
Blaine		Loup Basin Public Health Department	Blaine County Emergency Management
Buffalo	CHI Health Good Samaritan/Richard H Young Hospital	Two Rivers Public Health Department	Buffalo County Emergency Management
	Kearney Regional Medical Center		
Clay		South Heartland District Health Department	Clay County Emergency Management
Custer	Callaway District Hospital	Loup Basin Public Health Department	Custer County Emergency Management
	Jennie M Melham Memorial Medical Center		
Dawson	Cozad Community Hospital	Two Rivers Public Health Department	Dawson County Emergency Management
	Gothenburg Health		
	Lexington Regional Health Center		
Franklin	Franklin County Memorial Hospital	Two Rivers Public Health Department	Franklin County Emergency Management
Garfield		Loup Basin Public Health Department	Garfield County Emergency Management
Gosper		Two Rivers Public Health Department	Region 15 Emergency Management
Greeley		Loup Basin Public Health Department	Greeley County Emergency Management
Hall	CHI Health Saint Francis	Central District Health Department	GI/Hall County Emergency Management
Hamilton	Memorial Community Health	Central District Health Department	Hamilton County Emergency Management
Harlan	Harlan County Health System	Two Rivers Public Health Department	Harlan County Emergency Management
Howard	Howard County Medical Center	Loup Basin Public Health Department	Howard County Emergency Management
Kearney	Kearney County Health Services	Two Rivers Public Health Department	Kearney County Emergency Management
Loup		Loup Basin Public Health Dept.	Loup County Emergency Management
Merrick	Litzenberg Memorial County Hospital	Central District Health Department	Region 44 Emergency Management
Nuckolls	Brodstone Memorial Hospital	South Heartland District Health Department	Nuckolls County Emergency Management
Phelps	Phelps Memorial Health Center	Two Rivers Public Health Dept.	Region 15 Emergency Management
Sherman		Loup Basin Public Health Department	Sherman County Emergency Management
Valley	Valley County Health System	Loup Basin Public Health Dept.	Valley County Emergency Management
Webster	Webster County Community Hospital	South Heartland District Health Dept.	Webster County Emergency Management
Wheeler		Loup Basin Public Health Department	Wheeler County Emergency Management

Hospital	Community	Lic. Bed Capacity	State Trauma Level
Brodstone Memorial Hospital	Superior, NE	25	
Callaway District Hospital	Callaway, NE	12	
Cozad Community Hospital	Cozad, NE	21	IV
Franklin County Memorial Hospital	Franklin, NE	15	IV
CHI Health Good Samaritan/Richard H Young Hospital*	Kearney, NE	226	II
CHI Health Saint Francis	Grand Island, NE	163	III
Gothenburg Health	Gothenburg, NE	12	IV
Harlan County Health System	Alma, NE	25	
Howard County Community Hospital	St. Paul, NE	25	IV
Jennie M Melham Memorial Medical Center	Broken Bow, NE	25	IV
Kearney County Health Services	Minden, NE	25	IV
Kearney Regional Medical Center	Kearney, NE	44	
Lexington Regional Health Center	Lexington, NE	25	
Litzenberg Memorial County Hospital	Central City, NE	20	IV
Mary Lanning Memorial Hospital ^{TG}	Hastings, NE	173	III
Memorial Community Health	Aurora, NE	25	IV
Phelps Memorial Health Center	Holdrege, NE	25	IV
Valley County Health System	Ord, NE	25	IV
Veterans Administration**	Grand Island, NE		
Webster County Community Hospital	Red Cloud, NE	16	

*Richard H Young is an inpatient/outpatient mental health facility affiliated with CHI Health Good Samaritan.

** Veterans Administration includes the following: community living center, residential substance abuse, and community-based outpatient clinic

OTHER ENTITIES

While hospitals, health departments and emergency managers make up the majority of the TRIMRS membership, other area entities also involved in the TRIMRS health care coalition or as partners to the health care coalition through work on subcommittees and task forces include:

- EMS Regional Coordinators/EMS representatives
- Region 3 Behavioral Health Services
- Ham radio operators
- American Red Cross
- Funeral Directors
- Volunteers (Central Nebraska Medical Reserve Corps)
- University of Nebraska at Kearney Student Health

In addition to the essential health care providers and emergency responders, as listed above, other potential providers and responders in the TRIMRS area also include long-term care facilities, private entities, specialty service providers, primary care providers, support service providers, law enforcement, fire, faith-based organizations, community-based organizations and volunteer-based organizations that should be part of a multi-agency preparedness, mitigation, response and recovery effort. TRIMRS believes it is essential to add members and partners, through the coalition or through local community multi-agency

groups, in a manner that allows time for appropriate integration and planning efforts, supporting each and every organization that is added.

TRIMRS ORGANIZATIONAL STRUCTURE

The TRIMRS Steering Committee serves as the governing entity, responsible for development and execution of an annual work plan and preparation of a corresponding budget; it serves as the final decision making body for all activities and resource allocation. The TRIMRS Steering Committee is composed of hospitals, health departments, emergency managers, regional EMS representatives, Region 3 Behavioral Health and the Chairs of all subcommittees with each organization, regardless of size or function, having one vote. Meetings are held on a monthly basis, typically via telehealth technology, with periodic in-person meeting to for relationship development. TRIMRS considers relationship development to be a cornerstone of preparedness.

The TRIMRS Steering Committee elects an Executive Committee that consists of a Chair, Vice-Chair, Secretary and Treasurer. In addition to the TRIMRS Steering Committee, the following subcommittees and advisory boards meet on an as needed basis. These groups are subject to change based upon the goals of TRIMRS and the capabilities/performance measures required by the National Bioterrorism Hospital Preparedness Program:

Subcommittee	Medical Surge/EOC Combined Subcommittee
Primary Focus	Development of a Medical Surge Plan for the TRIMRS Health Care Coalition
Details	Plan to include: <ul style="list-style-type: none"> • Pre-hospital and hospital surge coordination and management • Continuous monitoring, offloading and on-loading of patients • Risk assessment of potential surge • Ability to provide no less than 20% immediate bed availability of staff members' beds within 4 hours of an incident • Rapid bed turnover/rapid discharge/transferring of lower acuity patients/deferral of electives and procedures • Onloading through redeployment of resources for higher acuity admissions • Tracking and documenting patient movement

Subcommittee	Healthcare Recovery Plan
Primary Focus	Development of a Healthcare Recovery Plan for the TRIMRS Health Care Coalition, which includes identification of critical services and key resources.
Details	Plan to include: <ul style="list-style-type: none"> • Critical medical services (e.g. trauma, radiology, critical care, surgery, negative pressure, pediatrics, mental/behavioral health, EMS, decon, isolation) • Critical medical support services (e.g. patient transport services, pharmacy, blood banks, laboratory, medical gas suppliers, mobile medical assets) • Critical facility management services (e.g. power, water, sanitation, generators, heating, ventilation, HVAC) • Critical healthcare information systems for information management/communication (e.g. failover and back-up, remote site hosting) • Key health care resources (e.g. alternate care sites, staffing, equipment, beds, medical supply, PPE, pharmaceuticals) • Post-disaster mental and behavioral health needs (risk-based estimates of potential mental healthcare needs, assessment of resources, process to obtain resources)
Secondary Focus	Provide assistance to hospitals in developing COOP/BCP plan

Subcommittee	Communications/Information Sharing & Responder Safety and Health Combined Subcommittee
Primary Focus	Development (update) of an Information/Communication Plan for the TRIMRS Health Care Coalition
Details	Plan to include: <ul style="list-style-type: none"> • Process to provide the status of resources (situational awareness TO membership) • Process to provide the status of need (situation awareness FROM membership) • Method to provide status (information management system, interoperable communications) • Identification of essential elements of information
Primary Focus	Development of a Resource Plan for the TRIMRS Health Care Coalition
Details	Plan to include: <ul style="list-style-type: none"> • Protocols for resource management • Protocols to receive and request resources that will provide pharmaceutical prophylaxis, and/or treatment and PPE to health care workforce (we have a lot of this) • Protocol for assessing need and resource request process to fulfill need.

Subcommittee	Mass Fatalities
Primary Focus	Development or adoption of a Fatality Management Plan for the TRIMRS Health Care Coalition
Details	<ul style="list-style-type: none"> • Develop plan for coalition OR • Adopt the Nebraska DHHS “Emergency Support Function Eight - Mass Fatality Plan and Matrix”

Subcommittee	Health Care System Preparedness
Primary Focus	Structure of the TRIMRS Health Care Coalition
Details	<ul style="list-style-type: none"> • Discuss strategic planning process • Review and amend policies and/or consider bylaws • Set direction for future growth and sustainability

Partner	Central Nebraska Medical Reserve Corps Advisory Council
Primary Focus	Oversight and direction of the Medical Reserve Corps
Details	<ul style="list-style-type: none"> • Develop a strategic plan • Review and amend policies • Set direction for activities, growth and sustainability

Subcommittee	Exercise Design Team
Primary Focus	Development of Annual Exercise
Details	<ul style="list-style-type: none"> • Regional exercises (objectives based upon contract deliverables) • Individual hospital exercises, design and facilitation as requested

TRIMRS Resources for our Members

Plans/Policies/Procedures/MOUs/Other:

- Medical Volunteer Hospital Plan Template
- Hospital Pandemic Influenza Plan Template
- Hospital CBRNE Plan Template
- Hospital Mass Fatality Plan Templates
- County Mass Fatalities/Mass Casualties Family Assistance Center
- Nebraska Emergency/Disaster Health and Medical Volunteer Plan
- Inter-Hospital Agreement for Resources (MOA)
- EMS Mutual Aid Agreement (MOA)
- Alternate Care Site Use Agreement (MOA)
- Hospital Alternate Care Site Plan Template
- Hospital Evacuation Plan Template
- Hospital Disaster Medical Record
- Central Nebraska Medical Reserve Corps Policies
- EMS Mass Casualty Incident Response
- TRIMRS Regional Plan
- Buffalo County Medical Table Plan
- Active Shooter Plan Checklist
- Hospital Rapid Discharge

Plans/Policies/Procedures Actively in Development:

- Mass Fatalities Disaster Site
- Mass Fatalities Morgue Site
- Mass Fatalities Headquarters
- Pre-Hospital Regional Surge Planning

Supplies/Equipment/Staffing:

- Inter-Hospital MOU (Staff, equipment, supplies, patient transfer)
- Local caches at area hospitals (mainly PPE)
- Mobile Medical Assets (Alternate Care Site equipment and supplies)
- Central Nebraska Medical Reserve Corps (Staff and mobile trauma trailer)
- ESAR-VHP (Staff)

Education/Training:

- Incident Command for Hospitals
- Strategic National Stockpile
- Plan development workshops
- Ebola information
- Roles and Responsibilities
- CMS Proposed Regulations

Exercises:

- Pandemic Influenza/PanFlu Scramble
- Strategic National Stockpile
- Active Shooter
- Tornado
- Evacuation
- Ice Storm Evacuation/Shelter-in-Place
- Botulism
- Anthrax
- Transportation Evacuation

Communications:

- Med 4 Radios
- Satellite Radio/Phones (GS and BMH)
- Emergency Management radio caches and mobile communications centers
- Ham radio operators/equipment
- TRIMRS Mass Notification Systems (to request help or provide situational awareness)
- Website (under construction)
- Facebook

Disaster/Public Health Emergency Role:

- Liaison/Logistics: Assist in locating and arranging for hospital resources; situational awareness

- As needed/requested

