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The Arizona Tribal Health Care Coalition Administration Plan

Completed October 19, 2017

Arizona Tribal Health Care Coalition (THCC) Administration Plan Table of Contents

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Charter

Mission: The mission of the Tribal Health Care Coalition (THCC) is to elevate emergency preparedness and response in tribal communities and healthcare facilities serving tribal communities to the highest level possible.

Vision: We envision tribal communities and healthcare facilities serving tribal communities aware of their disaster vulnerabilities, having effective mitigation strategies, with effective partnerships at the Tribal, County, State and Federal levels of government and with functioning incident management structures and processes capable of responding to disasters in a professional and timely manner to preserve and protect the people and property of tribal communities across the State of Arizona.

Values: The following values are practiced by all members:

- We value being prepared for disasters and knowledgeable of disaster management principles,
- We value high quality professional response,
- We value helping our neighbors and being of service to communities both tribal and non-tribal,
- We value tribal sovereignty and the government to government relationship between tribal nations, the State of Arizona and the United States of America, and
- We value traditions and cultural practices that have been central to tribal communities for centuries.

Governance

Governance and Operations: The THCC is an Advisory Committee, comprised of required members:

- 638 Title V (Tribal Operated Health Care),
- Indian Health Service (IHS),
- Tribal Emergency Management, and
- Tribal Emergency Medical Services (EMS).

It also includes community/tribal partners:

- Arizona Bureau of Indian Affairs Emergency Manager,
- Arizona Health Care Cost Containment System (AHCCCS),
- Arizona Department of Emergency and Military Affairs,
- Arizona Department of Health Services' (ADHS) Bureau of Public Health Emergency Preparedness,
- Arizona Tribal Executive Committee,
- InterTribal Council of Arizona.

The THCC communicates with and links to the other Health Care Coalitions in Arizona:

- Arizona Pediatric Disaster Coalition and
- Regional and State Health Care Coalitions.

Coyote Crisis Collaborative is the Fiscal Agent and Managing Partner. Other subject matter expertise may serve on the THCC or provide necessary information through work groups. Input on changes to the structure is guided by THCC and may be adjusted as needed.

Officers: Each officer of the THCC serves a one-year term.

The Vice Chair becomes the Chair on July 1 of the each year. The officers include:

- The Chair,
- The Vice Chair,
- Chair Elect, and
- The Past Chair (advisory role).

The election of the new Vice Chair is held during a regular THCC meeting before June 30th of each year. The new Officers are in effect July 1 of each year. If the Chair or Vice Chair leaves office before the term expires, the Chair can appoint an interim Vice Chair until an election is held. A quorum of the THCC is needed for the vote, either during the meeting or prior via email.

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Each Regional HCC and the Arizona Pediatric Disaster Coalition has a representative serving on the THCC.

All officers must document training and certification in the National Incident Management System (NIMS).

Terms of Members: There are no term limits for the THCC. All positions represent critical tribal experts in Arizona. Representation on the THCC is determined by the organizations represented, such as the emergency managers or another designee of the tribal hospitals.

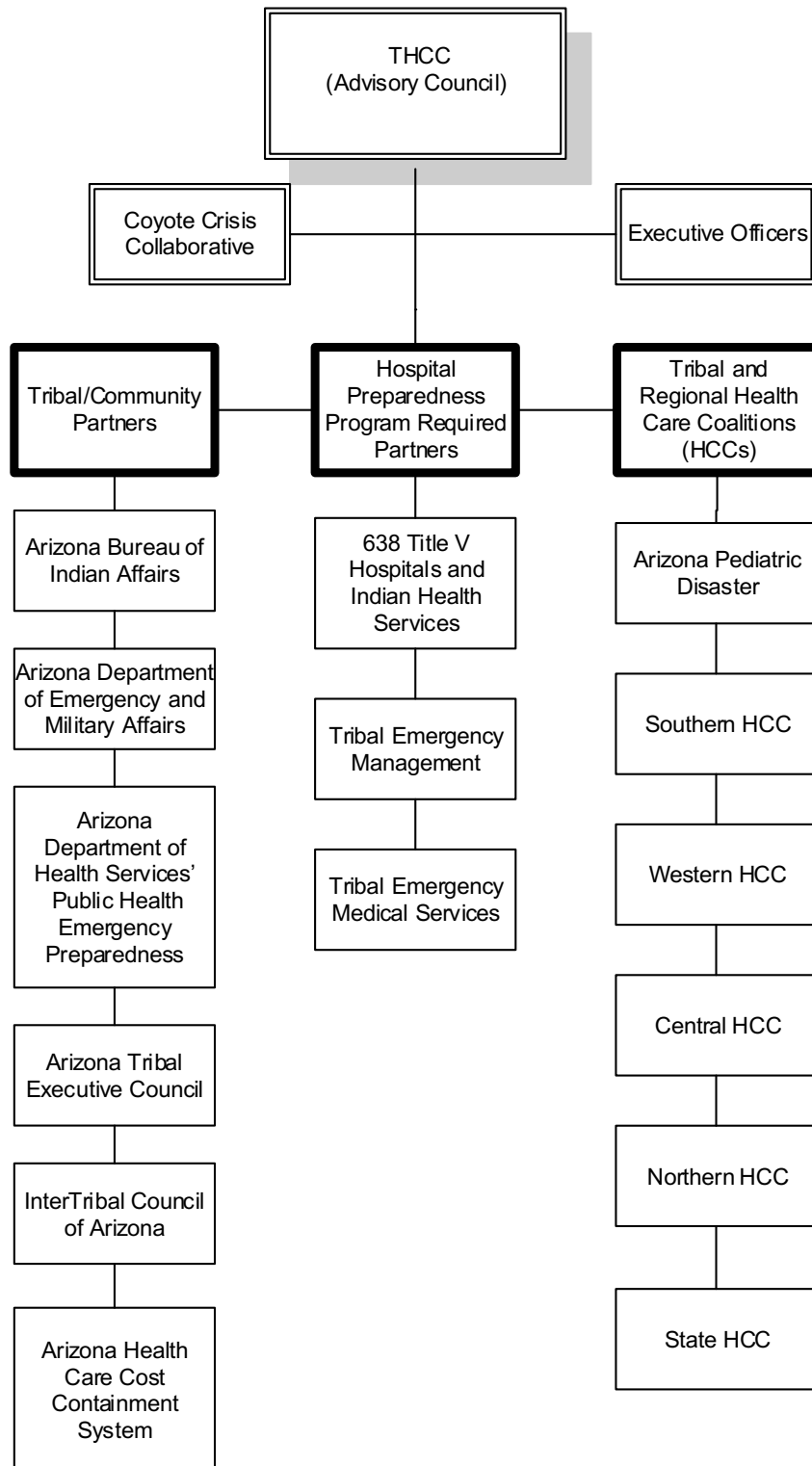
Expiration of Membership: Attendance at meetings is not required for all THCC members. Invitations are provided, and members attend as their time allots.

Expectations of THCC Appointed Leads for the Other Health Care Coalitions (HCCs): The THCC has appointed liaisons to the Regional HCCs and the Arizona Pediatric Disaster Coalition. This is done for purposes of communication and alignment. Expectations include:

1. Ensure that tribal considerations are integrated into HCC plans (including local Emergency Support Function #8 [ESF-8]) for managing access to and administration of pharmaceutical/non-pharmaceutical interventions. This will be reported back to the THCC and reflected in minutes.
2. Complete a Hazard Vulnerability Assessment with Regional HCC information available; this task will be done in conjunction with the THCC officers. This is also a Hospital Preparedness Program (HPP) required deliverable.
3. Ensure safety and health of responders to include tribal populations and tribal accommodations within plans. This will be reported back to the THCC and reflected in minutes.
4. Ensure that surge plans within the HCCs accommodate tribal interests, including those accommodating infectious disease outbreaks. This will be reported back to the THCC and reflected in minutes.
5. Report back to the officers of the THCC participation of the THCC hospitals in the Regional HCC surge test.
6. Validate the tribal hospitals have participated in the coalition surge test. This will be reported back to the THCC and reflected in minutes.
7. Share the THCC Preparedness Plan with the HCCs pertaining to tribal capability situational awareness, evacuation, transport, and relocation with the Regional HCCs and the Arizona Pediatric Disaster Coalition. This will be reported back to the THCC and reflected in minutes.

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Organizational Chart



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Meetings

The THCC Advisory Committee meetings are quarterly or more often as needed. These meetings are held via conference call or webinar and may be replaced by an Annual Arizona THCC Workshop. Meetings include national and/or state speakers and business that requires a vote, unless that vote has been secured by email. A quorum is required to adopt, revise, and update any Bylaws, policies, plans, processes, structure, the Charter, management, or other changes and may be conducted via email

Meeting Minutes document participation, discussions, and decisions of members of the THCC. Email votes on decisions are documented and reported in the Minutes as well.

Conflict Resolution: Votes on all topics are generally completed via email or in meetings. If and when there are conflicts, information may be directed to the THCC Administrator at Coyote Crisis Collaborative. The Administrator then forwards the information to the THCC Officers, who examine concerns with respect to policies and other documentation adopted by the THCC and best practices to validate resolutions. Based on information collected, the THCC will communicate with the individual filing a conflict and/or the THCC for vote.

Attendance at Required Meetings: The THCC is represented and attends the All Partners Meeting, Senior Advisory Council, Training and Exercise Workshop, and other meetings requested by ADHS. The Training and Exercise Plan and performance measures are submitted to ADHS.

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Operations

The THCC is operational in terms of communications and information sharing, which is conducted through and with ADHS and the other state HCCs. This includes fatality management planning, medical surge planning, and continuity of operations. The THCC may offer important information for fatality management and medical surge planning pertaining to tribal interests.

Agreement to Avoid Duplication of Other HCCs: Per agreement with the Arizona Pediatric Disaster Coalition and the four Regional HCCs in Arizona, the THCC does not duplicate their work, but instead advocates for tribal health interests in disasters, identifies and addresses tribal-specific gaps, and provides tribal health guidance on resources, indicators, and other recommendations to the other HCCs in Arizona regarding. Hence, the THCC does not retain formal Memorandums of Understanding with the healthcare partners across Arizona, but depends on the other HCCs and ESF-8s in Arizona for communications.

Contractors: As needed, contractors may be utilized to develop plans or other documents. These contracts are awarded by Coyote Crisis Collaborative on behalf of the THCC.

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Fund Management

Coyote Crisis Collaborative serves as the managing partner of the THCC. The THCC is funded by HPP dollars through ADHS. The funds are managed by the Coyote Crisis Collaborative (fiscal agent). Account updates are provided to the Officers of the THCC by Coyote Crisis Collaborative monthly and to ADHS and the Assistant Secretary of Preparedness and Response (ASPR) per requirement to accomplish the annual scope of work.

The Collaborative is able to expedite funding to the HCC member organizations, such as hospitals, as needed. Funding is provided as early as the day of receiving funding dedicated by ADHS.

Communications

Tribal Networks: The THCC requests through ESF-8 government agencies (Arizona Department of Health Services (ADHS) and county and tribal ESF-8 through HCCs in Arizona) resource requests and coordination to foster optimal tribal care during a disaster. The THCC also communicates to these ESF-8 government agencies through established networks

The THCC maintains a communication network with:

- Arizona-based Bureau of Indian Affairs,
- Indian Health Service Area Offices (Tucson, Navajo, and Phoenix),
- Tribal Emergency Managers,
- Tribal Leaders,
- Tribal Public Health Emergency Preparedness (PHEP) Coordinators, and
- Inter-Tribal Council of Arizona.

In times of disaster, communication will flow through the established networks of these entities. The THCC will collect and provide information to serve tribal healthcare facilities in an effort to prepare tribal communities for disaster.

Communications with Healthcare Executives: Communications with Healthcare Executives for THCC hospital members is done annually, in November. The communications include a copy of the Annual Report, completed in October of each year.

Technologies: The THCC utilizes EMTrack, EMResource, the Arizona Health Alert Network (AzHAN), GotoMeeting, and Adobe Connect for communications and collection of information. Other resource and information management may avail additional communication devices offered by ADHS.

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Exercises

Exercises are defined within the annual Work Plan. Minimally, these include two communications drills.

Tribal hospitals participate in the Surge Test, statewide exercises, and other exercises required for compliance with the HPP through their participation in regional HCCs.

Policy for Determining Projects to Fund: The THCC in Arizona is the recipient of Hospital Preparedness Program federal funding under disbursement from the Arizona Department of Health Services. Funding is used to pay for planning, direct public outreach, workshops, conferences, speakers, and other projects to meet the goals defined by the strategic plan developed annually. In the event funding must be reallocated – such as when dollars are available after all commitments and contracts have been covered – the THCC will award the new dollars to benefit tribal projects that will benefit the THCC members as a whole (e.g., special projects by THCC member organizations that only benefit themselves and do not offer general resources/benefits to the THCC will not be considered for funding).

Policies and Processes Defined as Separate Documents

The THCC maintains some separate documents for specific documents. These include:

- Capability Assessments,
- Hazard Vulnerability Assessments,
- Tribal Disaster Plan for Hospitals,
- Evacuation Plan,
- Work Plans defining goals and scopes of work, policies, and certain other initiatives, and
- Other policies and processes.