Purpose
This Governance document defines the structures and processes that the Sonoma County Healthcare Coalition (HCC) uses to develop cooperative disaster response capacities. Sonoma County’s HCC consists of many agencies and organizations with a stake in responding to community health or medical needs during local disasters. We value active participation, transparent decision-making, mutual assistance, and fairness in allocation of resources, knowing that strong working relationships and a common vision are at the heart of a community’s successful disaster response and recovery.

HCC Membership
All organizations that provide health or medical services, as well as organizations whose mission is related to providing or assuring health services during disasters, are welcome to join the Coalition; to attend the HCC quarterly meeting, called the Healthcare Disaster Planning Forum; and to participate in working committees of the HCC relevant to their mission. Membership information is maintained by the Health Department’s Public Health Preparedness (PHP) program. Members agree to share their organization’s contact information with each other for disaster preparedness and response purposes.

Each organization should consult regulations, licensing standards, funding agreements, professional organizations, or other sources to understand its internal disaster preparedness and response obligations. Active membership in the Healthcare Coalition is further demonstrated when an organization participates regularly in Coalition activities, including:
- **Attendance**: In-person attendance at Healthcare Forum meetings.
- **Communications**: Maintain current contact information for your organization’s disaster response contacts and agree to share this with Coalition partners. Establish Coalition communications systems at your facility. Respond promptly to requests for information during emergencies.
- **Training & Exercises**: Participate in trainings and exercises: monthly drills, annual Statewide Tabletop Exercise, annual Statewide Functional Exercise, annual Surge Test Exercise, and other events as needed.
- **Planning**: Integrating reference to Coalition plans and procedures into the organization’s internal disaster plans.

By participating in the above Coalition activities, Coalition members demonstrate their agreement to coordinate disaster planning and response efforts with the HCC and with the Medical-Health Operational Area Coordinator (MHOAC) Program.

Healthcare Disaster Planning Forum
The Healthcare Coalition full membership meets quarterly at the Healthcare Disaster Planning Forum. Forum agendas are set by the HCC Steering Committee (see below). In general, each meeting is designed to build collaborative disaster response capacity by providing training or tabletop discussion on disaster topics. Each quarter usually deals with a theme as follows:
- 1st meeting (usually February) – focus on strategic planning, Governance review, Hazard Vulnerability Assessment (HVA)
- 2nd meeting (usually May) – focus on HPP grant work plan and budgeting priorities
- 3rd meeting (usually August) – focus on preparation for Statewide Exercises (SWE)
- 4th meeting (usually December because the SWE is in November) – focus on SWE debrief and corrective actions

HCC Steering Committee
A Steering Committee of the HCC has been established to manage decisions required of the Healthcare Coalition. The Steering Committee consists of 1 to 2 representatives from (5) groups: Public Health, Local Emergency Medical Services Agency (LEMSA), hospitals, clinics, and skilled nursing facilities (SNFs). The Steering Committee meets monthly to make decisions on behalf of the entire HCC to establish priorities for strategic planning; to approve policies, plans, or other products of the HCC; to approve funding decisions for the HPP grant or other funds available to the HCC; and to provide other guidance and support as needed to sustain Coalition initiatives. Notes from the Steering Committee are prepared by PHP and shared to the entire Coalition.

Steering Committee members have one vote each and make decisions as much as possible by consensus, so that all members can accept decisions. The hospital, clinic, and SNF representatives also attend their relevant Mini-Forum and the Healthcare Disaster Planning Forum. Steering Committee members bring the input of these working groups to Steering Committee decisions.

For decisions on use of HPP or other funds, the Steering Committee will consider:
- The priorities for use of funds set by grantors
- The degree to which a funding request aligns with priorities set by the Coalition
- The qualifications of a requesting organization for funds (see below). (NOTE: Steering Committee may allow exceptions)
To qualify for receipt of funds or items purchased from funds managed by the HCC, organizations should:

1. Meet the membership activities described above under Membership.
2. Attend 3 of the last 4 Healthcare Forum meetings in person. Note: hospitals, clinics, and SNFs may send one person to represent more than one facility within their organization; eg: the Cloverdale Healthcare disaster manager may represent other SNFs in the local Ensign corporate structure.
3. Have participated in 1) the last Statewide Tabletop Exercise (sign-in sheet is used to verify; one representative may attend on behalf of multiple facilities within their organization), and 2) the Statewide Functional Exercise (at a minimum respond to communications during the exercise).
4. Be NIMS compliant. Compliance is demonstrated by periodic reporting on a facility’s ICS training plan and current status of trainings for facility command center staff.
5. Provide a disaster justification for any purchase requests.
6. Acknowledge that all purchases remain the property of the grantor (usually the Health Dept.) and may be moved or reassigned for disaster management purposes. Recipients sign a receipt to this effect and take responsibility to maintain and account for all purchases during an annual inventory or when requested.

**HCC Subcommittees**
The Coalition may establish standing or ad hoc subcommittees or working groups as needed. Current committees are:

*Hospital, Clinic, or SNF Mini-Forums* – these are standing subcommittees made of PHP, LEMSA, and either hospital, clinic, or SNF representatives, along with and any other Coalition member whose mission most closely matches that of each Mini-Forum. Mini-Forums meet to discuss issues of importance to their type of healthcare organization. Mini-Forums determine by majority decision which organizations are appropriate to participate in those meetings. They devise plans; make recommendations to the Steering Committee on purchases or priorities; evaluate disaster preparedness progress at each other’s facilities, such as NIMS compliance; and provide assistance to each other to build a foundation of response capacity across all member facilities. Mini-Forums are co-chaired by either PHP or LEMSA plus their representative who also serves on the Steering Committee. Together the co-chairs guide the Mini-Forum discussion, priorities, and activities to meet Coalition goals.

*Healthcare System Surge Planning Committee* – currently inactive while Coalition Surge Plan is in development. Next steps are to develop a surge patient tracking and transport process, a process for coordinating patient surge across the healthcare system, and finalization of draft plans for government-authorized alternate care sites.

*Child Disaster Planning Team* – currently inactive. Formed in 2013, this ad hoc group meets to identify gaps and define priorities that build disaster response capacity to serve children.

*Exercise Committee* – this standing subcommittee meets primarily to plan for mini-drills at Healthcare Forum meetings and for the annual Statewide Medical-Health tabletop and functional exercises. The Exercise Committee may also plan other exercises established by the Steering Committee.

**HCC Funding and Staffing**
The primary funding for HCC activities comes through the US Department of Health and Human Services, Assistant Secretary for Prevention and Response’s Hospital Preparedness Program (ASPR-HPP) program. The HPP grant is awarded to local communities to develop collaborative system-wide health and medical disaster response capabilities. In Sonoma, the Health Dept. PHP program accepts HPP funds and takes responsibility for grant work planning and fiscal requirements. As the Fiscal Agent for HPP funds, Health Department decisions on HPP issues must prevail, but the Health Dept. seeks agreement on decisions for HPP funds from the Coalition under this Governance structure. Occasional funding opportunities may also arise from Homeland Security, California Hospital Association, California Dept. of Public Health, or other entities.

Staff support for Coalition activities may vary, but typically consists of part-time staffing from Public Health Preparedness, EMS Agency, and accounting staff using HPP funds. Additional ongoing financial and staffing support to Coalition activities is provided in-kind by personnel participating from healthcare organizations.

**Amendments to Governance**
This Governance document may be amended by decision of the Steering Committee only after it is published as a planned agenda item at the Healthcare Disaster Planning Forum and is discussed at that Forum meeting. Governance is reviewed at February meeting and current Forum roster is sent to all current members.