Response team capabilities

During Budget Period 1 (BP1) we made great strides in advancing our response operations capabilities with our agency response teams. The Type III All Hazards Incident Management Team (IMT) continues to expand its roster with internal employees and external partners that add a wealth of knowledge and experience to the team. Additionally, our section chiefs now meet on a regular basis to continue the development of their teams and improve processes to make the IMT as efficient as possible. At the agency level, a workgroup has been established to discuss and formalize policy, procedural, and other items to ensure the continued success and improvement of the IMT.

IMT members have been called upon in real world responses, participated in trainings and exercises, and have been nationally deployed through the Emergency Management Assistance Compact several times, providing invaluable experience to bring back and improve our internal processes.

Response team readiness

Emergency Management Assistance Compact (EMAC) deployments

- Hurricane Harvey - Texas
- US Virgin Islands Recovery Deployment
- Kilauea Volcano Deployment - Hawaii

Incident Management Team activations

- 2017 Wildfires (September 2017)
- Hepatitis C Outbreak (May 2018)

New Healthcare Coalition model

On January 12, 2018 DOH conducted a workshop with the state’s six healthcare coalitions (HCC), several healthcare organizations, and local health jurisdictions to develop a new model for healthcare preparedness in Washington State. Workshop members were charged with restructuring the current healthcare coalition model to account for increasing expectations by our federal funders, reduced resources, and healthcare infrastructure that spreads across multiple regions and states. Draft models were developed, and Secretary of Health John Wiesman made the final determination on a new structure: a shift to a two HCC structure that will be fully implemented during the next budget period.
Training and exercise
EPR started the planning process for the Transportation Relay Exercise (T-REX) 2019 medical countermeasures distribution full scale exercise. This exercise will evaluate the state’s ability to distribute medical countermeasures statewide during a public health emergency. This will be the largest exercise ever conducted by DOH, and will occur in partnership with all 35 local health jurisdictions, participating tribal governments, state agencies, federal agencies, health care systems, pharmaceutical distributors, and private corporations.

Uniform Emergency Volunteer Health Practitioners Act
Senate Bill 5990 was signed into law in March 2018 establishing the Uniform Emergency Volunteer Health Practitioners Act (UEVHPA). This act enables healthcare providers from within Washington or out of state to register with the state managed health and medical volunteer registration system, deploy under a state mission during disasters, provide needed medical care to the public during these incidents, and receive liability and workers compensation protections during response. SB 5990 complements RCW 38.52, which defines the parameters of local emergency volunteer programs. DOH will work in conjunction with LHJs to identify and register healthcare providers at the state level to augment state level response teams, and to provide support to LHJs and healthcare facilities during disasters.

Emergency plans
During BP1, DOH completed seven agency level response plans and two statewide response plans. Over the past four years, 17 of 29 agency level response plans and seven of ten statewide response plans have been completed, and appropriate personnel have been trained on the plans through seminars.

This year
7 agency level plans were completed
2 state level plans were completed

In total
29 agency level plans have been completed
10 state level plans have been completed

Budget
Total by grant
PHEP total: $12,115,099

DOH | LHJs | Tribes/Tribal Assoc | Other partners
---|---|---|---
$4,936,596 | $6,572,393 | $527,060 | $79,050

HPP total: $5,297,887

DOH | HCCs | Healthcare partners
---|---|---
$1,316,891 | $1,583,505 | $2,397,491

Total by jurisdiction

DOH Total | LHJs Total | Tribes/Tribal Assoc Total | Other partners Total
---|---|---|---
$6,253,487 | $8,155,898 | $527,060 | $2,476,541

Total $17,412,986

Tribal government medical countermeasure exercises
The Office of Emergency Preparedness and Response, in partnership with the American Indian Health Commission (AIHC), conducted 9 regional table top exercises for the purpose of strengthening collaboration and mutual aid between tribes, local public health and emergency management, and to enhance the statewide ability to manage and distribute medical materiel during public health disasters.

Statewide pharmacy MOU
The Washington State Pharmacy MOU incorporates existing pharmacy infrastructure into local emergency response structures. By utilizing assets across the whole community, local health jurisdictions can address the health and medical needs of affected populations during a public health incident, emergency, or disaster. DOH is further expanding our reach with pharmacies by coordinating with the Washington State Pharmacy Association to develop an MOU with tribal governments, tribal pharmacies, and independent pharmacies.

91% of people in WA are within 5 miles of a pharmacy with a signed MOU
645 pharmacy locations have a signed MOU