

Safety & Preparedness Resources

CMS CONDITIONS OF PARTICIPATION

In Nov. 2017, the Emergency Preparedness Conditions of Participation were implemented by the Centers for Medicare & Medicaid Services. In addition to self-assessment checklists, MHA's [interactive toolkit](#) provides technical implementation assistance by compiling state and national planning resources. Resources are listed on our website and discussed quarterly during a standing emergency preparedness program update webinar.

U.S. HHS ASPR HOSPITAL PREPAREDNESS PROGRAM

MHA serves as a subcontractor to the Missouri Department of Health and Senior Services and has administered more than \$50 million of federal preparedness funding to Missouri hospitals since 2002. MHA prioritized the use of these funds to build robust, redundant response systems that support member hospital preparedness. This includes strengthening regulatory and accreditation compliance, as well as building capacity for medical surge and continuity of health care delivery.

HOSPITAL MUTUAL AID AGREEMENT

Established in 2007, the MHA-facilitated [mutual aid agreement](#) outlines specific roles and expectations for lending and receiving resources, to include staff during an emergency. This agreement was renewed in 2011 with an amendment added in 2015 to clarify liability and payment guidelines. With 91 percent of MHA's member hospitals – including all Missouri trauma centers – participating, the MAA now allows interested hospitals from Missouri border states to participate when responding to incidents that impact Missouri health care providers.

S.A.F.E.R. INITIATIVE

Hospitals are at the center of efforts to build strong, healthy and resilient communities. In 2016, MHA launched an initiative to provide resources under five separate pillars: Safe cultures



of zero harm, Approaches to safer care, Facts to inform decision-making, Educational programming and Regulatory requirements. S.A.F.E.R. provides education and assistance to hospitals on violence prevention, human trafficking, engaging law enforcement and related regulatory compliance.

WORKPLACE VIOLENCE PREVENTION

Hospitals are experiencing record high accounts of violence against their workforce. Aggressive behavior, verbal threats and physical assaults targeting health care workers has become commonplace. MHA staff, at the direction of its Board of Trustees, adopted a three-pronged approach to assist in mitigating these occurrences.

- advocating for balanced surveys and regulatory relief
- fostering partnerships
- informing practice changes through evidence-based best practices

MHA currently is collecting data to establish a statewide benchmark, and has compiled an online [repository](#) of related policies from Missouri hospitals and other health care providers across the U.S.

OSHA ALLIANCE

MHA executed a two-year OSHA Alliance agreement for technical assistance to promote safe and secure workplaces.



Benefits of this partnership include:

1. Increasing worker access to effective workplace safety, health tools and information about worker rights.
2. Leveraging resources to maximize worker safety and health protection.
3. Establishing progressive dialogue with the agency and others committed to worker rights, worker safety and health.

EMRESOURCE AND ELECTRONIC INCIDENT COMMAND SYSTEM

These web-based applications are within the Juvare suite of health care communication and response coordination software. MHA maintains the statewide license for these applications, which is funded through the ASPR Hospital Preparedness Program. Staff provide technical assistance and training for organizational and systemwide use. Directed by the EMResource Advisory Committee, the applications

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are routinely reviewed and enhanced to meet member need. Active use of these platforms during organizational or statewide events meet several accreditation and compliance requirements.

- EMResource, which was adopted initially in Missouri as a tool to monitor and coordinate bed availability and hospital diversion status between health care organizations, emergency medical services and dispatch centers, was expanded to serve as a statewide health care coordination platform in 2002.
- eICS was developed by Missouri hospital leaders as an organizational-based tool to assist hospitals with managing incidents within their individual facilities and health care systems. Today, use of the eICS system has evolved to support the communication and coordination needs of health care organizations in a regional or statewide response. MHA's license agreement with Juvare allows for unlimited users and includes staff telephone, text and email notification features.

STANDARDIZED PLAIN LANGUAGE EMERGENCY CODES

In 2012 after finding significant variation among Missouri hospital overhead paging codes, MHA convened a working group to standardize the process and develop a set of emergency codes for statewide adoption. MHA has an implementation guide to assist hospitals with this transition, with the goal of all Missouri hospitals using these standardized, plain language emergency codes.

HEALTH CARE COALITIONS

Health care coalitions are a nationally promoted method to facilitate preparedness and response operations among diverse health care organizations within a geographic region. Tiered, scalable and flexible coordination among varied HCOs will facilitate more effective, efficient and timely situational awareness and coordination of resources, resulting in an overall improved health care emergency response. The role of HCCs is to communicate and coordinate, as HCCs do not replace or interfere with

official command and control structure authorized by local emergency management or implemented by hospital incident command.

Through the ASPR Hospital Preparedness Program, MHA facilitates the operations of five nonurban health care coalitions in seven Missouri Planning Regions. Missouri's approach to establish operational HCCs in large, often rural, geographic areas has gained national attention and has been adopted in several states with similar population densities.

MISSOURI SOCIETY OF HEALTHCARE ENGINEERS

[MOSHE](#), one of MHA's largest personal membership groups with more than 400 members, is dedicated to improving the delivery of quality care through the professional development of individuals responsible for health care facilities and operations. MOSHE offers monthly educational programs to members, advocates on behalf of their membership on issues related to health care facility operations and fosters collaborative working relationships with a comprehensive list of affiliate vendor members.

EDUCATION AND TECHNICAL ASSISTANCE

MHA's Health Institute offers an annual Emergency Preparedness and Safety Conference each fall featuring national experts who share strategies and lessons learned related to natural disasters and safety incidents. Themes include opportunities to enhance established hospital emergency management programs, as well as integrating preparedness initiatives into daily hospital operations.

Through the Hospital Preparedness Program, MHA develops and provides a variety of technical assistance programming to member hospitals and community partners on our website. This includes, but is not limited to, fundamentals of emergency preparedness, Incident Command education, EMResource and eICS training, compliance and regulatory briefings, quarterly program updates, and a series of on-demand offerings.

Further, MHA supports the sustainment of regional decontamination training centers in six nonurban communities to assist health care providers with meeting operations-level decontamination training for front-line staff.



Visit www.mhanet.com/emergency-preparedness.aspx or www.mhanet.com/safety-initiatives.aspx for more information.