

**Big Bend Healthcare Coalition**

**Member Project Funding Request Form**

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| **Project Title** |  | |
| **Requesting Agency** | |  |  | | --- | --- | | Are you a member of the Healthcare Coalition? | □ Yes  □ No | | |
| **Project Point of Contact-** Contact information for project lead | |  |  | | --- | --- | | Name |  | | Organization Address |  | | Phone Number |  | | Email Address |  | | |
| **Project Category and Scope** (check or circle appropriate option) | Training / Education  Exercise  Supplies / Equipment  Other (provide details below) | New Project:  Yes  No  Resubmittal: Yes No  If yes, provide date submitted:\_\_\_\_\_\_\_\_\_\_ |
| **Project Description & Details** | | |
| **Project Description** Provide a detailed description of the project |  | |
| **Identified Gap**  Provide description of the gap and how it was identified e.g. lessons learned and documented in an After-Action Report/Improvement Plan following an exercise or real-world incident. |  | |
| **2017-2022 Healthcare Preparedness and Response Activities**  Which capability goes your project address?  You may choose more than one, if applicable.  Descriptions of each capability are attached. | Foundation for Health Care & Medical Readiness  Health Care Medical Response Coordination  Continuity of Health Care Service Delivery  Medical Surge | |
| **Project Justification:** Describe how this project addresses the Health Care Preparedness & Response Capabilities selected above. |  | |
| **Additional Information:** Provide other information, as needed, for the review committee.  Ex: Hazard Focus Area(s), Projected Project Impact (state-wide, region-wide, county-wide, municipality, etc.) |  | |
| **Timeframe to complete each phase of the project:**  Provide estimated timeframe for your agency to complete each phase of the process after receiving notification of funding. | |  |  | | --- | --- | | **MOA Approval & Signature** |  | | **Project Procurement** |  | | **Submit Reimbursement Request** |  | | |
| **Letters of Support:**  If applicable, list County EM & ESF 8 Partners providing Letters of Support. Attach Letters. |  | |
| **Total Funding Request** |  | |
| **Date Submitted for Review** |  | |

**2017 – 2022 Health Care Preparedness and Response Capabilities**

These four capabilities were developed based on guidance provided in the 2012 Healthcare Preparedness Capabilities: National Guidance for Healthcare System Preparedness document. They support and cascade from guidance documented in the National Response Framework, National Preparedness Goal, and the National Health Security Strategy to build community health resilience and integrate health care organizations, emergency management organizations, and public health agencies.

**Capability 1: Foundation for Health Care and Medical Readiness**

Goal of Capability 1: The community’s5 health care organizations and other stakeholders—coordinated through a sustainable Health Care Coalition —have strong relationships, identify hazards and risks, and prioritize and address gaps through planning, training, exercising, and managing resources.

**Capability 2: Health Care and Medical Response Coordination**

Goal of Capability 2: Health care organizations, the Health Care Coalition, their jurisdiction(s), and the ESF-8 lead agency plan and collaborate to share and analyze information, manage and share resources, and coordinate strategies to deliver medical care to all populations during emergencies and planned events.

**Capability 3: Continuity of Health Care Service Delivery**

Goal of Capability 3: Health care organizations, with support from the Health Care Coalitions and the ESF-8 lead agency, provide uninterrupted, optimal medical care to all populations in the face of damaged or disabled health care infrastructure. Health care workers are well-trained, well-educated, and well-equipped to care for patients during emergencies. Simultaneous response and recovery operations result in a return to normal or, ideally, improved operations.

**Capability 4: Medical Surge**

Goal of Capability 4: Health care organizations—including hospitals, EMS, and out-of-hospital providers—deliver timely and efficient care to their patients even when the demand for health care services exceeds available supply. The Health Care Coalition (HCC), in collaboration with the ESF-8 lead agency, coordinates information and available resources for its members to maintain conventional surge response. When an emergency overwhelms the HCC’s collective resources, the HCC supports the health care delivery system’s transition to contingency and crisis surge response and promotes a timely return to conventional standards of care as soon as possible.