

**South Central Mountain Regional Task Force: Hospital and Healthcare Facilities**  
**2010 GOALS AND ASSOCIATED OBJECTIVES**

The Hospital and Healthcare Facilities Committee represents acute care facilities and the American Red Cross in the SCMRTF. The Committee is headed by a Chair/Vice Chair and meets monthly. The Committee operates under a majority rule system, with seven (7) voting members representing a quorum for voting purposes. Each facility receives one (1) vote, and the attendance at 75% of meetings is required of membership.

The Committee has adopted the stated Task Force Committee Mission, and while representing facilities, is committed to integration of health services with allied field, and to report in this manner through the Task Force format.

The 2010 Committee Goals and Objectives are identified below.

<b>GOAL</b>	<b>OBJECTIVE (IN PRIORITIZED ORDER)</b>	<b>COMPLETION DATE</b>	<b>RESPONSIBLE PARTY</b>	<b>MEASUREMENT</b>	<b>STATUS</b>	
1. Increase Training and Educational Opportunities to Members	1. Identify training needs	Ongoing	Training Officer(s)	Report to committee on proposed training opportunities.	Ongoing	
	2. Identify support and finances for Training and Education	Ongoing	Training Officer(s) (TO)	Report presented at a Committee meeting and accepted by the Committee	Ongoing	
	3. Publish an annual training schedule and maintain statistics on services provided	4/01/10	Training Officer(s) (TO)	Report presented at a Committee meeting and accepted by the Committee	Report published by the Training Committee for entire TaskForce – no need for approval	
	4. Assess future training needs or requirements	10/7/10	TO/Chair/Committee	Report presented at a Committee Meeting and accepted by the Committee.	Incomplete - Training committee is reorganizing and no future training submitted.	
	5. Evaluate Training and Education and integrate results into 2011 G/O	11/4/10	TO/Chair/Committee	Evaluation produced and accepted by the Committee	Incomplete – Training committee is reorganizing.	

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2. Develop and implement a drill for the healthcare community with all Task Force Entities/Asset assistance in compliance with HSEEP Guidelines for 2011	1. Propose Drill to Task Force Executive Board	3/1/10	Chair/Vice Chair	Task Force supports Drill	Incomplete – Executive Board has not accepted any proposals presented for drill.	
	2. Develop Hospital Exercise Work Group (EWG)	4/1/10	Chair/Vice Chair	EWG identified and meets	Incomplete – No drill approved to date.	
	3. Participate in the HSEEP planning and exercise process with Task Force Training Committee	11/4/10	Chair/Committee	A Progress report presented to the committee and approved to proceed with planning for 2011.	Incomplete – No drill approved to date.	
3. Continue to organize the Task Force Health Services Function	1. Develop a schedule of common meetings and report to the EBoard	4/1/10	Chair/Vice Chair	Post a schedule of the common meetings on the TaskForce Website.	Completed	
	2. Annual Review and Update of the Health Services Vision within the TaskForce	11/4/2010	Chair/Committees	Report to E-Board.	To be Completed by 1/12/11 - Will send Report to next Executive Board Meeting.	
4. Upgrade Health Services Communications	1. Train, implement and monitor FRED activations for hospitals	6/1/10	Chair/Designee	Initial minutes and plans are identified by the Project Manager on this site	Completed and will implement early 2011	
	2. Develop and implement testing schedule of FRED and 800 MHz Radio	6/1/10	Chair/Designee	Present schedule at committee meeting for approval.	Completed Will implement February 2011	
	3. Identify a liaison from Hospital Committee to all Task Force Committees	4/1/10	Chair/Designee	Individuals identified and recorded.	Completed – Tim Nilson is the liaison.	

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5. Determine Implementation of Medical Surge Guidance	1. Review Medical Surge Guidance when issued by OPHP	11/4/2010	Committee	Approval of Regional Hospital Plan by committee to reflect each facilities surge strategies.	Incomplete – PA MEMS training to be conducted 1/06/11 and then regional plan can be addressed.	
6. Increase Preparedness for Pandemic Influenza	1. Identify a Committee Pandemic Point of Contact/Working Group	3/4/10	Chair	Point of Contact/Working Group is in place	Complete – Beth Brown will lead Infection Prevention and Control personnel as the working group.	
	2. Critique H1N1 Pandemic activities within our Region	6/01/10	POC/WG	After Action Report is produced, identifying corrective action and/or gaps in the Regional Hospital Pandemic Plan	Incomplete	
	3. Revise Regional Hospital Pandemic Plan	9/01/10	Hospital Committee Representatives	Regional Hospital Pandemic Plan shared with E-Board.	Incomplete – Will revise after the scheduled PA MEMS Training on 1/06/11.	
	4. Develop a professional Pandemic Briefing for Committee and County Partners on Lessons Learned	9/01/10	Chair/POC/WG	Program Manager identifies completion.	Incomplete	

Doc/SCMRTF (#08-1247)/Goals and Associated Objectives (Health)