Regional Disaster Health Response System (RDHRS)

* A regional framework for readiness

**What is RDHRS?**

RDHRS establishes regional partnerships to **address health care preparedness challenges, establish best practices for improving disaster readiness** across the health care delivery system, and **expand access to specialty clinical care and increase medical surge capacity.**

**Objectives**

- Design a regional approach to partnering with hospitals and health care facilities
- Expand specialty care expertise
- Coordinate regional medical response
- Integrate measures of preparedness

- Support regional clinical care delivery when existing capacity and capabilities are exceeded by catastrophic events

**Why is RDHRS Important?**

The current threats to our nation’s health security are diverse and rapidly evolving, and our health care preparedness and response infrastructure must keep pace. **Regional coordination is crucial** when addressing an emergency that occurs at the multi-state or national level to ensure support for specialty clinical care and ensure medical surge capacity.

To create regional coordination, all three demonstration sites **build and mature multi-state partnerships.** They build on local health care coalitions and trauma centers, creating a **tiered system of disaster health care.** They also integrate local medical response capabilities with emergency medical services, burn centers, pediatric hospitals, labs, and outpatient services to **meet overwhelming health care needs created by disasters.**

“**The global pandemic provided an unprecedented opportunity for our team to rapidly pivot from theory to actual mobilization of RDHRS response capabilities** in support of our local, state, and regional partners – highlighting the inherent value of an RDHRS to identify and address gaps within coordinated patient care during disasters.”

- Region 1 Regional Disaster Health Response, Year 2 Final Report
RHDRS Accomplishments

In Year 1, pilots performed foundational activities to determine the current state of readiness, build stakeholder relationships, and inform design of an ideal regional framework for response.

YEAR 1 IMPACT

- Supported coordination of medical surge with technical specialists and operations experts
- Developed a regional response center mechanism to mobilize disaster medical experts
- Positioned to support large-scale patient movement across the country or from overseas with manpower and expertise
- Developed regional and national telemedicine capabilities to enhance support for limited medical specialty capabilities and capacity
- Developed state and regionally deployable specialty medical teams to address limited health care system capacity

Examples of Pilot-Specific Activities

- Region 7 DHRE conducted a full-scale exercise involving patient surge, identifying solutions to support patient care coordination and resource management in major incidents.
- R1 RDHRS developed a health care multi-agency coordination center called the RDHRS Response Center, which provides coordination and support for patient transport, telemedicine use, special team deployment, and adaptation of care plans and systems.
- R1 RDHRS developed the Catastrophic Tertiary Care Access Center (CTAC) function used in six coalition surge tests, which, when activated, monitors patient movement and advises response authorities on how to adjust the medical response.
- Region 7 DHRE analyzed use cases for telemedicine capabilities (e.g., using video conferencing to augment an emergency operations center and incident command).
- R1 RDHRS worked to expand the number of deployable medical teams (DMT), particularly hospital-sponsored teams, that states can use in disasters.

Having developed core capabilities during Year 1, RDHRS recipients put those capabilities into action during Year 2 – and played a critical role during the COVID-19 response.

YEAR 2 IMPACT / COVID-19 RESPONSE

- Enhanced partner preparedness by providing needed information and testing response systems
- Piloted novel response systems to provide access to critical care expertise
- Provided subject matter expertise in an effort to share resources and best practices
- Leveraged the RDHRS Networks to provide information by request and train stakeholders in emerging tools

Examples of Pilot-Specific Activities

- Region 7 DHRE supported specialized teams within the state and Region 7 that visited high risk sites and developed guidance documents and webinars for its partners.
- R1 RDHRS developed a rapidly deployable, easy to use, HIPAA-compliant telemedicine platform in collaboration with Bluestream Health.
- R1 RDHRS mobilized clinical experts to work with state health authorities to support distribution of over 400 surge ventilators.
- Region 7 DHRE trained 250 additional users in their interoperable communications platform, the Knowledge Center, and conducted 112 COVID-19 events, logging 7,413 entries to provide a full common operating picture.

YEAR 3 AND BEYOND

As part of the RDHRS, ASPR aims to establish a network of state-level clinical response assets as well as interstate regional assets to create a more coherent, comprehensive, and capable health care disaster response system that can respond to 21st century health security threats and integrate into daily care delivery systems. ASPR is looking at innovative approaches to building the RDHRS and continuing the dialogue with our state and local health system partners to explore various avenues to develop the system. Through the current funding period, the Colorado Mountain Plains RDHRS will work to continue establishing their demonstration site, and the two additional sites, Region 1 RDHRS and Region 7 DHRE, will continue to scale up their regional disaster preparedness and response capabilities.