



*The Mountain States region faces unique challenges including a large geographic area of both densely populated urban communities and expansive rural areas where most healthcare is provided by critical access hospitals. The pediatric population in this region meets or exceeds national averages, and is as high as 45% of the population in some areas. There are only three children's hospitals in the region, both with large catchment areas and who routinely operate at or near capacity.*

*With the looming threat of an earthquake along the Wasatch Front, tornadoes in Colorado, the potential for an event involving the Yellowstone caldera, and any other large-scale natural or manmade disaster that could occur, it can be easily discerned that one or more facilities in the Mountain States region could receive a surge of pediatric patients that could compromise the quality of medical care delivered. These same scenarios would not only overburden local pediatric resources, but could also produce situations where severely ill or injured children are being sustained in facilities that may not have the capacity or capability to efficaciously care for the child who must remain there.*

### **Mission**

The Mountain States Pediatric Disaster Coalition (MSPDC) was founded in 2014 at a meeting of stakeholders during the National Healthcare Coalition Conference in Denver, Colorado. **The mission of the MSPDC is to establish a network of healthcare facilities, pediatric providers, public health departments, emergency management professionals, and community groups to enhance regional pediatric surge capacity and capability, as well as to ensure the effective use of critical resources, in the event of a large-scale disaster or public health emergency affecting children.**

Specific objectives include:

- Improve regional pediatric disaster response by understanding regional pediatric surge capacity and capability
- Strengthen disaster-time communication by establishing relationships beforehand
- Augment the capability of non-pediatric providers/facilities to care for children in a disaster
- Promote pre-event planning for timely evacuation and appropriate transfer from incapacitated pediatric facilities

The following methods will be employed to accomplish these objectives:

- Assess regional pediatric capacity & capability
- Maintain an online database of regional pediatric facilities and points of contact
- Maintain regular Coalition-wide communication (quarterly conference calls)
- Support pediatric emergency and disaster education
- Support working group activities as needs and interests arise
- Support annual in-person meeting in conjunction with NPDC Conference or NHCC Conference
- Support a region-wide pediatric disaster exercise every 3 years
- Establish inter-facility and inter-state agreements for pediatric patient transfer during a disaster

### **Scope**

The Coalition is intended to be a simple, targeted, low-cost organization designed to enhance communication and situational awareness prior to, during, and after a large-scale crisis affecting children. The MSPDC is not a disaster response organization. It functions by the voluntary support of its membership and has no formal funding. The Coalition will serve as a free resource to hospitals, health departments, providers, government agencies, and professional societies as needed.

### **Leadership**

Strategic oversight is provided by an Executive Committee. The Executive Committee has representation from multiple states and includes pediatric providers and emergency management professionals. Coordination and administrative support of Coalition activities is provided by the Healthcare Corporation of America (HCA) at Eastern Idaho Regional Medical Center in Idaho Falls, ID.

### **Membership**

The coalition includes partners from Colorado, Utah, Idaho, Wyoming, and Montana. The General Assembly includes the Executive Committee, State Coordinators, Facility Representatives, and other partners. Membership is individual, not institutional. There is no cost associated with membership, but active participation is expected. Members may withdraw from the Coalition at any time, for any reason. Coalition members may include, but are not limited to:

- Children's hospitals representatives
- Representatives from hospitals/facilities with inpatient or outpatient pediatric services
- Pediatric and non-pediatric healthcare providers
- Nurses, respiratory therapists, and ancillary professionals who care for children
- Nurse managers and hospital administrators
- Public health professionals (Healthcare Preparedness Program coordinators)
- EMS for Children representatives
- Emergency management professionals
- State hospital associations
- Other State/Federal partners

Member participation in Coalition working groups is strongly encouraged. These working groups may include, but are not limited to:

- State Coordinators
- Facility Representatives
- Children's hospital group
- Non-pediatric provider education group (Rural states group)
- Pediatric patient transport group
- Communications group

### **Amendments**

Amendments to this charter may be made as needed by the Executive Committee and ratified by the General Assembly either during quarterly conference calls or at annual in-person meetings.

### **Contact**

Please contact the MSPDC Coordinator, Jim Howard, at [mSPDC@hcahealthcare.com](mailto:mSPDC@hcahealthcare.com) or 208-529-6223 for additional information.

### **Mountain States Pediatric Disaster Coalition**

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