Survey Purpose

To gather information from health care coalitions (HCCs) about the state of health care system preparedness and response today versus before 2012 in order to illustrate the impact HPP has had on health care system preparedness. In 2012, the Hospital Preparedness Program (HPP) shifted to a coordinated health care coalition approach. This survey will also collect data on HCC's technical assistance (TA) needs. The survey will be sent to the main point of contact from each of HPP's 380+HCCs. No more than one survey will be completed per HCC.

Guiding Question

As a result of HPP, how is health care system preparedness different today than it was in 2012 and before?

Section 1: Consent Form and Demographic Information

Consent Form Language

You are invited to participate in an online survey by ASPR. This survey is intended for health care coalitions (HCCs) funded by ASPR's Hospital Preparedness Program (HPP) with the purpose of gathering information from HCCs about the impact of HPP on the state of health care system preparedness and response.

HPP appreciates your time and effort in completing this short survey. Your input is important, and we encourage candid responses. The survey will take approximately 15 minutes to complete online; there are no known risks or discomforts associated with this survey. Your participation in this assessment is completely voluntary, and you may stop the assessment at any time.

The survey is being provided to all HPP-funded HCCs. We ask that the person with the most knowledge of your health care coalition submit the completed assessment by Friday, November 3, 2017. We request only one response per HCC.

If you have any questions, please contact Kati Miller at katimiller@deloitte.com.

Again, thank you for your time and feedback.

Clicking	on the "Agree"	button ind	icates that	you have	read the	above	information,	are 18	years o	of age
or older,	and consent to	o participat	e in this su	ırvey.						

ш	Agree
	Disagree

De	emographic Information Questions	Question Type	Response Options/ Description
1.	State/Jurisdiction	Yes/No and Fill In	 Prepopulated with respondents' state/jurisdiction Respondents asked to confirm or correct state/jurisdiction
2.	Health Care Coalition Name	Yes/No and Fill In	 Prepopulated with respondents' coalition name Respondents asked to confirm or correct coalition name
3.	Name	Fill In	• N/A
4.	Role/Title	Fill In	• N/A
5.	Organization Name (e.g., John Smith Medical Center)	Fill In	• N/A
6.	Organization Type	Drop Down	List of potential HCC member organizations from the 2017-2022 Health Care Preparedness and Response Capabilities Other (e.g., child care service, dental clinic,

			work service ization)	, faith-bas	sed	
	Section 2: Impact Questions					
health ca	swering the following questions, please c are system preparedness and response th the 2012-2017 project period.					
Theme		Question				
	1. How strongly do you agree with the	ne following s	tatements?			
		Strongly Disagree	Disagree	Agree	Strongly Agree	
Relationships	a) I am confident that the health care organizations within my HCC would have been able to coordinate local and regional health care, government, and public health entities to respondeffectively to an emergency or disaster that occurred prior to 2012 .					
	b) Today , I am confident that our HCC can coordinate across local and regional health care, government, and public health entities to respond effectively to an emergency or disaster.		0	□ →		

		Strongly Disagree	Disagree	Agree	Strongly Agree
	a) I believe that regional health care system preparedness efforts, such as health care coalitions and local/regional exercises, are critical to national preparedness.				
bility	b) I believe that HPP funding is critical to developing and maintaining national health care system preparedness.			0	
Capability	c) I believe that HPP guidance is critical to developing and maintaining national health care system preparedness.	0			0
	d) I believe that HPP technical support through ASPR TRACIE is critical to developing and maintaining national health care system preparedness.	-			
	e) HPP funding, guidance, and technical support have improved my HCC's ability to decrease morbidity and mortality during emergencies and disasters.	0			

	3. Please indicate your level of agreeme	ent with th	e following:	1			
	Because of HPP's emphasis on health care is now more capable of	system co	ordination be	eginning in 2	2012, my H	ICC	
		Strongly Disagree	Disagree	Agree	Strongly Agree		
Outcomes	a) Providing care to a surge of patients that exceeds my HCC's member organizations' day-to-day patient volume baseline						
	b) Earliest possible communication of situational awareness and risk information to other health care organizations			0			
	c) Maintaining operations throughout the surge of patients during an emergency						
	d) Appropriately coordinating and supporting response activities with other health care organizations		0				
	4. Please indicate your level of agreement with the following:						
	Today, my health care coalition is more capable of incorporating and building upon lessons learned from an emergency, incident, or exercise than it was before 2012.						
	Strongly Disagree Disagree	,	Agree	Strongly Agree	e		
system, respond	2017-2022 project period, there are four capal including HCCs, hospitals, and emergency meffectively to emergencies that impact the pues in total, which are referenced in questions 5	edical serv blic's healtl	rices, has to o h. These cap	do to prepa pabilities inc	re for and clude 18		

questions, please remember that we are interested specifically in your individual HCC's priorities.

	fc	nderstanding that your HCC may focus on multiple objectives, which of the ollowing are the top three objectives that your HCC plans to prioritize with your Y2017 HPP funding? (Select 3)
		Establishing and operationalizing an HCC (Capability 1)
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Funding		
Y		
<u>L</u>		
		Maintaining access to non-personnel resources during an emergency (Capability 3)
		=
		(Capability 3)
		3 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -
		3 3
		Coordinating health care delivery system recovery (Capability 3)
		your HCC were to have received additional funding in FY2017, which three
		dditional objectives would you prioritize? (Select 3)
		Establishing and operationalizing an HCC (Capability 1)
		l Identifying risk and needs (Capability 1)
D D	_	(Capability 2)
Funding		
<u>H</u>		
	1	
		ı - ıvıannanının access io non-bersonner resources dunnu an emerdency (Cadadiilly 3)
		Developing strategies to protect health care information systems and networks (Capability 3) Protecting responders' safety and health (Capability 3)
		Developing strategies to protect health care information systems and networks (Capability 3) Protecting responders' safety and health (Capability 3) Planning for and coordinating health care evacuation and relocation (Capability 3)
		Developing strategies to protect health care information systems and networks (Capability 3) Protecting responders' safety and health (Capability 3) Planning for and coordinating health care evacuation and relocation (Capability 3) Coordinating health care delivery system recovery (Capability 3)
		Developing strategies to protect health care information systems and networks (Capability 3) Protecting responders' safety and health (Capability 3) Planning for and coordinating health care evacuation and relocation (Capability 3) Coordinating health care delivery system recovery (Capability 3) Planning for a medical surge (Capability 4)

	7. Which one or more of the following capability objectives is your HCC likely <u>unable</u> to <u>fully</u> address with your current level of FY2017 HPP funding? (Select all that apply)
Funding	 □ Establishing and operationalizing an HCC (Capability 1) □ Identifying risk and needs (Capability 1) □ Developing an HCC preparedness plan (Capability 1) □ Training and preparing the health care and medical workforce (Capability 1) □ Ensuring preparedness is sustainable (Capability 1) □ Developing and coordinating health care organization and HCC response plans (Capability 2) □ Utilizing information sharing procedures and platforms (Capability 2)
	 □ Coordinating response strategy, resources, and communications (Capability 2) □ Identifying essential functions for health care delivery (Capability 3) □ Planning for continuity of operations (Capability 3) □ Maintaining access to non-personnel resources during an emergency (Capability 3) □ Developing strategies to protect health care information systems and networks
	(Capability 3) ☐ Protecting responders' safety and health (Capability 3) ☐ Planning for and coordinating health care evacuation and relocation (Capability 3) ☐ Coordinating health care delivery system recovery (Capability 3) ☐ Planning for a medical surge (Capability 4) ☐ Responding to a medical surge (Capability 4)
	Section 3: Technical Assistance Questions
Theme	Question
ance	 From whom is your HCC most likely to request or seek technical assistance? (Order from most likely (1) to least likely (8)) Awardee (state, U.S. territory, freely associated state, Washington D.C., Chicago, Los Angeles County, or New York City) ASPR Technical Resources Assistance Center and Information Exchange (TRACIE) HPP Field Project Officer Peers
Technical Assistance	 Trade Association (e.g., American Hospital Association, Association of State and Territorial Health Officials, National Emergency Management Association, National Association of County and City Health Officials, etc.) Centers for Disease Control and Prevention (CDC) Federal Emergency Management Agency (FEMA) HPP Headquarters Staff
	2. What are your coalition's three priority areas for technical assistance? (Please list 3) 1. 2. 3.