



SE MINNESOTA
DISASTER HEALTH COALITION

Enhancing Regional Preparedness, Response and Recovery

Southeast Minnesota Disaster Health Coalition
Integrated Preparedness Plan (IPP)

July 1, 2024- June 30,2027

DRAFT

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Purpose

The Integrated Preparedness Plan (IPP) is the roadmap for the Southeast Minnesota Disaster Health Coalition (SEM N DHC) to meet the priorities described in the Administration for Strategic Preparedness and Response (ASPR) Healthcare Preparedness and Response Capabilities and the Minnesota Department of Health (MDH) Health Care Preparedness Program work plan. This IPP provides a strategy to maximize implementation for critical information found in plans through training and exercises.

This IPP is composed of trainings and exercises that will meet requirements, strengthen capabilities, and will incorporate coordinated efforts of health care facilities and their respective Health Care Coalition (HCC). It also contains scheduled plan updates over the next three years. All exercises will use the Homeland Security Exercise and Evaluation Program (HSEEP) methodology. Past and current assessments, review of After-Action Reports with Improvement Planning actions, surveys sent to coalition members and just-in-time training requests conducted will be used to identify needs for the Health Care Coalition, Public Health Partners, Local Emergency Response Partners, as well as Private and Volunteer-based Organizations.

Over the next three years, the Regional Healthcare Preparedness Coordinators (RHPCs) will use and adjust this plan to address specific gaps and strengthen healthcare capacity in the Southeast region. The IPP will formally be drafted and submitted to the Advisory Committee in January of each grant year.

Health Care Coalition Training and Exercises**Training & Assessments:**

TRAINING	Proposed Dates	Proposed Delivery	Length of Training
SEMNDHC Guidelines	Bi-Monthly (6x annually)	Online	60-90 minutes
Overview & Awareness H-MACC Training	Quarterly	Online	60-90 minutes
App Armor Training	Quarterly	Online	60-90 minutes
MNTrac Administration Training	Bi-annually	Online	60 minutes
SEMNDHC Coalition Membership/ Governance	Semi-Annually	Online	60-90 minutes
Public Information Officer Training	Annually	In-Person	4 hours
Overview & Awareness level Family Assistance Center Training	Semi-Annually	Online/In-Person	2 hours each
Attendance at National Healthcare Coalition Conference	Annually	TBD	TBD
Incident Command System (ICS) Training * (see training summary)	Semi-annually	In-Person	3 hours
SEMNDHC Integrated Preparedness Planning Training	Annually	In-Person	3 hours
Introductory & Overview to developing Pre-Scripted Messaging Training	Quarterly	Online	90 minutes
Overview & Awareness for Cybersecurity Training	Annually	In-Person/Online	2 hours
Continuity of Operations Training	Annually	In-Person/Online	2 hours
Improving Medical Surge Plans- Training	Annually	In-Person/ Online	2 hours
ASSESSMENTS			
Supply Chain Integrity Assessment	Annually	December 31, 2026	Varies
Hazard Vulnerability Assessment	Annually	January 31- annually	Varies
Readiness Assessment	Annually	January 31- annually	Varies
Risk Assessment	Annually	Every 5 years	Varies
Workforce Assessment	Annually	December 31, 2026	Varies
Cybersecurity Assessment	Annually	June 30, 2025	Varies
Extended Downtime Health Care Delivery Impact Assessment	Annually	June 30, 2025	Varies

Training Summary:

Each of the trainings and assessments listed above support the 2024-2028 NOFO and MDH requirements.

***ICS training listed above** is a customized training delivery for all healthcare partners. The intent of the training is to provide awareness and application of ICS principles. At the conclusion of the training, a short tabletop exercise will be conducted with participants that integrates use of App Armor/H-MACC, SEMNDHC Guidelines and course materials. This training will be delivered in person at multiple host sites across the region and at one quarterly meeting as a large group offering. Comprised of 4 learning modules: Command Operations, Communications,

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Roles & Responsibilities, and Managing Expectations, this training will provide all organizations with an application based approach to strengthening response capabilities.

Exercises:

Workshops (Discussion Based)	Planning Period	Proposed Delivery Date
Communications Messaging Workshop	Ongoing	August - Annually
Supply Chain Integrity Workshop	Ongoing	Annually
Patient Movement Plan Workshop	June 2025-August 2025	September 2025/2026
Cyber Security Workshops	July 2025-October 2025	November 2025/ 2026
Gap Analysis Workshop (Specific to SEM N DHC)	Ongoing	Annually
Tabletops – Table Top Exercise (TTX) (Discussion Based)		
MRSE TTX	January-May Annually	May/June Annually
Information Sharing TTX		
Patient Movement Plan TTX	Ongoing	September- every 2 years
Statewide Exercise	TBD	Once every 5 years
Cybersecurity Exercise	October 2026-May 2027	June 2027
Avian Influenza (H5N1)	Ongoing	April of 2026
Extended Network Downtime TTX	TBD	June 2027
Drills (Operations Based)		
Specific Function Drills *(See Summary below table)	Ongoing	Monthly
Communication Drills	Ongoing	2x Annually
App Armor Drills (also incorporated into training)	Ongoing	Monthly
Full-Scale (Operations Based)		
MRSE Functional/ Full-Scale	January-May Annually	May/June Annually

Exercise Summary:

Each of the Exercises listed above will follow the HSEEP methodology and include an After-Action Report with Improvement Planning Matrix.

***Drills:** To meet 4.6 activity of the NOFO, monthly drills will be scheduled and held. Coalition members will be asked to register for drill(s) they wish to participate 30 days in advance. Registered participants will receive an AppArmor notification which will direct them to a live virtual setting in which they will be given a specific objective to meet, the plan to reference, and the situation. Each drill will have an AAR/IP submitted to participating organizations.

Planning:

Document Names	Focused Update Period	Proposed Delivery
SEM N DHC Governance Document	Ongoing	December Annually
SEM N DHC Guidelines- Update	Ongoing	December Annually
H-MACC Guidelines- Update	Ongoing	December Annually
App Armor Process	Ongoing	December Annually
Burn Surge- Update	January- March 2027	June 2027
Strategic Plan 2024-2028	January-March Annually	March Annually
Readiness Plan	January-March Annually	March Annually
Integrated Preparedness Plan- Update	Ongoing	December Annually
Information Sharing Plan	February-May 2025	June 2025
Infectious Disease - Update	January- March 2026	June 2026
Resource Management Plan	February- May 2025	June 2025
Medical Surge Support Plan- Update	March-May 2025	June 2025
Continuity of Operations Plan	March- May 2025	June 2025
Workforce Readiness/Resilience Plan	January – May 2026	June 2026
Cybersecurity Plan	January- May 2026	June 2026
Extended Downtime Support Plan	March- May 2026	June 2026
Recovery Plan	March- May 2026	June 2026
Pediatric Annex- Update	July-November 2024	June 2025
Patient Movement Plan	TBD	June 2027
Allocation of Scarce Resources Plan	TBD	June 2027
Chemical Response Annex- Update	TBD	June 2027

Planning Summary:

Each of the plans listed above will be updated annually after the original creation and submission. For plans not yet developed or developed and not widely understood, training and workshops have been incorporated into the IPP to better implement understanding.

ROADMAP of ACTIVITIES: The matrix below combines training, exercises, and planning listed earlier in this document to showcase the activities in one snapshot.

Deliverable Name	Requirement	Jan	Feb	Mar	April	May	June	July	Aug	Sept	Oct	Nov	Dec
TRAINING													
Training Development													
SEMN DHC Guidelines Training				X		X		X		X		X	
H-MACC Training					X		X		X		X		X
App Armor Training			X	X	X	X	X	X	X	X	X	X	X
SEMNDHC Coalition Membership Training			X				X			X			
Public Information Officer Training	Added Value								X				
Family Assistance Center Training	Added Value			X				X					X
National Healthcare Coalition Conference													
ICS Training * (see training summary)	Added Value				X	X	X	X	X	X	X	X	X
SEMN DHC Integrated Preparedness Planning Training		X											
Pre-Scripted Messaging Training	Added Value		X			X					X		
Cybersecurity Training					X								
Continuity of Operations Training												X	
Medical Surge Training		X											
ASSESSMENTS													
Supply Chain Integrity Assessment	2.4												12-31
Hazard Vulnerability Assessment	2.2	1-31											12-31
Readiness Assessment	2.3	1-31											12-31
Risk Assessment	2.1												2029
Workforce Assessment	2.5												12-31
Cybersecurity Assessment	2.6						6-30						
Extended Downtime Health Care Delivery Impact Assessment	2.7						6-30						
EXERCISES													
Communications Messaging Workshop	Added Value								X				
Supply Chain Integrity Workshop	Added Value										X		
Patient Movement Plan Workshop	Added Value												X
Cyber Security Workshops	4.4			X									
MRSE TTX	4.1				X								
Information Sharing TTX	Added Value											X	
Patient Movement Plan TTX	4.2								X				
Statewide Exercise	4.7									X			

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Cybersecurity Exercise	4.4	x												
Gap Analysis TTX (Specific to AARs for SEM N DHC)	Added Value	X												
Specific Function Drills *(See Summary below table)	Added Value	x	x	x	x	x	x	x	x	x	x	x	x	
Communication Drills						x						x		
App Armor Drills (also incorporated into training)	Added Value	x	x	x	x	x	x	x	x	x	x	x	x	
MRSE Full-Scale Exercise	4.1	5-31												
PLANS & DOCUMENTS														
SEM N DHC Governance Document	1.1												12-31	
SEM N DHC Guidelines- Update	Added Value												12-31	
H-MACC Guidelines- Update	Added Value												12-31	
Strategic Plan 2024-2028	3.1			03-31										
Readiness Plan	3.2			03-31										
Integrated Preparedness Plan- Update	3.2.1												12-31	
Information Sharing Plan	3.3.1						06-30							
Resource Management Plan	3.3.2						06-30							
Medical Surge Support Plan- Update	3.3.4						06-30							
Continuity of Operations Plan	3.4.1						06-30							
Workforce Readiness/Resilience Plan	3.5												2026	
Cybersecurity Plan	3.4.2												2026	
Extended Downtime Support Plan	3.4.3												2026	
Recovery Plan	3.4.4												2026	
Patient Movement Plan	4.2													
Allocation of Scarce Resources Plan	3.36													