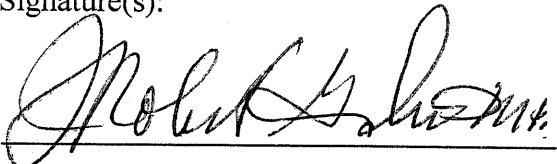




Ottilie W. Lundgren Memorial Field Hospital

Acceptable Use Policy

Title: <i>Acceptable Use Policy</i>	Policy #: MFH07-01
Date of Origination: <i>August 18, 2006</i> Document Status: <i>Draft January 26, 2007</i> Date Approved : Date Last Reviewed/Revised : <i>January 29, 2007</i>	Signature(s):  <i>Commissioner of Public Health</i>

- I. **Purpose:** The Ottilie W. Lundgren Memorial Field Hospital (MFH) is a mobile facility designed for deployment in either 25-bed increments or in its full complement of 100 beds to any location in the state in response to a mass casualty event, a local emergency that disrupts the integrity of a healthcare facility's infrastructure, or a Statewide public health emergency that overwhelms the existing health care infrastructure. The MFH is not intended to supplant local first responders or healthcare institutions, but serves to support their operations. This policy will help to delineate who the entities are that are able to use the MFH and the acceptable uses of the facility.
- II. **Policy:** It is the policy of the MFH management and leadership to grant use of the MFH to those entities that meet the criteria for acceptable use of this facility.
- III. **Responsibilities and Authority:** The MFH management and leadership are responsible for planning, coordinating and executing the use of the MFH within the parameters of this policy. Ultimate responsibility and authority for the appropriate use of the MFH lies with the Connecticut Commissioner of Public Health and the Governor of the State of Connecticut.

IV. **Parameters for Use:** The MFH is a unique approach that incorporates a partnership between traditional and non-traditional players in emergency preparedness and response. Acceptable use for the MFH includes, but is not limited to:

- a. Isolation care or quarantine facility;
- b. Emergency care following a public health emergency;
- c. Surge capacity in the event of a public health emergency (e.g. plane crash that overwhelms the capacity within the existing healthcare infrastructure);
- d. Logistics support to a health care facility in response to mechanical failure (e.g. hospital fire or power loss);
- e. Preparation and triage of casualties (as appropriate) for ground and air evacuation in the event of a mass casualty and or public health emergency;
- f. Provision of a patient reception center for State and Federal public health emergencies;
- g. Mortuary service in conjunction with the Office of the Chief Medical Examiner and the Disaster Mortuary Team;
- h. Educational and training events with local, state, regional and federal entities (e.g. local emergency medical services, military drills and exercises in conjunction with National Disaster Medical System);
- i. Other uses as deemed appropriate by the Governor, the Commissioner, and or their designees.

#### V. **Timeframe for Deployment**

- a. The timeframes listed below for the respective configurations represent estimates for the minimum instate setup time. The range includes a built in estimate of two hours travel time and represents the time from the initial approval for deployment to a fully functional facility:
  1. For a 25 bed configuration, 6-8 hours;
  2. For a 50 bed configuration, 12-18 hours
  3. For a 75 bed configuration, 24-30 hours.
  4. For a 100 bed configuration, 30-40 hours.
- b. Set-up times may be longer due to variances in travel times or other environmental or unpredictable factors.

#### VI. **HIPAA Requirement**

- The entity using the MFH is responsible for ensuring compliance with all applicable provisions for the Health Insurance Portability and Accountability Act of 1996 and rules promulgated pursuant to the Act.

**VII. In-State Deployment Procedure in Connecticut:**

- a. In order for the MFH and/or its components to be deployed in Connecticut for any purpose, the following must occur:
  - 1. The entity requesting deployment must submit, in writing, a Request for Deployment (RFD) that describes the intended use for the MFH or its components; documents coordination with and notification of the request to the local emergency manager; and contains contact information for the entity making the request.
  - 2. The RFD must be submitted to DPH Operations Branch for evaluation and approval;
  - 3. In accordance with Title 28 of the Connecticut General Statutes, Civil Preparedness and Emergency Services, the Governor's Office or the Commissioner of Public Health or the Commissioner of Emergency Management and Homeland Security must approve deployment.

**VIII. Out-of-State Deployment Procedure:**

- a. In order for the MFH and/or its components to be deployed outside Connecticut, the following must occur:
  - 1. Through the Emergency Management Assistance Compact, the Federal Government must submit a request for deployment of the MFH to the Governor's Office. Following an order from the Governor the MFH will be deployed.

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