



Welcome

RPPN STRATEGY MEETING

Why Are We Here?



Center for Pediatric Everyday Readiness: Regional Pediatric Pandemic Network

Strategic Planning Retreat

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October 17-19, 2021



Acknowledgements & disclaimer

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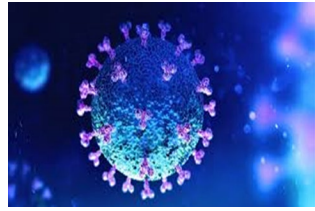
Disclaimer

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Congressional drivers for the RPPN

At the time of a pandemic

- Behavioral health
- Gaps in community engagement
- eHealth and a workforce gapped in optimization
- Disparate access and resources
- Magnification of disparities



September 1, 2021
HRSA funded
the Center for
Pediatric Everyday
Readiness – Regional
Pediatric Pandemic
Network



RPPPN

**Regional Pediatric
Pandemic Network**

What is the Center for Pediatric Everyday Readiness- Regional Pediatric Pandemic Network?

- **Composition**

A network of 5 children's hospitals-hub and spoke model:

- University Hospitals-Rainbow Babies and Children's Hospital-Deanna DahlGrove
- University of California San Francisco-Benioff Children's Hospital-Nicolaus Glomb
- University of Louisville School of Medicine-Norton Children's Hospital –Mary Fallat
- University of Utah, Primary Children's-Hilary Hewes
- Saint Louis University-Cardinal Glennon Children's Hospital-Rachel Charney

Centralized support: ASPR WRAPEM and EGL and the EMSC Innovation and Improvement Center

Clinical and implementation arm activities in the hospital sites

PI roles for managing tension between prescriptive work and hub site growth

- **A network of networks supporting the children's hospital hubs**

ASPR Pediatric Disaster Centers of Excellence support the Network



- Designated in 2019 through a competitive grant process
- Designed to disseminate best practices in pediatric disaster preparedness, response and recovery in a regional manner
- ASPR Eastern Great Lakes (ASPR EGL) COE
 - Anchored at UH Rainbow Babies and Children's Cleveland Ohio
 - Michigan/Ohio
 - Hubs in 6 children's hospitals

Eastern Great Lakes Pediatric Consortium for Disaster Response



ASPR Western Regional Alliance for Pediatric Emergency Management (WRAP-EM) COE

- Anchored at UCSF Benioff Children's Hospital
- California, Arizona, Oregon, Washington, Nevada, Utah
- 14 healthcare centers

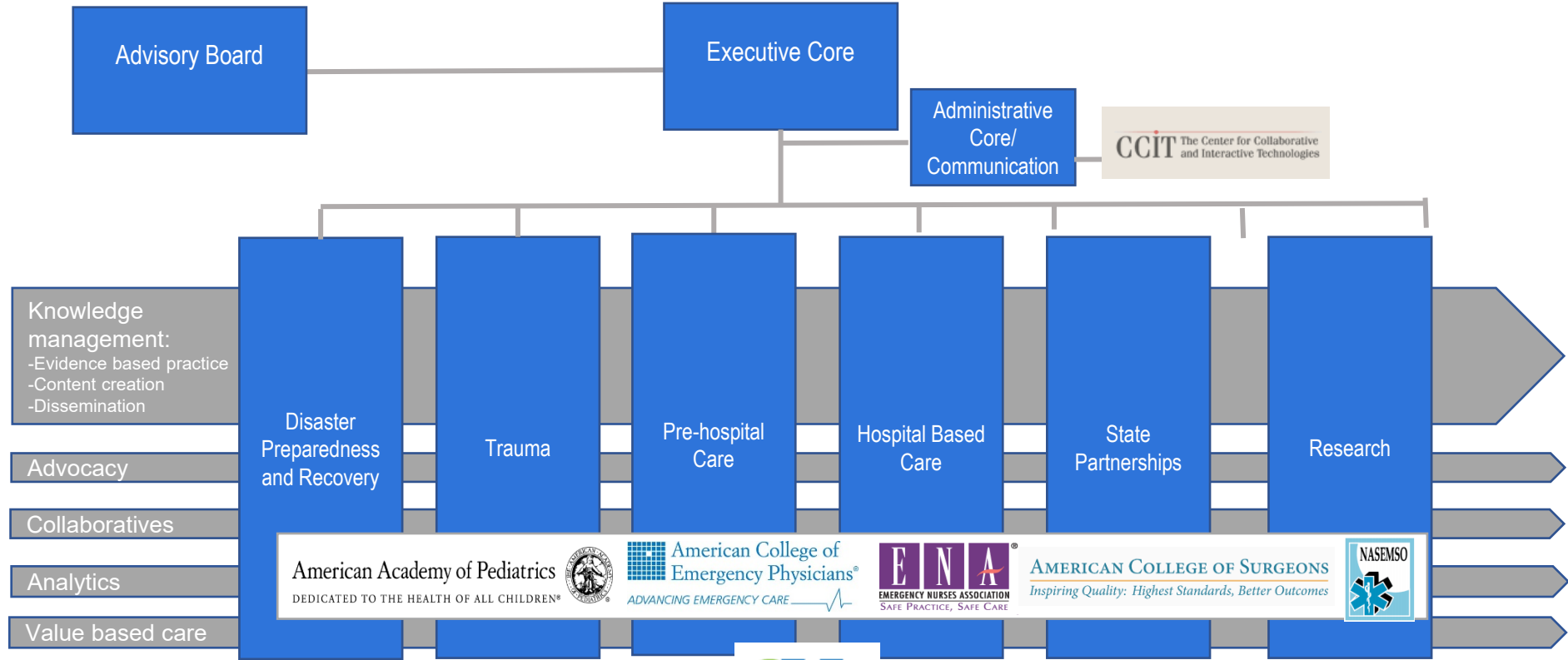
“Contributing to a national model for pediatric disaster preparedness, response and recovery”



EMSC Innovation and Improvement Center



Dell-Rainbow-Baylor-Lundquist-Yale



Center for Pediatric Everyday Readiness-Regional Pediatric Pandemic Network



Affiliation
 ■ CPER Hub
 ● EGLPCDR
 ▲ EIIC
 ✚ WRAP-EM

Alias
 ■ Boston Children's Hospital
 ■ C.S. Mott
 ■ Cardinal Glennon
 ■ Children's Hospital & Medical Center
 ■ Children's Hospital Colorado
 ■ Children's Hospital of Michigan
 ■ Children's Hospital of Los Angeles
 ■ Cincinnati Children's Hospital
 ■ Dell
 ■ Doernbecher Children's Hospital
 ■ Helen Devos
 ■ Intermountain Primary Children's Hospital
 ■ Loma Linda University Children's Hospital
 ■ Nationwide
 ■ Norton Children's
 ■ Phoenix Children's Hospital
 ■ Rainbow
 ■ Stanford Lucile Packard Children's Hospital
 ■ Texas Children's
 ■ The Lundquist Institute
 ■ U. of Utah
 ■ UC Davis Children's Hospital
 ■ UCSF-Benioff Children's
 ■ University Medical Center Children's Hospital
 ■ University of Utah Health Burn Center
 ■ University of Washington Harborview Medical Center
 ■ Yale

- Regional hubs united in a hub and spoke model; RDHRS collaboration

Where are we?

Center for Pediatric Everyday Readiness – Regional Pediatric Pandemic Network

- 7 weeks preparation time from posting of NOFO to due date
- Slightly over 2-week time period from award notification to start date
- 30- and 45-day conditions of the grant: submitted
- 90-day deliverables: evaluation measures and board member roles defined
- Now what?

The purpose of our strategic planning is:

1. To grow and sustain the relationships we build for the next 5 years
2. To identify the means by which we create efficiency and efficacy of our network integration efforts
3. To identify specific product deliverables for HRSA that we will share with HRSA

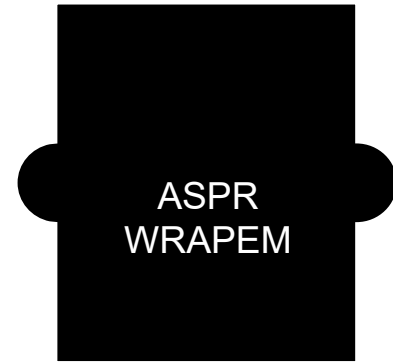
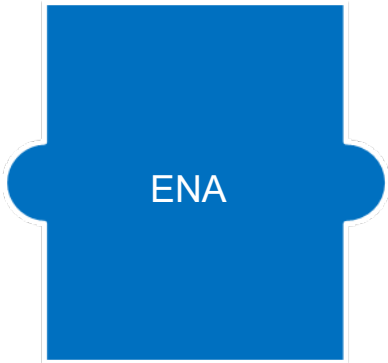
Tenor of our discussions

- We recognize that the work of the RPPN by congressional justification is driven through the hub children's hospitals
- We focus on the partnerships we develop with regional communities
- We support the work of the hub hospitals as implementation strategies
- Recognize the risk of large infrastructure and system-based networks driving the work rather than partnering; avoid the tail wagging the dog

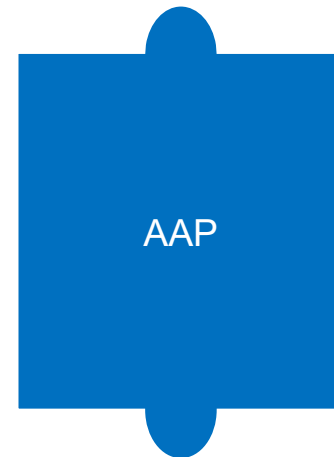
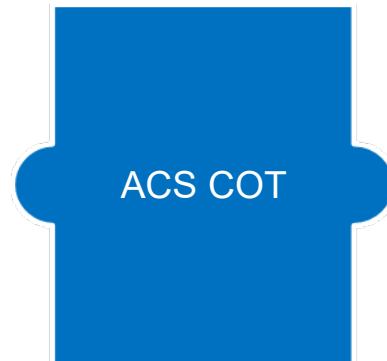
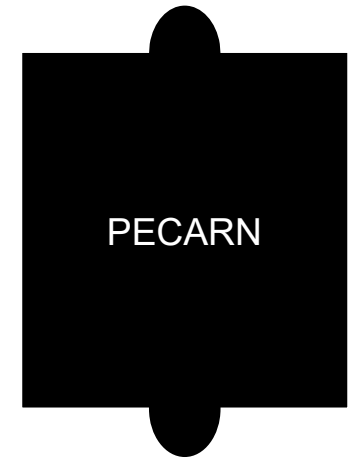
Tenor of our discussions

A rising tide floats all boats: we will all gain from collaboration





“The Center for Pediatric Everyday Readiness –
Regional Pediatric Pandemic Network: better
outcomes everyday, everywhere, for every child
through pediatric readiness”

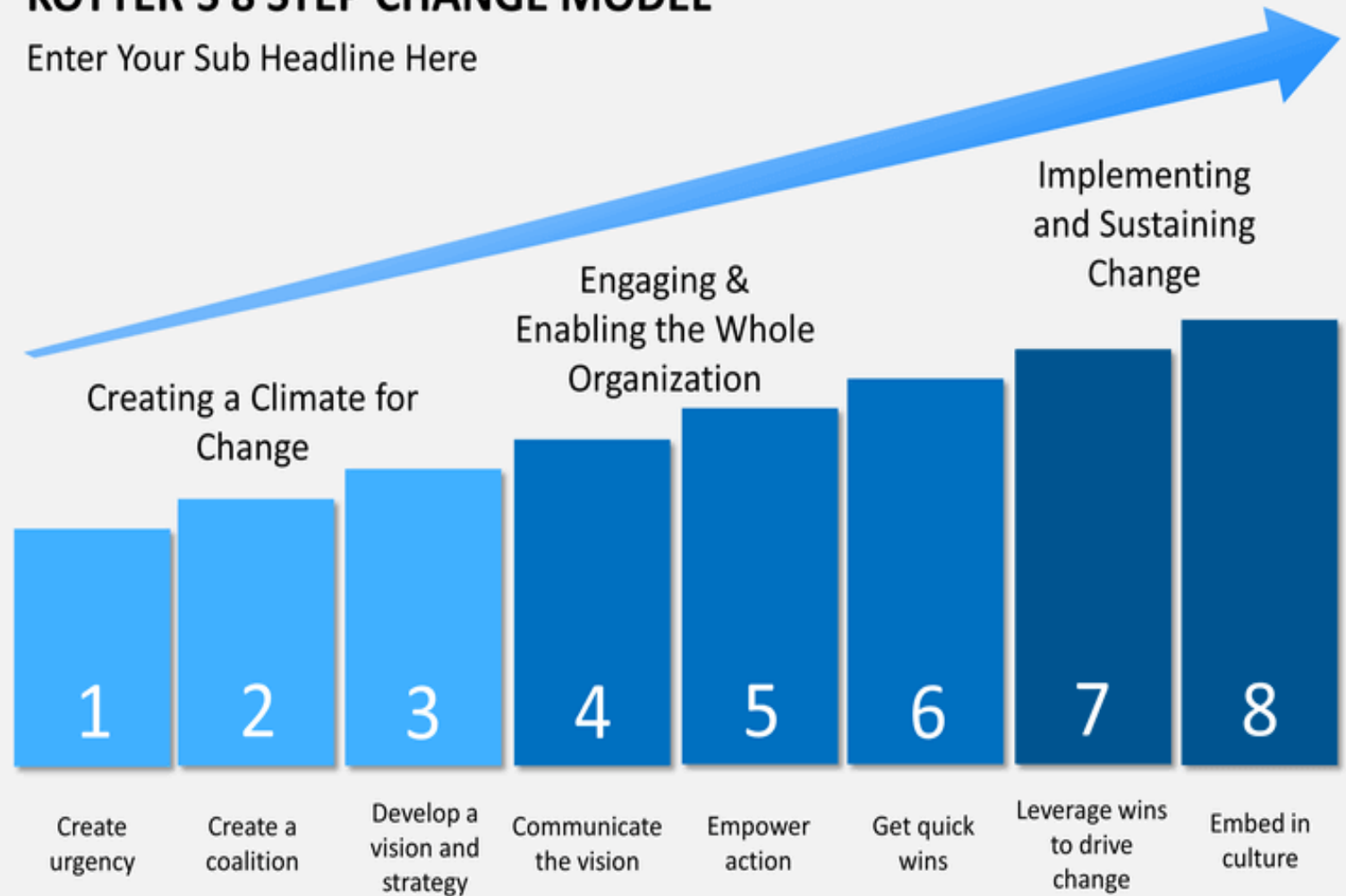


Get Your Mind Strategically Centered!



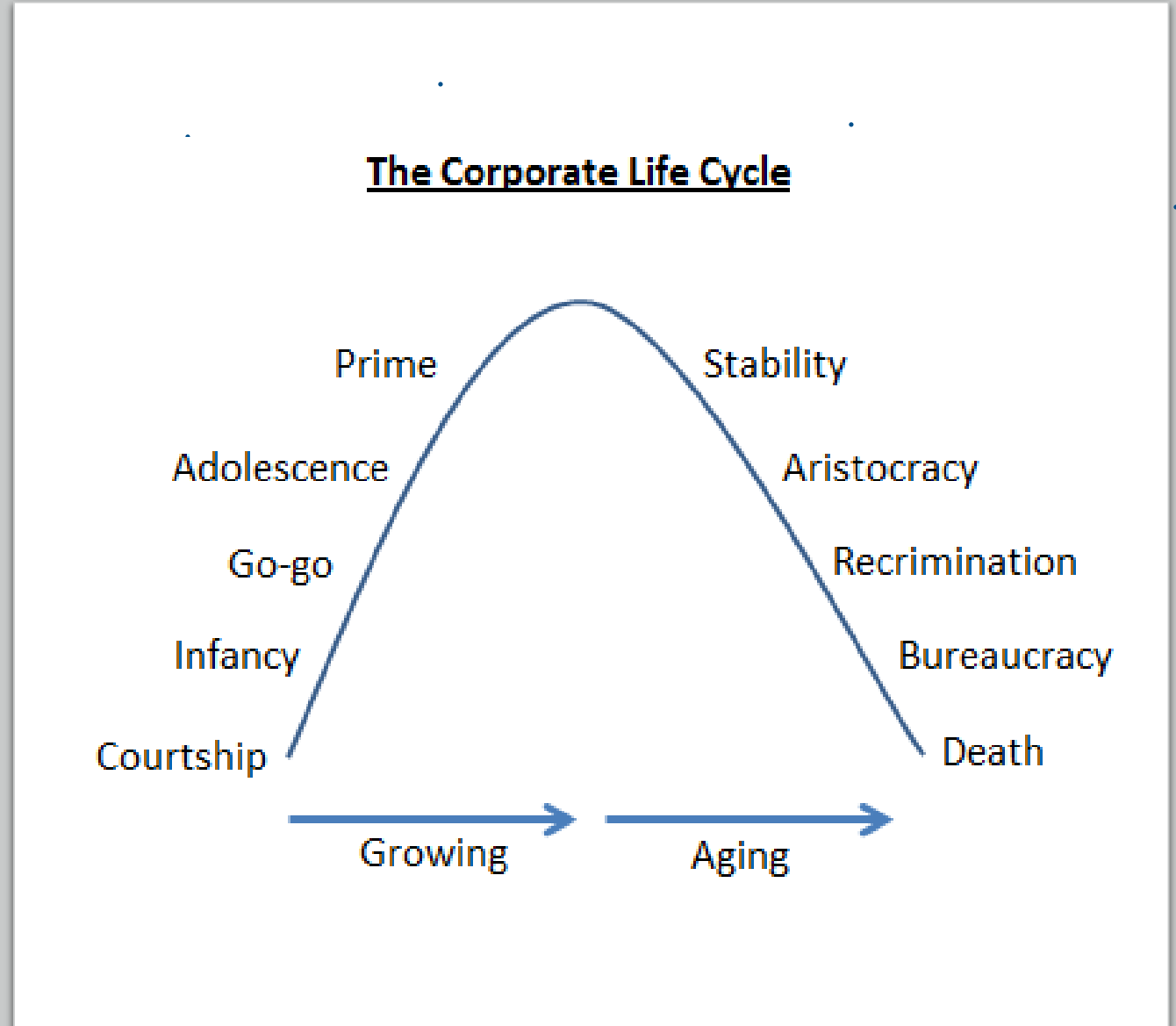
KOTTER'S 8 STEP CHANGE MODEL

Enter Your Sub Headline Here

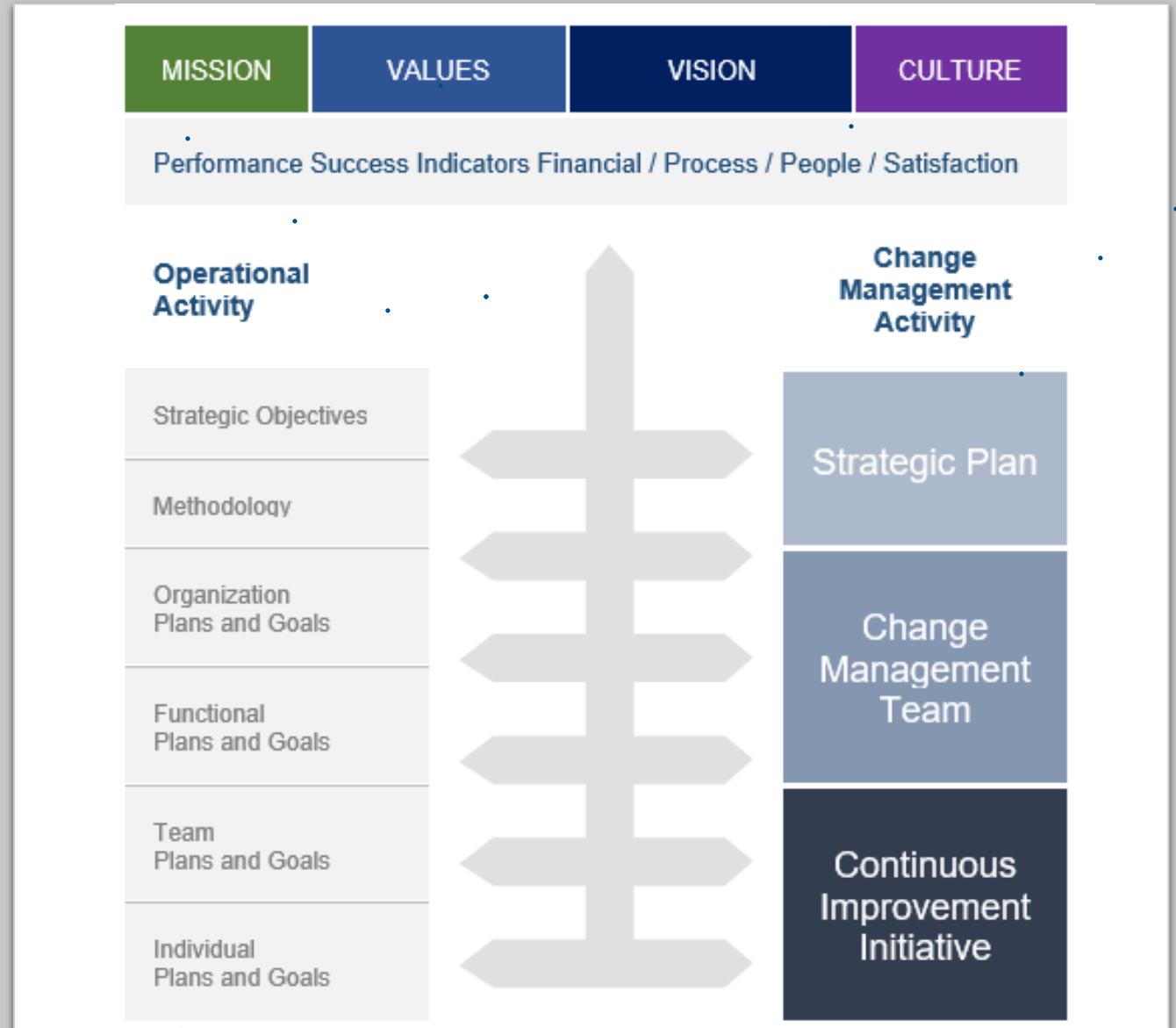


Get Your Mind Strategically Centered!

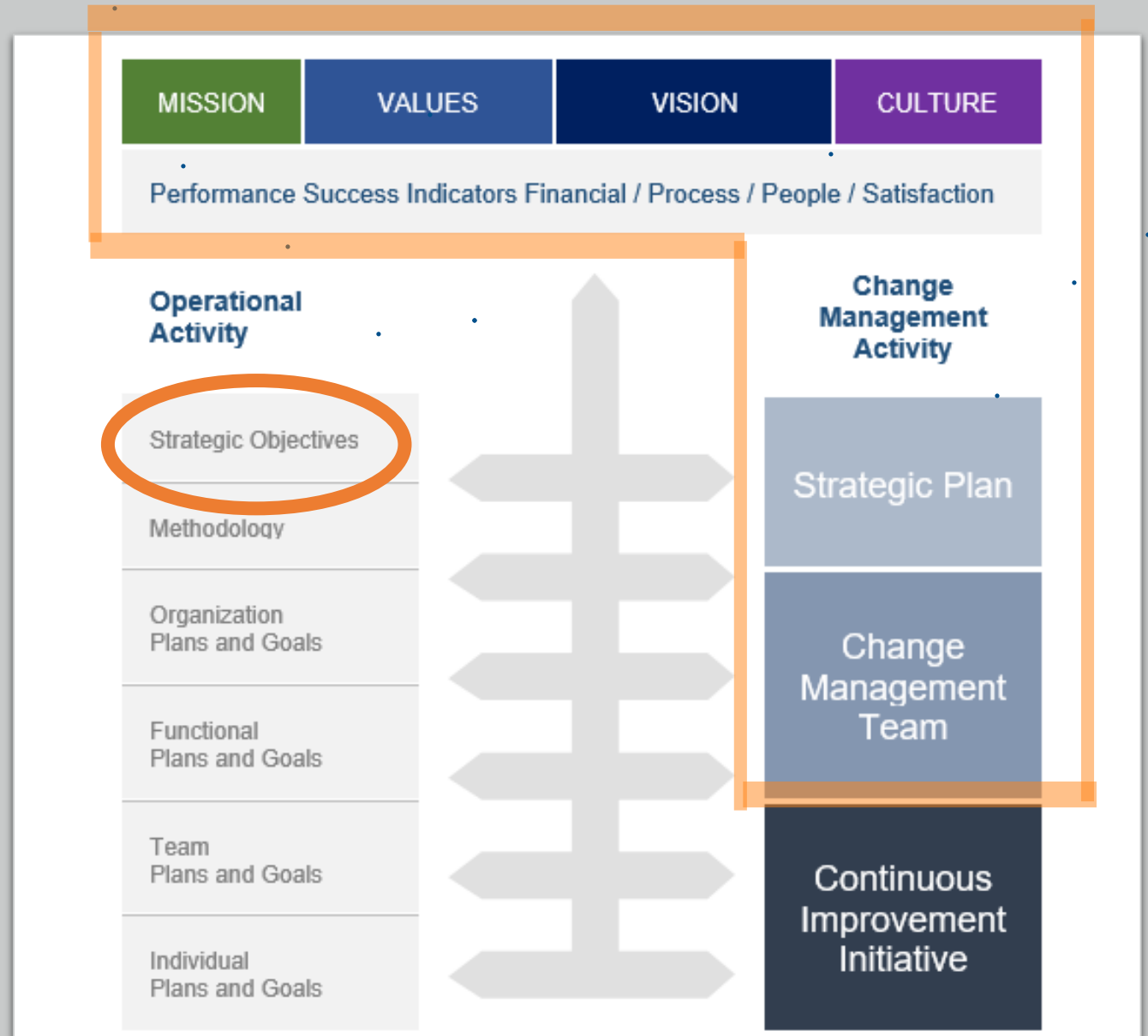
Corporate Lifecycles: How and Why
Corporations Grow and Die and What
to Do About It by Ichak Adizes



Get Your Mind Strategically Centered!



Get Your Mind Strategically Centered!



Where Are We Headed Together? - Agenda

- Here We Go! - **Welcome** & Opening Words
- **Introductions**
- Why Are We Here? - **Offsite Purpose**
- **Get Your Mind Strategically Centered!**
- **Where Are We Headed Together?** - Agenda
- **What's Important To You?**
- What Is **“In”** & **“Out”** For The Offsite?
- Session Close
- Virtual **Happy Hour** & Networking
- Austin Dinner

**LET'S
GET
READY**

Sunday 10/17 Agenda (CST) 5:00-6:30

Where Are We Headed Together? - Agenda

- **Breakfast** & Virtual Coffee
- Session Opening
- What Do We Need To Accomplish? – **RPPN Strategic Charter Process**
- What's Our **Purpose**?
- Who Do We **Aspire** To Be?
- What Are Our **Strategic Areas Of Focus/Alignment**?
- What Are Our Core **Values**?
- Networks & Hub **SWOT** Analysis Discussions
- Networks & Hub SWOT Presentations & Input
- Let's Get Aligned - **RPPN Primary Goals** Discussion
- What Do We Need To Do? - **RPPN Domains** Discussion
- Session Close
- Virtual **Happy Hour** & Networking
- Austin Dinner



Monday 10/18 Agenda (CST) 8:30-5:00

Where Are We Headed Together? - Agenda

- **Breakfast** & Virtual Coffee
- Session Opening
- Steering Committee & National Advisory Board **Membership Brainstorm**
- So What? Now What?, **Next Step** Discussion
- **Open Space** Discussion
- **HRSA Virtual Progress Update Meeting**
- **HRSA Progress Update Debrief** and Adjust
- **Offsite Closing** Ceremony



Tuesday 10/19 Agenda (CST) 8:30-3:00

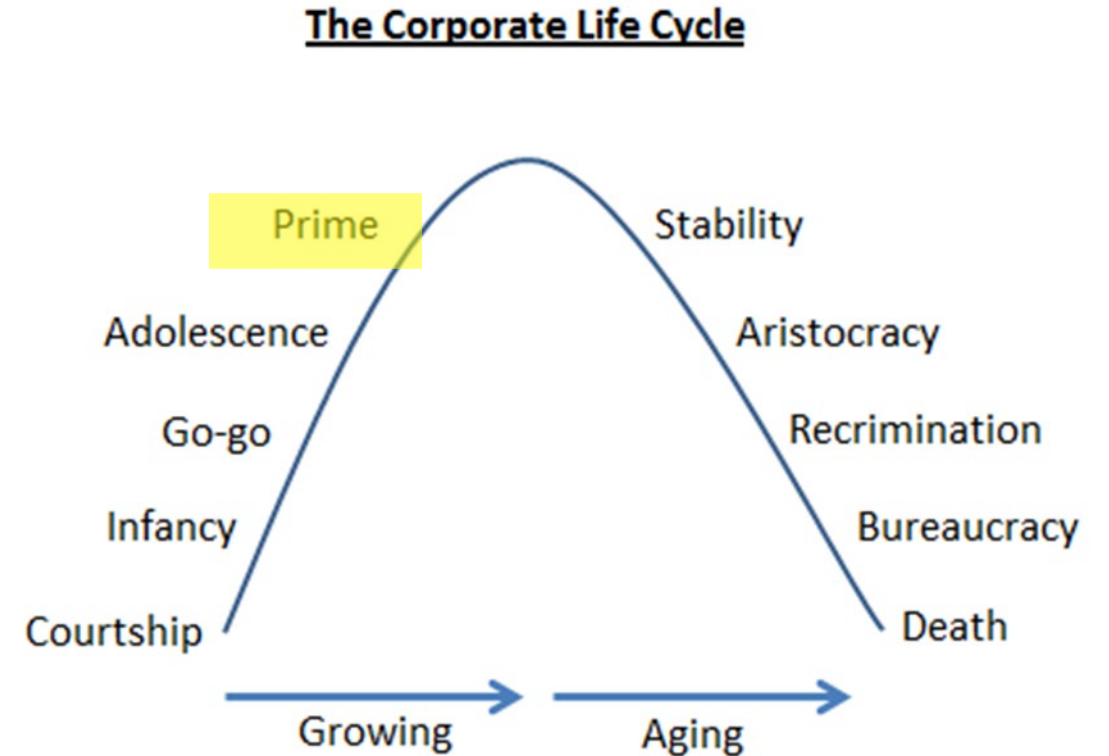
What's Our Purpose (Mission)? – RPPN Charter

- The global aim of the CPER RPPN is to provide a foundation for the Nation's children's hospitals and related pediatric SMEs to strengthen collaboration and coordination with existing local, state, regional, and national emergency preparedness systems to ensure the needs of all children are addressed—within both every day and global health threats—through enhanced pediatric readiness, including preparedness, response, recovery and pandemic activities.

- **Large Group Discussion – what are your reactions, thoughts, and or ideas?**



Who Do We Aspire To Be? – RPPN Vision



What do we want to create together that will transform the world that we are working within?

What Are Our RPPN Strategic Areas Of Focus & Alignment?



What Are Our RPPN Strategic Areas Of Focus & Alignment?

- Helps make Mission and Vision more tangible.
- Can be measured.
- Activity can be in one or more buck.
- Also know as dashboards, KPIs, and scorecards.



**Example
Clinical
Care
Improvement**

What Are Our
Core RPPN
Values?

CORE
VALUES!

Our Core RPPN Values

- Core Values are the collectively defined **core behaviors and beliefs that people are expected to exhibit** in their work performance.
- Core Values are the foundational cornerstones for **effective** organizational **culture** development.
- Core Values connect, align, and **bring commonality to diverse organizations** working together.
- Core Values shift communication from surface level talk, to deeper and **more meaningful dialogue**.
- Embedded Core Values are regularly used in **decision-making**, change management, and performance feedback.
- Values Based Organizations (VBO) **out perform** other organizations.



Our Core RPPN Values – Examples

Medical Association Values Study

In this October 2021 Study, we selected 50 Medical Associations and analysed their listed values. The most prevalent values are listed in the accompanying table.

Ranked Value

1. Integrity
1. Diversity / Inclusion
2. Innovation
2. Leadership
3. Collaboration

C O R E
V A L U E S !

Networks & Hub SWOT Analysis Discussions

The three networks and the hub group will meet independently to complete a SWOT analysis with recommendations and top 5 high-level priorities.

- Hub
- ASPR/WRAPEM
- ASPR/EGL
- EIIC

SWOT Analysis

HELPFUL

HARMFUL

Strengths

What do you do particularly well?

What do you do that is unique in the “marketplace”?

What do your patients, user groups, or others ask for you to do repeatedly?

What tools/resources do you have to accomplish your tasks?

Weaknesses

What are you uncomfortable doing?

What needed staff, resources, or skills do you lack?

What do you do but consistently perform poorly at?

Opportunities

Are there new situations coming down the road that you can take advantage of like new programs being offered? New funding? New tools available for you to use?

Are there gaps in the “marketplace or emerging needs ” that you can fill?

Are there partnerships that might be fruitful?

Threats

Is there any competition and what do they offer that you can't do as well?

Are there “environmental” changes or situations that could cause problems for you and your programs or services?

What other roadblocks are being thrown in your path?

RPPN Primary Goals Discussion

- 1) Expand the scope and number of collaborations and partnerships of children's hospitals with systems of preparedness.
- 2) Improve pediatric readiness across health systems influenced by children's hospitals.
- 3) Increase the capacity & capability of telehealth/telehealth to address children's unique needs during a disaster or global health threat.
- 4) Accelerate the real-time dissemination and uptake of research informed pediatric care to address the needs of children and their families.

Center for Pediatric Everyday Readiness- Regional Pediatric Pandemic Network

Domain Goals and Key Priority



RPPN timeline: 6 month ramp up



Contractual issues

Strategic planning

Determine operational design

Finalize cooperative strategies with HRSA

BLAZING FORWARD



September 21

Oct 21

Late Oct 21

Nov 30, 21

Dec 1, 21



Official Launch

HRSA Launch
Oct 7, 2021

Oct 2021 Strategic Planning Meeting

Early Nov 21, RPPN wide launch

Launch domain operations work: steering, PMs

3 month domain strategy with January PM collaborative

Domain: Analytics

- Long term goals

To create an analytics core to evolve:

- 1. **Big data management warehouse**
- 2. **Self-service analytics platform**
- 3. **Multi-use: surveillance, prediction, capacity/capability, research platform**

- Single most important 6-9 month activity

- **Recruit data scientist** to begin the framework for the analytics core build using our consultant to identify roles and support the scientist

Domain: Equity and Regionalization of Care

- Long term goals
 1. Create a core team to **review all RPPN outreach/resource materials** to ensure they are inclusive and culturally relevant
 2. Support efforts to **increase NPRP scores** especially among rural/remote/critical access/tribal hospitals and to identify ED PECCs in all hospitals, regardless of geographic location and annual peds volume
 3. **Partner with Research and Analytics to track data** concerning outcomes and their relationship to **patient and family demographics**
- Single most important 6-9 month activity
 - Help to create and **conduct an environmental scan/needs assessment** that includes tribal/critical access hospitals

Domain: Health Information Portability (HIP)

- Long term goals
 1. Identify barriers to HIP and **develop framework-improving access** to efficient methods of sharing health information.
 2. **Determine where effective aspects of EHR/EMR platforms can benefit local/state/regional/national groups** by addressing their perceived needs or areas for expansion.
 3. Demonstrate how local/state/regional/national groups can **partner with vendors to customize a method of health information exchange (HIE)** between systems with focus on interoperability as well as efficiency and effectiveness of data exchange.
- Single most important 6-9 month activity
 - **Create survey** regarding practices in interoperability of EHR/EMR platforms during the pandemic.

Domain: Mental Health/Behavioral Health

- Long-term goals
- Are to create a **behavioral health core with specialization in pediatric disaster** mental health/trauma-informed care:
- **1. Increase the capacity/capability of telehealth** by identifying steps for psychologists to be licensed by the PsyPACT Commission for an Authority to Practice Interjurisdictional Telepsychology (APIT); deliver and provide just-in-time instruction for psychologists with existing expertise or interest in obtaining training in pediatric disaster preparedness/response to obtain their E.Passport Certificate from the Association of State and Provincial Psychology Boards
- **2. Develop unique training materials** to improve pediatric mental health pandemic preparedness/response across health systems influenced by children's hospitals, *including emergency plans for children with special health care needs*
- **3. Engage stakeholders** (parents, families, teachers) in identifying preferences for various modalities of delivery of pandemic preparedness, response, and recovery behavioral/mental health information (e.g., videos, infographics, wallet cards, apps)

Domain: Mental Health/Behavioral Health

- Single most important 6-9 month activity
 - **Identify steps for obtaining stakeholders'** (parents, families, children/adolescents, teachers, health care providers) feedback on their preferences for various modalities for receiving behavioral/mental health information on pediatric pandemic preparedness, response, and recovery (e.g., videos, infographics, wallet cards, apps)

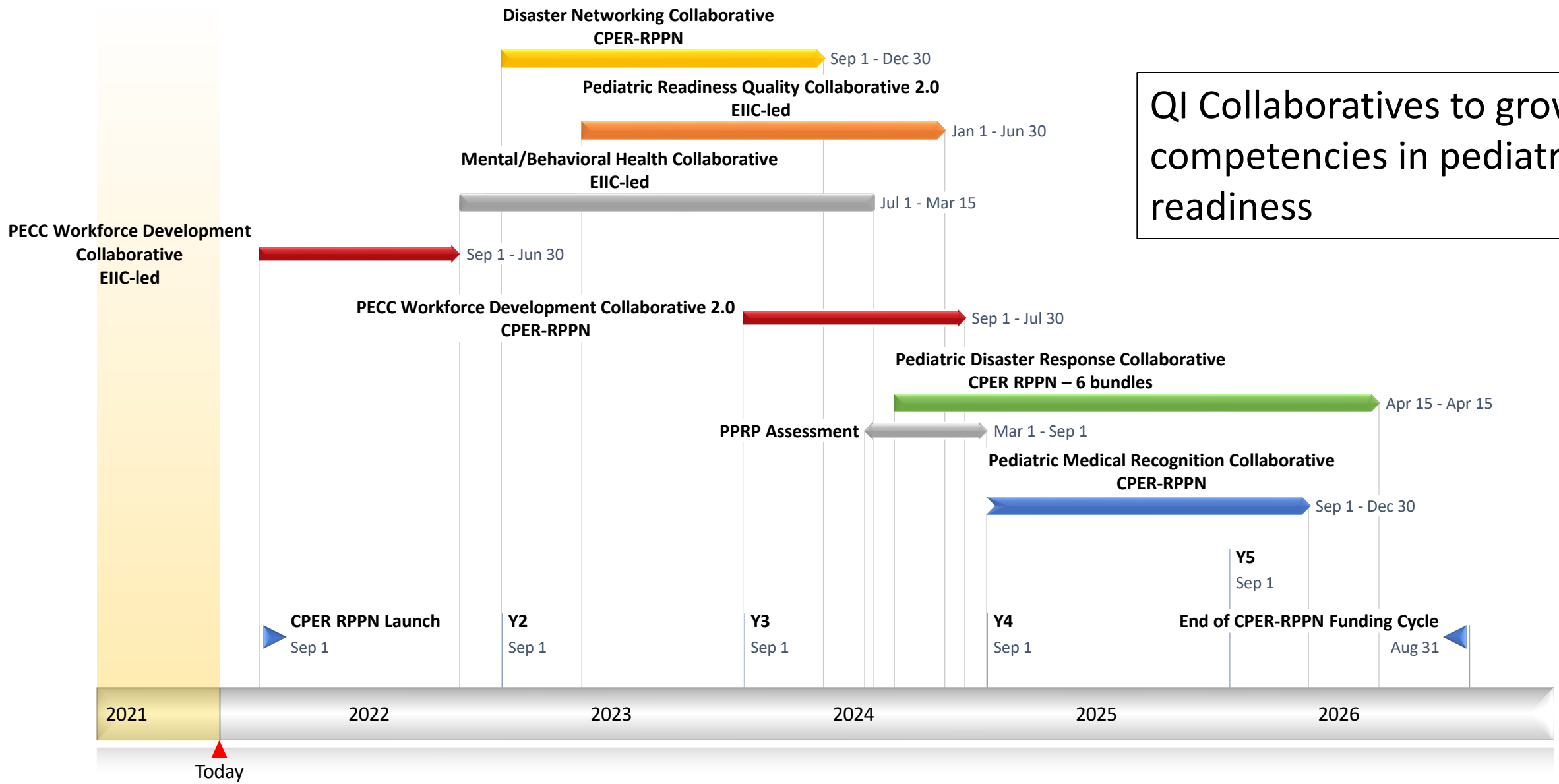
Domain: Research

- Long term goals
 1. **Develop a national pediatric disaster research agenda** for pediatric disaster medicine.
 2. **Start a national disaster medicine scholars program** to develop future leaders in pediatric disaster preparedness.
 3. Work on a **Community Based Participatory Research (CBPR)** program.
- Single most important 6-9 month activity
 - Development of a **national research agenda for pediatric disaster medicine**, to include identification of panel members and a modified Delphi process.

Domain: Collaboratives

- Long term goals
 1. Ensure XX proportion of children's hospitals effectively influence healthcare coalitions to **integrate the needs of children in disaster planning efforts.**
 2. Develop/Empower the emergency care workforce across the continuum to effectively improve pediatric readiness/disaster planning at the local level
 3. **Enhance disaster response capabilities among regional teams** (driven by children's hospitals) focusing on 6 critical domains of disaster response.
- Single most important 6-9 month activity
 - **Ensure a shared mental model** for purpose, structure, timeline, and content development for collaboratives **across RPPN domains**

QI Collaboratives to grow competencies in pediatric readiness



2026

Domain: Pediatric Readiness

- Long term goals
 1. Enhance the **influence of children's hospitals** in emergency management and healthcare coalitions
 2. **Establish a framework**, whereby children's hospitals serve as a critical lead in driving pediatric readiness efforts at the regional level
 3. **Grow a network of children's hospitals** that are actively engaged in promoting, expanding, and ensuring full integration of pediatric needs in emergency care systems.
- Single most important 6-9 month activity
 - **Promote children's hospital and associated regional or corporate network participation in Y2 collaboratives** including Mental Health, Disaster Networking, and PRQC.

Domain: Telemedicine

- Long term goals
 1. **Assess/inventory telehealth capabilities** across children's hospitals and hospital networks that includes structure, scope of services, business model, pediatric services, reach, volume, referral sites, leads, contacts , hospital network, geographic location
 2. **Maintain an ongoing directory of telehealth programs** by state/territory to include (reach, contact, state, pediatric services provided) with geospatial mapping
 3. **Integrate telehealth capabilities into state and regional disaster planning** and response through development of exercises and protocols to be integrated into QI collaborative activities
 4. **Reduce legal/regulatory barriers** (licensure, privilege, liability) to creation of virtual care network activation during pediatric surge
- Single most important 6–9-month activity
 - **Create a telehealth assessment tool for hospitals**

Domain: Surge Capacity and Surveillance

- Long term goals
 - Promote/Develop **pediatric surveillance on a national and regional level.**
 - Ensure optimal **pediatric surge planning**
 - Increase **real time pediatric capacity and capabilities**
 - **Enhance pediatric coordination**
- Single most important 6-9 month activity
 - **Hire a program manager**
 - Create an **implementation survey** for the EGL pediatric HAV tool that will be used to evaluate the use of the pediatric EGL HVA tool for the 5 hub hospitals.

Domain: Trauma

- Long term goals
 1. **Creation of a toolkit and standard provider training** for pediatric trauma triage, shock recognition, and early recognition for need to transfer to higher level of care.
 2. **Development of minimum standards** (Level 3 Peds verification/designation or 'Peds Ready' status) for pediatric trauma resuscitation and stabilization capability in non-pediatric centers.
 3. **Facilitate creation of local nursing and physician champions** for pediatric trauma care (Pediatric Emergency Care Coordinator development, engagement with adult surgeons).
- Single most important 6-9 month activity
 - **PECC Development** in Trauma Centers

Domain: Drills & Exercises

- Long term goals
 1. Create and assist hub sites **implement and evaluate exercises.**
 2. Create and assist spoke sites **implement and evaluate integrated exercises.**
 3. Create and assist hub, spoke and related communities **implement and evaluate exercises** that promote integration and cooperation
- Single most important 6-9 month activity
 - **Kick-off workshop** for hub site representatives committed to collaborate on **development and delivery of exercises** through the next five years

Domain: Deployable Assets and Pediatric Care Coordination

- Long term goals
 - 1. Operationalize the concept of a “pediatric specific” state medical operations coordination cell (SMOCC)
 - 2. Identify and address barriers to the interstate integration of pediatric specific SMOCO.
 - 3. Identify and test concepts for a focused pediatric strike team
- Single most important 6-9 months activity
 - Kick-off event (workshop) for hub site representatives. The event will provide background on pediatric specific SMOCC and do initial work group planning for year one.

Domain: Infectious Disease

- Long term goals
 1. **Establish a resource directory** of pandemic-related expertise with goal to provide pandemic related preparedness plans & timely response recommendations
 2. **Support pediatric pandemic readiness programs** that increase capability and capacity
 3. **Develop/ validate education modules**
- Single most important 6–9-month activity
 - **Establish the National Pandemic Advisory Committee**

Domain: CBRN

- Long term goals
 1. **Develop educational modules and exercise templates** that address pediatric-specific CBRN challenges, including the 2023 ASPR Hospital Preparedness Program CBRN Annex
 2. **Integrate Poison Control Centers & Radiation Injury Treatment Network** into emergency management plans and regional HICS infrastructures
 3. **Collaborate with WRAP-EM in CPER CBRN activities** including updating pediatric countermeasures dosing guidance
- Single most important 6-9 month activity
 - **Establish a partnership** with Poison Control Centers and Radiation Treatment Network in each of the five CPER regions.

Domain: Community *and Medical Home

- Long term goals
 1. Ensure that healthcare coalitions **understand the definition and importance of the medical home in the disaster cycle** and have representation on their coalitions
 2. Create a **community of practice** that incorporates a disaster cycle quality collaborative for medical home providers
 3. **Integrate objectives** for the disaster cycle for pediatrics into **healthcare professional education** (prehospital, allied health, nursing and medical)
- Single most important 6-9 month activity
 - Use the seated **Advisory Council to review the gap analysis** for enablers, barriers and strategies to integrate disaster preparedness concepts into the medical home

* Community includes schools, daycare among other important partners

Domain: Reunification

- Long term goals
 - **Improve US Hospital Reunification Planning** leveraging the AAP Hospital Reunification Toolkit through evaluation and QI Collaboratives
 - Create a **taskforce of stakeholders** in regional reunification planning
 - Develop and test a **best practices plan** for regional reunification
- Single most important 6-9 month activity*
 - **Recruit hospitals to evaluate the AAP Hospital Reunification Toolkit** and initiate baseline assessment and implementation

Domain: Prehospital

- Long term goals
 - Fully **integrate EMS into systemwide pediatric pandemic and disaster response** (public health, hospitals, public safety) that ensures the capable care of ***all children*** including those with special health care needs
 - **Assess** status of **pediatric readiness** for pandemic response among ground ambulance and 9-1-1 responding agencies through the 2024 NPPRP Assessment
 - Ensure that EMS agency Pediatric Emergency Care **Coordinators have reliable resources** to ensure high quality pediatric care during pandemics and disasters
- Single most important 6-9 month activity
 - **Promote EMS agency participation** Disaster Networking Collaborative

Domain: Knowledge & Education Core (KEC)

- Long term goals
 1. **Lead the education-related deliverables** for this grant, including disaster and pandemic response education, with the Concept of Operation (CONOPS) as the framework
 2. Assist each RPPN domain with **optimizing web design** to maximizing objectives and begin to harness user experience data
 3. Curation and **dissemination of disaster educational/knowledge** resources via existing core infrastructure, resources and management
- Single most important 6-9 month activity
 - Establish **bidirectional communication with each domain and hub hospital**, to dialogue about gaps between existing and needed educational resources

Domain: Legal/Ethical Domain

- Long term goals
 - **Establish a Legal/Ethics Advisory Council** for the Network, involving legal counsel and ethics professionals who are familiar with previous work : will include SMEs, domain representatives, HUB site and Network PI representatives. Hub site representatives will be selected based on their experience with ASPR COEs' legal work and the domain's needs
 - **Gather extant legal/ethical resources, playbooks, best practices, guidelines;** especially those with Crisis Standard language which is pertinent to pediatrics
 - **Establish champions in the other Domains** where the need for legal/ethical guidance will augment their work and roles (examples include Telemedicine, Reunification, EMS-Prehospital) to establish process and cadence for Legal/Ethics Advisory Committee to confer on their projects
 - **Reduce legal/regulatory barriers** to pediatric disaster response (licensure, liability protections, credentialing, virtual care delivery) leveraging extant mechanisms with exploration of model regional reciprocity compacts
- Single most important 6-9 month activity
 - Establish both Advisory Council (which will have cross-domain consultative functions)
 - **Establish Domain WORKGROUP** which will construct All-Network scan/survey of State and Regional Emergency Order powers, disaster licensure and liability processes, EMAC and cross border MOU experience, Child Protection and Reunification statutes, and State guidance on Crisis Standards establishment and use

RPPN timeline: 6 month ramp up



Contractual issues

Strategic planning

Determine operational design

Finalize cooperative strategies with HRSA

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Launch domain operations work: steering, PMs

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RPPN Committee & Advisory Board Membership Brainstorm

Steering Committee: TBN in partnership with HRSA			National Advisory Board: Federal & Organizational Partners (includes Federal Partners & Leaders from ACS, ACEP, ENA, NASEMSO, AAP, ASPR, CHA): TBN in partnership with HRSA
Operational			Strategic
Collaborators			Super Influencers
Organizations			Individuals



So What, Now What, Next Step Discussion

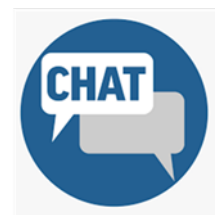
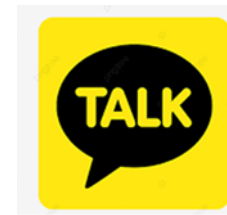
NEXT STEPS

From your input, we will:

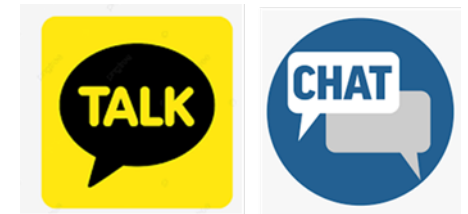
- Refine Purpose
- Draft Vision Statement
- Draft Buckets
- Draft Values Statement
- Draft Membership List
- Compile SWOTs
- Compile Domain Comments

What else needs to happen?

- 1 Parking Lot
- 2
- 3
- 4
- 5
- 6
- 7
- 8



HRSA Progress Update Debrief and Adjust



Offsite Close



Review Offsite Purpose

Mentimeter

Closing Activity

Last words of gratitude