

# An RDHRS Can Support the Development and Coordination of Deployable Disaster Medical Teams (DMTs) Within a Region

During disasters and emergencies, the need for medical care can quickly overwhelm the available health care system

## The Need for State and Regional Teams

For some disasters, state and regionally-based DMTs may be deployed faster than federal assets without requiring a federal declaration to be mobilized. They can also support pre-planned large events and may be more cost-effective for states in some circumstances.



## An RDHRS has a role in developing and coordinating among DMTs

The models, tools, and other resources developed by an RDHRS can help to inform the planning for states that want to start their own DMTs but are struggling to do so. Also, if DMTs within or among states share some common core team capabilities, it is easier for states to plan for regional sharing and to use them more effectively together in real time.



# The Region 1 RDHRS Has Supported the Development of DMT Coordination Across Region I

## Established a Hospital-Hosted DMT Model

The Region 1 RDHRS-established hospital-hosted DMT model with numerous supporting materials, provides one possible framework for other hospitals and states to replicate more easily. One benefit of basing a DMT at a hospital is its access to a wide range of clinical specialties. Through a simple contracting agreement between any state government and the host hospital, such as an MOU, appropriate personnel may be rapidly mobilized and quickly deployed.



## Developed Tools and Resources

The resources developed by the RDHRS — including equipment lists, organizational charts, contracts/MOUs, and job descriptions, can help facilitate the development and establishment of any model of DMT for states and regions.



## Convened Regional Leaders to Create a DMT Community

The R1 RDHRS has brought together regional team leaders with representation from each state as part of an established Regional DMT working group to support ongoing collaboration and unification of DMTs in the region as well as increasing capabilities and resilience.



## Adapted Standard Mission Assignments to Facilitate Planning and Sharing of Assets

A common list of standard mission assignments and mission ready packages was adapted by the RDHRS to facilitate standardization of response component across jurisdictions. Teams may perform a wide range and support of patient care functions in a variety of mission assignments, such as:

1. Triage/Pre-Hospital Care
2. Emergency Department Decompression, Base of Operations (BoO), or General Emergency Care
3. Shelter Support-General Medical Care
4. Hospital Augmentation - Specialty Care
5. Support of Patient Movement
6. Administration of Mass Prophylaxis
7. Medical Support for Pre-planned Mass Gatherings
8. Healthcare Needs Assessment by Subject Matter Experts