

## Region 8 HPP Planning Board and Advisory Committee

January 6 2010, 10 a.m. – 2 p.m.

Ramada Inn, Marquette

Meeting Minutes

Agenda Items	Description
<b>I. Welcome and Introductions</b>	Meeting was called to order around 10:05 a.m.
<b>II. Public Comment</b>	None
<b>III. Old Business</b>	<p>a. H1N1 Update DCHS will be lifting visitor restrictions on January 11. MGHS ILI numbers have been dropping substantially. WMH has lifted their restrictions quite a while ago due to the fact that their area was not impacted as drastically as other areas. NSH lifted their restrictions before Christmas.</p> <p>Marquette County Health Department held a clinic on January 5, turnout was much less than expected. Mark McCune and Mark Weber said there was a major decline in request for the vaccines. They're not sure if the public knows the priority groups have been lifted. They will soon be doing a PSA to announce vaccines are available for the general public.</p> <p>b. SNS Now that we've had a couple SNS shipments, please review your hospital's SNS receiving plan to see if it worked and update if necessary.</p>
<b>V. New Business</b>	<p>a. HPP Assistant Coordinator Greg Place is the new HPP Assistant Coordinator. His phone number is (906) 225-7415 his email address is <a href="mailto:gregory.place@mghs.org">gregory.place@mghs.org</a></p> <p>b. H1N1 Funding Hospitals received two funding sources: The H1N1 preparedness check that was to have been spent by November 30, and the H1H1 Response funding that will need to be spent by February 15. The response money should be used to purchase items that will help the hospitals complete the checklists as provided by the Region 8 Flu Planners (Gary Gustafson and Marsha Lucas).</p> <p>MCA's also received H1N1 Response funding. <b>Do not</b> spend this money on any Life Support Agency that have not filled out the checklist provided by the Region 8 Flu Planners.</p> <p>c. H1N1 Checklists &amp; Feedback It was decided that if you hire someone when they don't normally work or doing something they don't normally do, it will be covered under the H1N1 funding through the grant. If a hospital wants to hire someone to write a pandemic plan, the grant will cover that if the position is dedicated solely to that purpose (no other duties whatsoever). The Region 8 Flu Planners have created an appendix for hospital's disaster plans. It includes everything on the checklist and has a bit of research on it.</p>

	<p>It contains blanks for each individual hospital to fill in. To get this appendix, please contact the Flu Planners at (906) 225-3418.</p> <p>d. Software Purchase/Handhelds Viewed the EMSsystems training slide show presentation. Spoke of assuring that all the handhelds have new software on them. To be followed by user trainings. Longer term goal would be to have more handhelds available throughout the Region to allow for immediate use in a disaster and also use for accountability. The concept of personnel and major resource (ambulance) accountability was discussed. Our most finite resource is personnel and we are not tracking them and subsequently their safety at incidents. Lyn has spoke with Kevin Chau at the State office who coordinates MIHAN and other systems. He believes we can trial using the new software for accountability and we will be discussing this further. Lyn also explained how updated handhelds can also be used to transmit ECGs through their built-in cellular phone technology. More information will be disseminated to the Board as it becomes available. For now, while planning exercises, please incorporate the handheld devices for patient triage.</p> <p>e. Divisional Reports None to report.</p> <p>f. HAvBED and ILI Reporting Region will provide feedback to the hospitals on who is responding and who isn't. The inability for hospitals to respond to HAvBED exercises without continually prompting from the Region office was discussed. Locations of computer screens with the software on it, Emergency Departments that are not staffed when there are no patients, staff around-the-clock not knowing what to do, the length of time it takes to collect information (especially ILI info), etc. were all key points made. The Region provided monies to the hospitals to assure HAvBED exercises and real-life events would be completed. Some discussion occurred on how to test the system on off-hours without head's up prompting.</p>
<p><b>VI. Informal &amp; Discussion Items</b></p>	<p>a. Hospital/Regional Interaction MGHS OnDemand is a website that allows people to log into to download educational information. Current hospitals who are members of the UP hospital library coalition may be able to use this system depending on availability of licenses or users that are allowed. Check with Kitty Stuart at MGH for more information. If grant-related videos/DVDs are of interest to partners, let Greg know and he will see what copyrights we may need to address before sharing and loading to the MGHS OnDemand system.</p> <p>b. Updated NIMS Numbers It is required of hospitals and MCAs to forward updated numbers to the Region office when anyone within their entity has completed a NIMS training. These numbers are collected and reported to the State.</p>
<p><b>VII. Training &amp; Exercises</b></p>	<p>a. Spring Exercises List of exercises/trainings to occur from January to March, enclosed in meeting packet.</p> <p>b. NDLS NDLS was held last year and again is likely going to be later this summer. Cathy Flores noted that she has not received a certificate from attending that course as of yet. Lyn said her's was almost a year. Josh will follow up and get back to the</p>

	<p>group. Cathy suggests we not do the program if difficulties such as this are a problem with the national coordination.</p>
<p><b>VII. Funding Requests</b></p>	<p>a. <span style="float: right;">Approval of Funding Requests – February – March</span>  Motion to send a letter to OPHP requesting reply regarding November IAF with concerns on staying on task with spending.</p> <p><b>Motion:</b> Lyn Nelson      <b>Second:</b> Joe Schneller</p> <p><b>Funding Requests</b>  Host a Joint-Commission CSR Emergency Preparedness Plan review for accredited facilities  All department managers will meet to discuss emergency plans and unmet needs to develop specific goals for years one, two and three  Broselow Cart for Helen Newberry Joy Hospital  Back-up Power Supply for ACC Site (Generator) for identified hospitals  Replacement of expired PPE in cached locations  StatPaq replenishment to requested Emergency Departments  Emergency Management Program Review for identified hospitals  Evacuation equipment for Bariatric and other special needs patients, including an air transfer system (Bell and Newberry)  Additional supply of stockpiled backboards and straps  ID vests and cards for ACC assigned personnel  Provide train-the-trainer program to requesting hospitals  Decon Tent for single patient for Aspirus Ontonagon  Provide Incident Command Staff at individual hospitals with specific program for their institution.  Test the Region’s ability to react to a pandemic situation as an entire Region in a single epidemic event  Use of E-Team, EMSsystem, and MI-HAN  Patient Tracking software conversion  Refinement of policies and procedures for coordinating volunteer resources and concept of operations  Update information with quantitative surge triggers and MI-MORT placement in each hospital fatality management plan  CISM Team refresher on mass fatality management of grieving families and healthcare workers (hospital and EMS based)  Evaluation of current evacuation equipment at group tabletop exercise, including EMS agencies  Security for Helen Newberry Joy Hospital  Security for EMS Agencies in Luce County  Travel for participation in Interstate, Interregional and Intercontinental training and exercises</p> <p>Motion to approve list of funding requests as presented minus those items rejected by OPHP.</p> <p><b>Motion:</b> Lyn Nelson      <b>Second:</b> Teresa Schwalbach</p> <p>b. Pagers (Cost Sharing with Homeland Security Planning Board for Future FY)  Three year project to replace all pagers is being looked at by the UP Regional Homeland Security Board, made up of mainly Emergency Managers. Currently they are in the process of collecting numbers and gathering totals. They won’t be able to assist all departments right away with narrow-banding required pager replacements, but are looking at providing some form of assistance to all fire and EMS agencies over the next three years. HPP could consider assistance in some way as well if it ends up as an identified need by EMS at the Advisory Group.</p>
<p><b>IX. Adjournment</b></p>	<p>Meeting was adjourned at approximately 2:00 p.m.</p>

