

**CREPC ESF 8 Public Health Subcommittee**  
**Minutes**  
**December 3, 2010**  
**New Britain EMS**

**Attendees:** Dave Koscuk, John Shaw, Pamela Kilbey-Fox, Francine Truglio, Allyson Schulz, Rob Miller, John Degnan, Paul Hutcheon, Judy Torpey, Dave Boone, Bill Kramer, Steve Huleatt, Tom Gavaghan, Jeff Lim, Tung Nguyen, Kate Novick, Sylvia Dake, & Melissa Marquis

- **Welcome:** Melissa welcomed the group to the New Britain EMS Department/Training facility, and thanked Dave Koscuk for hosting.
- **Approval of Minutes:** Francine Truglio motioned to approve the minutes as written. Rob Miller seconded. All in favor.
- **Regional Planning Updates:**

Steve Huleatt shared the regional contract deliverables with the group. He recently received it from DPH, although it is not executed at this time. Steve went over the deliverables set forth in the contract and discussed what ESF-8 PH is responsible for over the next 3 years. Essentially the contract has 3 parts- CRI, Project Public Health Ready (PPHR), and drills and exercises. The contract start date is 9/1/10, if there are any activities that you have completed that tie into this contract please document and provide to Steve. Contract funding is similar to the last contract with the exception of new additional funding of \$1K per year to non-lead health departments to pay for their PPHR activities. This funding will require subcontracting between WHBHD and each non-lead health department in Region 3.
- **Workgroup Updates:**

Melissa and Steve laid out the formation of the regional and local workgroups and asked everyone to **sign up for at least 1 workgroup**. The table below is a list of those who signed up at this meeting. If you know of other people you work with who could provide valuable information to these groups, please let Melissa know.

Steering committee will provide a summary report to Steve with the workgroups activities annually. The steering committee will meet quarterly. The committee will be made up of every health director, CADH and CRCOG.

There is a suggestion that due to the amount of work required, and being sensitive of people's time, that perhaps the ESF 8 PH meetings be scheduled bi-monthly while the workgroups will continue to meet monthly. Full meetings, including workgroup reports, will take place at the bimonthly meetings. More info to follow.

<b>Local CRI Wkgrp</b> (Chair- Marquis)	<b>Regional CRI Wkgrp</b> (Chair-Centrella)	<b>PPHR Workgroup</b> (Chair- Marquis)	<b>Regional PHERP/D&amp;E wkgrp</b> (Chair-Centrella/Scace)
Bill Kramer	Bill Kramer	Bill Kramer	Bill Kramer
Jeffrey Lim	Dave Koscuk	Paul Hutcheon	Judye Torpey
Dave Koscuk	Patrick Ciardullo	Kate Novick	Allyson Schulz (D&E)
Patrick Ciardullo	Tung Nguyen	Allyson Schulz	John Degnan (D&E)
John Degnan	John Shaw	John Shaw	
	John Degnan	Juanita Estrada	
	Allyson Schulz		

**PPHR workgroup:** CADH staff has seen other state’s approaches and have some ideas. Melissa, Charles Brown and Steve Huleatt participated as National reviewers for NACCHO in November and December. They have valuable input to add to CTs 5 regional plans that will be submitted. CREPC was among the first few in the nation to become recognized during NACCHOs beta testing in 2006. We were up for re-recognition in 2010, but have been granted extension till 2012. Format is more structured this time around. It is very much a TAR on Steroids, except it is all-hazards.

In order to be recognized, applicants must meet or partially meet items, though there is a limit on the number of partially mets that can be scored.

We have the recommendations from the reviewers from the 2006 applications. We will work off of their comments and also by using the newly released regional criteria to help inform our application.

The process keeps the bar high to meet all standards. Melissa and Steve commented that there is a tremendous amount of work and lots of administrative documentation needed, with fine detail. You must “draw them a map”. All documents **MUST** be hyperlinked, now is the time to test some of the existing links to ensure they work and take you to the correct page in the plan.

All working groups should submit summary reports/minutes, after action docs etc. (REPT, Tom G., Steve in lead, etc. – meets quarterly for directional lead)

**CRI workgroups:**

The 2 CRI workgroups will be chaired by CADH and CRCOG. Each workgroup will be tasked with identifying areas for improvement, developing corrective actions and implementing those actions at the local and regional level. The CRI deliverables have not changed much from the previous contract years. TAR scheduling will begin over the next few months.

**PHERP/Drills and Exercise Workgroup:**

Carmine and Dan Scace will assist in chairing this workgroup. Since Dan handles the regional training and exercise calendar for CRCOG, we thought it was more effective for him to take on the public health activities as well and integrate them into the 3 year TEP. Within the contract, we are obligated to complete 1 regional full scale exercise per year, with 1 being geared towards special needs/vulnerable populations and 1 towards alternate methods/dispensing. Can we combine these 2 drills into 1 closed POD drill?

The CRI workgroups will need to work together with the drill and exercise workgroup to determine what exercise to develop.

- **Drill and Exercise Update:**

- John Shaw reported on June 15, 2010 region 3 hospitals (11 of them) and DPH were involved in a discussion based exercise. 3-5 objectives were identified. Communications was noted to be an area for improvement. John mentioned that the hospitals would like to meet with public health to work on communications laterally.
- Regional WMD exercise Jan 27, 2011 (Seminar) Tetra Tech/CRCOG guided series, using Political storm ex after actions report to guide objectives for next series of exercises, many points ESF 8 Specific, Everbridge testing included, All 32 acute care hospitals involved in Everbridge communications test. This is the first in the series of regional exercises over the next year+.
- EHHD reported they will be holding a functional drill on Monday Jan 10, 2011 from 1-3:30pm at E.O. Smith HS in Storrs. It is a RDS walkthrough of SNS distribution with simulated breakdown. They are also planning a Spring time drive thru POD at Mansfield Middle school. Previous table tops and workshop output will be used to plan this. If interested in participating as an observer or evaluator, please let John Degnan know ASAP. This is the first exercise testing distribution functions... Hartford is eager to attend, and Melissa and Steve encourage others to begin testing this section of their plans.
- North Central health district is also planning a POD exercise (FSE) in May 2011. Jeremy was not here to report on the activities.
- Allyson Schulz reported that Windsor is planning an Anthrax full scale exercise, TBD- possibly in April. They are hoping to test throughput. More info to follow.

Melissa strongly suggested the use of the CRI metric sheets and documentation (via AAR) of any drill you do. If you think something can be tied to a regional drill, please let Melissa or Steve know. Please keep your exercises on the planning calendar – the regional calendar maintained by Dan Scace. As a reminder....Your real world events to count as exercises! Just add Hot Wash and AAR. Melissa also suggests a local training and exercise plan, which is required for the TAR!

- **Local PHP Contract:**

Pamela discussed the PHEP vs PHER (H1N1) contract. Local contracts are being sent out soon. An amendment will be made to the local contract for the PHER H1N1 funding. A memo will be sent out from DPH today or Monday. Pamela mentioned that the LHDs need to send to DPH the amount of doses of H1N1 that they re-distributed to private providers.

- **CRI:**

There was discussion surrounding how other MDAs are getting large companies on board with signing on to be closed PODs, as well as who handles the distribution to those closed PODs. It is clear that there needs to be more discussion, and perhaps training on the closed POD guidance that this region developed last year. We will look into developing something and collaborating with Dan Scace and putting it on the regional training and exercise calendar.

Some additional distribution questions arose, specifically about who is responsible for distributing meds to Hospitals, and correctional facilities. Pamela mentioned that the State (DPH) is in the process of finalizing MOUs with the Department of Corrections which will place the onus of distributing to all Correctional facilities on the State. Until this is finalized, she encouraged MDAs to plan as if the State were not handling this function. Only the public piece is Public Health's responsibility. Rob Miller noted that some private hospitals have questioned where their items will come from. They are developing MOUs now and are treating as closed POD. There are legal issues related to requiring consent to provide meds to some wards of state. There are also out of jurisdiction issues: trucking companies, Munson's Chocolates, etc. Out of this discussion, and in discussions from the past, it is clear that there's a need to develop regional RSS plan/site. Melissa reminded the group that this is a time sensitive mission (36 to 48 hrs), we need to do what works best in the timeframe we have to work with. This discussion is encouraged to move from this format to the CRI workgroup level to get more into the weeds with respect to planning.

- **Department of Public Health:**

WebEOC Board creation for LTC facilities

- **Department of Emergency Management and Homeland Security:**

Tom Gavaghan discussed that the Save the children program related to disaster preparedness with childcare operations, schools, etc. is underway in the state. Tom is on the local committee to work this issue and improve CT's scores in certain areas. July 11, 2011 is the due date to have this work completed. Some of the topics include: reunification of families and kids, kids with special needs, evacuation plans for school, and overall planning. Local health and local EMD's are on this committee with local operations leaders.

Other DEMHS work: urge completion of local EOPs, High Band radio checks, etc.

- **CREPC Update:**

John Shaw provided the CREPC report. CREPC new leadership noted. Brian Heavren from Hartford Police is the new CREPC director.

In Sept, Mary Pettigrew, suggested and implemented that the 5 regional ESF 8's leads meet via teleconference and discuss lines of authority. How do we outline this? John will continue to participate and keep Melissa/Steve informed of any changes, issues.

- **MMRS Update**

None

- **Other Business**

Melissa asked if the group was still having difficulty using the CRI metric sheets. Would it be beneficial for Corinne, et al to train people properly? Problems have been reported to her. Group agrees there are problems mainly with locked data cells. John Degnan was able to obtain an unlocked metric sheet that is available. He will send to Melissa and she will investigate the difference between his sheets and the ones she obtained from the SNS extranet and DPH. When filling out the metric sheets, please remember to send them to Corinne at DPH and Melissa. We will make sure they are correctly filled out and will send to CDC.

Next month's meeting agenda – Melissa wants input on targeting objectives for TAR recommendations, etc. It has been decided that we will host a SWOT analysis to look at where we are now as a region, and where we want/need to be over the next 3 years. Lunch will be provided. Location and time will be determined soon. Hartford will host this meeting. Dan Scace has agreed to facilitate this meeting. The SWOT will take place of our normal monthly ESF-8 PH meeting. Date is January 7<sup>th</sup>.

Communications drills will be starting soon. We are working with CRCOG to upload all ESF-8 contact information into their Everbridge system.

- **New business:**

None

*Next Meeting – January 7, 2011 SWOT Analysis Location: Northend Senior Center*  
**80 Coventry Street, Hartford Connecticut**