

**Minutes**  
**DEMHS Region 3**  
**R-ESF 8**  
**Public Health Sub-Committee Meeting**  
**November 4, 2016**  
**Eastern Highlands Health District- Tolland Fire Training Dept.**

- Welcome- John Degnan welcomed the group to Tolland and thanked John Littel for providing the space. Introductions made
- Approval of Minutes- Len Nelson made motion to approve minutes, seconded by Patrick Getler. All in favor. 2 abstentions due to not in attendance. Minutes continue to be posted to the CRCOG website.
- Regional Status Updates
  - Training, Drills or Exercises
  - CREPC Update
- State Updates
  - DPH
  - DEMHS
- Local Public Health Preparedness Contract
- Other Business-
  - Family Assistance Center- Regional planning, Jon Basso ARC.
    - Fatality management drill held last week at Camp Hartell. It included sessions on mass fatalities, identification of bodies, data management, and family assistance center. ARC has significant presence during operation of family assistance centers. For commercial air and rail incidents, NTSB is in the lead. For other mass casualties or terrorism events, FBI in coordination with state and local jurisdictions would assume control with ARC assisting in operating FAC. This includes mass feeding, behavioral health and mental health support (also spiritual care). There may be a reception center stood up closer to the scene as well as a FAC further from the scene, closed to media, and only for family/friends of victims. Information sharing to families is the most important

elements/tasks of FAC. FAC need to be established immediately once an incident is known. ARC rarely takes the lead in FAC unless they are asked to.

- How does Region 3 ESF-8 develop a regional plan for FAC when local public health does not have a primary role?
  - Our role should be supportive and mimic a sheltering event where LHD responsibility is to ensure proper sanitation, food and water safety.
  - There are several municipalities within region 3 who have a human health services component and would have a more direct role in establishing and operating FAC. However, the majority of LHDs in Region 3 are districts, and would have a supportive role only.
- ARC vets spiritual care and behavioral health services
- There will be a staff staging area for credentials and job assignments. Then would go to FAC.
  - Credentialing of staff is critically important in an event like this
- What do we need to do as Region 3 PH?
  - Site selection? Suggest developing draft MOU that can be applied to any site. Would be event dependent.
  - Behavioral health
  - Development of concept of operations for ESF-8 PH- provide support in coop for the LHD involved. Work will ESF-5 and ESF-6 to implement plans and train.
  - If RCC activated- ESF-8 should have liaison present to ensure broad situational awareness.
  - Need to identify who command will be.
- PPHR Focus Group and Workgroup updates- Steve, Greg Chiara, Melissa
  - Greg provided background/history on PPHR and the genesis of our current project.

- Region 3 PPHR recognized in 2012-2013. 5-year recognition cycle. We've been granted 1-year extension to allow all 5 regions to go through next application process together. Will need to apply in 2018.
- Since last recognition, NACCHO had some questions and misgivings regarding the regional application process, particularly for regions who have a primarily supportive role. NACCHO made a unilateral decision last year that no regional applications will be allowed- needed to be the primary response agency. CT was able to communicate with NACCHO to discuss why this wouldn't work – not just for CT, but other regional applicants across the nation- and were able to get NACCHO to agree to developing a workgroup to examine how regional applications could be submitted.
- An ad hoc workgroup developed including national regional applicants or regional reviewers. Working with NACCHO and CT to develop 4 focus groups to identify the gaps, things that need to change and to develop a new regional framework process. NACCHO wants to hear from individuals involved in the process. Greg shared flowchart outlining the anticipated process (see attached).
- Melissa and Steve talked about the key themes and topics that NACCHO identified as part of the break out groups during the 1<sup>st</sup> focus group meeting. Also discussed were the next steps for focus groups and the ad hoc workgroup.
- Greg stated DPH remains fully supportive and onboard with PPHR. It is a valuable process for all jurisdictions involved.
- The regions are only as good as the locals that support them. We need local plans to be updated on a regular basis. Plans need to be current and operational.

- Suggestion to DPH to ensure that the documents that LHD submit to DPH for deliverables are actually read and followed-up on.

*Next meeting December 2, 2016 -*