Present

See attached attendance list

The meeting opened at 11:10 a.m.

Mr. Falaguerra opened the discussion on the current status of H1N1 vaccinations at the hospitals. The first delivery of multi-dose vaccinations was received by some hospitals without the requisite number of syringes and needles. There has been a delay in delivering the requested dosages to some of the facilities. These and other issues are being addressed with the Department of Public Health.

Several hospitals reported they have yet to receive from DPH their proposed contracts for federal funding for the current fiscal year. While funding is being reduced over past years, there has been an approved supplemental funding for hospitals for administering the H1N1 vaccinations.

A recent request has been received for additional reporting on acuity of hospital admissions. It was agreed that most hospitals have and should give this request to their Infectious Diseases staff to complete and return.

The group discussed various methods being used internally to monitor the surge in bed usage due to the flu. Also shared were various methods hospitals use to monitor employee absences real time to adjust staffing patterns. Connecticut Children’s Medical Center has advised that during the flu season, they will receive transfers of pediatric patients with flu-like symptoms from ages up to 9 years of age. Hospitals should plan on keeping patients over 9 years of age.

The status of WebEOC was discussed. Clarification is needed on how hospitals will communicate with each other during any future major event. Mr. Falaguerra stated he will follow up with the Department of Emergency Management and Homeland Security.

Follow up discussion was held on the After Action Report and Improvement Plans following the regional Autumn Storm tabletop exercise and functional exercise. Communication issues remain a top priority needing to be addressed.
Several Region 3 plans were discussed.

- The Regional Mass Casualty Plan has been completed and is in place.
- The EMS Mobilization Plan has resulted in a draft document being reviewed to identify legislative issues. A white paper will be drafted. Several issues were discussed that need attention:
  - Payment
  - Anticipatory waivers of regulatory requirements (currently, state “certified” ambulances cannot transport patients to any facility other than a hospital). It was reported that until the state moves to approve these exceptions at the state level, CREPC will continue the planning efforts.
  - Mutual aid plans under new statutory authority is limited to government-sponsored groups. Volunteer and commercial groups are excluded.
- The State Altered Standards of Care white paper has been given to Yale to roll out, but this project will not start until the spring.

The meeting was adjourned at 12:00 noon

Respectfully submitted

Cressy Goodwin
Recorder
# ATTENDANCE:

**CREPC ESF-8 HOSPITAL SECTION Meeting**

_October 14, 2009_

<table>
<thead>
<tr>
<th>Name</th>
<th>Affiliation</th>
<th>e-mail Address</th>
</tr>
</thead>
<tbody>
<tr>
<td>Kris Pagano</td>
<td>Hosp of Central CT</td>
<td><a href="mailto:kpaganov@tnacc.org">kpaganov@tnacc.org</a></td>
</tr>
<tr>
<td>Mark Petrone</td>
<td>UCONN Health Center/John Dempsey Hosp</td>
<td><a href="mailto:petrone@uchc.edu">petrone@uchc.edu</a></td>
</tr>
<tr>
<td>Marge Hetitia</td>
<td>ECHW</td>
<td><a href="mailto:mhettia@echw.org">mhettia@echw.org</a></td>
</tr>
<tr>
<td>Don Cyr</td>
<td>HSC</td>
<td><a href="mailto:dcyr@hfsc.org">dcyr@hfsc.org</a></td>
</tr>
<tr>
<td>Jerald Showsa</td>
<td>HH CEMP</td>
<td><a href="mailto:jshowsah@harthosp.org">jshowsah@harthosp.org</a></td>
</tr>
<tr>
<td>Cresy Goodwin</td>
<td>ESF-B</td>
<td><a href="mailto:cgoodwin@tiac.net">cgoodwin@tiac.net</a></td>
</tr>
</tbody>
</table>