

Minutes-DRAFT
DEMHS Region 3
R-ESF 8
Public Health Sub-Committee Meeting January 9, 2015
Manchester RCC

Attendees: Jennifer Kertanis, Don Janelle, Steve Huleatt, Marge Seiferheld, Maryann Lexius, Judye Torpey, Melissa Marquis, Aimee Eberly, Allyson Schulz, Carmine Centrella, Bill Kramer, Rob Miller

The January 9, 2015 meeting of the Region 3 ESF-8 Local Health Section was convened following a weather delay at 10:00am at the Manchester RCC.

- **Approval of Minutes**

Minutes from the December 5, 2014 meeting were distributed and reviewed. There were no changes requested to the minutes. Judye Torpey moved to accept the minutes and Bill Kramer seconded. The vote was called and the December 5th minutes were approved unanimously.

- **Regional Status Updates**

- 1) **Steve Huleatt reported the following Project updates:**

- a. Brief discussion regarding the need to hire a Facilitator for Health Care Coalition planning. Carmine Centrella and Dave Kosciuk working with a vendor at this time.
- b. The Regional ESF-8 Assessment that was started by Hartford Hospital and completed by Yale was submitted to DPH. Per Greg Chiara of DPH this is a Draft.
 - i. Region 3 has a robust internal structure that others regions lack, but we still lack the authority to function as a Region and be recognized the State.
 - ii. ESF-8 Leads are to decide on the Regional ESF-8 Assessment-Improvement Plan.
- c. CDC now realized that CT cannot function in a regional manner. So, each MDA will be responsible to complete an individual Operational Readiness Review (ORR) Tool.

- i. Steve Huleatt suggested that we “Be Patient”. And forward our questions to DPH Emergency Preparedness staff. No ORR Tool training planned at present.
- d. DPH Public Health Preparedness Grant Amendment – Revised work plan came out from DPH yesterday. Let Steve or Melissa Marquis know if you have not received it.

2) CREPC

Carmine Centrella reported as follows:

- a. Next CREPC membership meeting is January 22, 2015.
 - b. Regionally- Not much new
 - c. Initiative- “Crisis Management Software Platform” is better than WebEOC in managing resources during an emergency.
 - i. Request for Qualifications (RFQ) was sent out in Region 2-cost is \$300K
 - ii. Looking to CRCOG to purchase the software by contract statewide, to be available to regions that are interested.
 - d. FEMA training-now available:
 - a. Active Shooter-2 or 3 training modules used nationally.
 - b. Warm/Hot zone training.
- Question: Jennifer Kertanis stated that CREPC paid for Everbridge for 5 years for Region 3 LHDs. Jennifer requested that if the funding goes away to provide advance notice to LHD’s for financial planning purposes. Carmine agreed and stated that he is looking into other funding options for sustainment.

3) Other Regional discussion:

- a. Carmine discussed a Regional Ebola response plan- Developing a plan of what ESF-8 is doing for others to ‘plug into’. But, no one has seen the IAP from DPH on Ebola; making it not possible to ‘plug into’ a state system.
- b. Steve stated that we are the only ESF that is receiving consistent funding. Also, new infectious diseases have driven our work.
- c. DPH has unofficially identified several ambulance companies to transport Ebola patients. LHD’s are to contact DPH regarding a need for transport of a confirmed Ebola patient. The names of the designated ambulance companies are still unofficial and have not been released.
- d. Melissa stated \$6 Billion of federal funds have been made available for Ebola response. This is in addition to the Public Health Emergency Preparedness

(PHEP) money. There is still not information from DPH how the Ebola funding will be distributed in CT.

- **State Updates**

- No one from DPH or DEMHS was present.
- Steve provided the following update for DEMHS:
Per Tom “Get the School Safety Reports in!” Only 50% of the plans are in.
Note: the funding to review plans will end Feb. 15th. To date, Bill Turley and 2 assistants have been conducting the reviews. It is possible the plan review work will be assigned to the State Police.

- **Local Public Health Preparedness Contract**

Melissa provided the following update:

- DPH released the PHEP work plan yesterday- not much changed from the June 2014 Draft. Where the “region or regional” word was used, it has essentially been replaced with “local health department”.
- Details on Work plan deliverables discussed:
 - i. Item 1 is different
 - ii. Item 2a-should have been submitted already
 - iii. Item 2b is completed.
 - iv. CRI still applies to Regions 2 & 3, in CDC’s eyes.
 - v. Item 2c-Every MDA to do a set-up exercise to prepare to receive SNS.
 - vi. Melissa further stated that, looking forward, the ORR Tool will be required from each MDA. Ebola put a hold on everything and slowed progress on CDC projects.
 - vii. Not sure exactly when the ORR Tool will be finalized, but it will likely be sent to the States with their contracts for budget period 4 (July 1, 2015)
 - viii. Still unclear whether this review (as the TAR) will be annual or bi-annual. Updates will be provided as they are provided from CDC.
 - ix. Melissa recommends we spend the time now getting familiar with the document. It is estimated that the first ORR review and prep will take the most amount of time, but moving forward barring any major revisions to the tool it should be less time consuming. Melissa anticipates local preparation for ORR will take at a minimum of approximately 200 hours of staff time.

- Question: Who will conduct the reviews of the ORR Tools? Answer: CDC will review 2 or 3 in each region and DPH will conduct the rest. Plan on an 8 hour review of the completed ORR Tool for each MDA, at least for the first year.
- **IMPORTANT FOR FUTURE ESF-8 LHD MEETINGS:** Melissa offered to provide guidance to MDAs on the ORR Tool. A decision was made for future ESF-8 PH meetings to change the agenda at least until July 2015 and transition to a Workgroup Agenda:
 - Cover important business of ESF-8 PH in the first hour of the meeting;
 - Spend the remaining meeting time in review of the ORR Tool, taking it section by section, and Melissa will share an interpretation of what information is needed.
 - As Gaps are identified, “Fill them, Meet them or Not at this time”. The value is at the local level. The question is what do we think we need to do better? This information is needed for our Improvement Plan (IP).
- **Notes from the Field**
 - **Ebola – What needs to be documented?**

Minutes during this section will be abbreviated as sensitive information may be shared.

Melissa led the discussion about how to record Ebola activities to fulfill as evidence for local, state, federal deliverables and other projects such as Project Public Health Ready (PPHR) or Public Health Accreditation Board (PHAB) accreditation. Look at documenting this event within the whole public health capabilities context.

Consider Ebola as a single event and the local response to other Ebola related events (such as active or direct active monitoring cases) are “Tasks”. Suggest 1 overall AAR for Ebola, and Active monitoring/Direct active monitoring cases or other response events as “tasks” under the whole Ebola umbrella.

- The objectives of task are Information sharing, planning and active monitoring.
 1. Whatever our activities have been and into the future: track and record them.
 2. Type of Information to track-Keep it Simple, but track financial impact: personnel hours spent on Conference calls, local planning and patient monitoring, including OT; Equipment purchases as well.

3. This information will be helpful when we complete the ORR Tool for next year.
4. For example: of the 15 Capabilities that fall under Public Health, the following may be related to local response to an Ebola Event: #1 Community Preparedness, #3 Emergency Operations Coordination; #4 Emergency Public Information and Warning; #6 Information sharing; #11 Non-Pharmaceutical Interventions; #12 Public Health Lab Testing-(optional) if manage a symptomatic patient.; #13 PH surveillance and Epidemiological Investigation; #14 Responder Safety and Health.
5. Review the ESF-8 Regional IAP's for Ebola for more background.

Other Business

- None

Next Meeting February 6, 2015 at Farmington Valley Health District in Canton