

**DEMHS Region 3
R-ESF 8 Minutes
Public Health Sub-Committee Meeting
March. 6, 2015
Hartford Health Dept.**

Attendees: Bruce Lockwood, Charles Motes, Carmine Centrella, Michael Pepe, Wendy Mis, Cristina Downes, Francine Truglio, Marge Seiferheld, Tung Nguyen, Betty Morris, Allyson Schulz, Aimee Eberly, Judy Torpey, Bill Kramer, Robert Miller, Michael Caronna, Maryann Cherniak- Lexius, John Degnan, Janet Leonardi, and Melissa Marquis

Abbreviated agenda due to working session for ORR

- Welcome- Melissa Marquis opened the meeting and thanked Tung and Hartford Health Dept for hosting.
- Approval of Minutes – Minutes from February meeting were motioned for approval by Chuck Motes and seconded by Allyson Schulz. All in favor.
- Regional Status Updates
 - Training, Drills or Exercises- WHBHD RDS drill 2/20/15
 - Waiting for comments from Steve Huleatt on the draft after-action report.
 - Everyone should have received the metric sheet for facility setup and pick list generation. This should complete the 3rd metric.
 - DPH is requesting MDA's to re-submit the Jurisdictional Data Sheet. The reason: CDC updated the form due to some formula issues.
 - Bruce Lockwood noted that CREPC received conditional accreditation for EMAP (Emergency Management Accreditation Program) in October '14. Conditional means the region is not done yet; four projects need to work on. One of them was HIRA (Hazardous Incidence Risk Analysis) was reviewed and adopted at the last CREPC meeting. The formal HIRA plan has been submitted to EMAP for their review. The other three projects are: Resource Management Plan (Carmine Centrella), COOP plan (Chief Austin), and COMP plan (Bruce).
 - Carmine reported: Risk Assessment FEMA- Risk Threat Assessment- Last year ranked 45th, this year 40th out of 64 UWASI areas. Of the 4 levels of risk, the Hartford region is ranked level 3.
- State Updates
 - DPH – Not present. But Corinne Rueb sent an email about Just in Time Training (JITT) updates developed by a workgroup. Not everyone received the email so more to come. Steve Huleatt was not present to discuss Ebola funding.
 - DEMHS – Not present. Sandy Hook Advisory Commission is releasing the final report today on School Safety Plan.
- Local Public Health Preparedness Contract- No update. Just keep in mind the deliverable dates are coming up. Some discussion about \$30,000 dollars as possible regional funding that may be used to plan for a series of exercises that lead up to next year full scale exercise.

- Other Business- MCM ORR Working session (see below)
 1. We are still waiting to hear on the frequency of the evaluation or review.
 2. CDC is still making last minute revisions on the existing ORR tool.
 3. They are going to re-connect with work group to finalize the tool. Final version must be ready by May '15.
 4. Melissa had a meeting with CDC and saw what the final report (draft) looked like. Completely different from any report that we may have seen. Unlike TAR report, the ORR report is more graphical and includes some narratives. CDC only showed the report at the state level or awardee level version. The local version would be similar but with more details including recommendations and actual assessments.

MCM ORR Working Session Agenda

- Review Capabilities 4 and 6

Capability 4

- **Function 1a:** Activating the public information system. Having the right people in place, such as primary and secondary, PIO and PIO Liaison. Have quarterly call downs and up-to-date contact info. Having a backup for both.
- **Function 2a – Planning:** Joint Information Center (JIC) – need to reference having the JIC in local plan. One way to reference it is regionally using the RESP – ESF-15 or the regional PHERP in your local standard operating system. (Section 5 of the TAR)
- **Function 2a – Ops:** Challenging to document since no one has tested this. But come next year, we need to take advantage of the Statewide Full Scale Drill.
 - *** Melissa will send out information for drill requirements that the ORR is asking for documentation purposes. So far she got nine elements listed: 1) POD setup time metric, 2) throughput time metric, 3&4) EOC activation messaging pre- during and post- event to both team and the public, 5) media briefing inquiry, 6) JITT needs for translational services, 7) unaccompanied minor, 8) security, and 9) adverse event reporting.
- **Function 3a:** nothing specific to call out. Refer to TAR 5.4 and 5.6
- **Function 3b:** looking for PIO job aid or other MCM-designated staff like PIO liaison. We may need to alter the JAS to fit PIO liaison job description.
- **Function 4a – Planning:** looking for methods how the public contacts a health dept./dist. during an event: establishing hotlines, social media, and call center.

Most of the MDAs have these items established in their local plans. The problem is more on the Ops side (evidence of this) participation in an exercise or a real event in the last five years and be able to demonstrate all of the applicable methods recognizing that not all jurisdictions are the same.

Capability 6

- **Function 1a – Ops:** Not sure if this is relevant to local health dept./dist. Need to communicate with DPH.
 - **Function 2a:** Not well articulated. May have to prefer to PUBH Code 19a25-1.
 - **Function 3a:** PHIN is not fully adopted in CT. MAVEN may be the most suitable exchange information tool/database.
- **Next steps**
 - Focus on Capabilities 8 and 9 for next ESF-8 Meeting.
 - Melissa will send DPH a list of the questions generated thus far and will share their answers when received.

*Next meeting- 4/10/15. Hosted by New Britain Health Dept.
To be held at NBEMS Academy: 185 Main Street; Suite 422*