

Emergency Preparedness Coordinators Meeting
02/05/07

Attendance:

Kay Gordon, Chairperson, Doctors Medical Center
Lynn Leatherman, Emanuel Medical Center
Don Bailey, Evergreen Convalescent
Daniel Cipponeri, Evergreen/Progress Valley
Renee Cartier, Health Services Agency
Rosie Lopez, Health Services Agency
Marianne Shaw, Memorial Medical Center
Sharon Perry, Memorial Medical Center
Tammie Waddle, Memorial Medical Center
Alicia Hinshaw, Modesto City Fire
Jim Worobe, Mountain-Valley EMS Agency
Patrick Lynch, RDMHS, SJ EMS Agency
Phil Cook, Kaiser
Teri Norton, Stanislaus County DCF
Terry Nelson, Stanislaus Surgical Hospital
Michael Rossini, Stanislaus Medical Society
Randy Fike, Health Service Agency
Patricia Martin, CDHS/EPO

1. Welcome/Introductions:

Kay called the meeting to order at 1 p.m.

2. Meeting Minutes:

A copy of the minutes was circulated. The following errors were discovered:

- Teri Norton's first name was misspelled in the attendance list and in two places in paragraph 4.
- Jim Worobe's name was left off the attendance list.

M/S/C (Worobe/Lopez: unanimous) to accept the minutes with the addition of Jim Worobe's name to the attendance list and with the change in spelling of Teri Norton's first name in the attendance list and paragraph 4.

3. System Saturation Issues:

Jim reported that per MVEMSA Policy, any period of System Saturation that last for more than 8 hours was to be reported the EPC and then passed to the EMSC by the EPC of for information and their action. There were 6 periods during January in which System Saturation lasted more than 8 hours, one period (January 25 – January 29) lasted for 30 hours. The Health Department was notified of the 30 hour period and our information does not suggest any disease process responsible for the increased load.

Teri Norton reported that most of the patients transported during this period were elderly or had chronic disease processes. Doctor Walker suggested that environmental factors exacerbate respiratory problems in this population and during periods of cooler temperatures, “dirty air” is more commonly due to particulate matter, which increases the frequency of respiratory ailments.

4. Pandemic Flu/Healthcare Executive Roundtable

Dr. Walker began by reporting on the Stanislaus County Healthcare Coalition Executive Roundtable. With the help of Renee, Kay, and Tammie, he described the event. He was pleased with the turnout and the reaction of the executives present. Apparently the group decided that annual meetings were not frequent enough to address all the topics that needed to be covered. Renee mentioned that she was left with the impression that some executives present were not sure semi-annual meetings met the requirement as well.

Dr. Walker presented a draft of the Mutual Aid MOU for Healthcare Facilities. He stressed that the document was a draft. His purpose was to familiarize the body with the contents of the MOU and provide some background. The executives will be provided with a proposed document for their counsel to review, with a request for response within an adequate time frame.

Dr. Walker then presented a short summation of a document he received from the Department of Health and Human Services entitled “*Interim Pre-pandemic Planning Guidance: Community Strategy for Pandemic Influenza Mitigation in the United States.*” The document contained over 180 pages, so Dr. Walker presented his summary. He presented the goals of community mitigation, showed a chart that compared the WHO Global Pandemic Phases and the Stages for Federal Government Response, and a Summary of the Community Mitigation Strategy by Pandemic Severity.

Finally, Dr. Walker discussed a study being conducted in response to a Surge Capacity Survey conducted last February. Dr. Walker described the details of a conference call he participated in earlier (before this meeting on this day). The Department of Health Services has awarded a contract for a consultant to conduct the study. Dr. Walker encouraged those present who wish to provide input to visit the Consultant’s web site and register as a participant. The dates for Collaborative Design Sessions are closely approaching and may not be options for many, however if there is enough interest, the Consultant may plan additional dates.

5. Committee Report – Bylaws

Terry Nelson provided an update on the activities of the Bylaws Committee. His report began with a brief history of the task that was assigned by this body and what the committee understood to be its responsibilities. Terry provided a graphical representation of how the committee foresaw the organization of this

body and how it would operate. He then reported that the committee had the beginnings of draft bylaws that provided the structure that supported the graphical representation. Dan asked if a Mission Statement had been adopted. Terry reported that at the August meeting, a Mission Statement had been proposed, modified, and accepted by this body. A copy of the Mission Statement and the representation is included as an attachment herein.

6. HRSA Grant

- Renee Cartier reported that the MOU is the springboard to starting the development of the alternate care sites. HSA did submit the HRSA grant and received a reply from that State that denied our work plans but approved our budget. The State required additional information and Renee has resubmitted the application. At this point, Renee is waiting for the State's response.

- Renee asked that the Chair place two items on the agenda for next month. The first being how the 05/06 funds are to be spent. The original intent was for communications and patient tracking. If this is still the intent, then decisions need to be made on the type of communications equipment and what level of commitment this body has with regard to patient tracking.

- Randy Fike reviewed the patient tracking issue. Randy met with the second vendor that presented to the body and asked about live demo. The vendor was unsure that could be set up within the time frame (mid March). Randy spoke with Mike Petrie regarding EMSsystem's patient tracking program and found there were some challenges encountered with regard to interoperability within the health care facilities. Randy asked the Chair if the workgroup could be reconvened to help the EPC decide how to proceed. Discussion followed. The Chair announced that Patient Tracking will be on the Agenda for next month and have the workgroup attend the meeting to provide a report.

7. Roundtable

- Patricia Martin announced that Loma Linda University has been awarded a grant to study Business Community and Pan Flu Planning. LLU contacted the Emergency Planning Office to gather information on what is taking place in the Northern and Central Valley and if there is any interest on our part in participating and providing information to them.

- Dan Cipponeri announced that he will turn 50 years-old this month.

- Renee Cartier announced that she has been asked by Jeff Ruben to serve on a committee on resource typing.

- Jim Worobe reported that he will be attending the HERT for MCI Train-the-Trainer course at the Homeland Security Training Center in Anniston, Alabama next week.
- Kay reported that the NDMS (National Disaster Medical System) Conference is scheduled for March 17th thru March 21st in Nashville. Kay suggests that anyone interested in attending register early.
- Marianne Shaw reported that she has been chosen for a working group on human resource, staffing, and training issues for the National Respiratory Therapist Association.
- Pat Lynch reported that EMSA has sent out a RFP for Mobile Field Hospitals. The State budgeted for three, 200 bed field hospitals to be prepositioned across the state. Pat also announced that the Ambulance Strike Team Committee has been reconvened to address Disaster Ambulance Support Units. These are 25 “fairly good sized” vehicles designed to provide 3 days of supplies for an Ambulance Strike Team. They will be disbursed with 3 units to each region and additional units to areas based on population base. MOUs will be going out to the LEMSAs for first right of refusal.
- Terry Nelson announced that Stanislaus Surgical Hospital is officially on the Med Net and can be activated by contacting DCF.

8. Next Meeting

March 5, 2007 at 1 p.m.