

**Region 8 Healthcare Coalition Planning Board and Advisory Committee**  
**Wednesday, May 13, 2015**  
**10:00am – 2:00pm**  
**Landmark Inn, Marquette**  
**Meeting Minutes**

Agenda Items	Description
<b>I. Welcome and Introductions</b>	Board Chair Curt LeSage called the meeting to order at 10:14am. Those in attendance introduced themselves: Jill Fries (MCHD), Beth Tappy (DIDHD), Vicki Peterson (Portage), Melody Snyder (AOH/AKH), Bonny Cotter (BCMh), John Cox (DCHS), Terry Parkin(MSH), Cathy Flores (SCMH), Pete Baril (WUPHD), Ed Unger (Schoolcraft MCA), Teresa Schwalbach (MQT CO EM), Jon Stone (Region 8), Gary Gustafson (Region 8), Dr. Edwards (Region 8 Med Director) Curt Lesage (UPHS EMS MQT), Nancy and Bob Weston (Burt Twp MRC). On the conference line: Shane Albrecht (CCHD), Scott Schreibers (MDHHS)
<b>II. Regional Administration</b>	<ul style="list-style-type: none"> <li>a. <b>Approval of previous minutes. Motion to approve Cox/Peterson second. Motion passed.</b></li> <li>b. <b>Approval of agenda.</b> Gary G requested the addition of item (Unger requested Hospital 800 MHz radios be added as item a under Emergency OPS Coordination and Dr. Edwards requested item D. Pharm Cache Update be added under Responder Safety and Health.) <b>Motion to approve Unger/second Cox. Motion passed.</b></li> <li>c. Fiduciary Update: A copy of the current budget was provided although it has already been revised since this printing. The carryover items need to be spent prior to June 30<sup>th</sup>. In order to meet some anticipated expenses within some of the line items we will be requesting the Board to vote on approving such reallocation. Please review the attached sheet of proposed Board action and provide any questions/comments prior to Board action. Balance of available BP3 funds is just over \$50,000.00. John Cox asked about the PAPRS for EMS and Jon explained the previous Board approval and that each transporting ALS service in Region 8 would be provided 2 of these, which also requires a short training program prior to distribution. Vicki asked who was doing the training and Jon advised he is doing that for the region. John asked about Tychem hoods and as DCMH uses the Bullard PAPRS and Jon advised him that the regional hoods that we have are not compatible.</li> <li>d. Medical Director Update.</li> <li>e. 501 ©3 Status Update. Jon advised that we are still working with proper paperwork and that we will advise when the process is completed. Has been a difficult process. We are hopeful the process will continue to move ahead.</li> </ul>
<b>111. Regional Updates</b>	<p style="text-align: center;"><b>Burt Township MRC MI-TESA Presentation</b>  <b>Joint Burt Township/Schoolcraft MRC Training Video</b>  Nancy Weston, Burt Township MRC Coordinator</p> <ul style="list-style-type: none"> <li>a. Regional Incidents/Response. John Cox advised they did an unannounced Ebola exercise and has 4 more planned. John mentioned the interest of having a regional Ebola exercise but if no other hospitals have agreed to take the patient how are we supposed to work with them. Dr. Edwards advised other facility involvement could include the use of EMResource to find out the status of bed</li> </ul>

availability if you had to evacuate, transfer or bypass other patients within the hospital. Could also include EM notification and following the Public Health Algorithm. John advised they were looking at a full scale exercise at DCMH in August. Vicki advised that Portage is going to do a weather related exercise that includes snow and will include damage to resources and utilities. Will implement and test their ICS, EOC and breaking down their Organizational Chart. Cathy Flores advised that Schoolcraft surveyed employees and violence response/prevention was a priority. They will be providing hands on training to staff and focus on safety and security at the facility. They have had intruders in the building in the past, and just had a potential shooter situation at their high school, which went on lock down. Ed Unger advised that some of the agencies in the area found out about it on the news. Bob Berbohm, Delta-Schoolcraft EM, has provided active shooter training to their staff. In 2014 there were 26 hospital shooting fatalities in the country. Unless it involves 4 or more victims it is not considered a mass shooting. Jon advised that the region has no funds at all that focus on active shooter training. Dr. Edwards did point out however that we do have funding for evacuation and/or SIP training for staff which may help in that regard, along with activation of the RMCC. Cox advised they have new doors now at their Emergency Department. There seems to be more drug seekers now than ever before, along with mercy family killings and in general more family problems. Jill Fries advised that sometimes taking proactive steps, like MGH does with parking the security police car by the ED, can serve as a deterrent in itself.

- b. MCA Update (Wadaga/Nelson). Both Lyn and Gary W were unable to attend the meeting. Dr. Edwards advised the next meeting regarding the MCA reorganization is scheduled for May 29<sup>th</sup>. The original plan for 10 MCA's is now changed to 8. The restructuring will look different in each region. The Narcan protocol for all first responders is due to go into effect October 1<sup>st</sup>. It will be up to the MCA's. Then the decision needs to be made as to how those will be supplied, whether auto-injectors which are very expensive, or through use of vials and syringes. (Roughly \$750.00 vs \$27.00). John Cox asked if all the first responders needed to be trained by the end of October and Dr. Edwards advised they did. There will be a sunset period of 1 ½ years and then a service could opt out. Unger pointed out that previously 1<sup>st</sup> responders were not permitted to use a Glucometer, now the state is saying that they can administer Narcan. Vicki Peterson brought up the question as to how many times have the ED's given Narcan on a patient who has arrived by EMS.
- c. Emergency Management/UP Regional Homeland Security Board (T Schwalbach). Teresa had to leave before giving her report.
- d. EPC's/Local Health Departments (Jill). Advised there will be a disaster exercise at Sawyer Airport on June 20<sup>th</sup>. Looking for victim volunteers. Contact Teresa Schwalbach or Lyn Nelson if interested. (Flyer was provided at the meeting). Will involve a plane crash with multiple victims/deaths. The Pan Flu tabletop at R&R went very well. Will try to have the AAR for that completed by June 30<sup>th</sup>. (Shane). Rural and Ready went very well. Good comments. There were 110 people who attended the event. All the speakers did a great job and we had very good comments on the evaluations. Many of the LTC folks stayed the whole 3 days and attended the FEMA workshop. It was good we were able to offer free Nursing and EMS CEU's. Looking at next year but depends on the budgets. Good feedback on the FEMA 341 course which indicated that we may include the MEMS system and things like the NEHC's into future offerings.
- e. Region 8 Epidemiologist. Scott Schreibers. Scott advised nothing new to report.
- f. Tribal. No report.
- g. Trauma Coordinator (Cheryl). Cheryl not in attendance but Ed Unger provided information from a meeting he had just recently attended. 34 hospitals in Michigan now designated as Trauma Centers. Portage and UP Health System-Marquette the only 2 in the U.P. The state site reviewers will begin making site visits to hospitals starting this fall. Jackie Scott, who oversees OPHP, is the Interim Director now overseeing the Trauma Program. Looking at combining Trauma with the Stroke/STEMI initiatives which also included

	<p>money from the Crime Victims funding. With the merging of a couple departments, MDCH will not be called the Michigan Department of Health and Human Services (MDHHS).</p> <p>h. Long Term Care. (Gary) 800 MHz radios are finally being distributed. Tim McKee, Chippewa Co. EM provided an 800 MHz radio training PowerPoint which was tweaked for LTC training needs. There were 12 LTC facilities who attended the LTC Workshop in conjunction with the Rural and Ready Symposium held at Bay Mills Resort and Convention Center in Brimley. The comments from the surveys show there was much interest and positive feedback on the 2 areas of focus provided at the workshop, The CMS checklist and exercises. Big thanks to Dr. Edwards for putting those 2 PowerPoint presentations together. They were both very well received. There continues to be an average of 17-18 LTC's who are participating in the EMResource HavBed and Equipment Availability drills each month, and participating in the monthly LTC Workgroup calls.</p>
<p><b>IV. Healthcare System Preparedness</b></p>	<p>a. Pediatric Champion. Gary G advises that there are now 7 hospitals who have identified a Pediatric Champion for their facility. These include DCMH/AKH/AGV/OSF St. Francis/UPHS-Marquette/BCMh/Aspirus Northstar. Please continue to try and identify an interested staff, or staffs, who would be willing to focus pediatric readiness at your facilities. We continue to provide pediatric focused updates as we get those including articles/ free webinars. Dr. Edwards also discussed the new Pediatric Burn Annex as part of the state burn plan. That plan can be found at <a href="http://michiganburn.org/index.shtml">http://michiganburn.org/index.shtml</a>. There are now 5 specialized burn teams that can be sent out if needed.</p> <p>b. SIM trailer Update. Jon advised that Gary Wadaga has purchased resources for both of the trailers. If anyone wants to use the trailers they need to have completed the training or facilitate with someone who has prior to use. The Pediatric manikins have arrived and training was provided by WorldPoint at both the Newberry and Baraga sites. The manikin looks more like a small adolescent than an infant. Jon reiterated that these manikins have much more capability than we originally had thought.</p> <p>c. Hospital Satellite Phones. With our decrease in funding we are looking at options to help prioritize how best to utilize future funding. One of those area is the Satellite phone service contract costs. The region is currently paying out over \$500.00/month to support the service contract costs for the Satellite phones. As there are a number of other available redundant communication options, and the ongoing issue with some of the phones still demonstrating poor service reception, we will be asking the Board to consider discontinuation of paying the monthly service contracts for each hospital's satellite phone beginning in BP4. With that they can then either elect to return the phone to the regional office, or if they want to pick up their own service contract for the phone, they can continue to keep the phone. This will be addressed under Board Action items. Jon also pointed out another alternative to redundant communications would be the use of amateur radio operators. With the addition of a small antennae and wire run into the hospital, reception would not be a problem.</p> <p>d. Burn Surge Training. The U of M have advised that they will only be providing one day of burn surge training on June 23<sup>rd</sup>, and not the second day as was previously discussed. As there are only 25 people registered, and a class can hold 40, they decided one day was adequate. There are still seats available to let the Region know if you are interested. Apologies to any who were planning on attending a June 24<sup>th</sup> class. Hopefully they can still make it work. ABLS Now is a prerequisite to this hands on training. If you took the online before June of 2014, you will need to retake prior to attending the class on June 23<sup>rd</sup>.</p>
<p><b>V. Healthcare System Recovery</b></p>	<p>a. COOP plan templates. The region sent out some COOP templates earlier to the partners. If they still need something, we can look around to see what else is available. There are other templates that can be found online as well. Most are very long and often only focus more on the business aspect of COOP, not always from a healthcare prospective. Dr. Edwards advised that Florida has some good templates as well. Pete Baril asked about what happened to that training last year when we sent people somewhere for this. Jill advised that Public Health has a good one that is practical to use. Cathy Flores also advised that the current templates out there are poor. Jill suggested perhaps looking at the AAR's post Katrina. Jon said he would like to see a regional effort in making a good plan and would like to look a putting together a workgroup. Vicki thought it should be something generic. Bonny advised that she was going to poll each department to find out for such an effort 3 things: Operations/liability/solution. Shane/Cathy Flores/John</p>

	Cox/Bonny Cotter agreed to serve on such a committee. This will be a BP4 focus area. Bonny thought we should also include the LTC's in the discussion.
<b>VI. Emergency Ops Coordination</b>	a. Emergency Department 800 Radio Consoles. Ed Unger asked about the status of these radios as the one at SCMH is not working and needs repair. Jon advised that those are about 10 years old and was advised by the vendor that most of the parts for them are no longer available to fix them. There is no regional funds available to replace. As long as the hospital has the portable 800 MHz they should be good.
<b>VII. Fatality Management</b>	a. State MI-MORT April 14/15 <sup>th</sup> Exercise Report. Jon advised that he and Gary G (that rhymes!) participated in the state MI-MORT exercise held down in Mason on April 14/15 <sup>th</sup> . Very educational and gave a great insight into this capability. Both served as Safety Officers.
<b>VIII. Information Sharing</b>	a. Great Lakes Homeland Security Conference (May 5/6/7) update. Regional staff all felt this was probably one of the best conferences in recent years. Had great speakers and a variety of breakout sessions that provided a wide array of information and education. The author of the book, "5 Days at Memorial" was a keynote, as well as the mother of a child who was killed during the Sandy Hook shooting who is not pushing for safer schools. Also the FBI agent who was the only one who interviewed Saddam Hussein after his capture gave an overview of that process. Very interesting information.
<b>IX. Medical Surge</b>	a. R8 Behavioral Workgroup. Jon advised we are continuing to seek interested individuals. Jill advised she has someone and will get in touch with Jon after the meeting. It was pointed out that this is much more than CISM. b. State SNS Drill March 25th. Gary G advised there was 100% participation from Region 8 hospitals. There were a couple issues the morning of the drill but we were able to work through those and get it completed.
<b>X. Responder Safety and Health</b>	a. PAPR Hoods. The regional order has arrived. We will provide each hospital with 8 of these and keep the rest in our cache. b. EMS PAPR Training for EMS. Jon reminded everyone that the EMS PAPRS have arrived (2 per each ALS service). Those ALS agencies need to contact him regarding setting up a training date. The training should take no more than 4 hours. c. DuoDotes SLEP extensions. Now through 2016. d. Hospital Expired Meds. Jon advised is you still have expired meds that were purchased with regional funds to send them back to the office. We put together a pharm workgroup last year and it was decided that each pharmacy would stock enough Cipro to provide a 3-day supply to cover 1 staff and 3 family members. If your pharmacy did not do that, they can still order and send the invoice to the regional office. Although this came out of BP2 funding, we can find a way to cover the cost.
<b>XI. Volunteer Management</b>	a. Burt Township MRC MI-TESA Presentation (Nancy Weston) SEE ABOVE b. Joint Burt Township/Schoolcraft MRC Training Video (Nancy Weston) SEE ABOVE c. R8 UP Disaster Response Team in the MiVol. (Gary) Still working with OPHP and the vendor in creating a subgroup within the Volunteer Registry. This will replace the previous UPHERT initiative in getting all the volunteers within one system
<b>XII. Exercises</b>	a. West. Bonny advised of a county wide airport exercise scheduled for May 27 <sup>th</sup> . Melody advised that Keweenaw will also be using this exercise to Mass Fatality Plan and to also utilize the ME bags/equipment that were purchased by the region for the death scene investigators previously. The hospital exercise will involve a severe weather related scenario. Multiple agencies will be involved. Looking at Covington to be the staging/moulage/triage area. Looking at getting the state park involved again this year, as well as checking with the Prison ERT also. Will be testing/exercising their internal procedures. Will be in the early evening to provide more opportunity for multiple agency staff involvement.

	<ul style="list-style-type: none"> <li>b. East. No report</li> <li>c. South. Airport disaster tabletop scheduled for Wednesday, June 20<sup>th</sup>. Multiple agencies involved. Will activate the Hospital EOC.</li> <li>d. Central. No report</li> </ul>
<b>Board Action Items</b>	<p><b>Motion:</b> Ed Unger made a motion to reallocate the following funds from the BP3 budget to purchase EMS PAPR Accessories. R8 Workgroup \$1885.60/WebEOC training \$500.00/BDLS \$350.00/Hospital Decon Training \$788.22. Seconded by John Cox. Motion passed.</p> <p><b>Motion:</b> John Cox made a motion to reallocate the \$3500.00 from the Portage Lift Bridge exercise to LTC Conference. Seconded by Ed Unger. Motion passed.</p> <p><b>Motion:</b> John Cox made a motion to cap the BP3 regional exercise funding to \$2000.00 for each participating hospital and \$500.00 for each participating EMS transport agency. Seconded by Bonny Cotter. Motion passed</p> <p><b>Motion:</b> Motion by John Cox to discontinue regional funding for hospital Satellite phone service starting in BP4 (July 1, 2015) and provide 2 options: Hospitals can keep the phone if they pick up the cost of their own service, or if not, return the phone to the Region 8 office. Seconded by Vicki Peterson. Motion passes.</p>
<b>Public Comment</b>	None
<b>Adjournment</b>	Unger motioned to adjourn, seconded by Cox. Meeting adjourned at 2:00 pm

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