

Hospital Preparedness Planning Group

Meeting Minutes

January 29, 2007

Melanie Tucker called to order the conference call, in lieu of the regular meeting of the Hospital Preparedness Planning Group at 9:05a on 1/29/07.

I. Sign In

II. Introductions: Everyone introduced themselves to the group on the call. Joining the call was Leslie Gray from FTG.

III. State Financial Audit: Melanie had previously received notice from a DSHS representative that an audit (of 07 Financials) was to be scheduled for the second week of February. After further research on DSHS's end, it was determined that the proposed audit would be postponed indefinitely. Per Melanie, there is the possibility of this being scheduled within 4-5 months' time.

Dave Reimer asks: do we expect an audit each year, and of the same facilities? Answer: Yes, expect that audits of program side and financials with regard to HRSA to happen every year. However, apart from the lead trauma facility, the same sites visited last time won't likely be visited again every year.

IV. HAM Radio Project Update: Last Friday, Joe Canfield went to Johns Community hospital and delivered equipment. He will be heading to Cornerstone this week for an installation. After that, he'll be installing at Austin Surgical Hospital.

Melanie asks: Are the Jump Kits ready for the DDCs? Answer: Joe will have to check and see if all the needed equipment has arrived. Melanie offered CATRAC space to do the programming of the computers, since they are in the CATRAC building already.

V. 07 Planning:

- Committee Chair & member assignments – A list of Chairs and committee members was emailed with the conference call invitation. Those who were omitted will be added in a revised list. Committee meetings will be held during the same time allotted for regular Friday HPG meetings. Melanie is confident that committees can meet objectives within the calendar of current meetings.
- Spending Plans/Project Approval Forms – Melanie will be sending out a Spending Plan template, Project Approval Form, 12 Performance Measures, and sentinel indicators electronically. All plans and associated paperwork are due no later than March 1, 07. Must be submitted electronically.

VI. EMBED Ready Update: FTG's goal is to support all the facilities' bed information for the upcoming drill. Leslie will be sending instructions on how to add beds. There were a few facilities Leslie needed to touch base with offline, and those representatives were advised. FTG will draft plans on how to capture surge beds based on previous small group discussions. In response to questions regarding capturing OR & ED beds, because these are fluid, it is not expected that these be updated every day unless the particular facility finds it feasible to do so.

There is a functional drill in the 3rd week of February (21 – 22). Participation is required. Reports in from Houston were that they queried heavily on bed availability. It is imperative that each facility get their bed information entered into EMBED Ready.

Also a need to brainstorm how to capture bed data from those facilities not yet integrated.

Julie Miller asks: has a solution been reached for the “unavailable bed” question, with regard to those beds not available due to not having staff. Answer: Working on it. Charlie with FTG is taking the ideas presented to test a few different coding scenarios to see what will work most effectively.

With regard to EMSystems page referencing service capacities, that only needs to be updated if/when a status changes.

VII. Monthly Hospital Reports: Slight revision to the new format – questions will be numbered for ease of reference. Also, for the time being, disregard the two questions on page 3 asking about volunteer health professionals enrolled in an advance registration system (question #'s 35 & 36).

Question re: competency-based programs (question #'s question 43), what qualifies as this? Answer: anything that has to do with preparedness outside the scope of formalized NIMS courses. WMD, mental health, explosives training, etc.

RE: NIMS compliance, Melanie will be sending out the compliance guidelines again for those who didn't receive it. Compliance is required by anyone who would potentially be filling Incident Command role. IS300 course isn't available online, but is also not clearly needed in the hospital setting.

RE: question on ESAR-VHP (question 14), is a state obligation, not regional. A facility can answer “no” without feeling like they're not meeting obligations. These questionnaires are to get a pulse on the region. Melanie submits one report to the state for the whole region.

VIII. Review of January 12, 2007 Meeting Minutes:

- Clarification about PODS: each POD contains basic care equipment. Nothing in it has an expiration date. Each can provide care for 25 patients for up to 72 hours. They will be in this week. We still have to determine as a region how best to do distribution during an event. There are 4 buildings identified in Austin/Travis Co. that could be able to take medical special needs patients, potentially up to 1000 additional patients in total.
- Spending for 07, re: alternative quotes for inventory software. Have made contact with 3 different companies. Not yet successful in getting a comparable quote to what FTG provided.
- No changes to minutes, approved by the group.

IX. Operational Issues Discussion:

- After Action Report from the 12/8/06 Pan Flu drill; Melanie will email this out.
- Upcoming drill in February is not a Pandemic drill. There is not likely to be a formal meeting beforehand, but it will come up for discussion at Thursday's Homeland Security Task Force meeting.
- FYI regarding CHEMPAKS from Dave Reimer: Zoe Nelson emailed about online training for CHEMPAK distribution. It is not yet available, but she is working on finishing that, and will notify when it is available on the web.
- Chempak meeting from 1/17/07 was cancelled due to the ice storm, and ultimately rolled into the 1/24/07 Medical Systems committee meeting, rather than rescheduling. Melanie is waiting for the draft distribution plan, and will forward when it comes in.

Meeting was adjourned at 10:05am.