



## OASPR TSA-O Regional Preparedness and Response Committee Meeting Meeting Minutes

*January 8, 2009*

Agenda:

- I. Sign In / Introductions
- II. Review / Approval of December 11, 2009 RPRC meeting minutes
- III. Old Business: Attendance, Radio Testing, CTECC, Other
- IV. Public Health
- V. FY10 Supplemental Grant
- VI. Inventory
- VII. Training: ICS, WebEOC, HAM Radio
- VIII. FY10: Update, Sub recipient Agreements, Timelines
- IX. Committees
- X. Regional Discussion / Concerns

Attendees: Andy Allen, Andrea Allely, Wayne Archambault, Ken Bell, Vasanti Brandl, Joe Canfield, Mike Caudle, Heidi Erwin, Ann Figueroa, Michelle Fillman, Dahlia Flores, Chris Freeman, Kimberly Gill, Jackie Gondeck, Gilbert Gonzales, Jordan Gray, Robert Haugland, Darryl Jordan, Cristy Knapp, Freddy Krail, Ken Lewis, Nancy Maschal, Ricky Nevels, Jodi Nikorak, Jim Pickens, Dave Reimer, Dave Rhinehart, Swapna Sah, Linda Sifuentes, Bill Shaffell, Blandonn Smith, Ron Weaver, Robin Wiatrek

Handouts: Important Deadlines (on reverse of agenda), Austin HAMs upcoming class list

Next meeting: February 12, 2010, 9am – 11am, CATRAC office

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- I. Sign In/Introductions
- II. Review/Approval of December 11, 2009 RPRC meeting minutes. Jackie Gondeck motioned to approve the minutes, seconded by Jordan Gray. Motion carried.
- III. Old Business
  - a. Attendance – Dave put on-screen the list of member hospitals and their respective percentages of RPR meeting participation. Jodi Nikorak (on phone) requested a copy be emailed so it can be reviewed by the people who were participating via conference call. If your hospital is under 80% at this point, participation is imperative going forward. Alternates are okay to send, if you are unable to make a meeting. Jackie Gondeck asked what recourse could be taken for non-compliance. Dave explained that DSHS is notified of non-compliance with the grant guidelines. Also, some other RACs decrease funds for those who miss meetings, or they don't qualify for funds in subsequent grant years. Dave will look at participation in other subcommittees to make up the deficit if your percentage is very low. Bill Shaffell asked about representation from Networks, vs. individual facilities; Dave replied that it could be discussed further offline.
  - b. Radio Testing – Dave has started to do some unannounced radio tests, with a 40-60% response rate. It was asked: what can be done to improve response and what are some best practices to share? Placement is important: the radio/handheld should be where there is always someone who can respond to it, 24/7. Even with the announced tests, facilities should look at it like an event in which we need to increase participation. For unannounced tests, Dave will monitor response rates.



For unannounced tests to the network hospitals, Wayne Archambault suggested one call could be made to the main location and the outliers could call back in CATRAC to show they got the radio test via their internal communications structure. The tests fall under the drill requirements from the state. Seton Edgar B. Davis & Seton Hays: we need to close the radio gap on them. Yesterday in LTI meeting, Chuck Brotherton gave some timelines on SEBD: By February/Spring they'll be on the 800 system. Seton Highland Lakes & Llano Memorial will need to be rebanded. We will need to purchase some more radios, both for new facilities and for old facilities that need an upgrade.

- c. CTECC – Background checks should be completed by 2/1/10. Afterwards, people can come in for their photo ID.
- IV. Public Health – Mike Caudle said Williamson has enough vaccine, primarily distributed through schools. City emergency management is coordinating to do clinics. Seton Network reports that they have an overabundance of vaccine.
- V. FY10 Supplemental Grant – The federal government gives money to DSHS, and they turn to the RACs as contractors for managing the funds. Each RAC signs a contract with DSHS to accept the funds. We then involve the sub-recipients as part of that funding. When the supplemental grant came about, there was so much granted per RAC, with a very quick turn-around which they had to encumber by 11/30/09. In order to do this on that timeline, instead of writing new contracts, they added this as amendment onto the original FY10 agreement, adding the grant language and money into the budget, which was then compiled into the total grant amount. They still want to treat it as H1N1 supplemental grants, even though it was tacked onto the OASPR grant. It does not affect the hospitals' agreements in having to sign a new agreement but will have an amendment attachment to the original agreement.
- VI. Inventory – Ken Bell discussed an inventory project with the objective of collecting a decon equipment list in the region's hospitals so if filters etc need replacing, the right ones are purchased. A lot can be purchased through grants, while some will be on your hospital's own resources. Dave Rhinehart then talked about EMAsset inventory tracking. One thing that needs to be done is to identify small items that were used as components of other things (e.g. 16 bolts used to build a decon bench) and re-list them in EM Asset as one complete item. Question: Could EM Asset be used as maintenance program. It's not designed for it, but it does have a manual maintenance feature (e.g. Add a comment: "expires Jan 2011") that does not automatically remind you when maintenance is coming due. Everyone should have been given a password to get into it. User ID is your email address. A number of users' passwords have expired, but Dan Leiberman of FTG said it'll just ask you to create new password. The tool is Web-based; Dave will send out the URL. Action-item: use the list that's there and compare to your inventory. It is only current through year before last. Question for the committee: what to do with fixing the lists that are wrong. Also, Dave has a lot in inventory in storage that he'd like to distribute to the hospitals.
- VII. Training – There will be ICS300 & 400 in January and February Round Rock PD. Dave will send out the flier and dates will be added to the CATRAC calendar. Austin HAMS are putting on a Technician class from January 16 through February 6, with the exams being available on February 13 or 21. As of last fall, the FCC won't let paid staff use HAM radios in non-emergency situations; Any use of HAM radio while on payroll is



looked at as conflict of interest. They can request a waiver for drills, but there is no guarantee it will be granted. The RAC is looking into requesting a test variance from the FCC for the full year.

- VIII. WebEOC: Robin Wiatrek reviewed WebEOC for the group. It is a web-based tool that serves as a virtual EOC. In your facility's EOC command center, you have white boards to write on and you can send materials requests, etc. This is a virtual board for doing all of that regionally. CAPCOG has a server that's hosting 8 counties, plus the hospitals and ISD. There is a separate server for Williamson County and another for Travis/Austin. You can only push information, not pull it from other areas, so it is secure. Robin will send out the self-registration tool. If you haven't signed in for 2 years, you'll need to redo your registration. Question: Can you access it on web-enabled phones? Robin said it was possible, but she wasn't positive.
- IX. Committees: Drill - Ron Weaver reported they are trying to get the AAR review completed before the Coalition meeting. He needs the number of participants from each facility. Email them to Dave. Also, they are prepping for next drill. Possibly a table top. And there will possibly be a functional drill later in the year.
- X. Regional Discussion / Concerns
- GETAC disaster committee chair sent along a report about watching your onsite gas. Gas Cylinders were stolen recently, some weighing up to 1000lbs.
  - Crime alert: A woman has been breaking into hospital locker rooms. She cuts padlocks and replaces with new ones, steals purses and valuables, drives an SUV.

Meeting adjourned at 1150 per Dave Reimer.