



FY 2015-2016 Hospital Preparedness Program (HPP)
Healthcare Coalition Conference
Region 2
MOHSEP – Baton Rouge
September 16, 2015
8:00 A.M. to 10:00 A.M.



Participants: (x indicates present)

Hospitals			
	AMG Specialty Hospital - Feliciana	X	Surgical Specialty Center of Baton Rouge: Genie Woodring, James Stone
	Apollo Behavioral Health Hospital	X	The NeuroMedical Center Rehabilitation Hospital: Elizabeth Wilson, Kris Fryoux
	Ascension Gonzales Rehabilitation Hospital	X	The Spine Hospital of : Bradley Devillier, Monica Nijoka
	Baton Rouge Behavioral Hospital	X	Villa Feliciana Medical Complex: Terry Norman
X	Baton Rouge General Medical Center – Bluebonnet : Connie DeLeo	X	West Feliciana Parish Hospital: Zephie Marionreaux
X	Baton Rouge General Medical Center – Mid City: Connie DeLeo	X	Woman’s Hospital: Mike Meagher
X	Baton Rouge Rehab Hospital: Laura Simon		
	Bethesda Rehabilitation Hospital	EMS	
X	Champion Medical Hospital: Randy Ardoin		
X	Eastern Louisiana Mental Health System-East: Kristi Hawkins		City of Gonzales Fire & Rescue
X	Eastern Louisiana Mental Health System-Feliciana Forensic Facility: Kristi Hawkins	X	East Baton Rouge Parish Dept of Emergency Medical Services: Bryant Hernandez
X	Lane Regional Medical Center: Allyson Hughes, Kevin Dicharry, Dana Bellefontaine		Elayn Hunt Correctional Services
	MMO Behavioral Health Systems		Louisiana State Penitentiary –EMS: Michael Thomas
	Oceans Behavioral Hospital of Baton Rouge	X	West Feliciana Parish Hospital – EMS: Zephie Marionreaux
X	Ochsner Medical Center-Baton Rouge: Clarence Bourgois, Gary Moore	X	Acadian Ambulance: Jordan McGee, EMS DRC
X	Our Lady of the Lake RMC: Rick Boyer		
X	Pointe Coupee General Hospital: Pattie Sam	Other Partners, Guests	
X	Prevost Memorial Hospital: Chelsie Dinino	X	Public Health – Region 2 PHERC: Priscilla Williams, Elizabeth Schill, Schaun Morgan
X	Promise Hospital of Baton Rouge (Mancuso Lane): Michael Nolan	X	LERN: Ted Colligan
X	Promise Hospital of Baton Rouge-BR General: Michael Nolan	X	BEMS: Amanda Broussard, Fabian Blache
X	Promise Hospital of Baton Rouge-Ochsner Hospital: Michael Nolan		Louisiana Assisted Living Association
X	SAGE Rehabilitation Institute: Alicia Burge		OPH – CCP
	Seaside Health System		
X	St. Elizabeth Hospital: Aiden Gautreau, Jennifer Sing		
	St. James Behavioral Health Hospital		

Facilitators:

Connie DeLeo, Region 2 Designated Regional Coordinator (DRC), Rick Boyer, Region 2 DRC; Frances Arledge, LHA/Hospital Preparedness Program.

Welcome and Introductions

Mr. Rick Boyer, Region 2's Hospital Designated Regional Coordinator (DRC), welcomed everyone to the meeting and began with introductions of members in attendance.

Regional Updates & Announcements

Mr. Rick Boyer reminded everyone of the bed poll reporting expectation for the region. Basic bed poll reporting for all hospitals is every Tuesday by 10:00 am and LERN data is due twice a day, every day for all Tier 1 Hospitals. Hospital staff along with Mr. Boyer are finalizing the After Action Report for the suspected active shooter event at OLOL Hospital last month. Details of the findings will be shared at the next HEPC meeting. It has been determined that when a hospital "locks down" its emergency department, this will serve to trigger immediate Divert Status. In explaining the diversion rationale, the importance of protecting first responders was emphasized. Jeff LeDuff will be conducting our Plain Talk training. The project will outline the verbiage that will be used by hospitals in region 2 to announce certain emergency events in addition to just using color-coding such as Code Silver.

Public Health – Ms. Priscilla Williams briefed the group on Public Health efforts in the Region to reach out to the community during National Preparedness Month. A flyer was passed out with some tips and details of preparedness activities for citizens. Ms. Shaun Morgan informed the group of an upcoming PPE training opportunity with the National Guard 62nd CST available to the group.

EMS – Mr. Jordan McGee, Region 2 EMS DRC reminded the group of an important upcoming regional meeting to discuss advancing plain language across healthcare entities throughout the region.

LERN – Mr. Ted Coligan briefed the group on the protocol for re-routing ambulances during active shooter events. He stressed the importance of effective and concise communication not just to hospitals and regional responders but also within facilities. He discussed the state trauma system growth and goals. Today there are seven trauma centers in the state with an ideal goal of 11 trauma centers.

Other – Mr. Mike Meagher with Woman's Hospital mentioned that his facility will host a Decon Training with the 62nd. He is currently working out the logistics of the training with the Hospital Association and will share details with the group as they come available.

Hospital Preparedness Program (HPP)

Ms. Frances Arledge presented a discussion on the transition of focus from emergency planning to developing emergency programs. This is an approach used at the state-level to reinforce the importance of healthcare coalitions and working together to ensure healthcare readiness for emergency events. Participation at all levels of an organization or regional coalition, especially at the leadership level, is essential for a successful program. Elements of an Emergency Management Program were reviewed and the group discussed examples of activities relevant to each area. The importance of risk assessments was highlighted: Hazard Vulnerability Analysis (HVA) is a critical aspect of planning for emergencies and prioritizing resources for response. The use of the HVA in driving mitigation activities was articulated. A diagram was presented to help the audience visualize where mitigation falls in the preparedness and program cycle. A review of some examples of mitigation along with a discussion of structural and non-structural activities was intended to help the group define its importance. The group discussed HPP funded resources that are available for supporting each other during a response. Recovering from an event is another area of focus for regional healthcare coalitions. Recovery activities will vary from event to event, however there are common themes such as operational aspects of healthcare delivery, personnel recovery, and restoration of property loss or damage. Planning and spending priorities for the hospital and EMS providers in the region were reviewed. Summary slides with Region 2 Needs Assessment Data results were included. Gaps identified for hospitals are communications and resource availability. The hospitals also reviewed the anticipated expiration rate of pharmaceutical caches at facilities along with weekly amounts of PPE caches. EMS priorities established by the state Bureau of EMS are Interoperable Communications and Training and Exercises. A list of identified future trainings and exercises that was developed during a state EMS workshop in May of 2015 was presented to the group.

Ebola/Infectious Disease Readiness

Ebola Grant Update – the State received Ebola Funds to support an Assessment Hospital(s) and a transportation provider(s). To date, one EMS provider is being considered for receiving grant funds. As of this meeting, no hospital in

Louisiana is identified as an “Assessment Hospital”, however hospitals are expected to be ready to identify and isolate a person suspected of having Ebola, and to inform or communicate with DHHH immediately regarding this patient. Planning is underway to establish a procedure for the transfer of a confirmed Ebola patient from Louisiana to the Region VI Ebola Treatment Center in Texas. As infectious disease planning continues, coalitions and hospitals can expect to work closely with the new HPP Infectious Disease/Pandemic Flu planner, Ms. Jill Hulin over the upcoming months.

ESF8 Portal Resources

Ms. Frances Arledge reminded coalition members about the tools available on the ESF8 Portal and encouraged them to use these documents and tools. Each organization’s emergency preparedness contact is responsible for managing users for their facility. A new platform for this system is being evaluated. To facilitate this transition, it will be important to make sure users in the system are correct for each organization. All organizations are encouraged to review the People/Users in the system for their organization and to limit this number to the fewest possible people to make best use of this resource.

HPP Grant FY2015-2016

An overview of the 2015-2016 grant was provided. Participants were informed that Louisiana’s grant award is slightly less than the grant award for the 2013-2014 grant period. Funds are expected to continue to decrease in the next grant period. The approach to allocating funds was reviewed for both hospital and EMS groups. For both groups, a decision was made to allocate funds in support of the ESF8 regional response network infrastructure, including the Administrative Designated Regional Coordinator role, Volunteer Designated Regional Coordinator role, CHEMPACK host sites and Louisianan Rural Ambulance Alliance equipment management project. Participation Agreements and individual facility allocation amounts are being developed at the time of this meeting.

The process for accepting grant funds was reviewed. The first step is for Hospitals and EMS providers to indicate their interest in receiving grant funds. Facilities must submit the signed letter of intent form by August 31, 2015 indicating they either accept or decline funds in the FY2015-2016 period. In addition, if interested in receiving funds, the facility must attend the Fall HCC Conference meeting and submit the NIMS Compliance Worksheet attesting to their compliance with NIMS implementation activities. Organizations submitting letters of intent will be evaluated to ensure eligibility to receive funds, including current licensure and operating status, compliance with State and Federal audit requirements as well as NIMS compliance.

The next step in the process is the Participation Agreement and Budget Proposal. Facilities accepting funds must submit a budget proposal detailing proposed purchases. Formal quotes are not required as part of the budget proposal process; facilities are encouraged to work with the DRC, ADRC and the HPP Grant Staff to ensure purchases are allowable within grant guidelines. Grant purchases may begin as early as July 1, 2015. A final deadline for purchases will be announced when participation agreements are available. Facilities must submit acceptable proof of purchase documentation in the Grant Management System. The annual Needs Assessment Survey is also required and must be completed by March 31, 2016. Documentation will be reviewed for reimbursement as soon as all participation criteria are met. The group is reminded that a 10% match of the reimbursable amount is required. Matching expenses may be demonstrated with either cash or in-kind purchases and must be allowable, documented and verifiable. Facilities are reminded that matching submitted for the HPP Grant may not be used in any other federally assisted program.

Site visits will be performed to monitor purchases made using HPP funds, assess facility progress toward meeting established grant goals and compliance with Participation Agreement activities. Approximately 20% of facilities are visited each year. If a “red flag” is found during the site visit, corrective action measures will be taken. Facilities may no longer be eligible to receive grant funds until measures have been met. Facilities may be asked to return a portion of grant funds received or facilities may be asked to provide justification as to why measure cannot be met. Facilities that did not receive funds during the defined period will be visited, however the site visit will focus on preparedness and compliance activities only.

Announcements

Upcoming education opportunities hosted by the Louisiana Hospital Association on regulatory compliance for CMS emergency preparedness rules and crisis communications. Review the handout fliers for more information and registration details.

Adjournment

The meeting ended at 10:00 AM.