

SWC Healthcare Preparedness Advisory Coalition (HPAC) Meeting Minutes

September 19, 2018

Bismarck-Burleigh Public Health / West Conference Room

Present at meeting: Crystalynn Kuntz, Kalen Ost, Valerie Vinchattle, Jenessa Vogel, Annette Lucier, Becky Ternes, Kathy Seidel, Neil Johnson, Rochelle Schaffer, Erica Reiner, Jolene Lunde, Anna Odenbach, Scott Osadchuck, Kendra Roeder, Heather Kalsow, Rebecca Nielson, Marlys Harrison

Via IVAN:

AGENDA

➤ FULL SCALE EXERCISE REVIEW

Participants that reached out to Crys on day of exercise: Elm Crest Manor, Sanford Home Care Mandan, Edgewood Village, Edgewood Dominion, Bismarck Surgical Associates, Missouri Slope Lutheran Care Center, Prospera, Northlake PACE Program, and Vibra. Emergency Managers: Gary Stockert, Mary Senger and Tom Doehing. Baptist Health Center did participate on a different date.

- **Objective 1: Local agencies will set up a Department of Operation Center by utilizing the incident command Structure**
 - Due to timeframe everyone was still in the office and on site, discussed any issues that may arise. Used calling system to email, text, phone that keeps calling until you respond.
 - Arranged to be closer at the impact zone, worked on documentation. After action focused on supplies that they need and created backpacks for each person to quickly set up EOC.
 - Worked on educating each department on their role of evacuation.
 - Better communication with availability of more walkie talkies and cellphones since there is no overhead paging. Walkie talkies were charged and ready to go beforehand.
 - Tiger Connect (previously called TigerText) <https://www.tigerconnect.com/> Application that can send text, pictures, and calls cell phones that is secure and HIPPA compliant. It also records information that is shared to be able to access later and download. Concern if cell phone service is down.
- **Objective 2: Local agencies will develop a triage plan for evacuation verses sheltering in place.**
 - Created plan as if tornado had touched down and after action on evacuation process. Facility is the backup kitchen for the hospital but unsure how much the hospital was affected.
 - Have a list available which patients are essential, and how they would need to be moved.
 - Discussed evacuation zones and mapped how they would get there.
 - Discussed timeframe on how long could shelter in place could go on, if needed for 72 hours or more.
 - Contracts with other companies, food availability, delivery, storage.
 - Shelter in Place is preferred and evacuation is last resort.
- **Objective 3: Local agencies will activate a communication plan and demonstrate a form of communication to the city/county emergency operation center, the department of health and the regional EPR coordinator.**
 - Several people unable to contact Morton County Emergency Manager Tom
 - In an actual disaster would activate EOC and the Emergency Managers would be together.

-Evacuation and transportation resources are not available by the city emergency managers but would reach out to the state or private companies. Even if you would need to evacuate there would be a triage and would need to wait a while to evacuate. Generators are also not available and need to have in place. Also consider fuel and how that would be done.

-*NOTE* Initial decision is up to the facility whether to evacuate or shelter in place.

-*NOTE* Outdoor warning sirens can be sounded for any major emergency disaster to tune in why those sirens are going off. They are not limited to just tornado warnings. Can be used for flooding, chemical spills.

Over all the Table Top Exercise and Exercise Drill seemed to work well with everyone. No improvements to the overall exercise were mentioned.

➤ COMMUNICABLE DISEASE

• Current Updates

-ND 2017 Epidemiology Report released in July for the 2016-2017 Influenza Season had a record of 7,507 cases. However, this is likely due to the increased electronic reporting, meaning fewer cases of influenza were missed by surveillance due to underreporting.

-Influenza 2017-2018 Season Wrap-up was the largest season on record with 8,515 cases. The Influenza A H3N2 virus was predominate for the second year in a row, the 2009 Influenza A H1N1 and influenza B both in lower numbers. Influenza B numbers increased in the latter half of the season which is typical. Nationally caused a record number of hospitalizations and the season was considered one of the most severe in the past 20 years.

-First variant influenza case was reported in August 2017 – H3N2 swine variant strain that was contracted from pigs at the ND State Fair. A second case also was reported that was residing in another state that had contact with pigs at the same fair.

-West Nile Virus (WNV) Update: As of September 17th 148 cases have been reported to the NDDoH. Burleigh County had the highest cases at 55, and Morton County and the second highest at 16 cases. This is due to the mosquito counts that have been off the charts this season.

• In the News

- **2018-2019 FLU Season**: World Health Organization (WHO) has recommended the quadrivalent vaccines for use and contain the following:

- an A/Michigan/45/2015 (H1N1)pdm09-like virus;
- an A/Singapore/INFIMH-16-0019/2016 (H3N2)-like virus;
- a B/Colorado/06/2017-like virus (B/Victoria/2/87 lineage); and
- a B/Phuket/3073/2013-like virus (B/Yamagata/16/88 lineage).

-It is recommended that the influenza B virus component of trivalent vaccines be a B/Colorado/06/2017-like virus of the B/Victoria/2/87-lineage.

• Trends

➤ **ROUNDTABLE SHARING**

- NDDDES Website Training: <https://www.nd.gov/des/training/>
 - ICS 300/400: November 5, 2018 in Dickinson
 - G290 Basic Public Information Officer: April 16-17, 2019 in Bismarck
- HAZMAT conference: [2018 North Dakota Hazardous Materials Conference](#)
 - October 31 – November 2 at the Ramkota Hotel in Bismarck; \$30.00 Registration fee
 - There are training tracks set up for public health and other emergency responders
- **Next Meeting: Wednesday, November 21 2018**
 - Infection Control, Cross Contamination, Food Contamination

Please Submit any Ideas for topics for training, exercises. Think of ideas on something we can work on for Emergency Plan.

➤ **CONTACT INFORMATION FOR EMERGENCY MANAGERS:**

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