

SWC Healthcare Preparedness Advisory Coalition (HPAC) Meeting Minutes

January 17, 2018

Bismarck-Burleigh Public Health / West Conference Room

Present at meeting: Crystalynn Kuntz, Valerie Vinchattle, Becky Ternes, Vanessa Raile, Annette Lucia, Shauna Fladeland, Whitney Schmidt, Kendra Roeder, Daren Repnow, Kaitlyn Green, Anna Odenbach, Rochelle Schaffer, Marlys Harrison, Jodie Fetsch, Molly Zosel, Bruce Kallis, Arthur Skrundevskiy; Vicki Butler, Debbie Goetz
Via IVAN: Emmons County: DelRae Baumgartner; Sakakawea Medical Center Hazen

AGENDA

➤ **All Hazard Risk Assessment Review**

- Crys presented the local Jurisdictional Risk Assessment-All Hazard for the SWC region. See attached document. The assessment was completed by round table discussion based on the risks happening over the past year. For your facility assessment focus on the top row of the chart (Very Likely events), and on the specific risks for you and make changes as needed. City of Bismarck <http://www.bismarcknd.gov/496/Get-Prepared> and Burleigh County <http://www.burleighco.com/departments/em/mitigation/> have Risk Assessments available online for examples.

➤ **Exercise scenario planning for 2018 both the tabletop and full scale**

- Note when documenting use the word **participation** and never observation.
- Discussion of various exercise ideas and as a group chose Tornado/Summer Storm with power outage and structure damage scenario. Planning/Goals next meeting March 21st; followed by Table Top Exercise on May 16th and Full Scale exercise on July 17th. Note the meeting for May and July may take more than 1 hour.

➤ **Communicable Disease and Preparedness Updates Including all News Worthy Issues**

- **Hepatitis A Outbreaks** – Since March 2017 several states (California, Michigan, and Utah) have been experiencing outbreaks as a result of person-to-person transmission and have primarily occurred among the homeless, persons who use injection and non-injection drugs, and their close direct contacts. Part of the challenge in those outbreaks is that homeless people do not have access to clean toilets and handwashing facilities. Hepatitis A is transmitted person to person through the fecal oral route or by consumption of contaminated food or water. An infected person is most likely to spread the disease 2 weeks before symptoms start. Hepatitis A is not usually spread by blood and does not lead to chronic infection. Hepatitis A vaccine is routinely recommended for all children 12 to 23 months. Two doses given at least six months apart are needed to be fully protected. Majority of adults have not been vaccinated since the vaccine first became available in 1995. There have not been any reported outbreaks in ND.
- **People with HIV who are Virally Suppressed** – In September 2017 the CDC released a memo stating that people living with HIV on antiretroviral therapy (ART) and are virally suppressed have no risk of transmitting the virus to HIV negative sexual partners. As of present in ND there are a reported 415 individuals with HIV and 82% are virally suppressed. The Ryan White Part B Program is available to help assist.
- **West Nile Virus (WNV) ND 2017 Summary Report** – 62 cases from 26 counties were reported to the NDDoH in 2017. The cases ranged from 11 to 83 years with a median age of 49.5 years. 20 cases met the case definition for West Nile neuroinvasive disease. Onset dates ranged from early July to late September. 22 cases (35%) were hospitalized and 2 cases were fatal.

- **INFLUENZA** – Flu cases this year have doubled those from last year, validating experts’ fears that this season could be particularly bad. This year’s flu vaccine may not be as helpful in past years but cautioned research is based only from Australia and may not reflect what will happen in the US because there is no guarantee that the strains that predominated Australia will be the same here. The effectiveness of flu shots can vary each year and average number between 2006 to 2017 was 46% (outliers 19% in 2014-1; and 60% in 2010-11). The start of this season is one of the earliest on record. Circulating strains appear well matched but one challenge with an early season is that people are not yet vaccinated or vaccinated less than 2 weeks prior to illness. **NDDoH Influenza Update week ending 1/6/2018.** Cases reported for the week were 430; cumulative cases for the season were 1901 with widespread activity level. Cases continue to rise mirroring what is being seen nationally. Widespread activity will likely continue through January and possibly into February. Even when vaccinated people do get the flu, they tend to be less sick and are less likely to have severe outcomes because of their illness. There have been 116 influenza-related hospitalizations reported, 8 deaths, and 208 deaths from pneumonia. There have been 16 reported outbreaks in long term, assisted or basic care settings. 13 of these cases were caused by Influenza A (not subtypes). At this point predominate strain is H3N2. During the 2014-15 season (H3N2 predominate season) there were several clusters of mumps-negative parotitis (swelling of the parotoid glands) cases that tested positive for influenza (colloquially known as “flumps”). 4 cases have been identified in ND to date for this current season.
- **NORMAL SALINE SHORTAGE** – FDA Statement released January 4, 2018. Expect that the shortage will improve in early 2018, with continuing improvements in the weeks ahead. Baxter announced that all their facilities in Puerto Rico have returned to the commercial power grid but it remains unstable in places. If you have some products that are due to expire reach out to the FDA to possibly get the expiration date extended.

➤ **Current Topics from Attending Agencies**

- Offering facilities call down for residents and/or resident families. Valley View did recent exercise using Regroup and went well. If interested, please contact Kalen. If you have an existing service that is fine, don’t have to use Regroup.

➤ **Past Exercises and Trainings**

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➤ **Upcoming Exercises and Trainings:**

- HSEEP: 3 day training 3-20-18 register at <https://www.nd.gov/des/events/>
- There will be shorter training opportunity during the long term care conference in May.

➤ **Next Meeting:** March 21st – Planning for Exercise

2018 dates for HPAC Meeting 9am at BBPH 500 E Front Ave remains on the third Wednesday of the month.

May 16th – Table Top Exercise

July 17th – Full Scale Exercise

September 19th – AAR/IP Review

November 21st – TBA