

Program Update

Office of Emergency Preparedness & Response (EPR)

Washington State Department of Health (DOH)

October 2015

The Office of Emergency Preparedness and Response (EPR) Program News Update is provided as a way to share current information about the preparedness program. This News Update is intended to be shared with local, regional, and tribal partners; please forward it to others who may be interested. We are currently in Budget Period 4 of a five-year cooperative agreement for our base grant with a fiscal period July 1 – June 30 each “year.” The Ebola funding streams have a variety of fiscal periods and due dates.

State and National Updates

Guiding Principles / Preparedness and Response – Michael Loehr

As you know we’ve made changes over the last year and a half:

- restructured and standardized the work activities of LHJs and HCCs;
- redefined our purpose in DOH and our focus on response capability;
- adjusted our funding allocation strategy

These changes have all been focused on establishing a statewide response and recovery system, and we’ve made great progress in many areas – our collective response to the last few disasters have shown this.

As we continue to change and improve, we feel it’s important to define a set of guiding principles for the statewide preparedness and response program. This would provide clarity as we allocate resources, set priorities, and move forward.

We conducted 20 key informant interviews with most members of the Disaster Advisory Group and gathered a lot of great insights and ideas. We will be discussing further with DAG at the November meeting.

Afterwards, we’ll be sending a draft document to all LHJs, tribes, HCCs for review and comment. We want wide input on this since the intent is that it applies to all of us as a connected system. We’ll be working throughout the Fall toward finalizing the guiding principles.



Developing State-level Volunteer Capability – Michael Loehr

I’ve mentioned this on these calls for the last 2 or 3 months, wanted to give you an update.

A core component of our preparedness and response philosophy, in fact one of our proposed guiding principles, is adopting a “whole community” approach to preparing, responding and recovering. That includes incorporating the skills and abilities of community members such as pharmacists, nurses and physicians from across the state to support disaster response. Local medical reserve corps programs are the ideal mechanism for this to happen, yet since losing half our funding over the last seven years, Medical Reserve Corps (MRC) programs are currently not sustainable for 2/3 of the state.

DOH is obviously big on the idea of response teams and we have over half a dozen teams in DOH now, but we realize our capacity is limited. And for certain capabilities like providing medical care for acute or chronic conditions in shelters or ACFs, we really don't have capacity, but that capacity exists in our communities across the state. So we want to create opportunities for volunteers to participate on specific response teams that could be mobilized statewide. This is not a state medical reserve corps, rather a set of state level response teams that could be populated by a combination of state, tribal, local responders, and volunteers, or we could have teams that are all volunteers.

We're working with key partners now such as American Red Cross (ARC), EMD and are working 1-on-1 with several LHJs to vet this idea. We are open to ideas about what you like about this concept, what challenges to foresee. It is complex and we're moving judiciously, but we do see great opportunity to incorporate a whole community approach to response.

Program Updates

New Emergency Preparedness and Response (EPR) Staff – Shawn Roberts

Neil Good joined the EPR Operational Readiness team on Oct. 16. He will be filling in temporarily as our capability 3, Emergency Operations Coordination lead, and our Cascadia Rising coordinator. He's been with DOH for the past five years, working in the Infectious Disease program. He served in the Navy prior to DOH, and spent most of his service career in the Marine Corps as a hospital corpsman. While in the military Neil earned his master's degree in emergency and disaster management.

Contact: Neil Good

Neil.Good@doh.wa.gov

360-236-4054

Re-forming SECURES User Group – Robert Scheel

This is awareness-level for most partners, we will be re-forming the SECURES user group. The purpose is for continuous improvement, to seek out new ways or tools improve efficiencies and save costs. The ideal user group will be made up of SECURES heavy users; those local administrators who are on the front tier, pushing the capabilities of the current system.

We are now approaching 3,000 active SECURES accounts and there are more than 100 local administrators supporting these accounts. DOH has added all staff to the system, and all LHJs have their business leadership on SECURES. Many LHJs added all of their staff for local call-down and notification purposes. Some LHJs are now using SECURES to convey public health information to their partners and/or provider communities.

Please stay tuned for next steps. Contact Robert Scheel, Capability 6 Information Sharing lead, for any questions about the group or the plan, robert.scheel@doh.wa.gov.

*A special note for tribes: currently there are many tribal emergency preparedness partners in SECURES and receiving messages; however there are no tribal "local administrators" using SECURES to cascade messages within or outside their tribe(s). There could be! Contact Robert if you are interested in learning more.

Healthcare Update – Erika Henry

- Work on **Intrastate Healthcare System Coordination Plan** begins in November, with a visit to Washington State by Scott Aronson, Principal at Russell Phillips. Scott will be meeting with Disaster

Medical Coordination Center (DMCC) hospitals and partners in Spokane, King and Pierce counties, as well as with other agencies (DOH, DSHS, WSHA) to finalize the scope of the project and to help set and understand expectations. Scott and his team will plan to assess 10 pre-selected hospitals around the state for expanded medical surge capability. The completed report will contain for hospitals and state agencies a guide to decisions around evacuation, shifts in clinical care guidance, etc. We'll update you as work progresses!

- The state-level **Essential Elements of Information (EEI) tool** is still in development, and this work is happening concurrently with the local/regional tool you may be working on within your healthcare coalition (HCC). The state tool will aggregate local/regional information and will pose a unique set of questions intended to inform Secretary Wiesman, the Disaster Medical Advisory Committee (DMAC) and others.



- The Association of Healthcare Emergency Preparedness Professionals (AHEPP) is hosting their first annual **conference November 17-18**. They have already provided some excellent webinars covering a variety of topics. Erika Henry is attending the conference and will share highlights with HCC leads during a future meeting.



Patient Movement Tabletop Exercise: Nov. 19 – Shawn Roberts

The Washington State Department of Health (DOH) and the U.S. Department of Health and Human Services (HHS) are sponsoring the 2015 Noble Lifesaver **Patient Movement Workshop on Thursday, November 19, 2015**. The purpose of the 2015 Noble Lifesaver Patient Movement Workshop is to discuss the scope of federal assistance for patient movement operations as well as the specific requirements among state, and regional partners in response to a catastrophic earthquake and tsunami impacting the Cascadia Region. The focus of the workshop is to determine the State's roles and responsibilities.

For more information on the workshop, please contact either Shawn Roberts or Erika Henry, shawn.roberts@doh.wa.gov or erika.henry@doh.wa.gov.

PHEP Training Update – Shawn Roberts

We sent you the Statewide Training and Exercise calendar Sep. 18. We included some courses DOH identified around operational readiness that we were planning to offer. Some of those courses included ICS 300 and ICS 400 at DOH, position-specific training and some leadership trainings.

EPR leadership met to discuss the training plan for the coming year and what overall needs we have. As a result of the discussion we will be making some changes to the calendar and what courses we will be offering.

We will focus more on team-based trainings in this coming year and less on position-specific trainings. We will highlight those changes as we update the Statewide Training and Exercise calendar next month. For more information, please feel free to contact Shawn Roberts, shawn.roberts@doh.wa.gov.

Grant Update

--Summaries of each grant or full grant guidance available on request--

Grant Deliverables Completed – Kari McDonald

Grant deliverables met in September and early October:

- PHEP Ebola Supplemental 1 close-out – this was the small grant (\$66k) that was used internally for DOH staffing and maintaining the Isolation and Quarantine site.
- Budget Period 3 HPP Performance Measures and NIMS Compliance
- Budget Period 3 PHEP Performance Measures
- Budget Period 3 Annual Progress Report
- Data validation of PHEP Ebola Supplemental 2 application – Feds did not have the module set up in the grants management system at the time of application; this is a validation that they transferred the data correctly into the newly created module. There were many data transfer errors that took a good amount of time for us to correct.

There were numerous system programming issues that the feds worked to correct or offer awardees workarounds. Because of these system errors, several due date extensions were given which took us into the first couple weeks of October. I am happy to report that all deliverables were met on time. Grant reporting is definitely a collaborative effort and I thank each of you who participated in this process.

Upcoming grant deliverables:

- PHEP Ebola Performance Measure report – due 10/30/15
 - Measures 2 and 7 are reported quarterly
 - Measures 2, 3-7, 10 and 11 are every six months
- PHEP Ebola 6 month progress report – due 11/20/15

We submitted our initial **carryover request** for BP3 unspent to the feds Oct. 20. We hope to hear back from them in the next month or two. You should have heard from the EPR team on your “special project” status already. Please contact Kari if you have any questions about special projects or the process, kari.mcdonald@doh.wa.gov.

If you have any information you would like to share with the public health preparedness community during a monthly update call please feel free to share your ideas with Dianna Trotter (dianna.trotter@doh.wa.gov or 360-236-4079).

EPR Program Update Calls are held the third Monday of each month from 2-3 p.m., with January and February combined because of the holidays.

2015 Update Calls			
Feb. 2	May 18	Aug. 17	Nov. 16
March 16	June 15	Sep. 21	Dec. 21
April 20	July 20	Oct. 19	