



County of San Luis Obispo Public Health Department Public Health Emergency Preparedness Program (PHEPAC) Meeting

October 6, 2016



Public Health
Prevent. Promote. Protect.
San Luis Obispo County

In attendance: Nicole Balliet, James Beebe, Kerry Boyle, George Brown, Peggy Callison, Claire Grantham, Beth Haberkern, Megan Harrington, Robin Hendry, Joe Hoeflich, Colleen Hubbard, Karen Jones, Anita Konopa, Steve Lieberman, Ann McDowell, Elizabeth Merson, Joe Piedalue, Susan Rainey, Teri Reeder, Dee Rittenhouse, and Jeannette Tosh

For corrections/comments: email Megan Harrington mharrington@co.slo.ca.us

Call to Order	Meeting began at 10:30 with a welcome from Elizabeth Merson and introductions.
TOPIC	DISCUSSION
PROGRAM REPORTS	
JOE HOEFLICH TRI COUNTIES REGINAL CENTER	<ul style="list-style-type: none"> Joe shared the experience of having an active shooter in one of their sister facilities in San Bernardino County and what precautions Tri-Counties Regional Center has put in to place to keep their patients, staff and visitors safe. They have gone through all of their facilities and have trained all of their staff on how to respond to an active shooter. He shared that it is a fine line to make sure you have secure facilities and an inviting place for families to visit. Joe discussed the the psychological effects of an active shooter and how it affects all staff differently.
ANITA KONOPA OFFICE OF EMERGENCY SERVICES	<ul style="list-style-type: none"> OES held a Nuclear Power Plant (NPP) dress rehearsal exercise in September. They received good feedback from the evaluators. OES is having a Disaster Preparedness Advisory Council (DPAC) meeting on October 26, 2016 the meeting will be going over the response to the Chimney Fire. OES will be doing NPP FEMA evaluated drill on November 2, 2016.
JAMES BEEBE LABORATORY	<ul style="list-style-type: none"> The lab has new equipment that can give very accurate test results within an hour. The lab recently had five test samples come in from a concert that was held in Pozo, and out of the five, two tested positive for E-coli. This particular strand of E-coli is not linked to beef, it is more likely linked to humans. The lab just started testing samples for Influenza- like illnesses, and is looking for rapid positives. They have also sent over 40 tests up to the state lab for testing for the Influenza strains.
ANN MCDOWELL COMMUNICABLE DISEASE	<ul style="list-style-type: none"> Public Health is investigating an E-coli outbreak at a Pozo concert in the VIP section where 439 tickets were sold. Public Health found out about the outbreak through social media, and complaints on the venue's site. Environmental Health will be monitoring the venue closely during upcoming events to ensure they follow safe food handling procedures. They are investigating as to what they think the cause is, they have a suspicion it is the chili that they served.
AARON LABARRE (VIA WRITTEN REPORT) ENVIRONMENTAL HEALTH	<ul style="list-style-type: none"> Environmental Health is sponsoring ammonia hazmat drill on October 16, 2016. Environmental Health supported the Chimney Fire Response by serving on the Damage Assessment Team

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	and conducting food and sanitation inspections at the shelter and fire camps.
ELIZABETH MERSON PUBLIC HEALTH EMERGENCY PREPAREDNESS	<ul style="list-style-type: none"> • PHEP is working on getting their grants approved and all work plans in place. • PHEP is in drill season.
ROBIN HENDRY COMMUNICATIONS	<ul style="list-style-type: none"> • Recently sent out CAHAN forms for updating CAHAN contact information. • If you are a Verizon Wireless subscriber you may have trouble reading Reddinet alerts. Reddinet is working towards fixing this issue.
PEGGY CALLISON CENTRAL COAST HOME HEALTH AND HOSPICE	<ul style="list-style-type: none"> • Peggy works for Central Coast Home Health and Hospice which has facilities in Santa Barbara to San Luis Obispo counties. They oversee 140 hospice patients, 400 plus home health patients, and have over 200 employees in their programs.
ELIZABETH MERSON PUBLIC HEALTH EMERGENCY PREPAREDNESS	<ul style="list-style-type: none"> • Elizabeth reviewed the the new CMS emergency preparedness ruling; attached is the PowerPoint slideshow. • CMS webinar link: https://www.cms.gov/Outreach-and-Education/Outreach/NPC/National-Provider-Calls-and-Events-Items/2016-10-05-Emergency-Preparedness.html?DLPage=1&DLEntries=10&DLSort=0&DLSortDir=descending
DENISE YI UP COMING EVENTS	<ul style="list-style-type: none"> • Public Point of Distribution (PPOD) - October 23, 2016 • Statewide Medical and Health Exercise Tabletop – October 20, 2016 • Diablo Canyon Nuclear Power Plant FEMA Evaluated Exercise: November 2, 2016: • Statewide Medical and Health Functional Exercise – November 17, 2016 • CHEMPACK Training – January 12, 2017
ROUND TABLE	<ul style="list-style-type: none"> • Jeannette Tosh: Twin Cities Community Hospital will be having their free flu shot clinic on October 21, 2016 and again on October 29, 2016.
	<ul style="list-style-type: none"> • Next PHEPAC Meeting: Thursday January 5, 2017 at 10:30 am CHP Coastal Division Headquarters, 4115 Broad Street, #B-10, San Luis Obispo, CA
ADJOURN	<ul style="list-style-type: none"> • The meeting was adjourned at 11:45 am

**CMS EMERGENCY
PREPAREDNESS
FINAL RULE**

CMS and CoPs

- ▣ Centers for Medicare & Medicaid Services
- ▣ Conditions of Participation
- ▣ CMS develops Conditions of Participation (CoPs) and Conditions for Coverage (CfCs) that health care organizations must meet in order to begin and continue participating in the Medicare and Medicaid programs. These health and safety standards are the foundation for improving quality and protecting the health and safety of beneficiaries.

Emergency Preparedness Rule Purpose

To establish national emergency preparedness requirements to ensure adequate planning for both natural and man-made disasters, and coordination with federal, state, tribal, regional and local emergency preparedness systems.

Timeline

- Effective November 16, 2016
- Implementation November 16, 2017
 - Providers have one year to come into compliance with ruling.
- Enforced after November 16, 2017

17 Providers/Suppliers Impacted

1. Hospitals
2. Religious Nonmedical Health Care Institutions (RNHCIs)
3. Ambulatory Surgical Centers (ASCs)
4. Hospices
5. Psychiatric Residential Treatment Facilities (PRTFs)
6. All-Inclusive Care for the Elderly (PACE)
7. Transplant Centers
8. Long-Term Care (LTC) Facilities
9. Intermediate Care Facilities for Individuals with Intellectual Disabilities (ICF/IID)
10. Home Health Agencies (HHAs)
11. Comprehensive Outpatient Rehabilitation Facilities (CORFs)
12. Critical Access Hospitals (CAHs)
13. Clinics, Rehabilitation Agencies, and Public Health Agencies as Providers of Outpatient Physical Therapy and Speech-Language Pathology Services
14. Community Mental Health Centers (CMHCs)
15. Organ Procurement Organizations (OPOs)
16. Rural Health Clinics (RHCs) and Federally Qualified Health Centers (FQHCs)
17. End-Stage Renal Disease (ESRD) Facilities

Four Provisions for All Provider Types

- ▣ Risk Assessment and Planning
- ▣ Policies and Procedures
- ▣ Communication Plan
- ▣ Training and Testing

Risk Assessment and Planning

- ▣ Develop an emergency plan based on a risk assessment.
- ▣ Perform risk assessment using an “all-hazards” approach, focusing on capacities and capabilities.
 - Hazards likely in geographic area
 - Care-related emergencies
 - Equipment and Power failures
 - Interruption in Communications, including cyber attacks
 - Loss of all/portion of facility
 - Loss of all/portion of supplies
- ▣ Plan is to be reviewed and updated at least annually

Policies and Procedures

- ▣ Develop and implement policies and procedures based on the emergency plan and risk assessment.
- ▣ Policies and procedures must address a range of issues including subsistence needs, evacuation plans, procedures for sheltering in place, tracking patients and staff during an emergency.
- ▣ Review and update policies and procedures at least annually.

Communication Plan

- ▣ Complies with Federal and State laws
- ▣ System to contact staff, including patients, physicians, other necessary persons
- ▣ Well-coordinated within the facility, across health care providers, and with state and local public health departments and emergency management agencies.

Training and Testing

- ▣ Develop and maintain training and testing programs, including initial training in policies and procedures.
- ▣ Demonstrate knowledge of emergency procedures and provide training at least annually
- ▣ Conduct drills and exercises to test the emergency plan.

Requirements Vary by Provider Type

- ▣ Outpatient providers would not be required to have policies and procedures for the provision of subsistence needs.
- ▣ Home health agencies and hospices required to inform officials of patients in need of evacuation.
- ▣ Long term care and psychiatric residential treatment facilities must share information from the emergency plan with residents

PHEPAC

- ▣ Providers must show collaboration with state and local emergency preparedness officials
- ▣ By joining PHEPAC, providers can meet planning, communication and exercise requirements
- ▣ Ruling provides opportunity for providers to achieve greater organizational and community effectiveness through involvement in PHEPAC

CMS Resources

- ▣ Survey and Certification - Emergency Preparedness:
<https://www.cms.gov/Medicare/Provider-Enrollment-and-Certification/SurveyCertEmergPrep/index.html>
 - ▣ Has links to Emergency Preparedness Rule, Templates and Checklists, Guidance for Healthcare Providers and more
- ▣ Requirements by Provider Type:
<https://www.cms.gov/Medicare/Provider-Enrollment-and-Certification/SurveyCertEmergPrep/Downloads/EP-Rule-Table-Provider-Type.pdf>
- ▣ CMS Webinar slides:
<https://www.cms.gov/Outreach-and-Education/Outreach/NPC/Downloads/2016-10-05-Emerg-Prep-Presentation.pdf>

ASPR TRACIE

Technical Resources, Assistance Center and Information Exchange (TRACIE)

- ▣ Topic Collections and provider and supplier specific resources available to help organizations involved in implementing the CMS requirements with resources tailored to their specific needs
- ▣ Resources for hazard vulnerability assessments, emergency plans, policies and procedures, communications plans, trainings, and testing
- ▣ ASPR TRACIE:
www.ASPRtracie.hhs.gov/CMSrule