NORTHEAST CENTRAL OHIO REGION 5
Steering Committee Meeting
March 25, 2010

Attendees: Vicki Rosser, Samaritan Hospital; Lori Josefczyk, Dunlap Community Hospital; Laurie Weaver, Wooster Community Hospital; Cindi Norris, Pomerene Hospital; Mike Hildreth, MedCentral Mansfield; Mike Hildreth, MedCentral Shelby; Daniel Raub, Medina County Health Department; Kristen Hildreth, Medina County Health Department; Carrie Rubin, MPH Student; Margo Erme, Akron Health Department; Glen Moore, Akron Health Department; Adriana A. Pust, Ohio Department of Health; Tonia Martin, Alliance Community Hospital; Nicole Hickenbottom, Aultman Hospital; Chris, Aultman Hospital; George Baumgardner, Affinity Medical Center; Peter McDaniel, Mercy Medical Center; Sarah Short, NECO Hospitals, Sarah Metzger, NECO Hospitals; Kim Bergert, Akron Children's, Rick Young, MPH Presenter, Joan Robis, New Philadelphia City Health District; Suzanne Albury, Tuscarawas County Health Department; Judy Tournabene, Tuscarawas County Health Department; Melanie Campbell, Carroll County Health Department; Vicki Seiker, Summa Wadsworth Hospital; Jeff Funai, Summa Barberton Hospital; Greg Smith, Medina Hospital; Paulette M Kline, Barberton Health District; Gail Houglan, Union Hospital; Pam Smith, East Liverpool City Hospital; Leanne Beavers, Barberton Health District; Chris Haley, Lodi Community Hospital; Chris Snow, Lodi Community Hospital; Janet Brown, Twin City Hospital; Jim Smith, Shelby City Health Department; Susan Kovach, Mahoning County Board of Health; Chris Barker, Summit County Health District; Kerry Kernen, Summit County Health District; Marlene Martin, Summit County Health District; Steven Bosso, Twinsburg Fire; Scott Martin, Akron General; Robert Walker, Robinson Memorial Hospital; Deanna Danner, Salem Community Hospital; Carol Macejko, Western Reserve; Will Riley, Summa/Intern; Robin Brown, Summa Health; Susan Varnes, Wayne County Health Department; Steve Schwartzholder, Holmes County Health Department; DJ McFadden, Holmes County Health Department; Nancy O'Diam, Mansfield/Ontario/Richland County Health Department; Mary Derr, Mansfield/Ontario/Richland County Health Department; Raymond Herbst, Ashland County-City Health Department; George B Snyder, Trumbull Memorial Hospital; Tom Canchedi, Northside Medical Center; Kim Villers, Portage County Health Department; Sue Mischka, Ravenna Health Department; Lynette Blasiman, Ravenna Health Department; Kristi Kato, NECO Public Health

- John Mason called the meeting to order.

- The meeting minutes were reviewed. Bob Walker made a motion to approve the minutes as written, Chris Feller seconded. The meeting minutes passed.

- Rick Young a Master of Public Health student from NEOUCOM presented on his capstone project. A copy of his presentation is at the end of the meeting minutes.

- Sarah Metzger provided a brief presentation on patient tracking. The Ohio Department of Health and the Ohio Hospital Association are sponsoring at least three trainings on this program. The programs includes family tracking and reunification, it has just been introduced to the hospitals and state emergency medical services. The program is web based and uses bar codes and can include pictures. Both the Red Cross and Corner are interested in the systems and can see its benefits. Sarah would be willing to present this system to public health and EMA at one of our next meetings.

- Kristi Kato stated that the Public Health Planning Committee has passed the following incident management documents: Community Containment, Epidemiology, and Public Information. The group will continue to move forward with the development of the incident management documents.

- Kelly Engelhart and John Mason presented their H1N1 After Action Report for Portage County. A hand out from their presentation can be found after the meeting minutes. If you would like more information please contact Kelly Engelhart at 330-296-9919 or kengelhart@portageco.com

- The election for the new chair was held. Bob Walker and John Mason were both nominated. Bob Walker was elected and will serve as the NECO Steering Committee Chair. The group thanked John for his dedication and service to the NECO Steering Committee. A motion was made to destroy the ballots. That motion was carried through and ballots were destroyed by Kristi Kato.

- Prior to the meeting Steven Bosso was provided with a letter of recognition thanking him for his service with NECO.
- The next meeting will be on March 25th at NEOUCOM.
- There being no further business, a motion to adjourn was made. Unanimous approval.

Establishment and Testing of a Regional Incident Management Team in Northeast Ohio

An In Progress Review

Rick Young

25 March 2010

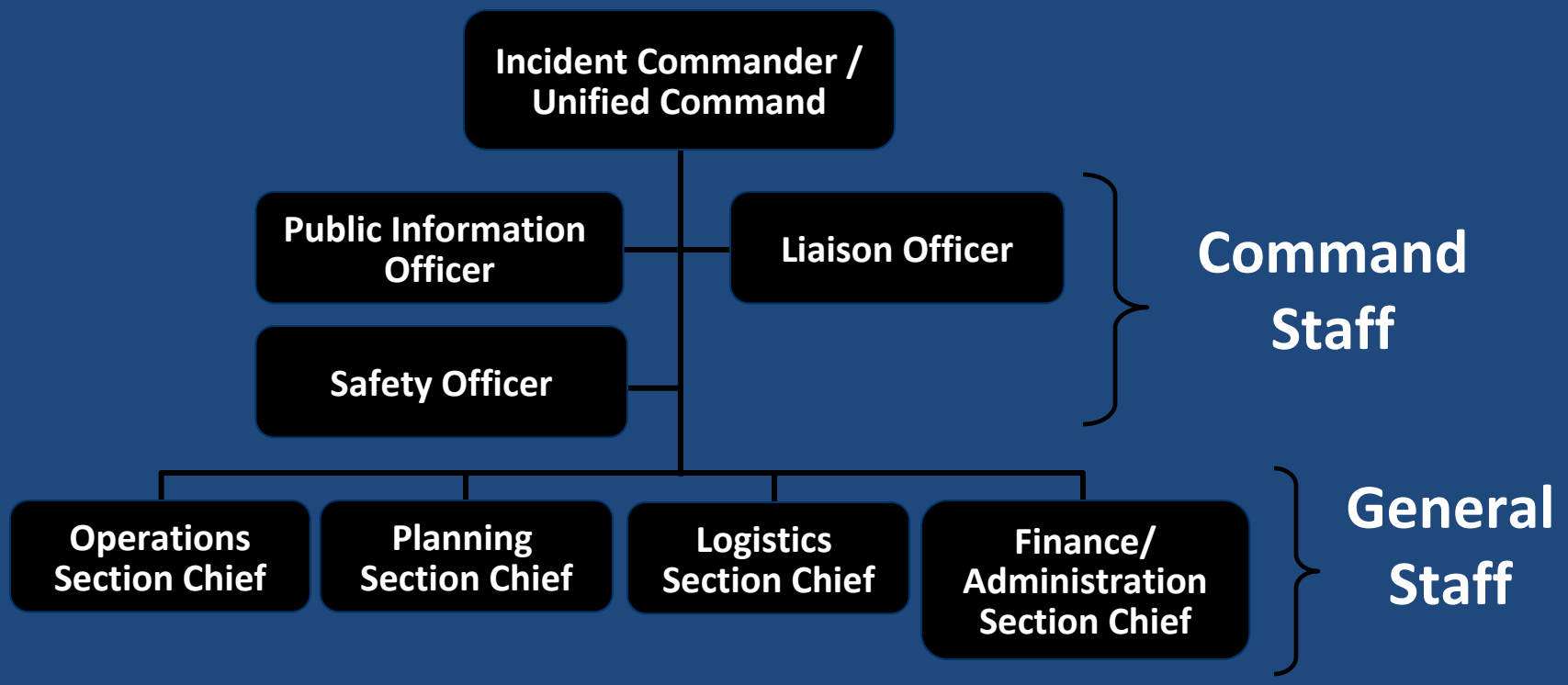
Introduction

- MPH student
- Retired Army guy
  - Chem-bio specialty
- Chemistry/Env. Engineering

Today's Objectives

1. Provide an update on the progress of my MPH capstone project.
2. Focus on the initial survey results regarding establishing an IMT.
3. Not to discuss what an IMT is…I assume you know

IMT Organization

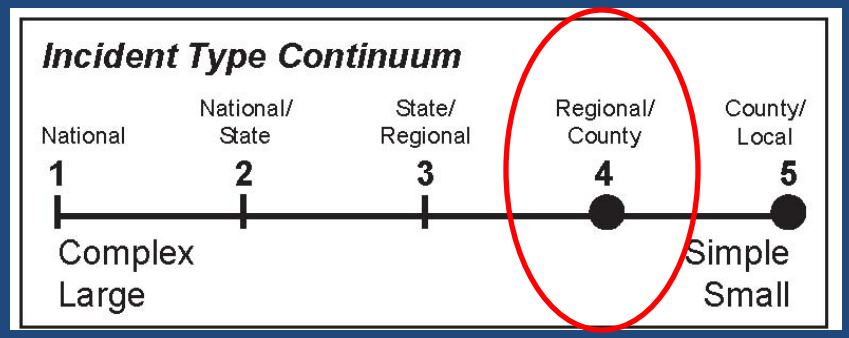


Types of IMTs

Regional: (Types 4)

A single and/or multi-agency team for expanded incidents, typically formed and managed at the city, township or county level or by a pre-determined local or regional entity.

7-10 members



1 op period

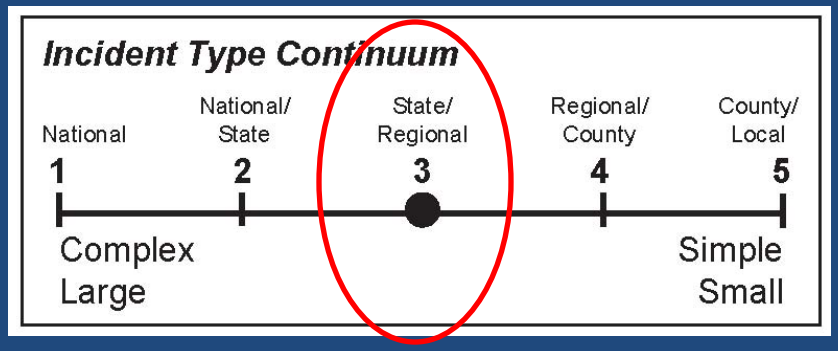
No written IAP

Types of IMTs

Type 3: State or Regional multi-agency/ multi-jurisdiction team for extended incidents

May be used at incidents such as a tornado touchdown, earthquake, flood, multi-day hostage/ standoff situation, or at large planned events.

7-20 members



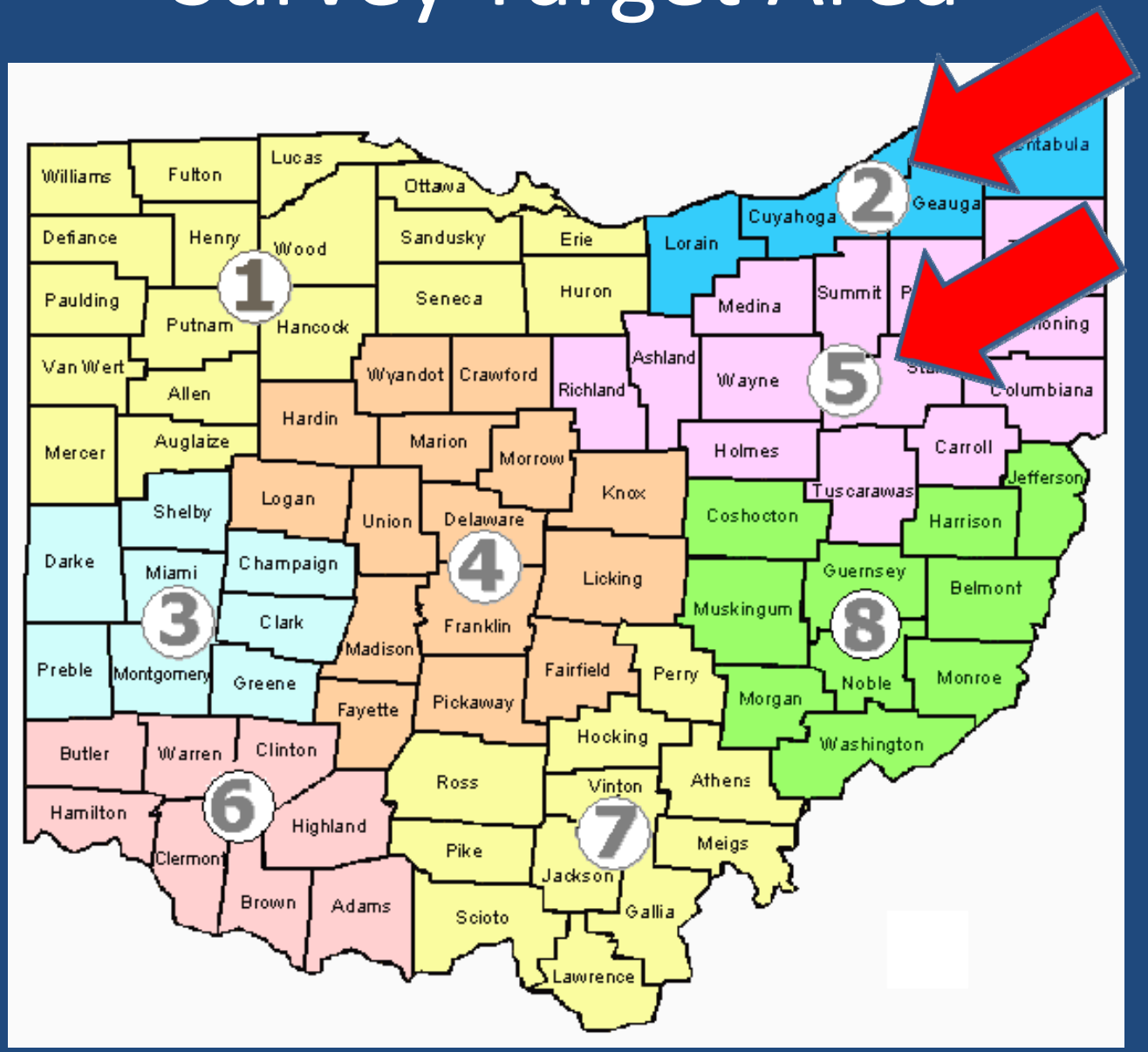
2+ op periods

Written IAP

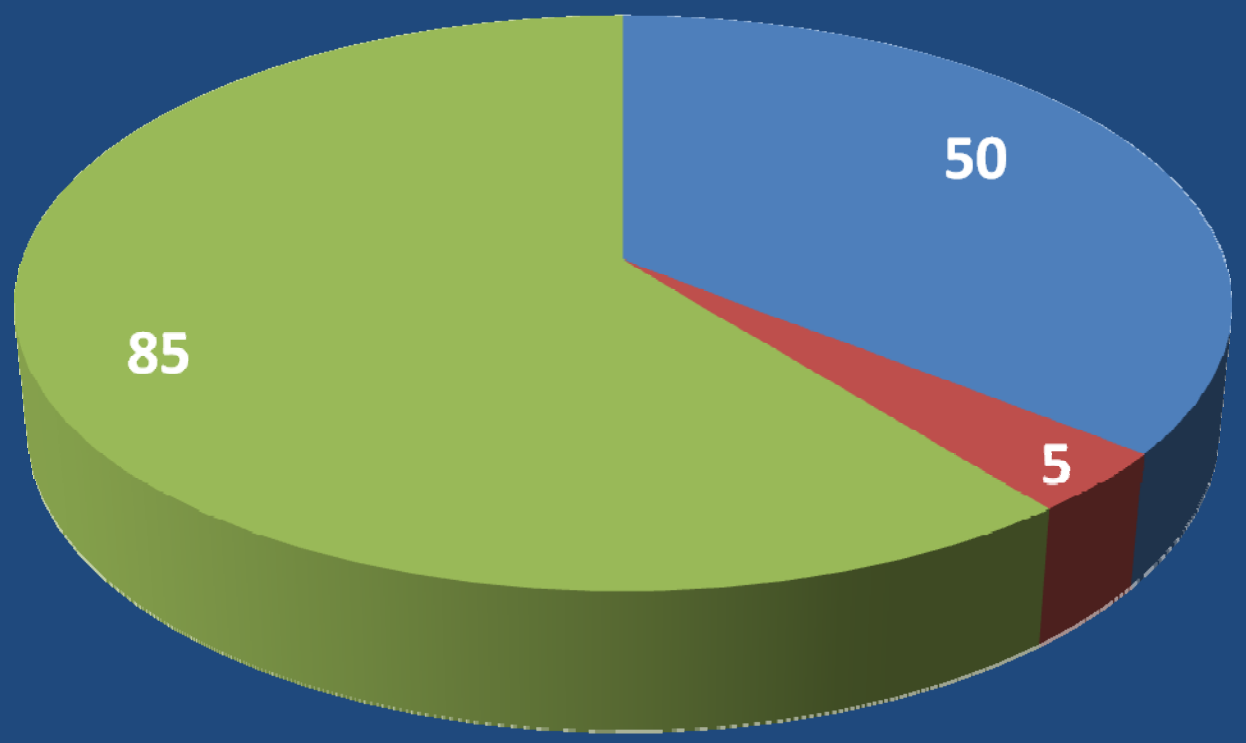
Project Purpose

- Start: design an ICS capability to assist Public Health
- Project Evolution/goals
  - **Evaluate the needs/desires/barriers to implement an IMT (Regional or Local)**
  - *Evaluate training and potential gaps*
  - *Develop a proposed exercise to test the IMT*

Survey Target Area

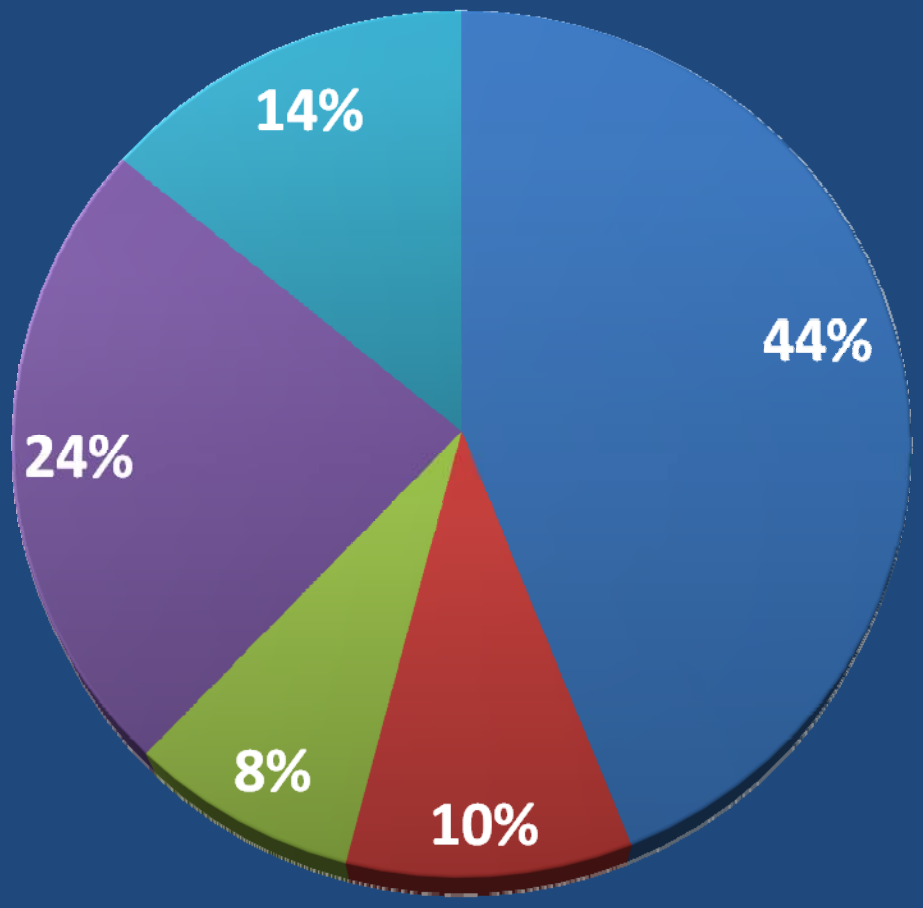


Approximated Response Rate (38.5%)

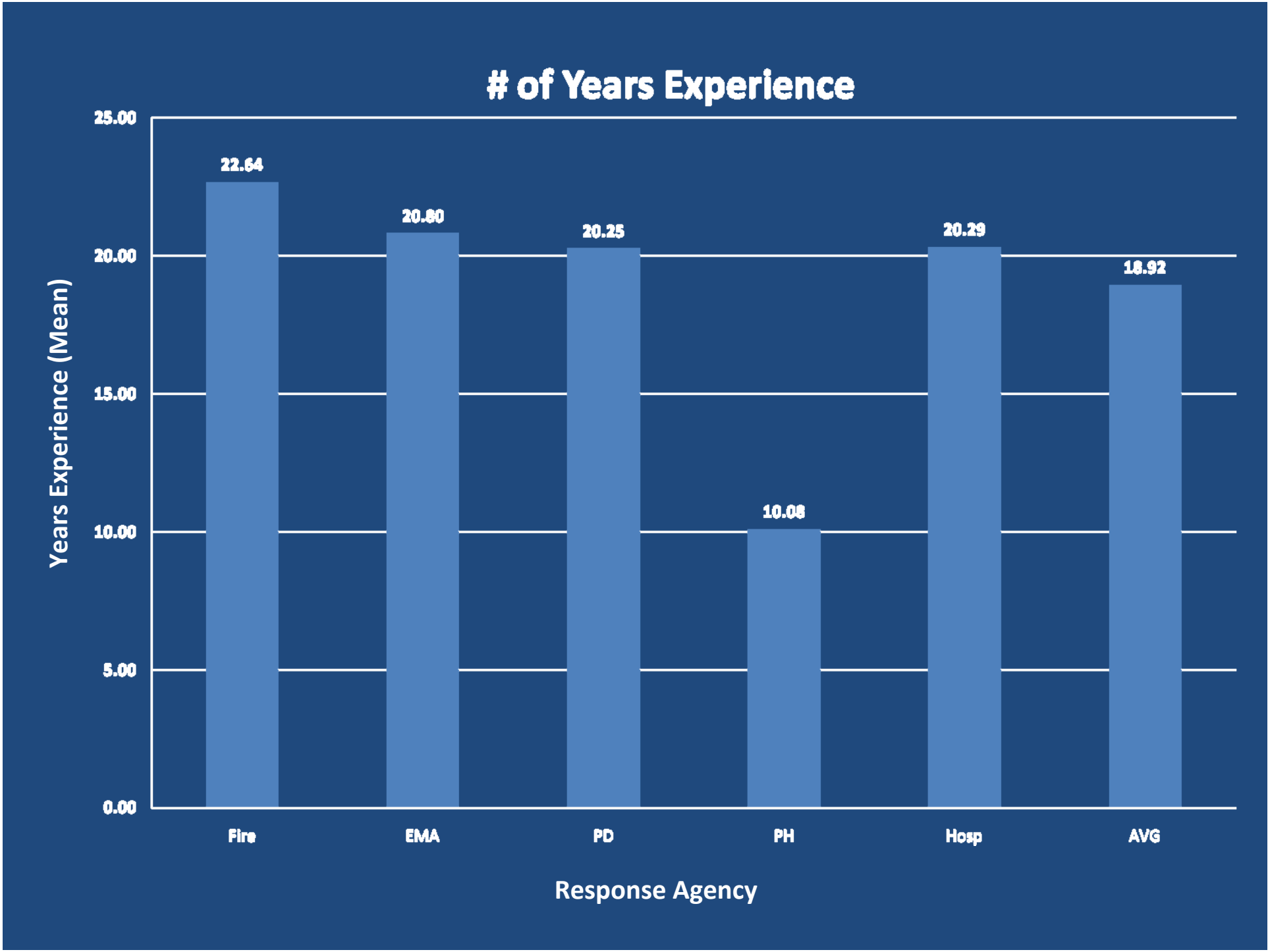


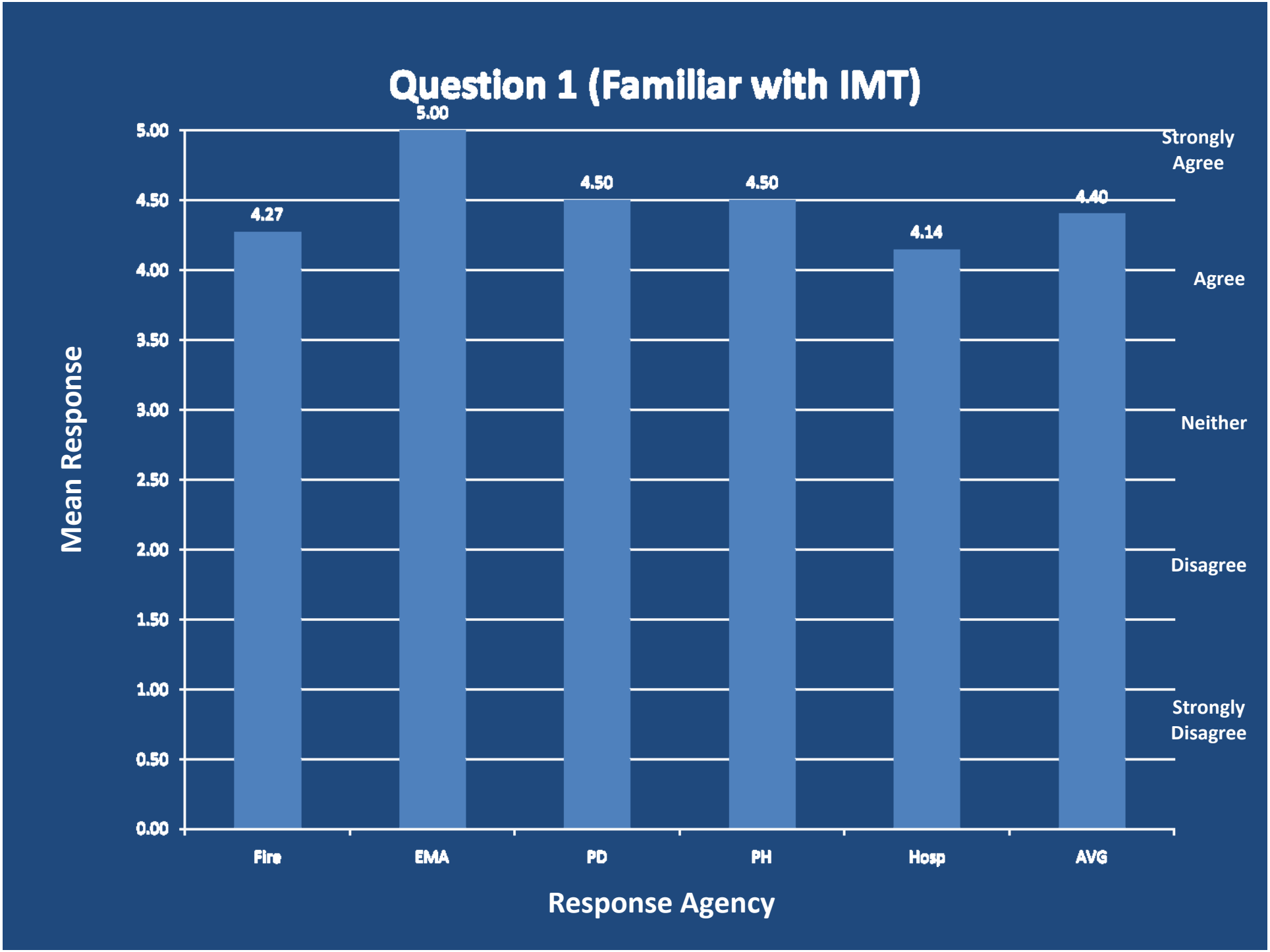
Responses Bad emails No Response

% Response by Agency



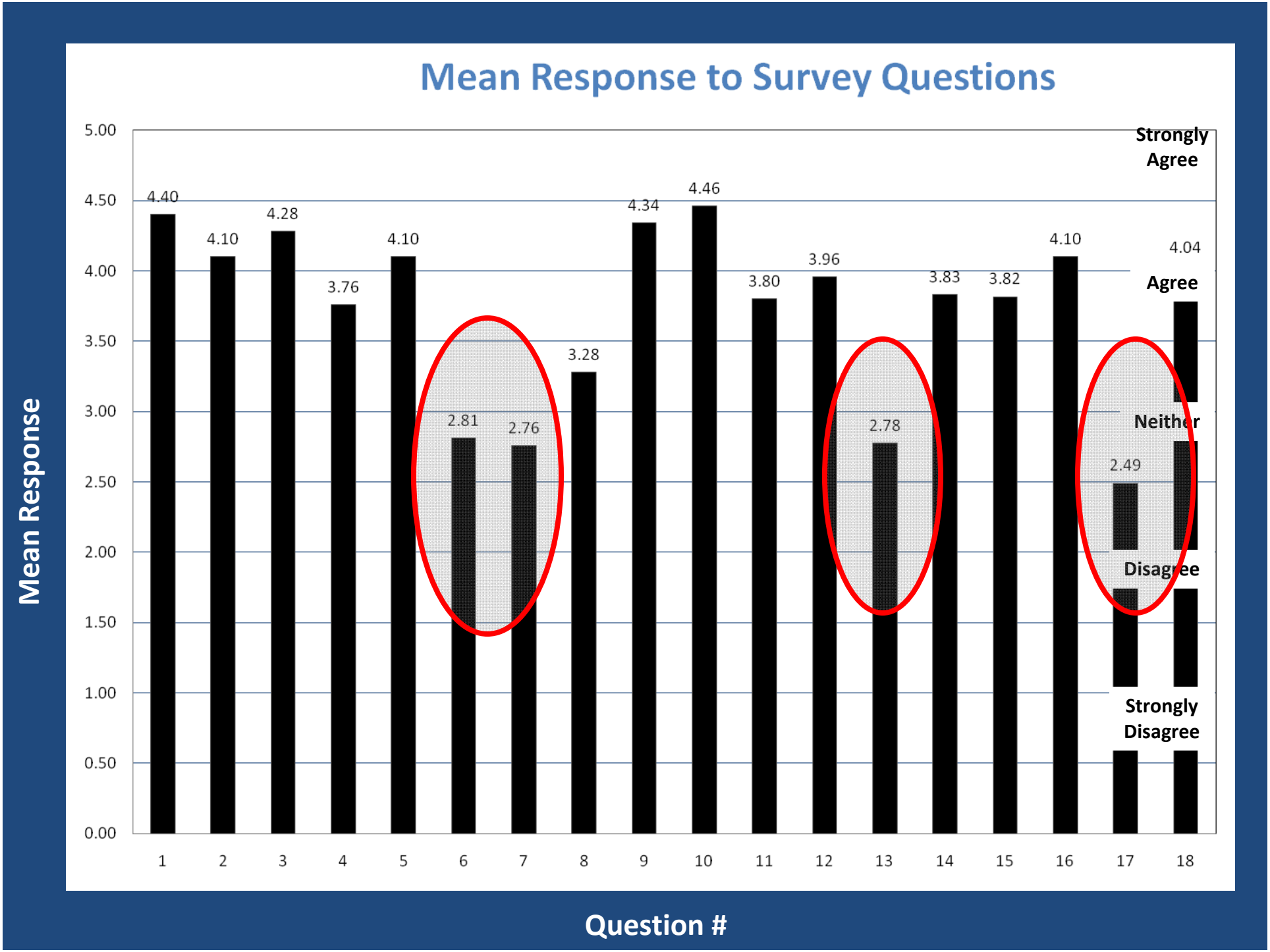
Fire EM Police/Sherriff PH Hospital


# of Years Experience
Years Experience (Mean)
25.00
20.00
15.00
10.00
5.00
0.00
22.64
20.80
20.25
10.08
20.29
18.92
Fire
EMA
PD
PH
Hosp
AVG
Response Agency

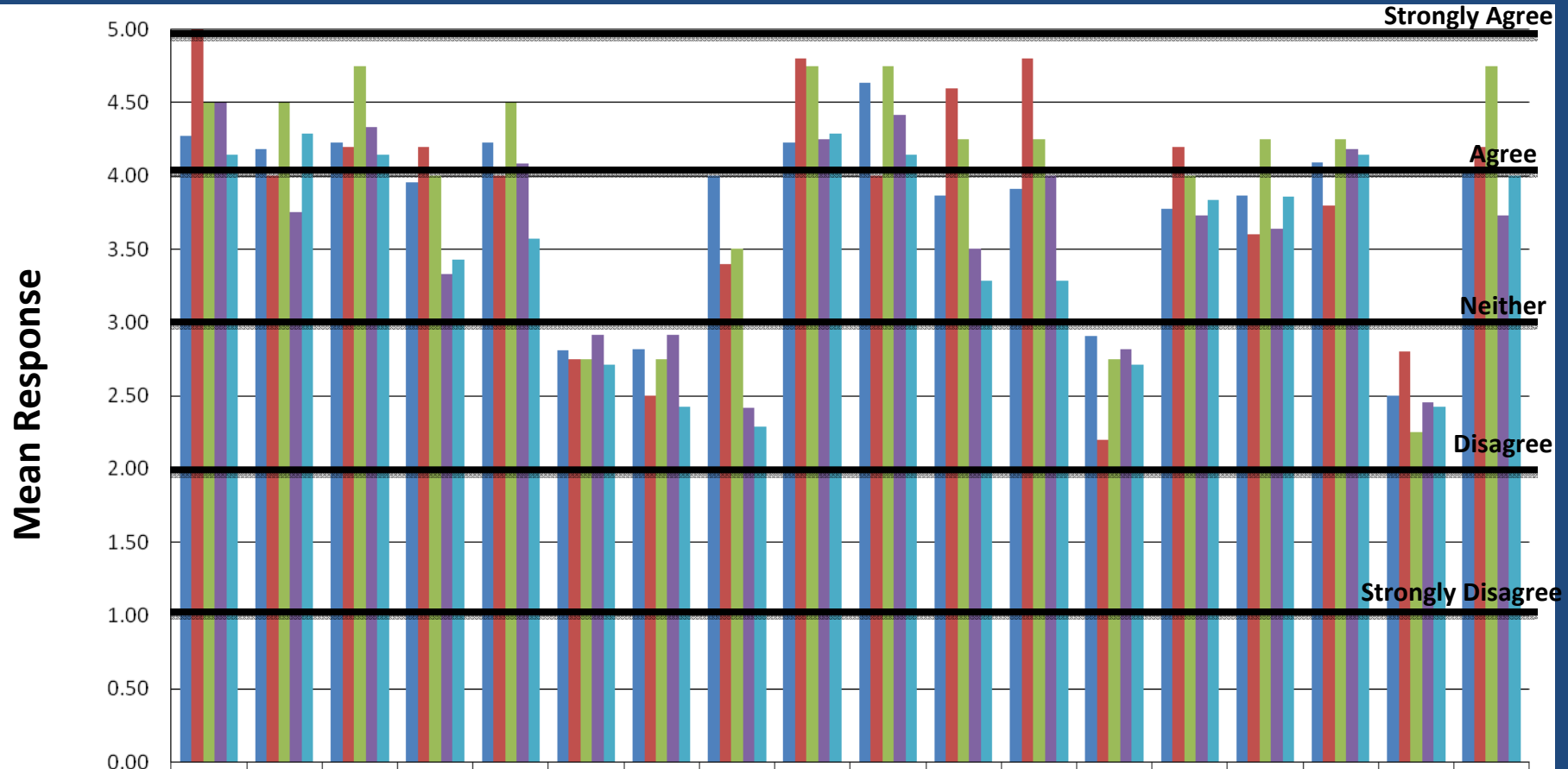

Question 1 (Familiar with IMT)
Mean Response
5.00
4.50
4.00
3.50
3.00
2.50
2.00
1.50
1.00
0.50
0.00
4.27
5.00
4.50
4.50
4.14
4.40
Fire
EMA
PD
PH
Hosp
AVG
Response Agency
Strongly Agree
Agree
Neither
Disagree
Strongly Disagree

Survey

- Overall response good (38.5 %)
  - Rate approximated – email chain effect
- Sample population appropriate
  - Experienced (~19 years experience)
  - Familiar with IMT concept (4.4)
- Fireman dominated (44%)


Mean Response to Survey Questions
Mean Response
Question #
5.00
4.50
4.00
3.50
3.00
2.50
2.00
1.50
1.00
0.50
0.00
4.40
4.10
4.28
3.76
4.10
2.81
2.76
3.28
4.34
4.46
3.80
3.96
2.78
3.83
3.82
4.10
2.49
4.04
1
2
3
4
5
6
7
8
9
10
11
12
13
14
15
16
17
18
Strongly Agree
Agree
Neither
Disagree
Strongly Disagree

Mean Responses By Agency



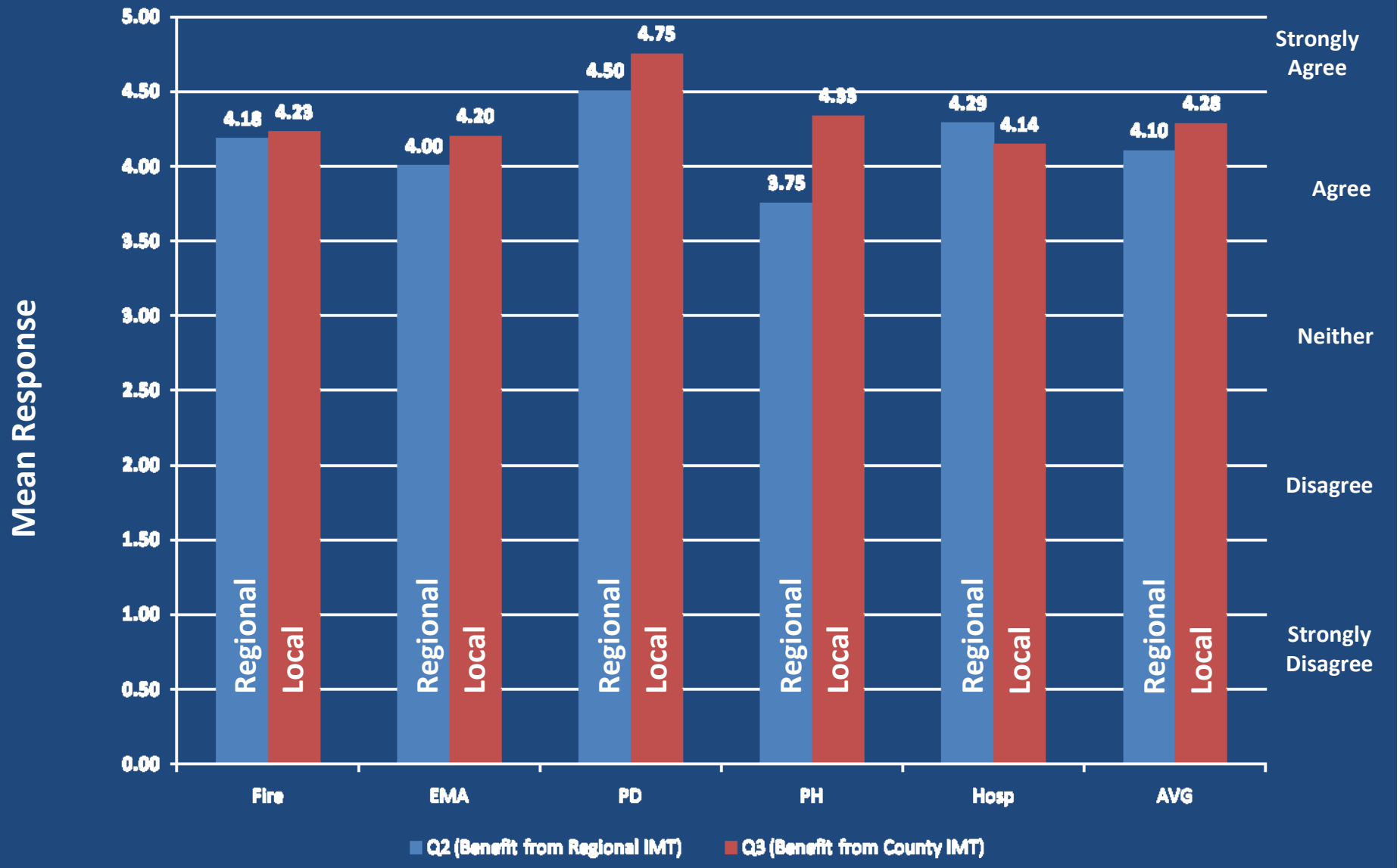
	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18
Fire	4.27	4.18	4.23	3.95	4.23	2.81	2.82	4.00	4.23	4.64	3.86	3.91	2.91	3.77	3.86	4.09	2.50	4.05
EMA	5.00	4.00	4.20	4.20	4.00	2.75	2.50	3.40	4.80	4.00	4.60	4.80	2.20	4.20	3.60	3.80	2.80	4.20
Police	4.50	4.50	4.75	4.00	4.50	2.75	2.75	3.50	4.75	4.75	4.25	4.25	2.75	4.00	4.25	4.25	2.25	4.75
Public Health	4.50	3.75	4.33	3.33	4.08	2.92	2.92	2.42	4.25	4.42	3.50	4.00	2.82	3.73	3.64	4.18	2.45	3.73
Hospital	4.14	4.29	4.14	3.43	3.57	2.71	2.43	2.29	4.29	4.14	3.29	3.29	2.71	3.83	3.86	4.14	2.43	4.00

General Observations

- Agreement that IMTs would be beneficial
- Local IMTs preferred over regional
- Supporting does not equal providing resources
- Ability to handle a large-scale event (neutral)
- Strong support for all-hazards approach and training standards
- Willingness to use local IMT > regional IMT
- Local success can lead to greater regional support

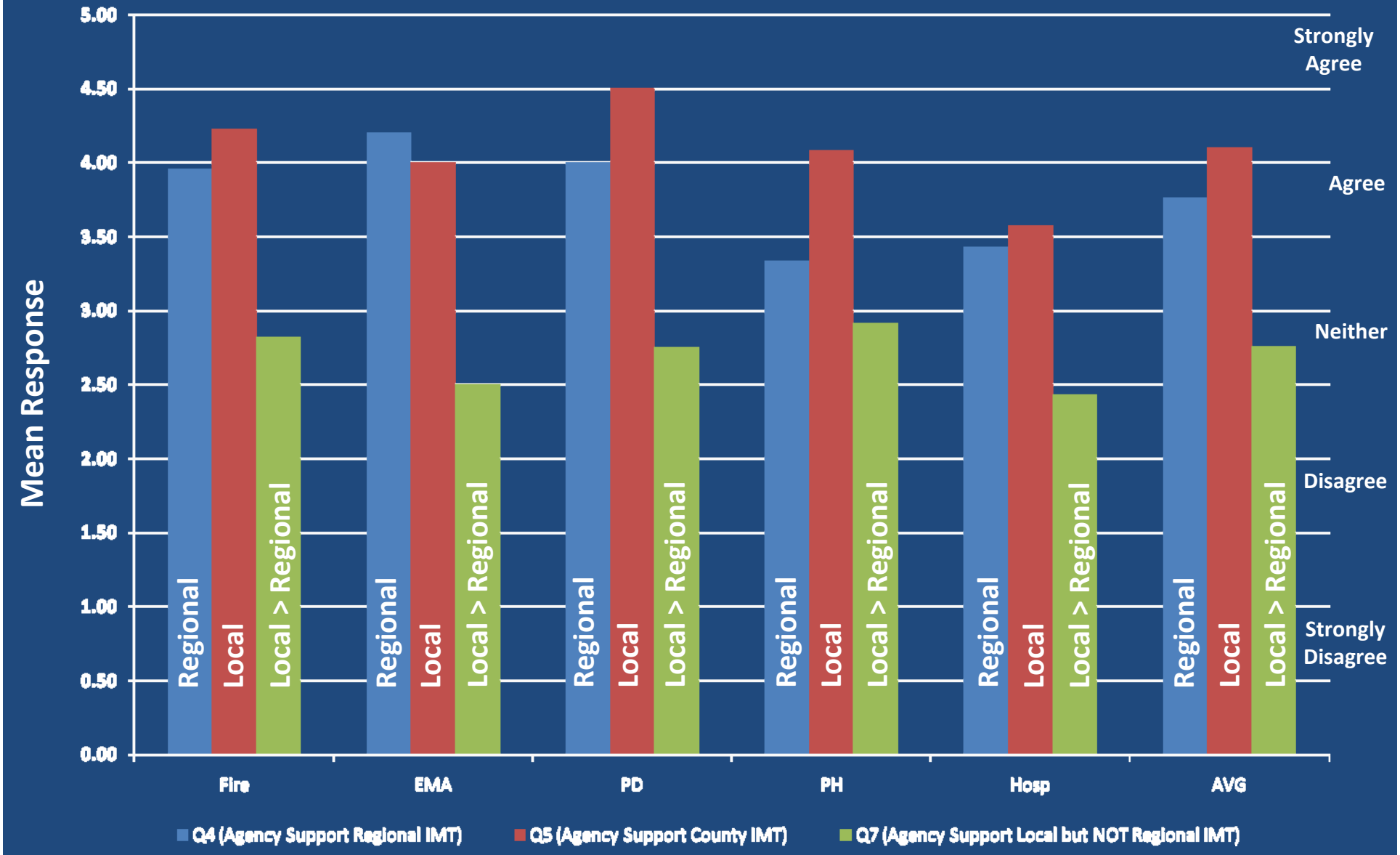
Benefit from IMT (Q2 – Q3)

Regional vs. Local



Agency Support for IMT (Q4, Q5, Q7)

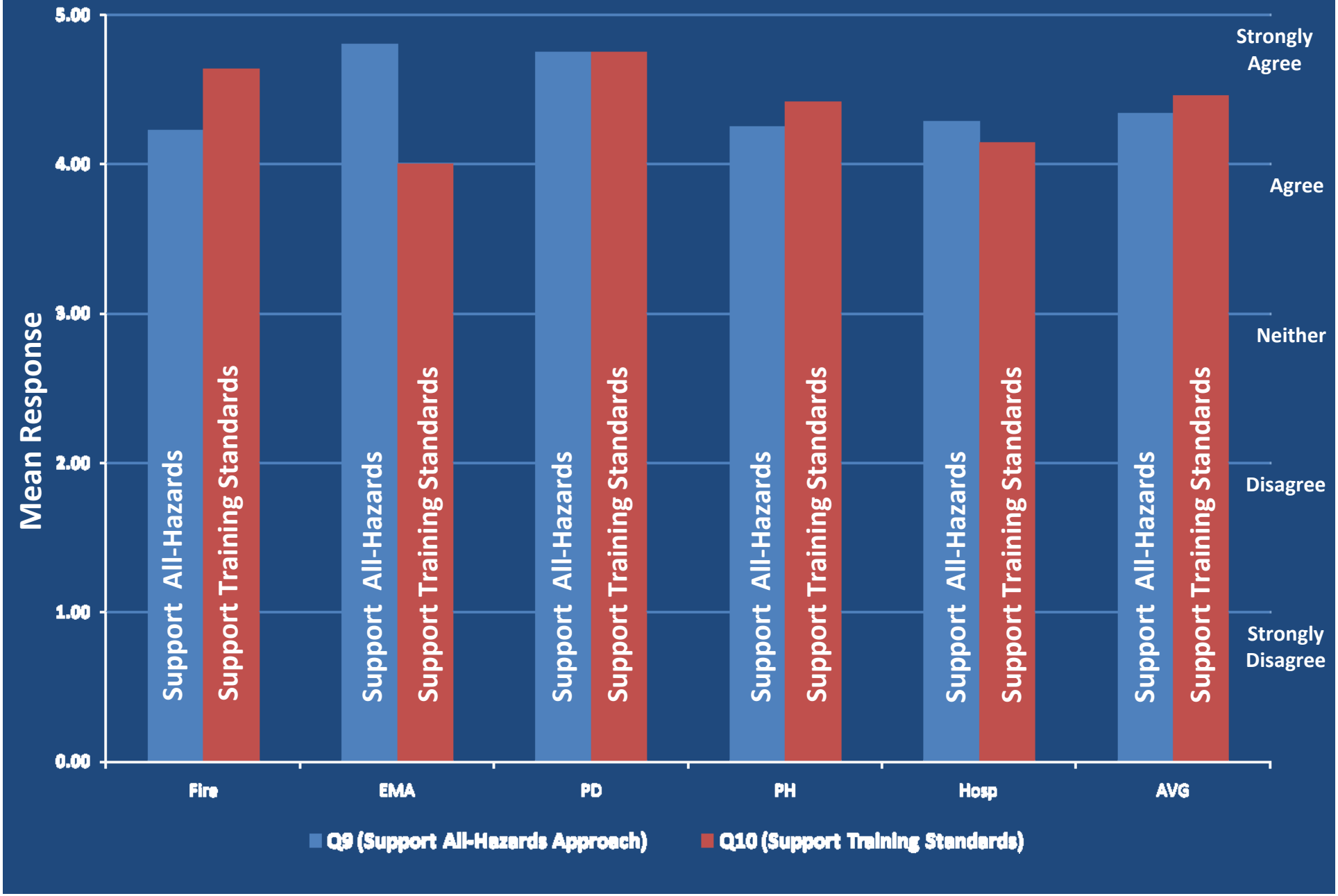
(Regional vs. Local)



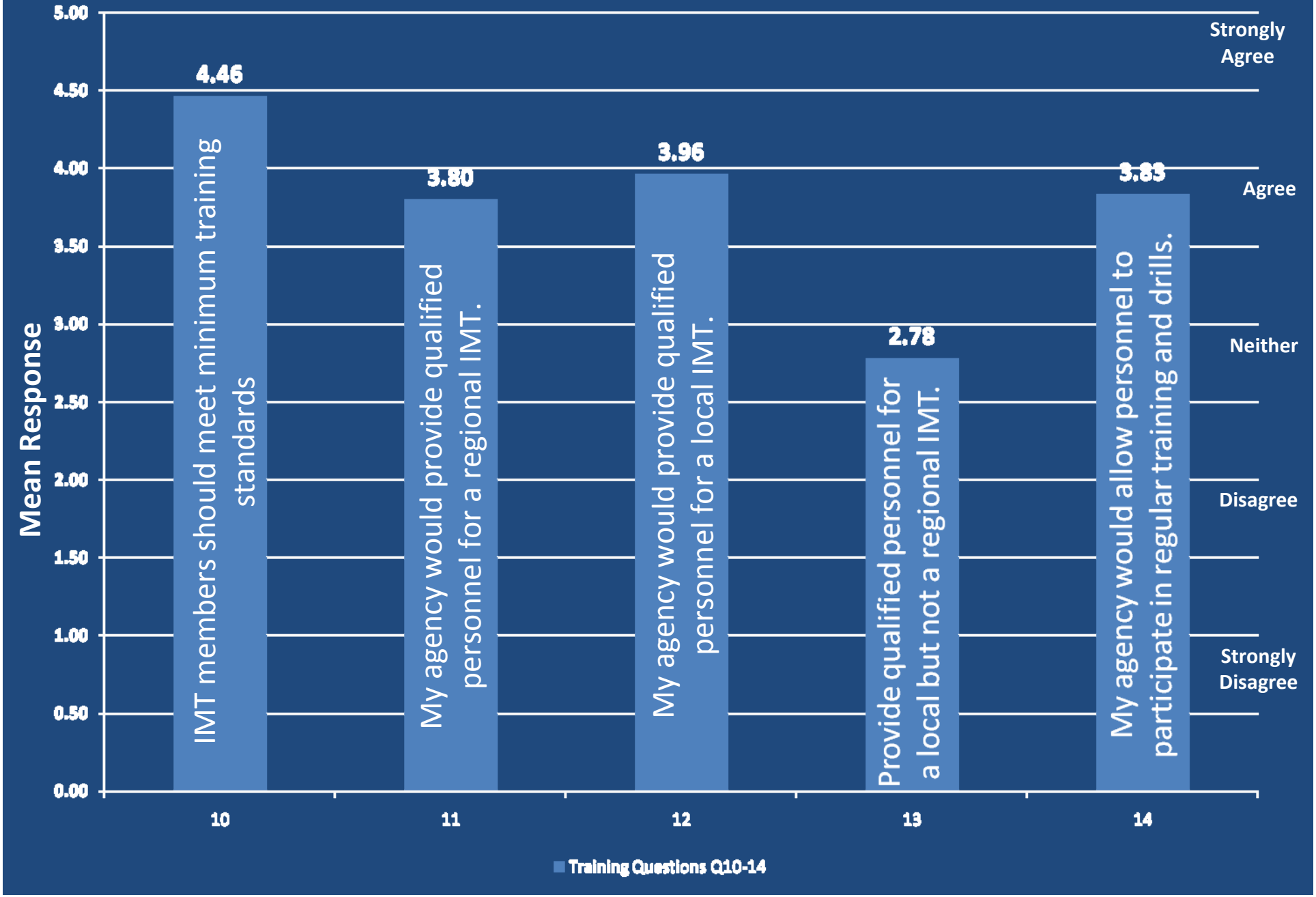
Local or Regional

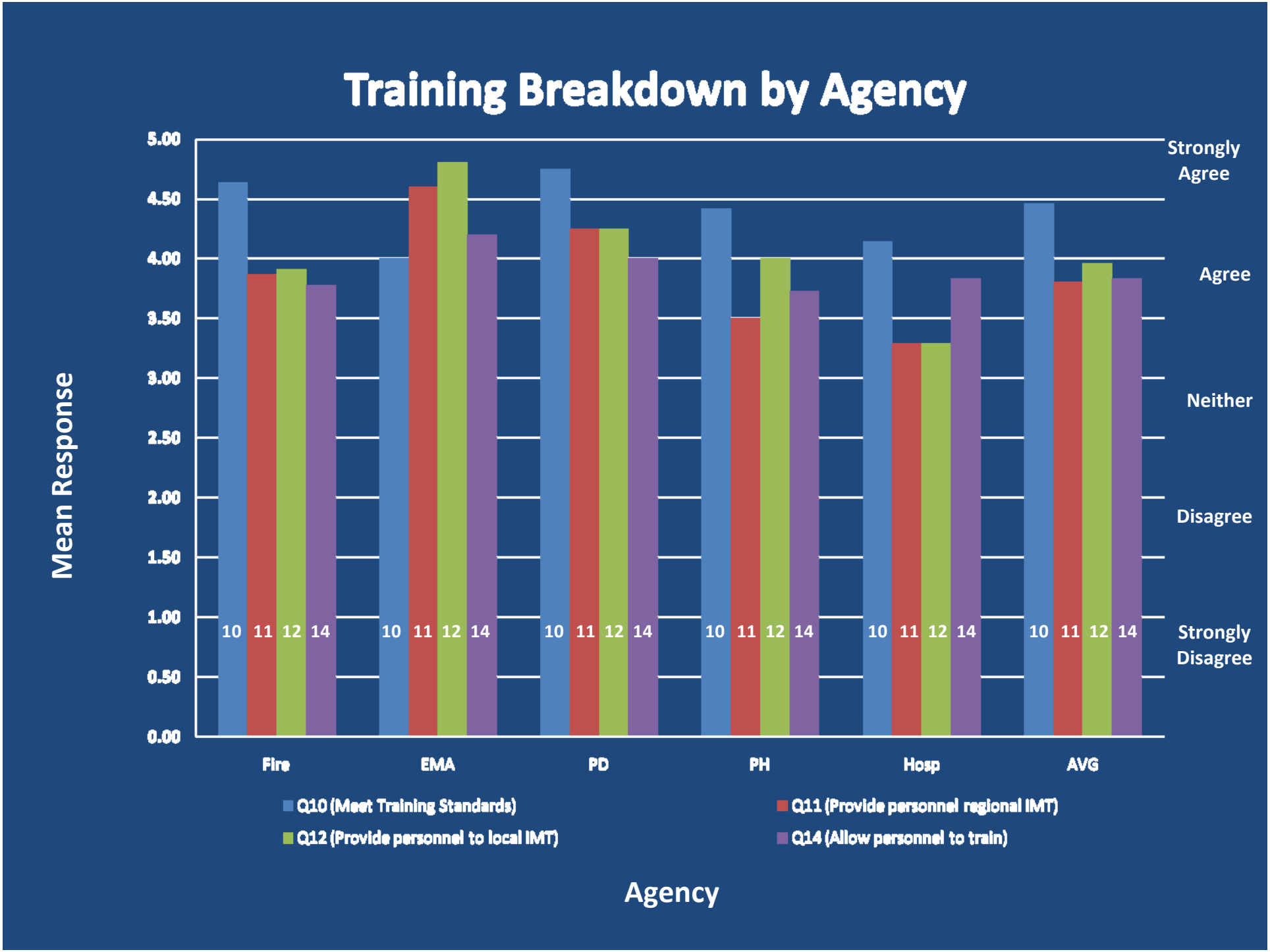
- Local over regional IMT
  - Benefit – local scored higher
  - Greater tendency to support development of local
- Question comparing regional versus local…not very good (neutral results)
- Agency trends (support): EMA/Fire/Law > Pub Health/Hospital

IMT Composition &Training Standards



Mean Responses to Training Questions

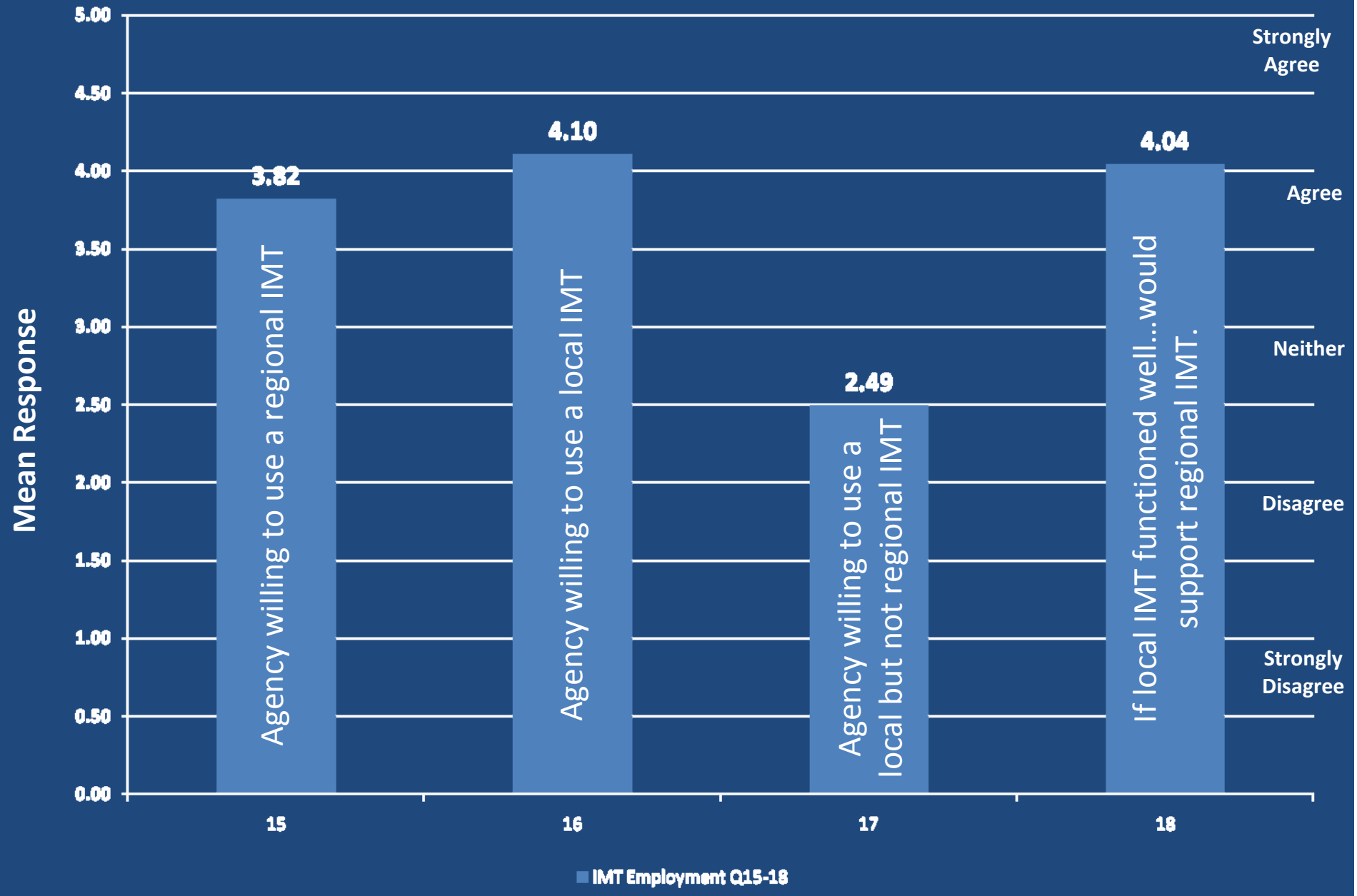



Training Breakdown by Agency
Mean Response
5.00
4.50
4.00
3.50
3.00
2.50
2.00
1.50
1.00
0.50
0.00
Strongly Agree
Agree
Neither
Disagree
Strongly Disagree
10 11 12 14
Fire
EMA
PD
PH
Hosp
AVG
Q10 (Meet Training Standards)
Q11 (Provide personnel regional IMT)
Q12 (Provide personnel to local IMT)
Q14 (Allow personnel to train)
Agency

Training

- Strong support for training standards
- Less support for providing resources
  - Personnel for the IMT
  - Time for training

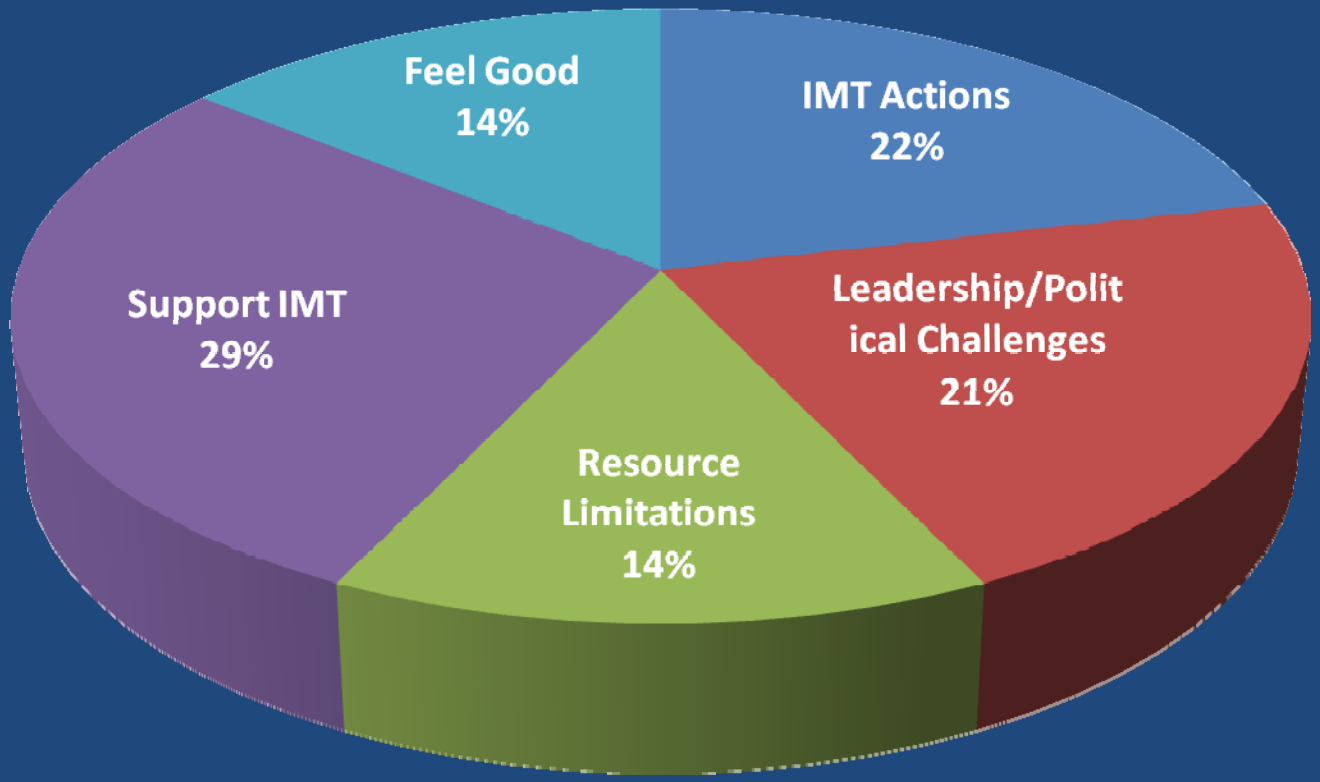
Mean Responses to IMT Employment



Will they use it?

- Preference is towards local IMT
- Supported by verbatim comments
- Anecdotal and literature review indicate trust is a factor

Verbatim Comments



Primary Challenges

- Administration (coordination & synchronization)
- “Political” or jurisdictional challenges
- Building trust
- Resources ($)
  - Money
  - People
  - Time
- Training analysis on-going
  - Focus on teamwork and building trust
  - Notification, activation and deployment

Conclusion

- Plenty of support for IMT implementation
- Resources and trust a challenge
- Break stove-pipe thinking
- Requires leadership & coordination

Portage County Vaccine Clinic/POD
Planning Template

Facility/Agency: Kent City School District – Team A		**Request Date:** 1/15/10
Address: 321 North DePeyster Street	**City:** Kent	**EMS:** Kent
Contact Liaison: Joe Giancola	**Phone:** 330-676-7610	**Phone:**
Location of Operation: Longcoy Elementary 1069 Elno Avenue, Kent OH Grades 1-5	**Time of Operation:** 9:00 a.m.	**Expect Number to Vaccinate** 101
Location of Operation: St. Pats 127 Portage Street, Kent OH	**Time of Operation:** 10:30 a.m.	**Expect Number to Vaccinate** 68
Location of Operation: Walls Elementary 900 Doramor Street, Kent OH Grades K-5	**Time of Operation:** 1:15 p.m.	**Expect Number to Vaccinate** 71
Public Health Nurse Site Coordinator: Karen Towne RN		**Contact Phone:** 330.569.8978 (cell)
Medical Director: Angela DeJulius MD		**Contact Phone:** 330.958.5073 (cell)
Target Phase and Tier to Vaccinate: Phase I-Tier II		**Total Expected Number of Vaccination in District:** 605 (plus staff)
Type Team to be Deployed: (Attach Roster) Rosters Attached		**Number of Teams Needed:** 3 for district

Special Considerations:

- Middle/High School Teachers & staff will be directed to Longcoy from 2:45 pm- 3:15 pm to be vaccinated by Satellite Team C. Elementary school staff will be vaccinated at the end of each Team A/B school clinic.
- Laptops & dose 1 forms will be at consult for dose 2 questions.
- All clinic staff will be notified via Communicator Reverse-911 system in event of school closing.

Please refer to the SOG or your direct supervisor regarding other operations concerns.

EMS Notified: Kent Fire Department	**Contact:** Chief Jim Williams

	Review and Approval	
Incident Command	Medical Director:	MRC Coordinator:
Operations Chief:	Finance Chief:	OHS/EMA Director:
Logistics Chief	PIO:	

Kent Schools Dose 2
Friday, January 15, 2010

Team A	Team B	Team C (2 vaccinators)
9:00 AM Longcoy Elementary 161	9:00 AM Davey Elementary 119	**AM Satellites** *Walls (20)* *(9:00 AM)* *Holden (10)*
10:30 AM [illegible] 44	10:30 AM Franklin Elementary 99	**PM Satellites** *Central (9)* *(1:15 PM)* *Davey (15)* *Longcoy (4)* *(stay for teachers)*
(Lunch at Kent Board Office)		
1:00 PM Walls Elementary 71	1:00 PM Holden Elementary 89	

VRC INFORMATION

LOCATION: PORTAGE COUNTY ADMIN BLDG, RM 134

LOGISTICS: REPORT 7:15 AM, ALL OTHERS: REPORT 8:00 AM

DOSE 2 Kent Schools **Friday, January 15, 2010**

VRC: PCHD Admin Bldg
LOG: 7:15 AM, ALL OTHERS: 8:00 AM

	Team A (Longcoy, St. Pats, Walls)	Team B (Davey, Franklin, Holden)	Team C (All satellites)
Command Staff			
Site Coordinator	Karen Towne	Kim Villers	Rose Ferraro
Vaccine Unit Lead	Kristen Marek	David Tanner	Jennifer Lynde LPN
Safety/Logistics	John Ferlito	John Bradshaw	
Facility Liaison	Annette Petranic	Lynette Blasiman	
[redacted]			
Operations Staff			
Consult	Kelly Engelhart	Sue Mischka	
Consult	Becky Lehman	Sarah Hallsky	
Flow in	Loyd Groves (Driver)	Beth Ahrens (Driver)	
Flow In	Tracey Radovic	Jonette Dembowski	
Flow out/QC	Jack Madved	Ruth Ann Buzzi	
Vaccination Team			
	Jodie Sausaman LPN	Joyce Schaffer LPN	
	Renee Petrovich LPN	Dawn Wiler LPN	
	Trina Woodall LPN	Heather Peel LPN	
	Chris Hyde LPN	Candace Rini LPN	
	Mark Chapple EMT (Ravenna) - *meet at site*	Jeanette Silsby LPN	
		Rick Gray EMT (S'boro) - *meet at site*	

** Driving separately; not on buses*

Portage County Vaccine Clinic/POD
After Action Report

Facility/Agency: Kent School Based Clinic			Date: 1/15/10
Address: 321 N. Depeyster Street		City: Kent	Township:
Contact Liaison: Dr. Joe Giancola		Phone:	Phone:
Day of Operation: Friday		Time of Operation: 9:00 am- 2:00 pm	
Potential Population:	Total Vaccinated: 408 students 50 staff	Injection:	Nasal:
Total Staff: 37	EMA Cost: $ 1,423.00	Public Health Cost: $4,400.00	Contract Nursing Cost: $ 1,750.00

Issues

Site Manager:

- List of students was not correct for Walls School
- One student was injected and had blood-nurse did not do notify Vaccine Unit Leader, student returned with teacher. Sheet was written out and call was made from school home
- EMS did not assist with child at Franklin. Was handled by PH staff.
- Needed to us information of issues with students from the 1st doses in the 2nd dose clinic

Vaccinator Unit Leader:

- No Issues

Logistics:

- Principal wanted location of clinic changes- was done

Safety:

- No issues

Liaison:

- School Administration was very happy and satisfied.g