

**Indiana District 5 Hospital Preparedness Planning Committee, Inc.**  
**Monthly Meeting Minutes**  
**Date: March 8<sup>th</sup>, 2019**  
**10:30am-11:30am (Lunch and Coalition meeting following)**  
**Locations: Moore Restoration, 3610 Shelby St., Indianapolis, IN 46277**

**1. Opening Comments/ Welcome**

- a. **Introductions**
- b. **Sign-in Sheet**
- c. **Approval of January & February meeting minutes**

**Approved by 1st:** David Heiniger

**2nd:** Kevin Sellers

**Approved by all**

**2. Hospital Reports**

**a. Recent Incidents, surveys, exercises**

- i. **Ron Reitenour/ Riverview Health:** shares hospital was close to discontinue flu restrictions but experienced an increase in cases, so have continued restrictions until trends go down. Had ISDH return after “Go Live” of new Riverview Health Westview Hospital. Found expired blood culture, with no questions directed at all towards emergency management.
- ii. **Ron Reitenour & Brent Shepherd attended Plainfield TTX exercise:** Hendricks County looking at contingency’s on ways to response from the healthcare coalition. Two of the neighborhood hospitals have limited staff for daily operations (6-7 people on staff) challenge of establishing incident command and maintaining patient care. Identified gaps in decon and surge within smaller facilities and would need to build contingency’s.
- iii. **Alyssa Lyle/ IUH Health Methodist (MPC) Medical Professional Center:** On Feb 8<sup>th</sup> after our D5 meeting the IUH AHC Police Dispatch received call from employee reporting that they had just got a call informing a bomb was in building between 2<sup>nd</sup>-4<sup>th</sup> floors and was advised to get out of the building to save her life. Dispatch contacted IMPD and property management and all the floors of the MPC was quickly evacuated, from 6<sup>th</sup> floor down. During the evacuation of floors it was discovered that the 3<sup>rd</sup> floor women’s restroom was locked from the inside, but confirmed that locked bathroom was completely unrelated. Working on an AAR/ IP of incident and will be looking at craft more instructional messaging for future alerts.
- iv. **Elaine Baker/ Community Health:** completed move, everything went smooth except for minor IT issues and implemented a 14 hours operational shift with incident command.

**3. Old Business**

**a. EMResource/eICS Trainings**

- i. Training has been scheduled for March 11 and 12, 8-4pm
- ii. There is still availability on both days, if you would like to bring in a back-up/alternate for your facility if you representing multiple hospitals.

- iii. Please bring a charged laptop and encourage bringing in hotspots if have available.

**b. Executive Director Report**

- i. Ron shares had issues with tax exempt status, working with total solutions CPA to get status re-instated, expected to be resolved within the next 30 days.
- ii. Lynne working to draft polices for fiscal functions, procure, document and maintain grant purchase items and will include paperwork for documentation.
- iii. Ron requested information on ISDH Auditing and will have extend the time frame.
- iv. Lynne will have to confirm receipt of grant purchases from last year.
- v. Moving forward Leslie will be emailing letters of approval or denial and when receive requests will need a signed and dated packing slip.
- vi. No purchases will be made without the signed letter of approved requests.

**d. ASPR Grant Project Requests**

- i. Received approval/ denial justifications feedback form ISDH.
- ii. Next week- (approval/denial) letters and MOU's to be sent out to include agreement for managing grant items that coalition will be purchasing and owning.
- iii. Lynne will be sending out purchase order receipts from last grant year for hospitals to confirm and document received grant items.

**e. Evacuation**

- i. Executive Board has approved Eskenazi Hospital's (Justin Mast) grant submission of Evacuation Training (EM Solutions through Grainger) and will share out more information once arrangements made with vendor.

**f. Coalition Surge Test**

- i. Leslie sent out request for the collective coalition's facility's licensed bed of testing evacuation of 20% of the acute care beds of coalition. Leslie reports that 1,000 is the 20% of the 5,000 total beds.
- ii. The Executive Board selected Vantage Point's proposal for surge test and ISDH has approved.
- iii. Leslie will be the lead on planning team and will reaching out to recruit team members as well as determine which facilities will participate.
- iv. Deadline of June 30<sup>th</sup> and have exercise conducted by June 1.
- v. Will be requesting for onsite evaluators during surge test.
- vi. Ron reminds the HPP group that we will be working through the challenge of the "Low No-Notice" requirement of giving our Coalition Surge Test participating hospitals a two week window of the of when surge test will occur.
- vii. Kevin explains that participating hospitals will need to practice at the minimal of a table top exercise which will include a test of the training.
- viii. Suggested to build a Surge Test Model to help in planning for this annual requirement moving forward for the next 5 years.
- ix. Ron requests HPP members to determine who can participate in Coalition Surge Test so can form an initial planning meeting to create objectives, recruiting evaluators and planning timeline.

**4. New Business**

**a. Open Discussion**

- i. Kara Solomon/ St. Francis Franciscan shares to working with her rehab centers who are certified by CARF (Commission on Accreditation of Rehabilitation

Facilities). She shows interest for St. Francis Franciscan Rehab to participate in Coalition Surge Test and questions if tested Evacuation with rehab centers with training with video and practice.

- ii. Ron explains the coordination and transportation of a mass evacuation of 20% of the collective coalition licensed beds of patients, has not has an incident that ever had to test evacuation at this magnitude. Encourages Kara to continue to pursue interest with practicing with coalition. Ron suggests to include nursing homes, ASC's and other patient care centers since is more of a realistic approach.
- iii. Ron explains that coalition will continue to utilize LiveProcess until it was determined that we are comfortable using the new platform.
- iv. Ron advices HCC members' to have hospital liaison notify D5 Officer on call for situational awareness and coordinate with local county ESF-8 for direct resource requests and more concepts will be established once we build out the response plan.
  - i. Kevin Webb explains the importance of knowing the drill requirements for your accrediting agency.
    - i.e. Joint Commission, HFAP (Healthcare Facilities Accreditation Program)
    - CARF (Commission on Accreditation of Rehabilitation Facilities).

**5. Next Meeting**

**b. April 12, 2019 (10:30am-11:30am)**

**Motion to adjourn meeting approved by 1<sup>st</sup>: Angie Miller**

**2<sup>nd</sup>: Jason Erlewine**

**Approved by all**