Meeting Minutes: Western Mass. Health and Medical Coordinating Coalition

VOTING MEMBERS:
Ann Shea, Hospitals
Bruce Bussiere, Hospitals
Brian Andrews, EMS
Carrie Matusko, CHCs
Beth Brett, CHCs (serving alternate)
Jeanne Galloway, Local Public Health
Nicole Zabko, Local Public Health
Patricia Haner, Long-Term Care

NONVOTING MEMBERS:
Lucy Britton, Hospital Alternate
Gail Bienvenue, MDPH
Michael Nelson, MDPH

HMCC STAFF:
Tracy Rogers
Mark Maloni

GUESTS:
Bob Barry, MEMA
Bonnie Roy, MEMA

Agenda Items | Notes
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1. Review agenda/introductions | Jeanne called the meeting to order at 2:07pm.
2. Approve minutes from November 2016 Steering Committee Meeting | Moved by Brian, seconded by Bruce, to accept the November minutes as written. Passed with one abstention.
3. Updates
   a) Standing Committee Update
   b) April Full Coalition Planning
   c) BP1 | a) Ann reviewed both standing committee initiative tracking sheets. No questions or feedback from the Committee. Mark indicated the challenge of the committees is finding meaningful work for collaborators/committee members that adds value to the Coalition without overburdening them. Thus far, many tasks are falling to coalition staff. If this was to continue to be the case, the standing committees will have a more advisory role, and would likely convene less often.
   b) Staff reviewed the upcoming agenda. The current Steering Committee meeting schedule doesn’t allow for much time between the Steering Committee meeting and the Full Coalition meeting. In the future, staff will strive to provide a digital update to allow for a greater amount of time for Steering Committee feedback.
   c) BP1 updates.
      1. PHEP funding for the region is level funded by OPEM, but follows a new allocation formula for the subregions (based on the population and number of towns within each subregion), which benefits Berkshire, Franklin, and Hampden counties, to the detriment...
of Hampshire County.

2. Budgets and workplans will be due a little later for hospitals, exact date TBD.

3. High-level changes for BP1 include: more formal integration of emergency management into the HMCC; creation of a preparedness plan that speaks to how the Coalition will achieve short and long-term goals (this is the coalition operational plan, as opposed to the emergency coordination plan); jurisdictional risk assessment efforts will carry into BP1; efforts toward greater med surge planning for the HMCC.

4. Review of exercises and events
   a) Duty Officer Questions/comments
   b) 2/9 and 2/12 snowstorm
   c) Holyoke EDS Drill (Jeanne and EMS)

   a) Tracy reviewed the duty officer program progress since November. A few utilizations of the duty officer provided staff with the opportunity to debrief and refine procedures.

   b) Tracy reviewed winter weather incidents in regards to the Duty Officer program as well. Ultimately, the feedback is thus:
      1. There is room to further refine contact efforts; to the maximum extent possible, avoid blasting the full coalition unless such action is truly necessary.
      2. Being clear with contacts what action is being asked of them reduces confusion. This messaging might change with each discipline or region.
      3. There is also balance to be struck in terms of respecting the duty officer’s time and ability to craft multiple messages to the region.
      4. Indicating that we will assume everything is good/operational unless we hear otherwise is a good way to reduce the reporting burden of our members.

   c) Jeanne gave kudos to the fine work of EMS during the recent Holyoke EDS drill.

5. Protocols.
   a) Coalition use of HMCC database
   b) Disciplinary documents hosting on HMCC webpage

   a) The Steering Committee agreed to proposed guidelines that we will not use our contact database for non-HMCC related communications (i.e., we will not send training opportunities that are not related to preparedness or response).

   b) The Steering Committee also discussed the HMCC webpage function and the request by the WAG to host documents relating to public health SOGs on the HMCC webpage. Slightly different conversation than above, as in this regard, the issue is not so much one of preparedness and response content, and more one of overall HMCC brand/role. Steering Committee felt that no other disciplines would utilize the webpage for document hosting, and that sufficient resources exist elsewhere for online promotion of public health preparedness materials.

6. Business not reasonably anticipated 48 hours prior to the meeting.

   None.

7. Wrap up and adjourn

   Carrie moved to adjourn, Brian seconded, passed unanimously. Meeting adjourned at 3:52 p.m.