

Agenda

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- ▶ Minutes Review/Approval
-
- ▶ Follow Up/Update From Last Meeting
 - ▶ Hydrogen Peroxide Vaporizer Training- APIC Meeting
 - ▶ TACN Update- Steve Hamby
 - ▶ Surge/Flu Update
 - ▶ Please sign up on website, if you haven't already
-
- ▶ 2018 HVA
 - ▶ Please use new template
-
- ▶ Coalition Assessment Tool (CAT)
-
- ▶ Evacuation Full Scale Exercise Update
 - ▶ Evacuating Facilities/Non-evacuating facilities
 - ▶ Patient Tracking
 - ▶ Any evaluators needed at non-evacuating facilities?
 - ▶ 2 week notice letter to go out April 16th
-
- ▶ EmPower Data/Social Vulnerability Index
-
- ▶ Subcommittees
 - ▶ CMS17 Updates
 - ▶ Budget
 - ▶ Exercise
-
- ▶ Stop The Bleed
-
- ▶ Regulatory/Compliance Update (Joint Commission, CMS, TDH, TOSHA, etc.)
-
- ▶ Real Event/Exercise/Training/Conference Attendance/Lessons Learned
 - ▶ Evacuation Tabletop Exercise
 - ▶ Training:
 - Environmental Hygiene Cleaning and Disinfection Training
 - Renovation and Maintenance Best Practices in Health System Facilities
 - REAC/TS Classes
 - Emotional Life Trauma Support Training
 - FEMA Health Sector Emergency Preparedness Course
 - Dialysis Technicians Class
 - TEEEX PER 211 Medical Management of CBRNE Events
-
- ▶ Other
 - ▶ Newsletter Distribution
 - ▶ Warehouse
-

Agenda

- ▶ Upcoming:
 - ▶ April
 - (Between 16-27 lo/no notice exercise)
 - 11: Hospital Evacuation
 - 17: LTC Evacuation
 - 18-20: Emergency Management of Georgia Summit and Training
 - 27 Coalition Evacuation Exercise Facilitated Discussion
 - ▶ May
 - 8 Coalition Meeting
 - 8-9 Pediatric Disaster Response and Emergency Preparedness TEEEX (MGT-439)
 - 15th First Water Purification System Training
 - 16th First Water Purification System Training
 - 25th Hospital Emergency Department Management of Radiation Accidents
 - ▶ June
 - 12: Coalition Meeting
 - 14: CMS17 Quarterly Meeting
 - 24-30: Anniston Training/Integrated Capstone Exercise: Healthcare Leadership Course
 - 25-30: Anniston Training/Integrated Capstone Exercise: Hospital Emergency Response Teams
-

Minutes

Start: 2:30 – End: 4:00
 Minutes Review/Approval
 Rose Mesa-second
 None Opposed

Follow Up From Last Mtg. | Wanda Roberts

- Hydrogen Peroxide Vaporizer: Nobody who attended the APIC meeting discussion was present, but it seems only one of the other facilities is interested in using the equipment. We will host training for UT staff. As a reminder, if you are not trained on this unit, you cannot use it at your facility. When the training is scheduled, we will let everyone know in case others become interested.
- TACN Update: Steve Hamby not at meeting, but advised that there has been little progress made on this at the state level. He will try to have an update by our next meeting date. (This communications project will be for the 2018/2019 fiscal year).
- Flu/Hospital Surge Update: Hospitals are full, but not from flu.

2018 HVA | Wanda Roberts

- Group voted to use the new Kaiser Permanente template (You can find template and instructions here: <https://www.calhospitalprepare.org/post/revised-hva-tool-kaiser-permanente>)
- Group set date of June meeting for submission deadline. Please send to Charity and Wanda when you've completed for your facility so we can begin working on the regional HVA.

ACTION ITEMS	PERSON RESPONSIBLE	DEADLINE
Complete and send HVA to RHC	All	June 12, 2018

Coalition Assessment Tool (CAT) | Wanda Roberts

- Each coalition was asked to complete an online self-assessment by March 31st. This tool was designed to gauge the Coalitions current status against the 2017-2022 Health Care Preparedness and Response Capabilities. The tool will be used to establish a baseline for the next 5 year period for Healthcare Coalitions, with no expectation any coalition would be 100% on all capabilities.
- Upon completion, our coalition did very well.
 - Capability 1: 89% of requirements met
 - Capability 2: 70% of requirements met
 - Capability 3: 87% of requirements met
 - Capability 4: 89% of requirements met
 Some areas we will be working on in the upcoming four years include: Strategies to protect health care information systems and networks, response plans, and we will work on some of the supply needs indicated from the assessment.
- For further details, you can see a summary here: <http://www.ketcoalition.org/wp-content/uploads/2018/04/CAT-Report-2018.pdf>

Evacuation Exercise Update | Tonya Shott/Marcus Sheppard

- We are using the patient tracking system and everyone will be classified as follows:
 - Critical-vent
 - Critical- non vent
 - Everyone else

- Central office IT staff will be present at Blount Memorial, Parkwest and the RMCC to observe/assist with the patient tracking system.
- If you aren't evacuating, you should plan on participating by accepting patients. If you stand up your IC, you can count this as one of your FSE. We will need everyone to log onto HRTS and update bed numbers.
- This is a low-notice exercise, but date range is between April 16-27th. A 2 week notice letter will be sent to emergency management on April 16th. You can share as needed at your facility, making sure upper management is aware.
- Coalition Surge Test Exercise Facilitated Discussion (Hotwash) will be April 27th 11:30-1:00. You can register here. <http://www.ketcoalition.org/calendar/coalition-surge-test-exercise-facilitated-discussion/>. Please encourage upper management to participate in this discussion. We will try to set up a conference call line. Lunch will be provided
- Blount Memorial has worked with Central Office and their IT staff to make the patient tracking system more user friendly and applicable for their facility. They have their own log in and will be able to upload patients and track to final destination. Parkwest and Turkey Creek have their own log in, but for this exercise, they will be using the east log in.
- We can host a training with central office if anyone would like. Please let Wanda know.

EmPower Data/Social Vulnerability Index | Wanda Roberts

- Central office has provided updated information from the EmPower data system. This information can be found: http://www.ketcoalition.org/wp-content/uploads/2018/04/KnoxEast_emPOWER_Mar18.pdf. This information is provided by Medicare and is intended to provide information prior to, during, or after an incident that may adversely impact at risk individuals. (For more generalized information you can visit the EmPower website at: <https://empowermap.hhs.gov/>. Tennessee has 1,215,415 beneficiaries on Medicare benefits, with 83,501 being electricity dependent beneficiaries. Having this information during an event would enable quick identification of those high risk individuals. Other information that can be provided is dialysis patients, home health recipients, and oxygen dependent. If interested in more detailed information, please let your RHC know.

Subcommittee Discussion

CMS17 Updates

- | Group 1: Long Term Care: No updates
- Group 2: Home Health: Not present
- Group 3: Ancillary : No updates
- Group 4: HAM class very successful: Great pass rate. Radios are being programmed and will be distributed soon with training session for use.

Budget Committee: We need to set up a meeting. Currently: Trish Polfus, David Walton, Janet Rowe, John Brinkley, Charity Menefee and Wanda Roberts are on this sub-committee. Opened floor for other volunteers. Rose Mesa volunteered. This will be to discuss the 2018/2019 budget period. Wanda will send out dates and get meetings scheduled.

Planning/Training Committee: Asked for volunteers for the upcoming year: Tonya Shott, Paul Parsons, David Walton, Janet Rowe, Rose Mesa volunteered. Wanda will send out dates for upcoming meeting.

If anyone is interested in participating, please let Wanda/Charity know.

Stop The Bleed Discussion | Jenny Holden

Jenny Holden, Gigi Taylor, Charity Menefee and Debbie Tuggle recently met to discuss this project. We will be partnering with Homeland Security, who is already planning active shooter drills in each county. Homeland Security is looking into providing two training kits for each county. The coalition approved moving forward with this project, with the coalition providing "Stop the Bleed" kits for each public school. This will be around \$122,000.

As a reminder, the "train the trainer" classes will be taught by UT. Past that, this will become a county project, working with our Coalition members and partners to provide the training to the schools. We are asking each hospital to actively participate in their county project when it is scheduled. As this project unfolds, we will provide more information.

The Regional PIO group will meet next week and they are being advised of this project as well, so your hospital PIO will also be involved in promotion of the hospital, coalition and the community partnership to bring this program and awareness of our impact to your local schools.

John Brinkley provided an email since he was unable to attend regarding the Knoxville "Stop the Bleed" push. "We had good turnout for Stop the Bleed in East Tennessee on 31 March. Thanks to all that participated and made this a

success - UT Medical Center, AMR Knox Co/Blount Co/McMinn Co, Knoxville Fire Department Rural Metro Fire Department, Knox Co Sheriff's Office. It was good for our communities.

Total trained 505

- West Town Mall 295
- Athens Walmart 120
- Market Square 50
- Alcoa Walmart 40

Regulatory/Compliance Update (Joint Commission, CMS, TDH, TOSHA, etc.)

All

- Recent visit to a LTC facility. No citations for emergency preparedness. They were prepared with their tabbed notebook, all information readily available for the surveyor.

Real Event/Exercise/Training/Conference Attendance/Lessons Learned

All

- Environmental Hygiene and Disinfection Training: hospital and CMS17 staff really enjoyed it. It was a good opportunity for training in an area needed and hard to find training for.
- Renovation and Maintenance Best Practices in Health System- Good class and group would like to see it offered again. There were issues that some of the Joint Commission codes that were presented were incorrect (they were using international joint commission codes, which are not the standard used in the United States). Instructor was advised so this should be corrected.
- REAC/TS class. Great turnout and students were positive about the training.
- Emotional Life Trauma Support- Nobody in the meeting attended, but Wanda heard back from several participants that it was a very well-received and needed training. We've already had requests to provide this again (this is applicable mainly to EMS and other first responders with per person cost.)
- FEMA Health Sector Emergency Preparedness Class: Good 30,000 foot view. Not much offered as far as specifics. Wanda has extra manuals from the class if anyone is interested, let her know.
- TEEEX CBRNE class: very good.
- We have 5 upcoming conference presentations:
 - Georgia Emergency Management Association Summit and Training
 - Training and Retention of Hospital Decon -Teams/REAC/TS: David Walton/Angie Bowen
 - The Team that Plays Together, Saves Together: Janet Rowe, Wanda Roberts
 - "You've got to be "KID" ing: KET Coalition Pediatric Project: Oseana Britton, Charity Menefee
 - Navigating the Murky Waters Between CMS and the role of the Coalition: Charity Menefee
 - Maine Emergency Management Association Summit and Training
 - Gatlinburg Wild Fire Event: Phil McDaniel

Ongoing Surge Event

Wanda Roberts

Update from facilities indicated there are still critical capacity issues. Group consensus was to continue HRTS reporting 4 times/day. AMR Knox County – There are ED delays. AMR currently has a surge program with UT, Fort Sanders and PRMC – if they get patients waiting more than 2 hours, they will start offloading patients and leave one staff per 5 patients (at times, that's 3 or 4 hours they may have to wait but it gets trucks back in service). Steve Hamby requested facilities show patience when waiting for EMS transport, as they are busy too.

- Wanda reminded group that cache ventilators are available if needed.
- Rose Meza reminded group that skilled nursing facilities could be looked at for bed placement if needed.

Upcoming Trainings/Meetings/Exercise (Information for each training can be found on our website at www.ketcoalition.org)

All

- ▶ April
 - (Between 16-27 lo/no notice exercise)

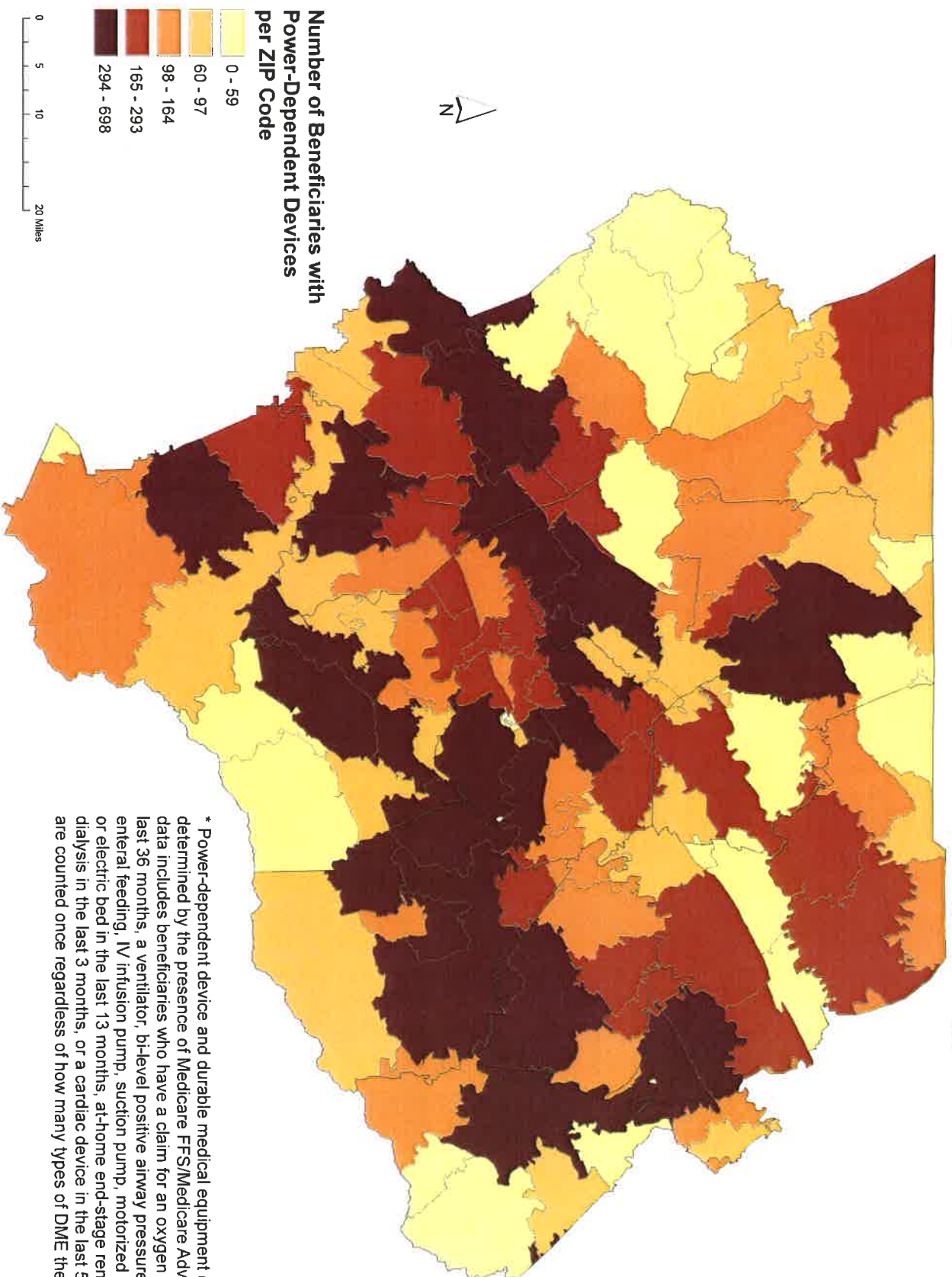
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Other

All

- Newsletter: Thank you for distributing. Please remember to cc Wanda on the distribution list
- First Water bags (one was passed around). We have 2,000 in warehouse. What does the group want to do with them? Group decided to keep stored at the warehouse with the First Water system. Trish Polfus suggested we split them up into groups of 50-100 and put them in “Go Bags” so they will be readily accessible. Wanda will work with Marcus and David (who are on the warehouse sub-committee) to get the bags ordered so that can be done.
- Warehouse: We have a lot of supplies that have not been picked up by facilities. Some facilities are ineligible, according to the by-laws because they have not attended Coalition meetings. There are others who are eligible but have not picked up. Group was asked for suggestions.
 - It was discussed, motion was made and approved that we give 90 days for supplies to be picked up. During that 90 day window, we give those who are ineligible the opportunity to come to the next three meetings. If they show interest in doing that, we should waive the by-laws attendance requirement for this one time and let them get their supplies. If they do not attend, or whatever is left over after 90 days is distributed to the other facilities.
 - Group suggested that from this point on, facilities are given 90 days to pick up items, then they are distributed to others who are active members.
 - If they need transportation assistance, then the other facilities offered to assist.
 - Wanda will wait for Charity to return before moving forward with this.
 - The CMS-17 group also asked for access to these supplies if not picked up by the hospitals. Review of the by-laws and additional review/discussion will occur.

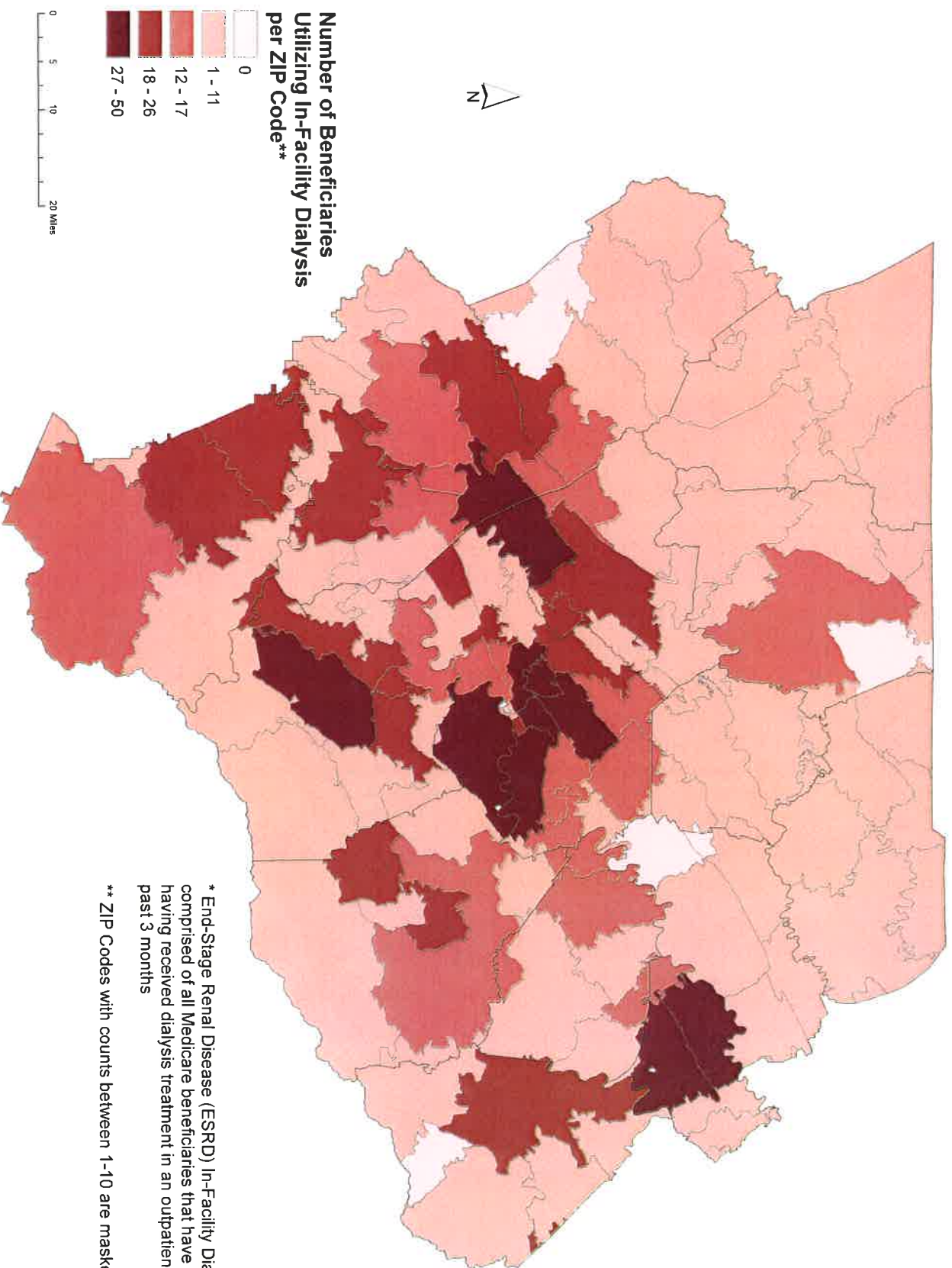
Medicare Beneficiaries with Power-Dependent Devices* in the Knox/East Tennessee Healthcare Coalition, March 2018



* Power-dependent device and durable medical equipment (DME) use is determined by the presence of Medicare FFS/Medicare Advantage claims. This data includes beneficiaries who have a claim for an oxygen concentrator in the last 36 months, a ventilator, bi-level positive airway pressure device (BiPAP), enteral feeding, IV infusion pump, suction pump, motorized wheelchair, scooter, or electric bed in the last 13 months, at-home end-stage renal disease (ESRD) dialysis in the last 3 months, or a cardiac device in the last 5 years. Individuals are counted once regardless of how many types of DME they utilize.

Data Source: The CMS dataset is developed from Medicare Fee For Service (FFS) Part A and B beneficiary administrative claims data (~32M 65+ blind, ESRD (dialysis), dual-eligible, disabled-can include adults and children) and Medicare Advantage claims data (~17M 65+ blind, ESRD (dialysis), dual-eligible, disabled-can include adults and children). This data does not include individuals that are only enrolled in a State Medicaid Program.
Data Classes: The data in this map are grouped by quantiles. There is an approximately equal number of ZIP codes in each data range.
Author: Kelly Squares, MPH, Epidemiologist, Emergency Preparedness Program, Tennessee Department of Health

Medicare Beneficiaries Utilizing In-Facility Dialysis* in the Knox/East Tennessee Healthcare Coalition, March 2018



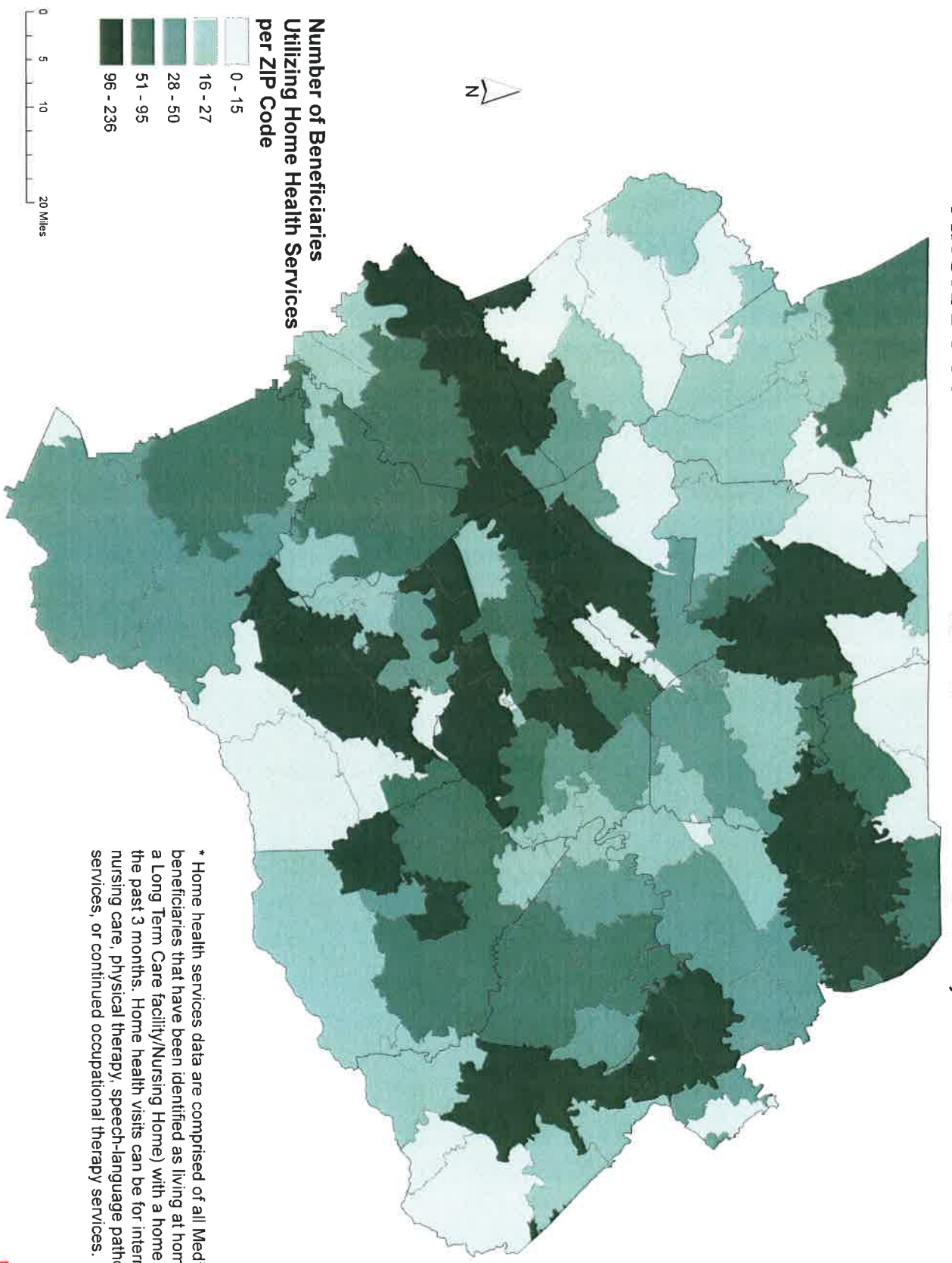
* End-Stage Renal Disease (ESRD) In-Facility Dialysis data is comprised of all Medicare beneficiaries that have been identified as having received dialysis treatment in an outpatient facility in the past 3 months

** ZIP Codes with counts between 1-10 are masked to 11

Data Source: The CMS dataset is developed from Medicare Fee For Service (FFS) Part A and B beneficiary administrative claims data (-32M 65+ blind ESRD (dialysis), dual-eligible, disabled-can include adults and children) and Medicare Advantage claims data (-17M 65+, blind, ESRD (dialysis), dual-eligible, disabled-can include adults and children). This data does not include individuals that are only enrolled in a State Medicaid Program.
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Author: Kelly Squires, MPH, Epidemiologist, Emergency Preparedness Program, Tennessee Department of Health



Medicare Beneficiaries Utilizing Home Health Services* in the Knox/East Tennessee Healthcare Coalition, March 2018

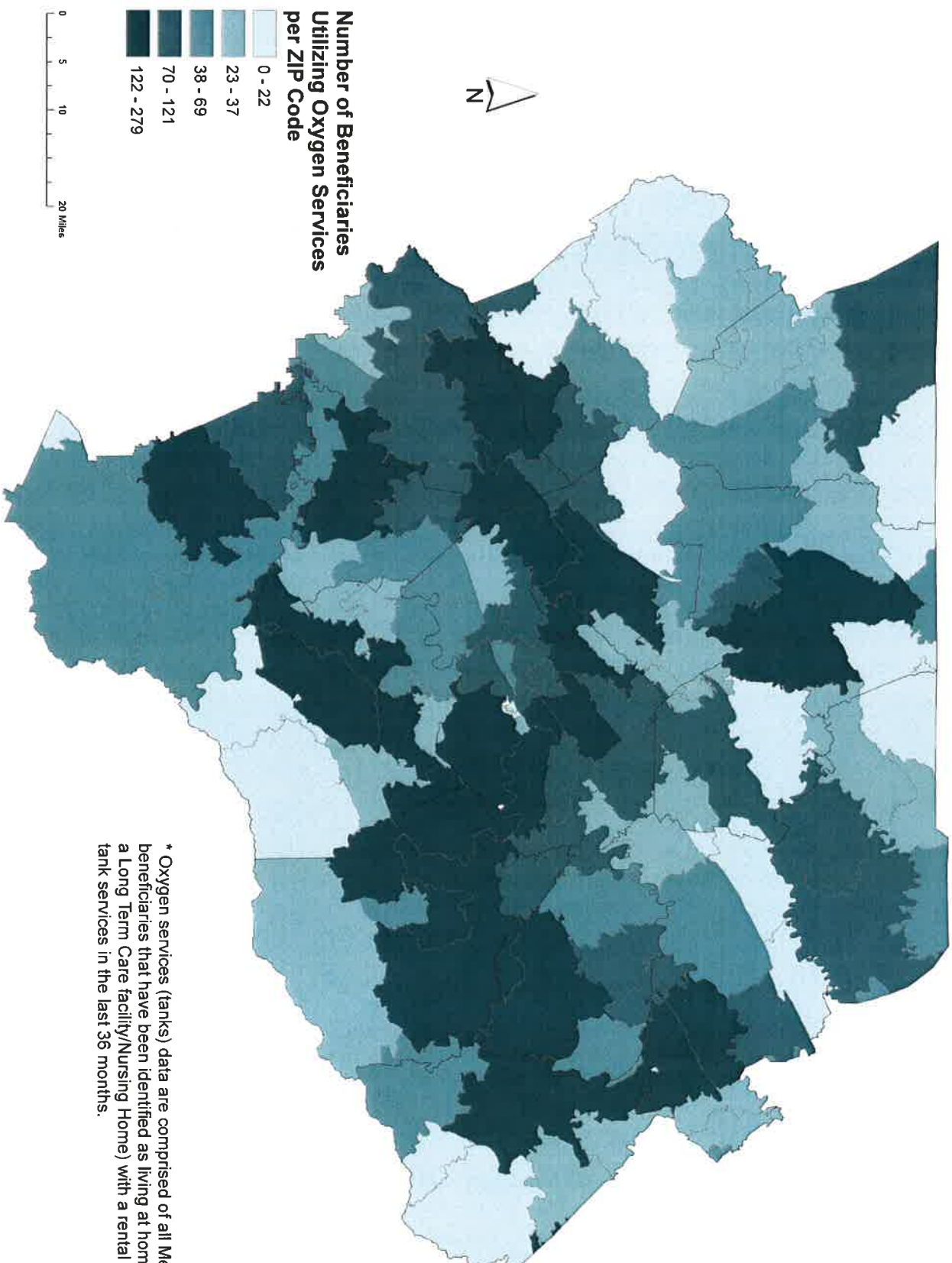


* Home health services data are comprised of all Medicare beneficiaries that have been identified as living at home (i.e., not in a Long Term Care facility/Nursing Home) with a home health visit in the past 3 months. Home health visits can be for intermittent skilled nursing care, physical therapy, speech-language pathology services, or continued occupational therapy services.

Data Source: The CMS dataset is developed from Medicare Fee For Service (FFS) Part A and B beneficiary administrative claims data (~32M 65+ blind, ESRD (dialysis), dual-eligible, disabled-can include adults and children) and Medicare Advantage claims data (~17M 65+ blind, ESRD (dialysis), dual-eligible, disabled-can include adults and children). This data does not include individuals that are only enrolled in a State Medicaid Program.
Data Classes: The data in this map are grouped by counties. There is an approximately equal number of ZIP codes in each data range.
Author: Kelly Squires, MPH, Epidemiologist, Emergency Preparedness Program, Tennessee Department of Health



Medicare Beneficiaries Utilizing Oxygen Services* in the Knox/East Tennessee Healthcare Coalition, March 2018



* Oxygen services (tanks) data are comprised of all Medicare beneficiaries that have been identified as living at home (i.e., not in a Long Term Care facility/Nursing Home) with a rental of oxygen tank services in the last 36 months.

Data Source: The CMS dataset is developed from Medicare Fee For Service (FFS) Part A and B beneficiary administrative claims data (~32M, 65+, blind, ESRD (dialysis), dual-eligible, disabled-can include adults and children) and Medicare Advantage claims data (~17M, 65+, blind, ESRD (dialysis), dual-eligible, disabled-can include adults and children). This data does not include individuals that are only enrolled in a State Medicaid Program.
Data Classes: The data in this map are grouped by quantiles. There is an approximately equal number of ZIP codes in each data range.
Author: Kelly Squares, MPH, Epidemiologist, Emergency Preparedness Program, Tennessee Department of Health



April 10 2018

Hospital- Knox	July 07/11/17	Aug 08/08/17	Sept	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	June
East Tennessee Children's Hosp.	X	X	X	X	X	X	X					
Christy Cooper												
Bill Thurman												
Steve Bohanan	X	X	X	X	X	X						
Fort Sanders Regional Hospital		X		X	X	X	X					
Other												
North Knoxville Medical Center	X*		X	X	X	X	X*					
Other		X		X	X							
Tenessa Stevens												
Parkwest Hospital	X	X	X	X	X	X	X					
Paul Parsons												
Physicians Regional Med. Center	X	X	X	X								
Other							X					
Steve Oran												
Danny McCreary												
Turkey Creek Medical Center	X	X	X	X	X	X*	X*					
Other												
Tonya Shoff												
U.T. Medical Center	X	X	X	X	X	X	X					
Janet Rowe												
David Pittman												
Brian Hitch	X	X	X	X								
Penninsula Hospital												
Other	X	X		X		X	X					
Todd Roberts												
Phil McDaniel												
Covenant Health	X	X		X	X		X					
Other												
Phil McDaniel												
Blount Memorial Hospital	X			X	X	X	X					
Other												
Marcus Sheppard												
Jill Rose												
Claiborne County Hospital	X	X	X	X	X*	X*						
Other												
Mike Campbell												
Fort Loudon Medical Center	X	X	X	X	X	X	X					
Other												
David Walton												
Jefferson Memorial Hospital	X*	X*	X*	X*								
Other												
Debbie Justice												
Wanda Fisher	X*											

Hospital- Knox

Hospital-East



	July	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar	April	May	June
Cherokee Health												
Karen Clawson												
Other												
Premier Surgical												
Steve Ross												
Other												
Amateur Radio Communications												
Jim Snyder		X	X		X					X		
Other												
REAC/TS												
Angie Bowen			X		X							
Wayne Baxter			X							WAB		
Rose Meza							X			RM		
Krisi Mayes-Weeks												
Jan Sneed							X					
Haylea Bates												
Phillip Hipps												
Tracy Smith										TS		
Jim McCarmon	X	X					X			Jim		
Connie Harig							X			OK		

CMS17

Other Attendees:

Name	Organization	Email	Phone
Patricia McCook	Blount Memorial Hosp	pmcgoxer@bmnnet.com	865-556-6480
Lindsay Shults	Rural Medical Services	LShults@rmsrh.org	423 613 3300