



**MINUTES OF HAMPDEN COUNTY HEALTH COALITION (HCHC)  
THURSDAY, MARCH 7, 2019**

**LOCATION:** Pioneer Valley Planning Commission (PVPC)  
60 Congress Street  
Springfield, MA 01104

**1. CALLED TO ORDER AT:** 10:47 a.m. by Jeanne Galloway  
**2. MEETING ADJOURNED AT:** 11:50am

**ATTENDEES:**

Kathleen Auer	Health Agent, Agawam Health Department
Soloe Dennis	Deputy Commissioner, Springfield Health & Human Services
Thomas FitzGerald	Health Director, Southwick
Jeanne Galloway	Co-Chair; Health Director, West Springfield
Christopher Goshea	Public Health
Thomas Hibert	Westfield & Montgomery
Beverly Hirschhorn	Director, Board of Health, Longmeadow
Erica Johnson	Senior Planner, PVPC
Angela Kramer	Public Health Nurse, Ludlow
Lois Luniewicz	Coordinator, Hampden County Medical Reserve Corps
Joshua Mathieu	Health Agent, Palmer
Lorri McCool	Health Agent, Wilbraham, Monson & Hampden
Cheryl Messer	Director of Nurses, Ludlow Board of Health
Debra Mulvenna	Public Health Nurse, Westfield Health Department
Michael Nelson	Regional Emergency Preparedness Coordinator, MDPH
Aimee Petrosky	Health Agent, East Longmeadow
Sherry Petrucci	Public Health Nurse, Agawam Health Department
Deborah Schaier	Public Health Nurse, Holyoke
Tammy Spencer	Co-Chair; Sanitarian, Health Department, Chicopee

**3. APPROVAL OF MINUTES**

Jeanne Galloway asked if there were any comments or questions regarding the minutes of the last meeting which was held on March 7, 2019. Lorri McCool made a motion to approve the minutes and Joshua Mathieu seconded. HCHC members present approved the motion.

**4. Financial Report**

Erica Johnson presented the FY19 Financial Statement for the month of February 2019 which reflects a balance of \$100,839.37. After the last meeting's budget amendment and with Stephanie moving to part time before Chris came on board there was a sizable amount in the planner line that was not going to be utilized. People sent in request for general office supplies that included computers, iPads, first aid kits, blankets etc. There was also a request to move \$15,000 by the end but Erica J. is waiting for an approval from the state before she can go ahead and order. Erica plans to adjust some quantities if the state approves some things; she also moved the money from the MHOA training since some

people who signed up did not attend. She also suggested that she will ask the state for reimbursement for Cheryl Messer since she obtained a certification for the National Health Care Disaster Professional Board certified.

**Sherry Petrucci made the motion to approve the 2019 FY financial statement for February 2019. Thomas FitzGerald seconded. All HCHC members present unanimously approved the motion.**

5. Business At Hand

a) **Deliverables Update:**

Chris Goshea mentioned that majority of the exercise status has been done, just waiting to process one person's paper work and three that are pending but he is working on that. Will the group like to work on the site notification, staff notification, and site assembly as a region? There will be a survey sent to find out who is interested and to plan for this around September so it does not interfere with the flu clinic. Also, with dispensing some people have closed pods and other people don't. If members of the group know how many closed pods they have, how the people are, how many people want to serve; and who else they are looking to engage. Closed pods are great for large businesses with health staff, long term health care facilities, schools, and people with functional access need groups. People that may not be able to tolerate the standard EDS flow path or are not able to come in to a dispensing site. Beverly Hirschhorn stated that there was a project that Stephanie was trying to engage group homes because there are DPH contractors that could have group homes in several communities. She wanted to get more information on that since she has not approached her group home. Chris G. said he will look into the group homes discussion. He also requested that if there are multiple groups interested in looking to expand closed pods they can be grouped together in one big meeting in order to have the conversation move faster. Chris G. is working on updating the primary, secondary, point of contact, and facility contact list for EDS which is almost finalized. He mentioned that he has conducted an equipment survey through which participants can get back to him. If you have an equipment update Chris G. so he can have an idea of what we have in our communities. The refrigerator survey will be closing in a week so Chris needs to be informed if you haven't taken it.

b) **Gap Analysis MRC**

Lois Luniewicz mentioned that she had Erica Johnson send her synopsis of the Gap Analysis to the group prior to this meeting. This survey went out about a year ago to many local partners, public health, emergency management, HMCC partners as well as the medical reserve core. She went through some highlights of the results. The purpose of the analysis was to determine current perceptions of the MRC; less from MRC's perspective and more from the view of the partnerships and community. **Shelter:** Across all the regions, similar priorities emerged both within the MRC and its partnerships, the need for establishing and strengthening partnerships, volunteer engagement, and emergency response. There is some discrepancy with MRC leadership and non-MRC leadership as the importance of sheltering is not considered to be an MRC function. Although many of us feel that in a sheltering situation we would be called upon. **Flu Clinics:** Non- MRC respondents believed that available MRC services are more limited than MRC leadership believes. Non-MRC leadership sees a lack of integration of MRC local emergency

management and in some cases this lack of integration seems to be as a result of the MRC being perceived as being isolated or lack of understanding of what the MRC can do. In some cases there are barriers with integration of MRC to local EMS/fire. This could go to say that our partners in the community may not be well versed of the MRC, who we are, what our capabilities are and she is not sure that is due to lack of trying to communicate that. Also unit leaders and state liability issues, inability to access disaster sites during poor weather conditions as barriers to the MRC volunteers responding. Lois said she hasn't had any concerns in the two regions that she works with but apparently that is a state-wide concern. Travelling in storm raises concern as to whether the MRC will be able to respond. **Volunteers:** There is not a lot of diversity: Baby boomers (55+) and older adults (30-54). There aren't many volunteers below 30. There is a lack of understanding in the community as to how the medical reserve core will respond in a disaster. There seems to be a lack of volunteer ability to speak or write in languages rather than English. Lois L. said they didn't have a high response rate statewide. There were a total of 207 responses.

**Transportation:** MRC leadership believes that 30% or less will travel hours to a deployment site. Some people believe no volunteers will take travel on a regular day; the numbers will reduce in inclement weather.

**Stakeholders:** Unit leaders need to present a better idea of expectations and stakeholders need a better

understanding of MRC capacity. **General Conclusions:** A key issue will be to recruit volunteers who will remain

engaged and are willing to deploy. **Goals:** To provide education to Non-MRC stakeholders about the real world capacity of the MRC. Not all the 207 respondents answered all the questions. The largest responding group of the

HMCC partners: Local public health (36%), emergency managers (28%), MRC coordinators and directors (15%).

There have been concerns that volunteers are not matched up with their skills set. However, volunteers fill

questionnaires that help determine how to match them well. The state expects regions to identify gaps pertaining to

them, and come up with work plans to fill the gaps. The state is also offering to help with standardization of

recruitment and retention which is all in the works. **(Erica Johnson can send a copy of the MRC Gap Analysis**

**Survey Results to anyone who needs it)**

## 6. News and Updates

### a) MRC & PVCOAD Updates

Lois Luniewicz said there was no MRC meeting due to weather. However, MRC will be having their first meeting since January next Wednesday. She recently sent out a flyer because there is a repeat of "you are the help until help arrives" series. There will be four trainings this spring and there will be a training to educate people on what you can do to save a life. The group has also identified CPR for April and "Stop the Bleed" either in May or June. Lois L. is still trying to pin down trainers. She will forward it to Erica Johnson so the rest of the group can have the information. She is also yet to give it to Central Hampden County. This is not limited to MRC volunteers; she'll rather there are more non volunteers because this is a community event and we want this to spread to as many people as possible. We will be inviting the participants from the fall for the training. April is National Volunteer month and we plan on having an event. Lois L. participated in a volunteer fair at the Chicopee Public Library. It didn't have a large turnout but she was able to communicate with the other presenters and the few people who were

able to come by; she was able to give out some information which is a good tool to get the group started. There will be a tabling event at the upcoming Public Health Nursing Clinical Conference on Thursday March 21 in Springfield. Lois L. is giving a presentation for the region 1 EMD's at their fourth quarter meeting in Agawam on May 23. She will be working with the regional partners to put together the bullet points. She has made it a point this fiscal year to participate in many LRP and LPC meetings as possible within Hampden County. She is finding it hard to obtain information on what communities have LPC and LRPC's. She checked the state website and most of them are in a state of limbo. If anyone has local LRP and LPC's she will want to know who she can contact and start attending their meetings. As part of the ongoing efforts with Central Hampden County's expansion they are working on a volunteer satisfaction survey, she has a couple of templates that she hasn't crossed referenced yet. Once it is finalized, she will forward it to all the MRC units so they can use it. The March meeting that was scheduled for Monday was postponed because of the weather and they will be meeting by conference call this Monday, March 11. The next PVCOAD meeting is March 20. Lastly, although the policy and procedure manual was updated a year ago, the county coordinators are working on it again. This year the group has an advantage of a fresh perspective because the Franklin county coordinator came into the position with no MRC emergency preparedness background. Therefore, she is reading the manual as one of the volunteers and her recommendations are helping them to streamline the manual and make it more volunteer-friendly. Jeanne Galloway asked if they were considering getting out of the Mass building this year during the Big E fair. Lois L. said they are supposed to be on the mailing list since they were able to get a place last year; and when the application is ready for release they are supposed to be on the list and that should be coming out soon. Jeanne G. mentioned that this will be the hundredth anniversary of the Mass building.

**b) HMCC Update**

Jeanne Galloway stated that newsletters have been sent out with information on the next meeting and other ongoing activities. She also mentioned earlier on during the EID presentation that there are projects that are overlapping. The next meeting is March 26.

**c) MCD Update**

Aimee Petrosky mentioned that during their last meeting they voted on a joining price for the mosquito season of \$5000. It grants you access to about thirty traps, and collection. Mosquitoes will be sent out to the state lab to see what they may be carrying. The amount of \$5000 seemed like an affordable price for some of the smaller communities to join in and to collect some data to see what they can leverage from their communities in the future years. Sherry Petrucci asked where MCD was on the mapping that should have happened. Jeanne Galloway said they were supposed to discuss it during their last meeting which was cancelled because of weather. Also, the group is trying to get a superintendent and putting in an RFP for services in the future. Aimee P. mentioned that this season there will be no treatment available through the MCD. Aimee P. stated they are paying the state employees to come and trap the mosquitoes and take it to the lab for testing. Then they will give a report on the lab results obtained. Some communities may have their trapping done by a contractor but the district is not hiring a contractor.

The group is interested in obtaining feedback on the \$5000 fee as to if it's a barrier or not. Joshua Mathieu said the Palmer council sent a resolution and he was wondering if they had received that as they were waiting for the next step. According to Aimee P., there were communities that were voting to join but they are not allocating the money for it in the appropriate way. The appropriating authority needs to use verbiage to allocate the funds into the trust for the SRB. If the right language is not used they cannot accept the money. The community has to send the money to the SRB which will not send invoices. Joshua M. suggested that they should have a guidance documented created to help people know what steps to take if they want to join. Jeanne G. said on the state website there are steps one can. Soloe Denis asked if there is a website for the group where he can direct his commissioner to see the list of districts that are a part of this. It was said that even on the state website MCD is not list on there as an organization yet. They have asked for talking points, the website, contact phone number, and e-mail. Amy P. said they will mention it at their next meeting as that can help them make changes.

**d) Western MA Public Health Advisory Group (WAG)**

Michael Nelson stated that they have not met since the last HCHC meeting. Jeanne Galloway mentioned that the EID presentation was a WAG project that is why the emergency planners were present. There is progress with the deliverables for this month and the other coalitions will have theirs later on this month. Michael N. added on that each of the four coalitions will have the exact presentation that went on this morning. From the presentation; there will be people consisting of the public health folks and coalitions. The information obtained will be included in the EDS plans. Chris Goshea has mentioned in the past meetings that one will have to update their plans; and the EID portion is automatically one of the portions that need to be added. There is a cover page explaining what changes and additions have been made. Soloe Denis asked if WAG has thought about having a checklist, or brochure of steps for future references to be sent to local health. Jeanne G. mentioned that the refrigeration project outcomes from the EID will be a part of the Homeland security subcommittee works.

**LSAC Update**

- e) Michael Nelson stated that they have not met since the last HCHC meeting. However, he gave an update on the funding for the next year. The state just received the Federal opportunity announcement which allows the group to apply for funding which continues the Public Health grant for the communities. They can now decipher the information obtained from the state and come up with a list of deliverables and budget for next year. This information will be put together and be released at the LSAC meeting where Chris Goshea is the group's representative and he will have it on March 18 and share it with the group on what the state is looking forward to do FY20. If funding remains level then you may have the same income coming in as you did last year.

**f) WRHSAC Updates**

Jeanne Galloway stated that there is a list of upcoming trainings: communities that need chain saw training will happen in April and May, behavioral health stuff that will happen in the summer. Working on getting the Debris

management plan and the SUV training online so interested members can take them and obtain certifications. The 2019 funding opportunity for the Homeland Security Council came out this week. The primary focus for those who obtain funds through the federal government is cyber security. We should think about how to get public health involved in this processes so we can obtain some of the funds. Beverly Hirschhorn stated that most people are required to send secure e-mails or to receive important information through fax but that has been replaced with emails and attachments. Is that a way the group can change technology and fall in cyber security? We can ask for software to help secure the receipts of emails. Sherry Petrucci informed her that their town encrypts their own e-mail so she should check with her town IT. Jeanne G. asked Beverly H. to see if she can put something together so she will present it to WAG and they'll figure how to move that forward. There is a cyber security conference for HMCC partners because most of them have been hit with security issues.

**g) MAVEN Report**

Angela Kramer said she has been getting some odd cases. An adult in Tolland had Measles that has been revoked. There was also a case of a six year old from Granville with Group A strep. Three Rivers had a strep pneumonia meningitis case on a six and half year old; the patient was in the hospital for about two weeks, came home, and went back. The school had to step in and let parents know that everyone was okay. There was also a strange case of ptosis on a seventy-six year old and it is from an animal. It was an animal coughing; it is very rare and she couldn't call the patient but the doctor's office. The doctor's office said they had to see the patient before she did anything. This may also be revoked because the patient also has lung cancer and has been coughing since October. She has also spoken to the state on these issues. There was also an incident of a sixty-seven year old with mumps and that may be getting revoked too. They think it may be something else. The lady who had the hepatitis A from the previous meetings is still looking to sue someone for the \$5000 cost she incurred due to her insurance coverage. There was also a sugar toxic producing organism but it was from the animals in CT. Between January and February the flu has reduced.

**g) Upcoming Events, Trainings & Exercises**

Michael Nelson said there is an exercise coming up in August which is the Crimson Contagion, a nationwide exercise being put on by the CDC that will simulate a massive incident and requires all sort of local level emergency dispensing. It will take place in the North-East (Mass, New Hampshire). For the Massachusetts contingent DPH were asked to find three communities in the state that has good EDS plans, a private hospital, and a local board health. DPH selected Holyoke, Pittsfield, and Great Barrington and it will take place in August. Debbie will be out there one day to participate in the MEMA exercise in Framingham and also to represent the Holyoke hospital; there will also be a person from the two other selected communities. Secondly, for PPE training there is already a committee working on that. Lois Luniewicz also mentioned that less than 1% of the responses of the survey came from MEMA. Jeanne Galloway asked Soloe Denis if he could speak about the National Public Health week. Soloe briefed the group on the lineup of events: they will create a calendar for the events that will be held all

month long in April for the city of Springfield, social media campaigns, and posters on PVTA buses. The goal is to help promote public health. Tammy Spencer mentioned that there is DEP/MHOA winter-spring training March 28 in Hadley. There is also DPH spring training in April. Jeanne G. is working with one of the vaping presenters from the high school to bring a 30 minutes vaping conference to the group during the next meeting. Soloe D. suggested if the group could make a flyer and state that “this training was brought to you by HCHC”. However, Jeanne G. said if the group moves forward and has a large vaping conference with breakout sessions then they can do that. Chris Goshea said that UMASS is hosting a talk about meningitis. It is conflicting with next meeting; seats have been reserved for the group so those who are interested can contact Chris G.

**7. Other Business**

**8. Meeting Adjourned**

Jeanne Galloway called for a motion to adjourn the meeting. Aimee Petrosky motioned to accept the adjournment and Joshua Mathieu seconded. HCHC members present unanimously approved the motion.

Respectfully submitted, Farida Bature, Support Staff, Pioneer Valley Planning Commission