



NERHCC

# Membership Meeting Minutes

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January 27, 2022 / 12pm-2pm / Zoom:

<https://us02web.zoom.us/j/81851379862?pwd=Y00vL2IyeHJBAnhUUFFnTDhUNFILdz09>

## ATTENDEES:

### Guest Speaker:

Jheri Corb, AHSA.

#### Topic: Rapid Response Staffing Agency

Responsible for invoices for candidates you select

- no cost for software/platform/services
- Experience with critical staffing solution
  - 30-90 days to get MSP running usually
    - 1 week average implementation and account set-up
    - 24/7 on demand access
    - Scalable to 10 to 1,000s to position
- Can also manage float pool, rate control
  - No conversion fees (13-week ICU nurse to permanent position)
- 10-15% of cost saving
- Offer references for client side (Flexcare, Travel Nurse Across America)

Curt Drennen & Carolyn Elliott, CDPHE.

#### Topic: Defining HPP fiscal funds usage.

- What do you need to hear from CDPHE to support growth of NERHCC?
  - Movement away from equipment to exercises/training
  - Nicole Cantrell- IPPW (requirements, alignment with other grant programs across the state)
  - What does future look like? (Andrew Glendening)
- What is purpose of HCCs and how to utilize funding?
  - NERHCC since 2017 (34 HCCs to 9 based on all hazard regions)
  - Core membership (hospitals, EM, Public health, EM, behavioral health)
    - Should also include any organization with a link to healthcare service delivery

- LTCF, schools/university, dialysis, FQHCs/community health centers, Urgent care, child care, social work services, faith-based organization, outpatient, home health, CERT, public safety
  - Defined- To create regional capacity by collectively sharing burden through cross sector partnerships
  - Focus- Develop and strengthen HCC partnership, coordinate response to healthcare emergencies, COOP, Medical Surge- plan for and respond to
    - #1 priority= medical surge
      - Example- evacuation of multiple LTCFs due to Marshall Fire w/ little to no notice
  - Goal: facilitates information sharing, resource sharing, and regional incident coordination
  - How to do this
    - Build partnerships
      - Steering committees and subcommittees
      - Planning response: pediatric, burn, infectious disease, information sharing COOP
      - Assessments: JRA/HVA and CEPA resource
      - Training and exercises
    - Manage resources
      - Funding, shared medical resources, information, training, relationship
  - NERHCC received 1.192 million over 5 years (second most of any coalition)
    - Each of last 5 years- NERHCC has come to OEPR at end of final quarter to spend over 100K at the end of the year.
- Strategic planning based on
  - HPP funding opportunity, notice of award guidance, HCC scope of works
  - ID gaps in Regional AARs and JRAs
- VA engagement? Specific rules on how VA can engage with HCCs
  - What those rules are is unknown
    - Sharing resources and finances is prohibited
- CDPHE OEPR- wants to create recovery arm
  - Focus on AARs and Improvement plans
    - How to capture institution knowledge
    - Building training and exercises
- NERHCC- impacted by overturn in HCC coordinator position
  - Focused on planning for last 2-4 years
  - Now seems like CDPHE wants to be tactical and operational
    - Ex-reallocate supplies on a regional level
  - Is that going to be a standard? Was that the vision? Or this that a new standard?
    - Curt- all of the above

## **AGENDA**

Approve previous meeting minutes

### **Fiscal Agent Report:**

### **Coordinator Report:**

- December deliverables submitted
- Working on expanding website and newsletter
- Working with hospitals, EPR, EM on supply change issues
  - Submitting form weekly to hospitals on low/critical supplies
    - Not something state will assist
    - Working sharing with facilities on resource sharing
  - Working with regional EPR for PPE and testing materials
- Can use COVID-19 for MRSE
  - Based on Nov 2021
  - Meeting weekly with other HCC coordinators
  - Due in March
- Work plan and budget due at the end of January
- March- information sharing plan update, resource inventory assessment, HCC preparedness plan update (burn annex)
- COVID-19 AAR/lps from region
  - Put together workgroup to have discussion to ID needs and gaps in region

### **Clinical Advisor Report:**

- Erin still on leave, Jobeth filling in
- No major updates

## **Follow-up**

### **Funding Applications**

- If have something place but not completed, reach out to Jobeth!
- If questions, reach out to board/Jobeth
- Must be tied to workplan and priorities

### **Multi-year Training**

- Workgroup in May to discuss
- Final workplan due in July

## FY22 Work Plan

- Exercise for decon/hazmat next year
- Focus on crisis education across region and integrate more behavioral health partners more
- Update workplan for utilization of funding to support a large-scale disaster
  - Look at past major events in region:
    - Use AAR/Improvement plans to identify gaps

## ACTION ITEMS

### PPE Workgroup

- \$30,000 rollover
- Put together workgroup to discuss types, where housed, etc
- Will send out email with minutes requesting for members
  - Can also email, text if interested

**Next Meeting: March 17, 202 11:30am-1:00pm**

**ADJOURN: 1:56pm**