

General Committee Meeting

May 1, 2024 10:00 am to 12:00 pm Zoom Meeting

Attendance

Rajit Gupta (Ashland), Sigalle Reiss & Sara Schaffer (Brookline), Mike Greene (Burlington), Nancy Porter & Derrick Neal (Cambridge), Linda Fantasia (Carlisle), Melanie Dineen (Concord), Kylee Sullivan & Katie Paciorkowski (Dedham), Sabrina Firicano & Krista Costello (Everett), Bill Murphy (Framingham), Nancy Funder (Hanover), Scott Moles (Holliston), Shaun McAuliffe & Simone Carter (Hopkinton), Eddie St. Louis (Hudson), Joanne Belanger & Alicia McCartin (Lexington), Francis Dagle (Littleton), Paige Ferriter (Marlborough), Ivan Kwagala (Maynard), John McVeigh (Millis), Caroline Kinsella (Milton), Tim McDonald & Ginnie Chacon-Lopez (Needham), Shin-Yi Lao (Newton), Matt Tanis (Norfolk and Wrentham), Abbie Atkins (Norwood), Adrienne Maguire (Revere), Taylor West (Southborough), Melissa Reniri (Walpole), Shuang Shen (Watertown), Michele Schuckel (Wayland), Karen DeCampo (Winchester), Meghan Doherty (Woburn), Josh Tallman, Paul Martin, Eric Olsen (MRC), Kerry Clark and Teri Clover (MRPC), Liz Foley (MDPH OPEM), Garrett Simonsen and Steven Mauzy (4AB PHEP)

Meeting Minutes

Tim McDonald (Needham) opened the meeting at 10:02 am.

I. Approval of February 28th and April 2nd GC Meeting Minutes

 Paul (MRC) alerted the coalition to his misspelled name in the April minutes. Nancy (Cambridge) made a motion, seconded by Paul (MRC), to accept the meeting minutes with an edited name – motion approved.

II. Planner Updates (Garrett Simonsen, Steven Mauzy, PHEP)

- Steven started with an update on the NACCHO reimbursement; most have been submitted to CHA. He did not have an exact update on when the checks would arrive. Expense reports have been submitted and are being processed.
- Eric Olsen introduced himself as the new 4AB MRC Coordinator and Paul Martin introduced himself as the new MetroWest Unit Coordinator.
- Garrett introduced the proposed focus areas and projects that the planners are bringing
 to the coalition for consideration. He began with a high-level overview of the
 requirements and priority areas from the MDPH Office of Preparedness and Emergency
 Management, which fall into three categories: community-level requirements,
 coalition-level requirements, and Urban Area Security Initiative (UASI) community
 requirements. One of the key differences in the deliverables during this budget period is
 that the CDC has deemphasized its focus on planning for emergency dispensing sites and



medical countermeasures (MCM). Instead, the focus is on developing or updating a public health emergency response framework - a framework for how we organize ourselves locally or regionally to respond to a public health emergency. They are also looking for us to take a deeper look at risks from the regional Hazard Vulnerability Assessment. Continued medical countermeasure planning is only required for UASI communities. The planners will advocate that the whole region continue to work on MCM, as there could still be a need to stand up MCM dispensing and/or administration in the event of a localized outbreak, such as Hepatitis A or Measles. Liz (DPH) added that the overall tone in the grant and the notice of funding opportunity is a shift toward response and readiness, rather than preparedness.

- The requirements for the next budget period can be distilled into six areas: risk assessment, response framework, hazard planning, training needs assessment, drills and exercises, and maintaining MCM readiness. The top hazards identified in the 2024 HMCC HVA fall into two categories: medical countermeasures (pandemic influenza, emerging infectious disease, and anthrax) and infrastructure failures (major hurricane, tornado, and a cyber attack scenario that includes power failure).
- The proposed focus areas for the next budget period are Impact and Capability Assessment, Response Framework, Hazard Planning, and Integrated Preparedness Plan. The impact and capability assessment would be focused on developing and conducting a regional public health impact and capability assessment for priority hazards. This would be inclusive of conducting a review of local and regional risk and capability assessments, developing a public health impact and capability assessment tool and process, conducting an impact and capability assessment and documenting outcomes in the final report, and finally utilizing the information gained to inform the response framework, conduct hazard planning, and develop a multi-year integrated preparedness plan. This work would be carried out in two tracks, one focused on infrastructure hazards and the other on MCM hazards. The infrastructure track will focus on power disruption and water, sanitation, and hygiene (WASH) emergencies. The work on WASH emergencies will build off work done through NACCHO-funded work done in Cambridge during the last budget period. All communities can take part in both tracks. Paul (MRC) asked if the risk assessment would include industrial and commercial hazards, such as chemicals.
- The second focus area is developing and implementing a regional all-hazards public health emergency response framework. This focus area will be completed through a literature review of existing plans to identify model practices, a planning workshop to develop the framework, a seminar on implementing and using the framework, and technical assistance from the planners to integrate the framework into local and regional plans.
- The third focus area is on hazard planning. This will include documenting planning assumptions and planning environment(s) for public health impacts associated with the hazards, documenting higher risk and disproportionately impacted populations, developing



community profiles for public health and disproportionate impacts, and documenting MRC volunteer roles in response.

• The final focus area is to conduct a regional Integrated Preparedness Plan Workshop (IPPW) to develop a public health Multi-Year Integrated Preparedness Plan (MYIPP) for priority hazards. The IPPW and MYIPP processes document plans to be developed, trainings to be conducted, drills and exercises to be conducted (including volunteer participation), and document policy changes to be implemented in BP2-BP5.

III. HMCC Updates (Teri Clover, Kerry Clark, MRPC)

- Kerry reviewed the proposed budget for BP1. This budget includes roughly \$155,900 for salary and wages, \$45,000 in conference travel, roughly \$389,700 for contractual line items, and approximately \$26,500 for other DPH-funded line items. Contractual line items include one regional planner, administrative support, additional MRC support, regional workshops and seminars, and support for financial staff. In past budget periods, the coalition approved an additional administrative and programmatic support staff member. Kerry recommends the position be primarily administrative. In past budget periods, the contracted financial support was paid for out of the HMCC budget. Given that PHEP/MRC and the Hospital Preparedness Program generate most of the work, this cost is being divided between the two programs. Line items in the 'other DPH funded' category include storage unit fees, website maintenance, and a training contract.
- In the budget discussion, Sigalle (Brookline) raised a question of financial support for local emergency preparedness personnel. With ARPA funding ending in December, emergency preparedness and MRC work funding is disappearing. Sigalle noted that there was not a lot of room in the budget for such a proposal, but wondered about the possibility of local allocations in the event of a BP1 spend down. Tim (Needham) acknowledged that the PHEP program has supported requests from communities in past budget periods and that there is no current process for communities who wish to request funds. Tim recommended revisiting the subject at the next meeting and begin determining a process for what to do with unanticipated unspent funds. Shin-Yi (Newton) made a motion to approve the budget and program areas as presented; Sean (Hopkinton) seconded the motion.
- Tim remarked that he would open nominations for new executive committee members at the next meeting. Staff and the EC will review the bylaws and poll current EC members to determine how many seats will be available in BP1 for new members.

IV. Vote and Adjourn

All communities voted in favor of the minutes and budget/program areas. Shin-Yi
(Newton) made a motion to adjourn at 11:37 pm; Joanne (Lexington) seconded the
motion.