

H1N1 Situational Debrief

Greater Sullivan County AHHR # 9
& Public Health Network

05/21/2009

Sit Rep #1 04-29-09

- State ICC activated at level 2
- H1N1 reported in nearby states
- AHHR 9 added hotline to our website
- AHHR9 reached out to RCC members
- PHNC sent out revision to call tree
- Sent dispatch info to Claremont chief

Sit Rep #2 04-30-09

- State ICC activated at level 2
- Still zero reported cases in NH
- AHHR RCC meeting called for 5-1-09
- County Administrator approves conference room use for possible MACE

Sit Rep #3 05-01-09

- State ICC increased to level III
- 2 unconfirmed cases in Concord NH
- AHHR 9 RCC met – decision to open MACE at Level 1
- Questions fielded from Sunapee VNA & New London

Sit Rep #4 05-02-09

- Region has developed Flu poster, printed and distributed
- 1 new probable case in Kearsarge region. at least 2 probable in Concord
- MACE still open at level 1. 8:30 - 4. JR as MACE Coordinator and Chief Chase as PIO.
- Carr Robertson completed Press Release re MACE for us – distributed to media and regional partners.
- JR & Lake Sunapee VNA spoke on WNTK radio to inform community about regional coordination and discuss handwashing message.
- Meetings at Kearsarge School District 1 pm and 7 pm.
- JR and Patti H to attend Web EOC training Sunday

Sit Rep #5 05-05-09

- MACE still at level 1.
- KRHS open today after probable case. 10 confirmed cases in New England
- NLH requests flu test kits – relayed to ICC
- PHN website updated with latest status and handwashing message
- JR & Lk Sunapee VNA spoke on WNTK and Country 1010 radio
- AHHR & State held conference call to debrief.

Sit Rep #6 05-06-09

- Status: 2 confirmed cases & 4 probable cases in NH
- Region 9 team met via conference call
- MACE deactivated/ on standby status
- AHHR to continue to disseminate public information messages, and update web site.
- Calls from media fielded.
- Medical Reserve Corps recruitment and planning underway. Ad placed.

Sit Rep #7 Present Status

- Status: **22** confirmed cases in NH. Kearsarge region, Concord, Keene, and Upper Valley all have cases.
- MACE still on standby status
- AHHR continues to disseminate public info messages, & update web
- Calls from media continue to be fielded.
- Charlestown POD Walkthrough Thurs 7:30 pm
- Medical Reserve Corps recruitment ads are bringing in a good response. MRC Orientation/ breakfast scheduled for June 18, 8 am at Country Kitchen, Newport
- AHHR meeting to debrief and compile After Action Report

After Action Report – H1N1 situation

- **DHHS would like us to consider:**
 - 1. Top 3 strengths for**
 - A. Region (example: all facility MOUs revisited and POD walk through arranged)
 - B. Entire Event
 - 2. Top 3 areas for improvement for**
 - A. Region
 - B. Entire Event
 - 3. Top 3 plan or policy changes to implement for**
 - A. Region
 - B. Entire Event

Strengths - Region

- Communication w in region / no feelings of isolation
- Teamwork / cohesiveness / depth of knowledge
- Knowledge of how to access supplies
- PHN Coord/ proactive / taken seriously
- Remarkable cooperation between AHHR / police, fire and EMS

Strengths – entire event

- A learning process / gain more knowledge every time
- PHNC – available, provide connections
- Core RCC group worked together well
- State / Dartmouth was impressed at how organized
- Diversity and depth of knowledge in the team
- Plan is an asset – dynamic. Current and updated
- Consistent, early and simple information flow
- Was the first time the DHHS ICC has ever opened
- Conference calls were frequent and helpful
- State support was available
- Messaging from state to locals was consistent
- Awareness/ monitoring/ taking it seriously

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Areas for Improvement - region

- Some challenge in getting supplies
- Reach out to School District Representatives – no awareness of what the AHHR is, SD reluctant to inform AHHR partners' role in team of response
- Present to each of the school boards / agenda at admin meeting
- Make sure we have reached out to all 15 towns in region, or make sure they're connected to other towns
- N-95 masks – improve access and knowledge and ability to fit test throughout region.
- Work closely with region 10 to communicate w schools.
- One laminated response card for the dispatchers – JR to do
- Go to four-deep rather than just 3-deep for MACE contacts
- Use of health officers, strengthening HO relationship

Areas for Improvement – entire event

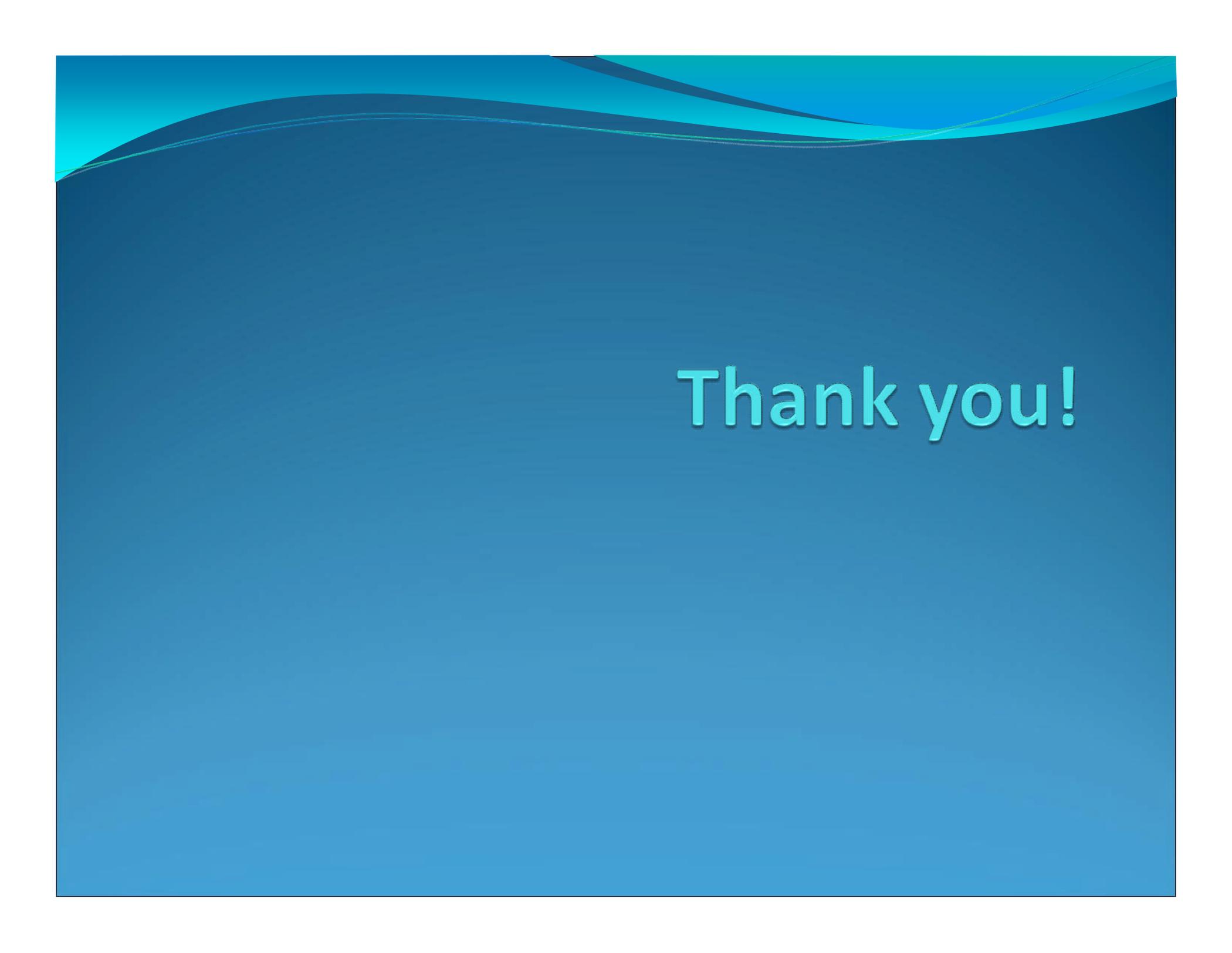
- School districts - Might need more coordination between DOE and DHHS and AHHRs
- School acted first before state informed AHHRs
- AHHRs' notification from state could be more prompt and consistent / coordinators should have been notified
- Learning curve for the state – now they can know what needs to be improved – will improve for next time
- Strengthen HO relationship in all communities – each town is different

POLICY CHANGES

Recommended by Region #9, following H1N1 event in
NH

Policy Changes recommended:

- Go to **Four-deep** for MACE communication tree
- Develop a separate school reference appendix – how does school reference PHEPRP in their plan and V.V.
- Plan **quick reference document** – in front (especially in front of MED SURGE Plan) and quick ref of who you need to call to get volunteers, etc.
- Make plan format more like LEOP and simplified – easier to use – **eliminate some information** (so that our plans fit in to municipalities' ESF 8 section)
- Eliminate section about medical aspects of Pan Flu
- **Bullet plan**
- Add **acronym dictionary** to the plan.

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Thank you!