



**Jefferson County Office of Homeland Security and Emergency Management**  
**28 Industrial Boulevard**  
**Kearneysville, WV 25430**  
**P. 304-728-3329**  
**Mobile: 304-279-8233**  
**F. 304-728-3320**  
[tmehling@jeffersoncountywv.org](mailto:tmehling@jeffersoncountywv.org)

---

People with Special Needs Committee  
Sign In Sheet  
September 20, 2010

<b>Print Name &amp; Organization</b>	<b>Email</b>	<b>Phone</b>	<b>Sign In</b>
Cates, Al Ruritan	Striderbo2@aol.com	728-2929	
Cates, Irene AARP	Striderbo2@aol.com	728-2929	
Catrow, Stacy JCBOE	scatrow@access.k12.wv.us	728-9220	
Crabill, Collet JCECC	ccrabill@jeffersoncountywv.org	728-3372	
French, Carl BCHD	Carl.g.french@wv.org	263-5131	<i>C French</i>
Hite, Sandy JCHD	Sandy.d.hite@wv.gov	728-3312	
Holstein-Wallace, Pam Region 3 Coordinator	pamhwallace@aol.com	279-3819	<i>pamhwallace</i>
Levesque, Jeff Red Cross	jeffsque@gmail.com	268-8294	
Maggio, Jennifer JCHSEM	jmaggio@jeffersoncountywv.org	724-8914	<i>Jennifer Maggio</i>
Marmorella, Nancy Good Shepherd	nmarmorella@gsivc.org	725-2622	
Mehling, Terri JCHSEM	tmehling@jeffersoncountywv.org	728-3329	







Jefferson County Office of Homeland Security and Emergency Management  
Emergency Planning for People with Special Needs  
Agenda  
September 20, 2010

- I. Call to Order
- II. Minutes – June 22, 2010 meeting
- III. Old Business
  - a) FY2011 Goals & Strategies – Updated contacts and assignment priorities
  - b) Doug Britvec of J.H. Consulting – Update - Discussion of Special Needs Template for Volunteer WV and other contracted work
  - c) New law requiring day care centers to compile emergency plans
  - d) Safety and Security Emergency Preparedness Plan (SSEPP) for PANTRAN transit authority
- IV. New Business
  - a) Progress Report on Children and Disasters – National Commission on Children and Disasters
- V. Member Sharing

The next meeting is scheduled for December 20, 2010 at 9:30 a.m. in the JCHSEM Emergency Operations Center, 28 Industrial Blvd, Kearneysville.

## Terri Mehling

**From:** LLIS.gov [help@llis.dhs.gov]  
**Sent:** Wednesday, September 15, 2010 3:45 PM  
**To:** tmehling@jeffersoncountywv.org  
**Subject:** New Resource on LLIS.gov

Lessons Learned  
Information Sharing  
LLIS.gov



FEMA

### New Children and Disasters Resource Page on *LLIS.gov*

Children, who make up nearly 25% of the U.S. population, have special and unique needs that must be considered during emergency planning activities. With the Consolidated Appropriations Act of 2008, Congress authorized the [National Commission on Children and Disasters](#) to examine children's needs and to ensure that they are considered in plans to prepare for, respond to, and recover from all hazards at all levels of government. The Federal Emergency Management Agency's Children's Working Group, established in 2009, has been working to ensure that children's needs are considered in all aspects of emergency management planning at the federal level.

To help with this effort, *LLIS.gov* has partnered with the National Commission on Children and Disasters and the FEMA Children's Working group to help *LLIS.gov* members understand the need for special recognition of children in emergency planning. *LLIS.gov*'s new [Children and Disasters](#) resource page provides a one-stop shop for guidance documents, training programs, and lessons learned from exercises and real-world incidents involving children, including:

- [Coordinating Pediatric Medical Care During an Influenza Pandemic: Hospital Workbook](#), Centers for Disease Control and Prevention;
- [Disaster Preparedness Resource Guide for Child Welfare Agencies](#), The Annie E. Casey Foundation;
- [Supplies for Infants and Toddlers in Mass Care Shelters and Emergency Congregate Care Facilities](#), National Commission on Children and Disasters;
- [The Impact of Katrina on Children](#), The Child Trauma Academy; and
- [The Wisconsin Center for School, Youth and Citizen Preparedness's "Responding to Emergencies and Disasters with Youth" Initiatives](#), *LLIS.gov* Exclusive Good Story.

In preparation for the release of the Commission's complete final report, the *LLIS.gov* Children and Disasters page also includes [National Commission on Children and Disasters: 2010 Report to the President and Congress, Executive Summary, August 23, 2010](#). To access these and other documents relating to Children and Disasters, [click here](#) or log in to *LLIS.gov* and click on the Children and Disasters link in the Planning and Training box of the **FEATURED CONTENT** tab. Also, be sure to add the Children and Disasters topic to your [LLIS Dispatch](#) subscription to receive personalized email updates when new content related to Children and Disasters is posted to *LLIS.gov*.

If you would prefer not to receive messages to this email address, please log onto [www.LLIS.gov](http://www.LLIS.gov), go to "My Settings" via the left navigation bar, and uncheck the box next to "Allow *LLIS.gov* communications to be sent to my external email address?"

[\[+\] Forward to a Friend](#)

**Media Contact**

**Erika Viltz**

(W) 202-640-6709

(C) 202-262-7171

## Five Years After Katrina, U.S. Remains Unprepared to Protect Children During Disasters

### *New Reports Reveal Millions of Children Vulnerable Should Disaster Strike*

WASHINGTON, D.C., (August 23, 2010) — New reports from Save the Children and the National Commission on Children and Disasters reveal that the federal government and a vast majority of states are still not fully prepared to protect children in disasters, five years after Hurricane Katrina ravaged the Gulf Coast.

According to Save the Children's report, fewer than one quarter of all states and the District of Columbia have enacted four basic safeguards to protect kids who are in school or child care during disasters, such as requiring all licensed child care centers to have a plan to reunite children with their families and requiring schools to have a clear written evacuation plan in place.

A report approved today by the National Commission on Children and Disasters shows modest progress at the federal level to accommodate the needs of children should a disaster strike. Among the findings are seriously underfunded federal programs for school disaster preparedness, inadequate coordination among federal, state and local agencies and lack of preparedness in our private health care system, including a disturbing finding that only six percent of hospital emergency rooms carry essential pediatric equipment.



Children participate in a Save the Children program following Hurricane Katrina intended to build community and self-esteem and strengthen resilience.

Hurricane Katrina revealed the harm children and families experience when kids are not accounted for in disaster planning:

- The storm displaced nearly 200,000 children from the Gulf Region.
- Following Hurricanes Katrina and Rita, it took six months for all of the 5,192 children separated from their families to be reunited.
- About 50,000 Louisiana and Mississippi children missed school in the 2005-2006 school year and approximately 15,000 did not attend in the 2006-2007 school year.
- More than a third of Louisiana children affected by the storm experienced clinically-diagnosed depression, anxiety, or another behavior disorder.

"Parents assume that their children are taken care of when they drop them off at school or child care," said Mark Shriver, Save the Children U.S. Programs senior vice president, "But many schools and child care facilities are not required to meet basic standards to protect kids should a disaster strike. For the 67 million kids separated from their families on any given day, this is unacceptable. If we're not prepared to protect kids, we're not prepared to protect America."

The BP Oil Spill this summer also revealed a major lack of preparation. Families recovering from this man-made disaster are experiencing similar issues that families face in the aftermath of a hurricane or other natural disaster. The spill has had catastrophic effects on the local economy and the community, and has placed enormous strain on parents, who are forced to pull their kids out of child care because they cannot afford it. Struggling parents frequently must bring their kids with them to BP claim centers, where they face long lines outside in the summer heat, putting children at risk for heat exposure.

In order to better prepare our nation to protect kids in an emergency, Save the Children urges the adoption of all four standards outlined in the report by states as well as federal passage of the Child Safety, Care, and Education Continuity Act of 2010 (H.R. 5240/S. 2898), which would require states to adhere to many of the same standards. Congresswoman Corrine Brown (D-FL) is the sponsor of the House legislation, and Senators Mary Landrieu (D-LA) and Lamar Alexander (R-TN) are the sponsors of the Senate measure.

To view a copy of Save the Children's report, please visit:

<http://www.savethechildren.org/publications/reports/2010-Disaster-Report.pdf>

#### **About Save the Children's Report**

Save the Children's report is the second disaster preparedness report released by the organization. The 2010 year report found that 38 states and the District of Columbia did not meet all four basic standards, and seven states met zero. Only 12 states meet all four standards, including Mississippi and Alabama, which is five more than in the 2009 report.

The five states that met all four standards in 2010 for the first time worked with Save the Children's U.S. Programs to meet them and, in many cases, adopted the exact same language as in the 2009 report.

Commissioned by Save the Children and conducted by Brown Buckley Tucker, the report reviewed four key standards identified by Save the Children, including plans for evacuation, reunification with families and evacuation for kids with special needs at child care facilities, as well as evacuation plans at schools.

#### **About Save the Children's U.S. Programs**

Save the Children's U.S. programs has worked to break the cycle of poverty and improve the lives of children by ensuring they have the resources they need – like access to a quality education, healthy foods and opportunities to grow and develop in a safe environment. Save the Children's early childhood education, literacy, and physical activity and nutrition programs reached more than 50,000 children in the United States last year alone. Combined with our emergency response work, we reached over 60,000 children. For more information visit <http://www.savethechildren.org/us>.

## **Supplies for Infants and Toddlers in Mass Care Shelters and Emergency Congregate Care Facilities**

*Updated June 2010*

This document was facilitated by the National Commission on Children and Disasters with guidance from subject matter experts in emergency management and pediatric care. The document identifies basic supplies necessary to sustain and support 10 infants and children up to 3 years of age for a 24 hour period. The guidance is "scalable" to accommodate 10 or more children over a longer period of time.

The National Commission on Children and Disasters recommends state and local jurisdictions provide caches of supplies to support the care of children in mass care shelters and emergency congregate care facilities for a minimum of 72 hours. The amount of supplies cached in an area should be based upon the potential number of children up to 3 years of age that could be populating the local shelters and facilities for a minimum of 72 hours, as determined by an assessment of current demographic data for the jurisdiction.

Depending on the nature of the event, a 24-72 hour supply of essential child-specific supplies should be on site prior to the opening of a shelter or facility. In situations where this is not possible, supplies should still be available for immediate delivery to the shelter, when children are sheltered, within 3 hours (for example, through local vendor agreements, supply caches, interagency mutual aid, etc.).

Such a level of preparedness is critical due to the high vulnerability of this population.

(Guidance begins on next page.)

Recommended Perishable Supplies for Immediate Delivery within 3 Hours		
Quantity	Description	Comment
40 Jars	Baby Food - Stage 2 (jar size is 3.5 - 4 oz)	Combination of vegetables, fruits, cereals, meats
1 box (16oz)	Cereal - single grain cereal preferred (e.g. rice, barley, oatmeal)	Rice, barley, oatmeal or a combination of these grains
See Note	Diaper wipes - fragrance free (hypoallergenic)	Minimum of 200 wipes
40	Diapers - Size 1 (up to 14 lbs.)	Initial supply should include one package of each size, with no less than 40 count of each size diaper
40	Diapers - Size 2 (12 - 18 lbs.)	
40	Diapers - Size 3 (16 - 28 lbs.)	
40	Diapers - Size 4 (22 - 37 lbs.)	
40	Diapers - Size 5 (27 lbs. +)	
40	Pull Ups 4T - 5T (38 lbs. +)	
320oz	Formula, milk-based, ready to feed (already mixed with water) ++	<b>Breastfeeding is the best nutritional option for children and should be strongly encouraged.</b>
64oz	Formula, hypoallergenic-hydrolyzed protein, ready to feed (already mixed with water) ++	
64oz	Formula, soy-based, ready to feed (already mixed with water) ++	
1 Quart	Oral Electrolyte solution for children, ready-to-use, unflavored (e.g. Pedialyte) - <b>Dispensed by medical/health authority in shelter</b> ++	Do not use sports drinks. The exact amount to be given, and for how long, should be determined by an appropriate medical authority (doctor or nurse). To be used in the event an infant/child experiences vomiting or diarrhea, and the degree of dehydration.
See Note	Nutritional Supplement Drinks for Kids/Children, ready-to-drink (e.g., Pediasure, Kids Essential/Kids Boost) - <b>Dispensed by medical/health authority in shelter</b>	<b>** Not for infants under 12 months of age **</b> Requirement is a total of 40-120 fl. oz per day; in no larger than 8 oz bottles.

Note: See "Supplemental Information" for additional information regarding the items follows by "++."

Non-Perishable Supplies & Equipment		
Quantity	Description	Comment
25	Infant feeding bottles (plastic only) ++	4 - 6 oz. size preferred (to address lack of refrigeration)
30	Infant Feeding Spoons ++	Specifically designed for feeding infants with a soft tip and small width. Can be used for younger children as well.
50	Nipples for Baby Bottles (non-latex standard) ++	2 per bottle
25	Diaper Rash Ointment (petroleum jelly, or zinc oxide based)	Small bottles or tubes
100 pads	Disposable Changing Pads	At least 13x18 in size. Quantity is based on 8-10 diaper changes per infant per day
10	Infant bathing basin	Thick plastic non-foldable basin. Basin should be at least 12" x10" x 4"
See Note	Infant wash, hypoallergenic	Either bottle(s) of baby wash (minimum 100 oz.), which can be "dosed out" in a disposable cup (1/8 cup per day per child) or 1 travel size (2oz) bottle to last ~48 hrs per child.
10	Wash cloths	Terry cloth/cotton - at least one per child to last the 72 hr period
10	Towels (for drying after bathing)	Terry cloth/cotton - at least one per child to last the 72 hr period
2 sets	Infant hat and booties ++	Issued by medical/health authority in shelter
10	Lightweight Blankets ( <i>to avoid suffocation risk</i> )	Should be hypoallergenic, (e.g., cotton, cotton flannel, or polyester fleece)
5	Folding, portable cribs or playpens	To provide safe sleeping environments for infants up to 12 months of age
2	Toddler potty seat	That can be placed on the seat of an adult toilet, with handles for support. One each should be located in both a Men's and Women's restroom
1 pack	Electrical Receptacle Covers	Minimum 30 (Note: Prioritize covering outlets in areas where children and families congregate (family sleeping area, children's areas, etc.)

Note: See "Supplemental Information" for additional information regarding the items follows by "++."

<b>Other Recommended Perishable Supplies</b>		
<b>Quantity</b>	<b>Description</b>	<b>Comment</b>
40	Baby Food – Stage 1 (jar size ~ 2.5 oz)	Combination of vegetables, fruits, cereals, meats
40	Baby Food - Stage 3 (jar size ~ 6 oz)	Combination of vegetables, fruits, cereals, meats
40	Diapers - Preemie Size (up to 6 lbs.)	As needed for shelter population
	Healthy snacks that are safe to eat and do not pose a choking hazard <i>(intended for children 2 years and older)</i>	Should be low sugar, low sodium: yogurt, applesauce, fruit dices (soft) (e.g., peaches, pears, bananas), veggie dices (soft) (e.g., carrots), 100% real fruit bite-sized snacks, real fruit bars (soft), low sugar/whole grain breakfast cereals and/or cereal bars, crackers (e.g., whole grain, "oyster"/mini)

<b>Other Recommended Non-Perishable Supplies &amp; Equipment</b>		
<b>Quantity</b>	<b>Description</b>	<b>Comment</b>
10	Sip Cups (support for toddlers) ++	

Note: See “Supplemental Information” for additional information regarding the items follows by “++.”

Supplemental Information	
Description	Supplemental Notes
Formula	<p>Use of a powdered formula is at the discretion of the jurisdiction or shelter operator. If using powdered preparation of the formula should be conducted by appropriately trained food preparation workers. Water used should be from an identified potable water source (bottled water should be used if there is any concern about the quality of tap or well water).</p> <p>Hypoallergenic hydrolyzed formula can be provided in powdered form—(1) 400 gram can—but only if potable water is accessible.</p>
Infant Feeding Bottles and Nipples	<p>Each time nutritional fluids, formula and/or other infant feeding measures (including breast milk in a bottle) are distributed by trained, designated shelter staff and/or medical professionals, clean, sterilized bottles and nipples must be used. Note: After use, bottles are to be returned to the designated location for appropriate sterilization (and/or disposal). Bottle feeding for infants and children is a 24/7 operation and considerations must be in place to provide bottle feeding as needed (On average, infants eat at minimum 5-8 times daily).</p> <p><b>Note to staff: Sterilizing and cleaning</b></p> <p>Sterilize bottles and nipples before you use them for the first time by putting them in boiling water for 5 minutes. Nipples and bottles should be cleaned and sterilized before each feeding. If disposable bottles and nipples are not available and more durable bottles and nipples will be re-used they must be fully sterilized before each feeding. To the greatest extent possible bottles and nipples should be used by only one child.</p> <p>In the event parents want to use their own bottles and nipples, shelter staff should provide support for cleaning these items between feedings. Support such as access to appropriate facilities for cleaning (not public restrooms).</p>

<p>Note regarding all feeding implements for Infant/Children</p>	<p>There is a specific concern with cleaning and sanitizing of all feeding implements associated with infants and children (infant feeding bottles/nipples, spoons, sip cups, etc). These items will require additional attention by food preparation staff to ensure they are sanitary as a means of reducing food borne illness. Staff medical/health staff should be consulted on best means of raising awareness among shelter residents and enlisting their support for these extra sanitary measures.</p> <p>Feeding implements such as spoons and sip cups should be cleaned using hot soapy water provided potable water is available. When the item is being cleaned to give to another child the item must be sterilized.</p>
<p>For the following items: infant bathing basin, lightweight blankets, diaper rash ointment, wash cloths, and towels</p>	<p>Consider pre-packaging the listed items together and providing one package to each family with children. Note: additional blankets and towels will be necessary for families with more than one child.</p>

Jefferson County Homeland Security and Emergency Management  
Emergency Planning For People with Special Needs Committee  
September 20, 2010  
Minutes

Jefferson County Homeland Security and Emergency Management's Emergency Planning for People with Special Needs Committee met at the Jefferson County EOC on September 20, 2010 at 9:30am. Present were: Terri Mehling, JCHSEM; Jennifer D. Maggio, JCHSEM; Carl French, Berkeley County Health Department; Pam Holstein-Wallace, Homeland Security Region 3 Coordinator and Denis Elliott, Jefferson Center.

#### Introductions

Ms. Mehling, JCHSEM Deputy Director opened the meeting with approval of minutes. Carl French moved to approve the minutes of the June meeting, all approved.

#### Old Business

Mr. Elliott mentioned his main concern for the Jefferson Center, is where they would shelter in place and what items they need on hand should an incident occur. Ms. Mehling offered to give him information regarding sheltering in place and what items they will need on hand. The committee brainstormed areas the Jefferson Center could possibly use as an offsite shelter. Ms. Mehling received information regarding a possible location; Charles Town Presbyterian Church and recommended Mr. Elliott contact them to see if they can help.

Ms. Mehling noted she updated contacts and assignment priorities for FY2011 Goals & Strategies. Ms. Mehling will email a revised copy to all committee members.

Ms. Mehling discussed the Special Needs Template that is being created by JH Consulting under a contract with Volunteer WV. The template, which is an annex to the Emergency Operations Plan (EOP), will be used statewide. The purpose of the annex is to lay out how we will respond and assist people in times of disaster. Ms. Mehling will make a copy of the document and give to Carl French and Denis Elliott to review. JH Consulting is currently distributing the draft and asking for comments from the counties. Ms. Mehling called Doug Britvec of JH Consulting and asked him to explain what is in the document and what will be the next step. Mr. Britvec explained there are two components of the project. First, is the Special Needs Annex to the EOP. The first draft has been reviewed by Volunteer WV and an expected final draft is to be complete by the end of the month. In early October the Steering Committee will meet with Volunteer WV to review the final draft. Kanawha Putnam Emergency Planning Committee has agreed to give the Special Needs Template a test run. The second component includes a resource database. They are currently working with the state to see how they are going to enter them into ETEAM. They would like to have all records collected by October 1<sup>st</sup> and have them entered by the end of the year. The format for the Special Needs Template follows the standard format of an annex to any EOP template. It was also developed using guidelines in the Comprehensive Preparedness Guide 301- Interim Emergency Management Planning Guide for Special Needs Populations. Throughout the template there is different color text. Each color has specific guidelines that each jurisdiction may

... ..  
... ..  
... ..  
... ..

... ..  
... ..  
... ..  
... ..

... ..

... ..  
... ..  
... ..

... ..  
... ..  
... ..  
... ..  
... ..

... ..

... ..  
... ..  
... ..  
... ..  
... ..

... ..  
... ..  
... ..  
... ..  
... ..

... ..  
... ..  
... ..

follow. Ms. Mehling asked Mr. Britvec if he knew specific resources that they are looking for. Mr. Britvec replied Mr. Harvey is working with an agency to determine what resources they should be looking at. Ms. Mehling asked if all comments were to be sent to Pam Holstein-Wallace. Mr. Britvec replied comments can be sent to Ms. Holstein-Wallace or directly to JH Consulting. All comments are due by the end of the month. The call was ended. Ms. Holstein-Wallace noted she is a member of the Steering Committee that is reviewing the Special Needs Annex. Ms. Mehling asked if it were okay to distribute a copy of the Special Needs Annex draft to Mr. Elliot and Mr. French. Ms. Holstein-Wallace approved. Ms. Mehling asked Mr. Elliot and Mr. French to please not distribute. A discussion of the template followed the call.

Ms. Holstein-Wallace made note of an upcoming special needs table top exercise. Brian Gerber, University of Colorado, Denver; Catastrophic Planning is conducting a series of table top exercises dealing with special needs and catastrophic evacuation of any major city. Ms. Holstein-Wallace is currently working on a date preferably in the first week of November.

Ms. Mehling gave an update on the law requiring day care centers to compile emergency plans. JCHSEM has yet to be contacted regarding review of plans. Plans will have to be reviewed and signed off on by local Emergency Management before approval. Ms. Holstein-Wallace asked when the deadline was to have the plans approved. Ms. Mehling replied by the end of December 2010. Mr. French asked Ms. Mehling to ask Barbara Miller if she could contact him regarding the law requiring day care centers to compile emergency plans.

Ms. Mehling reported on the Safety and Security Emergency Preparedness Plan (SSEPP) for PANTRAN transit authority. There is nothing new at this time. Ms. Holstein-Wallace noted they are working with a consultant.

### **New Business**

Ms. Mehling attached to the agenda, articles regarding National Commission on Children and Disasters collected from [www.LLIS.gov](http://www.LLIS.gov). Ms. Mehling noted she forwarded the article regarding supplies for infants and toddlers in mass care shelters and emergency congregate care facilities to the Red Cross. Ms. Holstein-Wallace noted doctors' offices now have kits with essential items for newborns. She noted it could be something that we could consider stocking. The main consideration would be where you would get the items and how they would be stored. A discussion followed.

### **Member Sharing**

Ms. Mehling announced Business Continuity Planning Workshops will be held September 27<sup>th</sup>, at 1p.m. and 6 p.m. at the Holiday Inn in Ranson, WV. There Barbara Miller, Dave Skeen and Neal Nilsen will be discussing Continuity of Operations Planning (COOP) and protecting your technology.

Mr. Elliot mentioned the new point of contact for Jefferson County Council on Aging (JCCOA) is Amy Wilemon, Finance Director.

... the ... of ...  
... the ... of ...  
... the ... of ...  
... the ... of ...  
... the ... of ...

... the ... of ...  
... the ... of ...  
... the ... of ...  
... the ... of ...  
... the ... of ...

... the ... of ...  
... the ... of ...  
... the ... of ...  
... the ... of ...  
... the ... of ...

... the ... of ...  
... the ... of ...  
... the ... of ...  
... the ... of ...  
... the ... of ...

The meeting was adjourned at approximately 10:30am. The next Emergency Planning for People with Special Needs Committee is scheduled for December 20, 2010 at 9:30 a.m. in the JCHSEM Emergency Operations Center, 28 Industrial Blvd, Kearneysville.

1870  
1871  
1872  
1873  
1874  
1875  
1876  
1877  
1878  
1879  
1880  
1881  
1882  
1883  
1884  
1885  
1886  
1887  
1888  
1889  
1890  
1891  
1892  
1893  
1894  
1895  
1896  
1897  
1898  
1899  
1900

Jefferson County Homeland Security and Emergency Management  
Emergency Planning For People with Special Needs Committee

June 22, 2010

Minutes

Jefferson County Homeland Security and Emergency Management's Emergency Planning for People with Special Needs Committee met at the Jefferson County EOC on June 22, 2010 at 9:30am. Present were: Barbara Miller, JCHSEM; Terri Mehling, JCHSEM; Jennifer Maggio, JCHSEM; Carl French, Berkeley County Health Department; Al & Irene Cates, AARP and Sandy Hite, Jefferson County Health Department. Briefly on the phone were Jeff Harvey and Doug Britvec, J.H. Consulting.

**Introductions**

Terri Mehling opened the meeting with the request to approve the minutes from March 15, 2010 meeting. Al Cates moved to approve and Irene Cates seconded the motion.

**Old Business**

Ms. Mehling reviewed the 2009/2010 Goals & Strategies. Ms. Mehling reported Ms. Maggio updated the contacts list. Ms. Miller suggested some changes; replace title to FY-2011, the County Commission has asked everyone to complete their Goals and Objectives a year in advance. Ms. Miller also noted Kelly Duncan is no longer with Good Shepherd and Larry Krauser would like to be deleted from the contact list. Ms. Hite mentioned she would like to be added to the contact list. Ms. Mehling reported JCHSEM will be unable to fulfill all of the action items this year due to budget cuts. Ms. Mehling reviewed the objectives; Objective 1, Ms. Maggio will be giving preparedness presentations to seniors; Objective 2, Ms. Mehling reviewed items we have available in our department that can be used to educate people with special needs and disabilities; Objective 2, Ms. Mehling noted she is trying to get a hold of Teresa McCabe at the Jefferson Memorial Hospital to put some of our preparedness pamphlets in with new parent packets and in the lobbies; Objective 4, Ms. Mehling noted JCHSEM is continually updating our contact lists. Ms. Miller noted there are new pharmacies, etc. that will need to be added as well as some that need to be removed from the list. Mr. French gave additional websites that can be resourceful. The sites are: [www.vulnerablepopulations.com](http://www.vulnerablepopulations.com) and [www.rtiinternational.com](http://www.rtiinternational.com), Ms. Mehling noted if there is any additional information that can be added to the list to please let her know.

**New Business**

Ms. Miller introduced Jeff Harvey and Doug Britvec of J.H. Consulting as well as introductions from Committee members. J.H. Consulting explained, discussed and reviewed the Special Needs Template they are creating for Volunteer WV and other contracted work. Mr. Harvey explained they are doing a Special Needs EOP Annex template and an ESF functional format template. These templates will have general concepts and hopefully a roadmap for all counties to do their own special needs planning. There will be a list of discussion questions to get everyone thinking of what needs to be added into their plan as well as a list of resources that could possibly help answer questions. The second portion includes a generalized list of special needs resources that agencies have available. J.H. Harvey has put together a Steering Committee to help represent goals and objectives from each agency. Ms. Miller offered the

JCHSEM people with special needs committee's list of local agencies and contacts. Mr. Harvey noted Volunteer WV has hired Caley Sams who is in charge of coordinating the grant and who is working with Mr. Harvey in collecting information for resources. Mr. Harvey told Ms. Miller he will email her Ms. Sams contact information. Ms. Mehling asked Mr. Harvey if these special needs resources will be fed into WV211 system. Mr. Harvey replied yes. Mr. Cates asked Mr. Harvey what format the template will be in. Mr. Harvey replied the template will be in Word format. Ms. Miller asked if the list of resources will be in ETeam. Mr. Harvey replied he doesn't know that answer yet. The call was ended. A brief discussion followed.

Ms. Miller reported on a new law requiring all day care centers to compile disaster plans and how they will take care of each individual child. Parents must be involved in writing the plan and the center must show proof of involvement. Local Emergency Management and local health departments will have to review the plans and make sure each plan meets all rules and regulations if they are not approved, the day care will be ineligible to receive their license/renewal. There is no template available due to all day care centers being different and each child having a different need.

Ms. Miller reported the National Transportation Agency is requiring all transit authorities in all States to do a SSEPP (Safety and Security Emergency Preparedness Plan). Along with that plan there are rules, definitions and regulations that differ between every state. Local responders as well as Emergency Management will be asked to sign the MOUs. Ms. Miller will be working with the Panhandle Transit Authority to make sure the rules and regulations are met. Once completed there is a 45 day legal review.

Ms. Mehling reviewed the handout, "Progress Report on Children and Disasters". The document provides goals regarding disaster planning and all components related to sheltering, etc. There is a concern for pediatric medicine because there isn't a common stockpile or enough doctors. Ms. Miller noted shelters are now looking for child size cots and stocking up on baby food/supplies. Ms. Mehling noted since Katrina they are looking into a tracking system to track children back to their families.

Ms. Mehling reviewed the handout, "Public Health Emergencies & the Special Needs Populations". The handout is geared more towards the health department, public health emergencies and special needs populations.

### **Member Sharing**

Ms. Hite reported she is currently updating plans for the special needs population, as well as finding resources. She is also focusing on home bound patients and how the health department will dispense medicine if there is a need to do so. Ms. Miller offered JCHSEM's list of resource contacts.

Mr. French reported he is continuously updating plans and contacts. All essential contacts have been put into the WARN System. Mr. French met with the Director of Hospice who is currently working to develop a POD and COOP plan. Mr. French will send her contact info to Ms. Miller.

Ms. Miller reviewed upcoming exercises and events. She also noted September is National Preparedness Month and listed some activities that are going on during that month.

The meeting was adjourned around 10am. The next Emergency Planning for People with Special Needs Committee meeting will be held September 20, 2010 at 9:30 a.m. in the JCHSEM Emergency Operations Center, 28 Industrial Blvd, Kearneysville.



ci