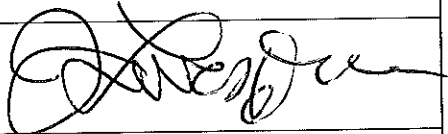

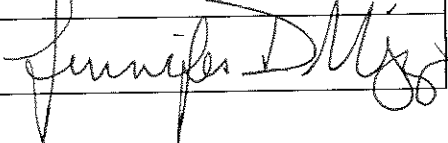




Jefferson County Office of Homeland Security and Emergency Management
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tmehling@jeffersoncountywv.org

People with Special Needs Committee
Sign In Sheet
June 18, 2012

Print Name & Organization	Email	Phone	Sign In
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 ENP JCECC	crcrabill@jeffersoncountywv.org	728-3372	
Daily, Roger JC Meals on Wheels	dailey282@frontiernet.net	724-7901	
French, Carl BCHD	carl.g.french@wv.org	263-5131	Carl French
Hite, Sandy JCHD	sandy.d.hite@wv.gov	728-8415	
Levesque, Jeff Red Cross	jeffsque@gmail.com	268-8294	
McNutt, Clint Volunteer	projectorroadie@gmail.com	433-2581	
Lewis, Kristen MRC	kristen.n.lewis@wv.gov	267-7130	
Maggio, Jennifer JCHSEM	jmaggio@jeffersoncountywv.org	724-8914	

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Jefferson County Office of Homeland Security and Emergency Management
Emergency Planning for People with Special Needs
Agenda
June 18, 2012

- I. Call to Order
- II. Minutes – March 19, 2012 meeting
- III. Old Business
 - a. FY2012 Goals & Strategies
 - b. Volunteer Registration
 - c. Whole of Community Partnership Initiative
 - d. Jefferson County Health Department NCR Full Scale Exercise – March 28
 - e. Animal Sheltering Trailer
- IV. New Business
 - a. HHS Facebook Applications – Project: Lifeline and bReddi
 - b. Press Release – CDC study on Autism
 - c. Article – Nursing Home Disaster Plans
 - d. Risk Assessment and Mitigation Planning Committee – June 19 – 2pm – 4pm
 - e. Future Direction of the Emergency Planning for People with Special Needs Committee
 - f. *WVSeniorCare.com -info on Long Term Care options*
- V. Member Sharing

The next meeting is scheduled for September 17, 2012 at 9:30 a.m. in the JCHSEM Emergency Operations Center, 28 Industrial Blvd, Kearneysville.

Jefferson County Homeland Security and Emergency Management
Emergency Planning For People with Special Needs Committee
March 19, 2012
Minutes

Jefferson County Homeland Security and Emergency Management's Emergency Planning for People with Special Needs Committee met at the Jefferson County EOC on March 19, 2012 at 9:30am. Present were: Terri Mehling, JCHSEM; Jennifer D. Maggio, JCHSEM; Kristen Lewis, Medical Reserve Corps; Sandy Hite, Jefferson County Health Department; Judith Miller, Healthier Jefferson County and Lana Shultz, State Farm Insurance.

Introductions

Ms. Mehling, JCHSEM Deputy Director, opened the meeting with approval of minutes. Sandy Hite moved to approve the minutes of the December 2011 meeting and Lana Shultz seconded the motion, all approved.

Old Business

Ms. Mehling reviewed the FY2012 Goals & Strategies document with the committee. She asked that everyone review the document, and if any changes need to be made to please let her know. The group discussed changes.

Ms. Judith Miller invited committee members to join the next Healthier Jefferson County Meeting. She noted they are trying to build stronger partnerships and discuss ways to better communicate.

Ms. Mehling noted JCHSEM will be asking volunteers to update their volunteer registration form. The form will have to be updated yearly.

Ms. Miller noted the Whole of Community Partnership Initiative is ongoing. JCHSEM and the Partnership and Development Committee members are in the process of renewing partnerships. The next meeting is in April.

Ms. Hite reported on the National Capitol Region Mass Dispensing Exercise that will take place March 28, 2012. Ms. Hite advised the committee there will be a communications workshop on March 27, 2012 followed by a functional exercise on March 28, 2012. The workshop will discuss policies and procedures for public messaging. The functional exercise will test county policies and procedures for public health response.

The Jefferson County Health Department will be setting up points of distribution for an anthrax response. Since schools will be in session, the JCHD will be utilizing the use of the JCHSEM Zumro tent. The alternate site will be at the Ranson Civic Center. Ms. Hite reported Jefferson Memorial Hospital will be involved in receiving, assessing and diagnosing patients. Ms. Hite reported JCHSEM will be activating their EOC once they receive notification.

New Business

Ms. Mehling reported last week was Flood Awareness Week. JCHSEM and the National Weather Service coordinated with each other in lowering the flood stage on the Shenandoah River at Millville from 13.5 feet to 10 feet. Ms. Mehling noted citizens will receive warning notifications quicker.

Ms. Mehling reported Ms. Miller is attending the Emergency Planning for Schools State Course at North Bend State Park, March 20-21, 2012.

Ms. Mehling reported JCHSEM received a bid for a companion animal rapid response trailer and supplies from Propac. The bid will now be proposed to the County Commission for approval. Ms. Mehling noted Ms. Miller is still working with the state on an Animals in Disaster Response Team Training for volunteers.

Ms. Mehling announced she will be speaking to the Shepherdstown Rotary Club at the Bavarian Inn at 7:30 am, April 10, 2012. Her presentation will be in regards to JCHSEM, what we do, partnerships, etc.

Ms. Mehling reported there will be a G197 Emergency Planning for the Special Needs Population Training at Chief Logan State Park on September 11-13, 2012 for those that are interested. An application can be found at <http://www.dhsem.wv.gov/training/Pages/default.aspx> and must be signed by Barbara Miller.

Ms. Mehling informed the committee of a new resource, FEMA Office of Disability Integration and Coordination website which provides guidance, tools, methods and strategies to integrate and coordinate emergency management inclusive of individuals with access and functional needs. Anyone can sign up for an email list to receive information. The website is <http://www.fema.gov/about/odic>.

Ms. Mehling will be emailing committee members a link to a video titled *What About the Children?* By Kathleen Henning. Ms. Henning is a former member of the Commission on Children In Disaster Evacuation, Shelters and Transportation. The video discusses the important aspects of diversity and preparedness.

Ms. Mehling also recommended committee members take IS-36 Multi-Hazard Planning for Childcare.

The next Emergency Planning for People with Special Needs Committee is scheduled for June 18, 2012 at 9:30 a.m. in the JCHSEM Emergency Operations Center, 28 Industrial Blvd, Kearneysville.

U.S. Department of Health & Human Services
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News Release

FOR IMMEDIATE RELEASE
May 31, 2012

Contact: HHS Press Office
(202) 690-6343

Winning applications from HHS Facebook challenge go live

New applications support personal preparedness for hurricanes and other emergencies

Two new free personal preparedness applications go live on Facebook today, as hurricane season begins, to help people support each other during an emergency and become better prepared by identifying lifelines. Lifelines are Facebook friends a user can count on, and who agree to check on them in an emergency, supply them with shelter, food, or other necessities, or provide the user's social network with an update about their situation.

"After disasters, a tremendous number of people use Facebook to post and share information, so developing a Facebook app that would help people establish social connections they'll need in an emergency seemed like a natural way to enhance community and individual resilience," explained Dr. Nicole Lurie, assistant secretary for preparedness and response, Health and Human Services, and a rear admiral in the U.S. Public Health Service.

The two apps, bRedd and Project: Lifeline, do more than allow users to identify lifelines. They also let users create and share personal preparedness plans, and track the status of their Facebook friends in disaster-affected areas. Both apps achieve the goals of helping families and friends to plan more easily, being better prepared when a disaster strikes, and more reliably and efficiently getting the word out about each others' health and safety.

This capability means people can more easily learn whether their loved ones are safe, helping the people affected by the disaster and those searching for missing people. The apps also allow users to print cards with a snapshots of their preparedness plans to carry in their wallets as quick references about what to do when a disaster strikes.

Both apps can be accessed through the ASPR website www.phe.gov/lifeline/ or directly through Facebook.

"The question is, who can you count on in an emergency and who can count on you?" Dr. Lurie said. "We know that people who have friends or relatives they can rely on for help are healthier and live longer than those who don't, and that every disaster has the potential to impact health, so having people you can depend on for help is especially important during a disaster. That's why we are encouraging everyone to identify their lifelines in advance."

These apps were winners of a challenge sponsored by the HHS Office of the Assistant Secretary for Preparedness and Response (ASPR). It was the first challenge for a Facebook application to be sponsored by the department.

After a thorough search of Facebook revealed a lack of personal preparedness apps, ASPR issued the Facebook Lifeline Application Challenge to bridge the gap. The challenge called on software application developers, entrepreneurs, social networking enthusiasts, members of the public health and emergency response communities to design new Facebook applications that would support individual and community resilience.

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Note: All HHS press releases, fact sheets and other press materials are available at <http://www.hhs.gov/news>.

You can follow HHS on Twitter [@HHSgov](#) and sign up for [HHS Email Updates](#).

Last revised: May 31, 2012



Centers for Disease Control and Prevention
CDC 24/7: Saving Lives. Protecting People. Saving Money through Prevention.

Press Release

CDC Division of News & Electronic Media
(404) 639-3286

CDC estimates 1 in 88 children in United States has been identified as having an autism spectrum disorder

CDC data help communities better serve these children

The Centers for Disease Control and Prevention estimates that 1 in 88 children in the United States has been identified as having an autism spectrum disorder (ASD), according to a new study released today that looked at data from 14 communities. Autism spectrum disorders are almost five times more common among boys than girls – with 1 in 54 boys identified.

The number of children identified with ASDs ranged from 1 in 210 children in Alabama to 1 in 47 children in Utah. The largest increases were among Hispanic and black children.

The report, *Prevalence of Autism Spectrum Disorders – Autism and Developmental Disabilities Monitoring Network, 14 Sites, United States, 2008*, provides autism prevalence estimates from 14 areas. It was published today in the *Morbidity and Mortality Weekly Report*.

“This information paints a picture of the magnitude of the condition across our country and helps us understand how communities identify children with autism,” said Health and Human Services (HHS) Secretary Kathleen Sebelius. “That is why HHS and our entire administration has been working hard to improve the lives of people living with autism spectrum disorders and their families by improving research, support, and services.”

“One thing the data tells us with certainty – there are more children and families that need help,” said CDC Director Thomas Frieden, M.D., M.P.H. “We must continue to track autism spectrum disorders because this is the information communities need to guide improvements in services to help children.”

The results of CDC’s study highlight the importance of the Obama administration’s efforts to address the needs of people with ASDs, including the work of the Interagency Autism Coordinating Committee (IACC) at the U.S. Department of Health and Human Services. The IACC’s charge is to facilitate ASD research, screening, intervention, and education. As part of this effort, the National Institutes of Health has invested in research to identify possible risk factors and effective therapies for people with ASDs.

Study results from the 2008 surveillance year show 11.3 per 1,000 8-year-old children have been identified as having an ASD. This marks a 23 percent increase since the last report in 2009. Some of this increase is due to the way children are identified, diagnosed and served in their communities, although exactly how much is due to these factors is unknown. “To understand more, we need to keep accelerating our research into risk factors and causes of autism spectrum disorders,” said Coleen Boyle, Ph.D., M.S.Hyg., director of CDC’s National Center on Birth Defects and Developmental Disabilities.

The study also shows more children are being diagnosed by age 3, an increase from 12 percent

for children born in 1994 to 18 percent for children born in 2000. "Unfortunately, 40 percent of the children in this study aren't getting a diagnosis until after age 4. We are working hard to change that," said Boyle.

The most important thing for parents to do is to act quickly whenever there is a concern about a child's development.

- Talk to your child's doctor about your concerns.
- Call your local early intervention program or school system for an assessment.
- Remember you do not need a diagnosis to access services for your child.

To learn more about this study, visit www.cdc.gov/autism.

For information on CDC's tools to help families track their child's development, visit www.cdc.gov/actearly

To learn more about the research CDC is doing on autism, visit www.cdc.gov/ncbddd/autism/research.html.

To learn more about the Administration's commitment to combating autism, visit http://www.hhs.gov/autism/factsheet_autism_support.html.

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[U.S. Department of Health and Human Services](#)

CDC works 24/7 saving lives, protecting people from health threats, and saving money to have a more secure nation. Whether these threats are chronic or acute, manmade or natural, human error or deliberate attack, global or domestic, CDC is the U.S. health protection agency.

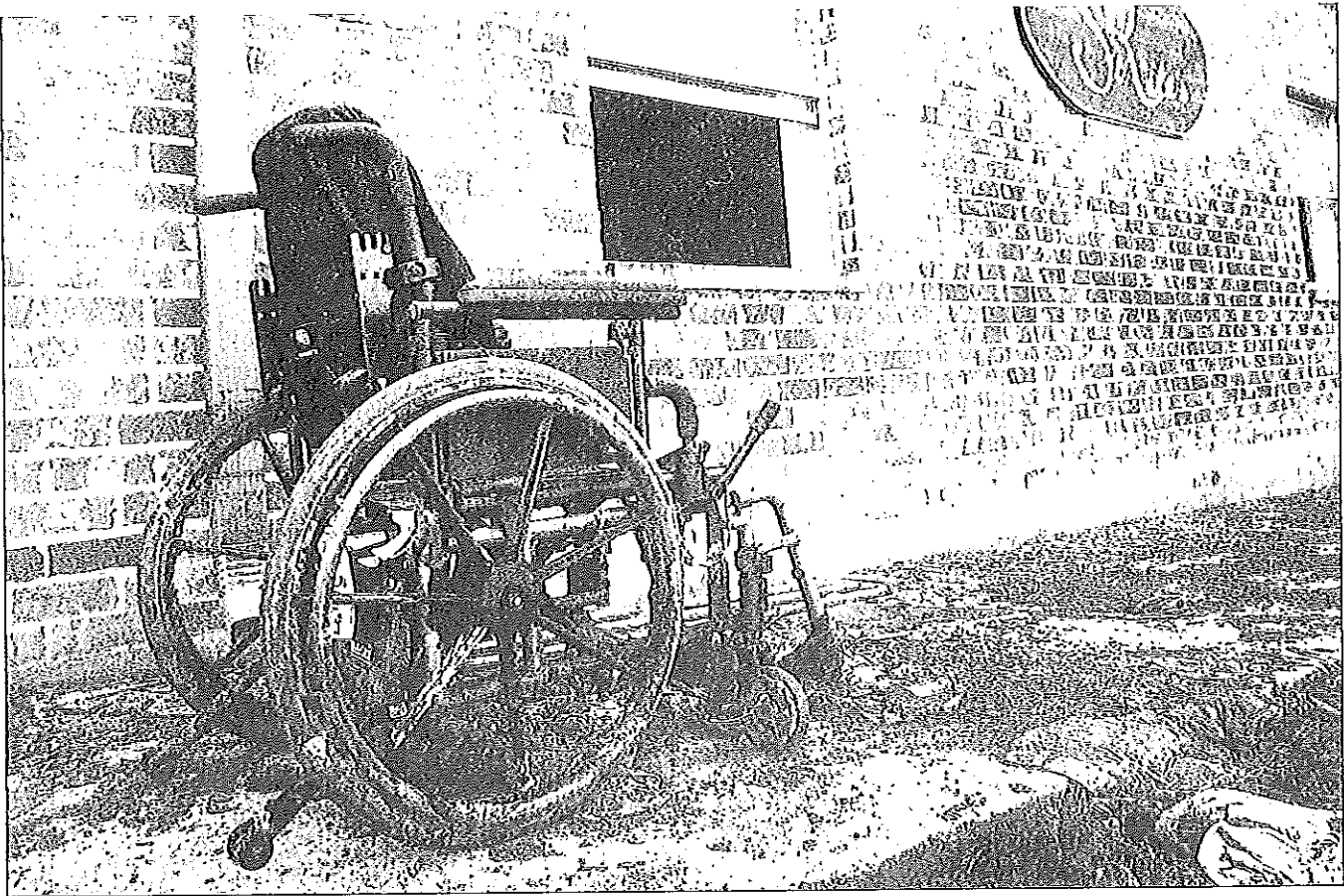
Historical Document: March 29, 2012

Content source: [Office of the Associate Director for Communication, Division of News and Electronic Media](#)

Notice: Links to non-governmental sites do not necessarily represent the views of the CDC.

Centers for Disease Control and Prevention 1600 Clifton Rd. Atlanta, GA
30333, USA
800-CDC-INFO (800-232-4636) TTY: (888) 232-6348, New Hours of
Operation 8am-8pm ET/Monday-Friday
Closed Holidays - cdcinfo@cdc.gov





AP file photo

A wheelchair sits outside St. Rita's Nursing Home in St. Bernard's Parish, La., after Hurricane Katrina. Nearly seven years after the hurricane exposed the vulnerability of nursing homes, serious shortcomings persist. 'We identified many of the same gaps in nursing home preparedness and response,' investigators from the inspector general's office of the Department of Health and Human Services wrote in the report, which is being released today.

Unprepared

Big gaps found in nursing homes' disaster plans

WASHINGTON (AP) — Tornado, hurricane or flood, nursing homes are woefully unprepared to protect frail residents in a natural disaster, government investigators say.

Emergency plans required by the government often lack specific steps such as coordinating with local authorities, notifying relatives or even pinning name tags and medication lists to residents in an evacuation, according to the findings.

That means the plans may not be worth the paper they're written on.

Nearly seven years after Hurricane Katrina's devastation of New Orleans exposed the vulnerability of nursing homes, serious shortcomings persist.

"We identified many of the same gaps in nursing home preparedness and response,"

investigators from the inspector general's office of the Department of Health and Human Services wrote in the report being released today. "Emergency plans lacked relevant information. ... Nursing homes faced challenges with unreliable transportation contracts, lack of collaboration with local emergency management, and residents who developed health problems."

The report recommends that Medicare and Medicaid add specific emergency planning and training steps to the existing federal requirement that nursing homes have a disaster plan. Many such steps are now in nonbinding federal guidelines that investigators found were disregarded.

In a written response, Medicare chief Marilyn Tavenner agreed with the recommendation, but gave no timetable for carrying it out.

Nationally, more than 3 million people spent

at least some time in a nursing home during 2009, according to the latest available data. Nearly 40 percent of them, 1.2 million, were in the top 10 disaster-prone states. The typical nursing home resident is a woman in her 80s or older, dealing with physical and mental limitations that leave her dependent on others for help with basic daily activities.

Investigators pursued a two-track approach. First they looked at the number of nursing homes that met federal regulations for emergency planning and training. Then they went into the field to test how solid those plans were, in a sample of homes drawn from 210 facilities substantially affected by floods, hurricanes and wildfires across seven states during

See DISASTER C6

SUPPORT GROUPS

■ **Moving Beyond Trauma**, an eight-week group, can help young

ful in planning for supplies. The group will meet from 5 to 7:30

10 a.m. to 2 p.m. the third Friday of every month at Trinity Lutheran

■ **Al-Anon and Alateen** programs are designed to help families

Disaster

FROM PAGE C5

2007-2010.

On the surface, things appeared to be in good shape. Ninety-two percent of the nation's 16,000 nursing homes met federal regulations for emergency planning, while 72 percent met the standards for emergency training.

A different story emerged when inspectors showed up at 24 selected nursing homes and started pulling files and interviewing staff.

The specific facilities in California, Louisiana, Minnesota, North Carolina, North Dakota, Tennessee and Texas were not identified in the report. All had been affected by disasters; 14 had evacuated and the remainder sheltered in place.

A detailed, well-rehearsed emergency plan is a basic requirement for disaster preparedness. But at one home, the emergency plan was in several boxes. At another one, it was on a legal pad.

Of the 24 emergency plans, 23 did not describe how to handle a resident's illness or death during an evacuation. Also, 15 had no information about specific medical needs of patients, such as feeding tubes and breathing equipment. Seven plans were silent on how to identify residents in an evacua-

tion, such as by attaching wristbands or name tags. Inspectors said 15 made no provision for including medication lists.

None of the nursing homes met a government recommendation for a seven-day supply of drinking water if residents had to shelter in place and their regular source of water was unsafe or unavailable.

Twenty-two had no backup plans to replace staff members unable to report for work during a disaster.

Transportation was an Achilles' heel. None of the nursing homes had planned to ensure transportation of adequate food and water for evacuated residents, while 19 had no specific plan for transporting wheelchairs and similar equipment. Twenty-two of the plans did not describe how the nursing home would transport medications.

Seventeen had no specific plan for working with local emergency coordinators to decide whether to evacuate or shelter in place.

Not surprisingly, administrators and staff from 17 of the nursing homes told investigators they faced substantial challenges in responding to the disasters that hit their areas. A common problem was that

transportation contracts were not honored after an evacuation was called. Four nursing homes that did evacuate said they had problems trying to keep track of residents and supplies, in some cases temporarily losing patients.

The vulnerability of nursing home patients became a national issue when 35 residents of St. Rita's Nursing Home just outside New Orleans perished during Katrina. Some drowned in their beds.

Prosecutors charged the owners of the facility with negligent homicide, saying they should have evacuated the home. But a jury acquitted them of all charges. Some jurors said afterward that Louisiana authorities should have taken responsibility for the safety of nursing home residents ahead of the monster storm.

A Houston Chronicle investigation found that, all told, at least 139 nursing home residents died during the hurricane or its aftermath.

The top 10 disaster-prone states, as ranked by historical statistics on major disaster declarations, are Texas, California, Oklahoma, New York, Florida, Louisiana, Alabama, Kentucky, Arkansas and Missouri.

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Health

Jefferson County Homeland Security and Emergency Management
Emergency Planning For People with Special Needs Committee
June 18, 2012
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 18, 2012 at 9:30am. Present were: Terri Mehling, JCHSEM; Jennifer D. Maggio, JCHSEM; Carl French, Berkeley County Health Department; Jeff Levesque, American Red Cross; Kristen Lewis, Medical Reserve Corps; Kathy Knight, Green Tree Associates and Carolyn Brubaker, Silver Lining.

Introductions

Ms. Mehling, JCHSEM Deputy Director, opened the meeting with approval of minutes. Carl French moved to approve the minutes of the March 2012 meeting and Kathy Knight seconded the motion, all approved.

Old Business

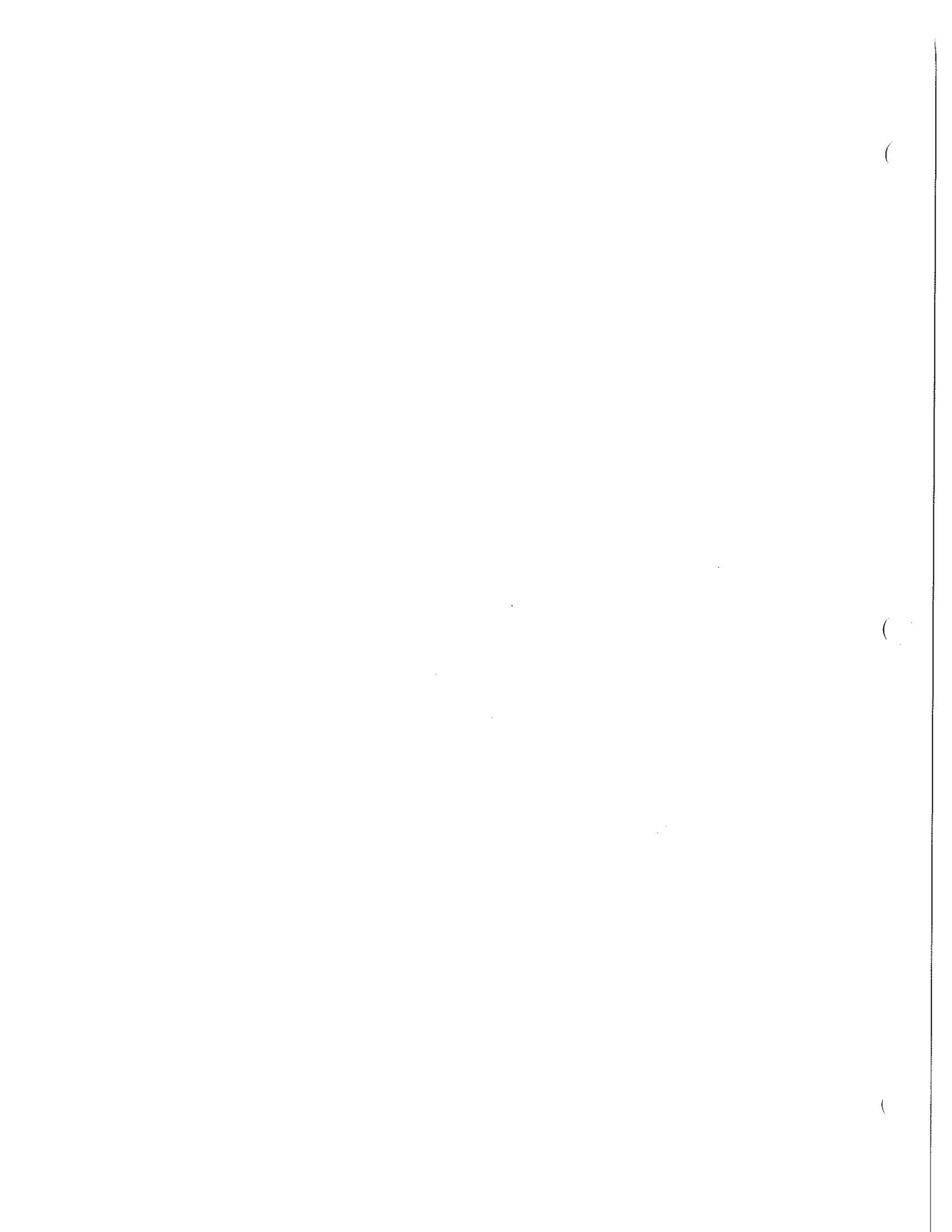
Ms. Mehling reviewed the FY2012 Goals & Strategies document with the committee. Ms. Mehling asked for a motion to approve the FY2012 Goals & Strategies document. Ms. Brubaker motioned to approve the document and Mr. French seconded the motion, all approved.

Ms. Mehling reported CERVIS has been launched. A list of instructions has been sent to volunteers on how to log into CERVIS. Volunteers can update and verify their information and sign up for events they would like to volunteer for. Ms. Mehling will shortly release an event for volunteers to sign up for the Jefferson County Fair.

Ms. Mehling noted the Whole of Community Program is ongoing. Committee members are still in the process of renewing old partnership agreements and targeting new partners.

Ms. Mehling reported the Pet Sheltering Trailer has been delivered. JCHSEM staff, JC Maintenance Department and Denise Lambiotte from JC Animal Control inventoried the trailer and the supplies it contained. Ms. Mehling noted JCHSEM is looking for funding for training for an Emergency Animal Sheltering Course. If anyone has ideas on where we may find funding to please let us know. The trailer is available for deployment for anywhere in the state.

Ms. Mehling reported on the Jefferson County Health Department NCR Full Scale Exercise that took place March 28, 2012. The Jefferson County EOC and the Jefferson County Emergency Communications Center worked as a closed POD. Dr. Bobby Jones assisted in the JC EOC. Mr. Levesque noted the James Rumsey LPN class as well as CERT Volunteers assisted in the exercise. A discussion followed.



New Business

Ms. Mehling reviewed the attached article *Project: Lifeline and bReddi*. These are new U.S. Department of Health and Human Services Facebook applications. Facebook users are able to set up their emergency plan and contact numbers online and share with their family and/or friends.

Ms. Mehling reviewed the press release regarding the CDC study on Autism. Ms. Brubaker noted the organization EPIC offers Autism Awareness Training. A discussion followed.

Ms. Mehling reviewed the article on nursing home disaster plans. A discussion followed.

Ms. Mehling reported there will be a Risk Assessment and Mitigation Planning Committee meeting, June 19, 2012 from 2-4pm. The meeting will close out the 2008 plan. The All Hazards Risk Assessment Plan must be revised every 5 years. A kick off for the 2012 plan will be next month. Ms. Mehling will be working with JH Consulting in creating the 2013 All Hazards Risk Assessment Plan. The new plan must involve THIRA (Threat and Hazard Identification and Risk Assessment).

Ms. Mehling reported JCHSEM is looking into the future direction of the People with Special Needs Committee. Due to low attendance, the JCHSEM staff is looking into how they can increase attendance. A discussion followed.

Ms. Mehling noted WVSeniorCare.com offers a lot of information on long term care options. There are additional resources as well. A hard copy can be ordered at no cost.

Ms. Mehling showed the committee new print material for people with special needs from FEMA Publications. There are items in large print and braille. Ms. Mehling gave information to committee members on how to order the materials at no cost.

Member Sharing

Mr. French reviewed the recent Zombie Attack Point of Dispensing Exercise. They received great response. The drill was open to the public and trained attendees about a closed POD, what was involved and how to manage it.

The next Emergency Planning for People with Special Needs Committee is scheduled for September 17, 2012 at 9:30 a.m. in the JCHSEM Emergency Operations Center, 28 Industrial Blvd, Kearneysville.

