## L.E.P.C. of Albany County



## Local Emergency Planning Committee PO Box A, 58 Verda Avenue Clarksville, New York 12041



2014 Meeting

3.12.2014 11:30am Albany Medical Center (Albany)

Meeting called by: Mr. Dan Lowinski Facilitator: Mr. Dan Lowinski Note taker: George Morehouse

Attendees: 25 See attached attendance sheet (1).

Meeting started at 11:46am with a self-introduction.

Reading of Thursday, January 30<sup>th</sup>, 2014 meeting minutes:

Accepted as read by Peter Berry and seconded by Doug Miller.

Presentation: Hospital Response for a Mass Casualty Incident (MCI)

Presenter: Mr. Scott Heller, AMC Director of Emergency Management

The hospitals vulnerability analysis is revised on a yearly bases. The top five vulnerabilities are a priority for yearly incident planning. Fire is the greatest concern, due to smoking in or near trash, shrub mulch and bathrooms.

AMC has approximately 45 different locations in New York State. There is ongoing training on general and specific topics through all locations. The drills and exercises are both center wide and unit specific with updates and results forwarded to senior hospital officials.

Hospital Incident Command Structure (HICS) is dynamic and flexible and a planned design for "business not as usual". The Administrator On Call is the Incident Commander for all emergency management incidents at the hospital not only a mass casualty incident.

There are three levels of hospital response activation. Level Three is when the incident can be managed by currently scheduled staff. Level One is when addition staff and resources are brought in for an expected patient surge.

The Emergency Department (ED) Mass Casualty Plan is not only for an accident with multiple injuries, but also used when there is a great number of unrelated illness arriving. The ED will activate a stand-by alert if there is a potential patient care impact from an incident. The hospital may pre-populate staff, pre-position staff and evaluate the preparedness of the ED prior to patient arrivals.

The hospital decontamination (decon) ability consists of a hazardous materials Level B team, which is available at all times. There is a fixed decon room at the ambulance arrival area, also available is an outside pre-lined tent with hot and cold water, and heating and cooling capabilities. A regional decon mobile trailer is also available for response to an incident.

Emergency Management is based on a whole community approach, with coalition building, visibility and acceptance by the full community.

## Floor Discussions:

The use of Robert's Rule of Order has been adopted and will be used to better manage LEPC meetings and records.

The LEPC doesn't have enforcement powers over the manufacturing, storage or transportation of hazardous items. The LEPC collects county wide data, reviews this data and then plans for manmade or natural incidents.

Next meeting: To be scheduled.

The meeting was adjourned at 12:51pm