

COMMUNICABLE DISEASE PREPAREDNESS COMMITTEE (CDPC)
MINUTES OF DECEMBER 13, 2016
ACADEMIC RESEACH C, ROOM 101 - LAS CRUCES, NM

Attendees

Minerva Baumann, Johnny Carrillo, Matt Crouse, Katrina Doolittle, JoAnne Dupre, Lori McKee, William Harty, Louis Huber, Tim Query, David Schoep

Call to Order at 3:00 p.m. by CDPC Co-Chair Katrina Doolittle.

I. Introductions

II. Minutes of September 13, 2016

- No corrections or additions.
- Minutes of the 9/13/2016 CDPC meeting were approved as presented.

III. Old business: Continuity of Operation Plans (CoOP)

- Updates received:
 - a. Animal Care Facilities – coordinated through Dr. Ivey in Sept/Oct
 - i. Caldwell Fisheries - draft received, commented
 - ii. Biology - approved 9/12/16
 - iii. Veterinary Entomology Research Laboratory - draft received, commented
 - iv. Animal Care Facility - draft received, commented
 - v. Animal & Range Sciences - draft received, commented
 - b. Intercollegiate Athletics – 12/9/2016 – complete
 - c. NMDA - draft received, commented, statewide plan
 - d. Facilities and Services Operations update 12/13/16 – need AVP signature
 - e. Environmental Health & Safety updated 12/5/16; refresher training completed
- Need updated:
 - a. DACC Health & Public Service – contacted Dean Scribner in June 2016 and request to DACC President Renae Scott; Kathy Reddington is coordinating CoOP development for all DACC
 - b. Student Services – Due 5/29/11 – July 2015 provided CoOP overview to Division of Student Success leaders, no plans submitted yet
 - c. Food Protection and Emergency Preparedness Center - Due 12/2/15 – working on statewide plan EFS-11 which is about 60% done; this unit is part of the emergency functions of the state, so the CoOP is an addendum to the state plan.
- NMSU expects to have an inspection from AIG in January or February. Fire Protection Services and Facilities will provide information for the building insurance assessment. The inspectors will be looking at the CoOP plans for buildings that have essential functions, such as Corbett Center and Pan American

Center. These units need Continuity of Operations Planning to insure that building services remain functional to provide dining operations, custodial, facilities, electrical and utilities. Response received from Auxiliary Services; no response yet from Special Events.

IV. New Business

1. Review/revision of Communicable Disease Response Plan

- Handout distributed for review and discussion: Appendix F (vii) “Communicable Disease” of the *All Hazards Emergency Operations Manual*
- Revisions from Chief Lopez were incorporated to define the “Incident Response” indicators. Level 1 is minimal impact to the entire population of students, faculty, and staff, and doesn't need outside assistance from Department of Health (DOH) or the community. Minor findings may trigger us to bring our broader task force together. We usually will have contact with DOH, who will help lead the response to infectious illness.
- References to “influenza” were removed and replaced with “infectious illness” since these actions also relate to outbreaks such as meningitis, food-borne illness, and other communicable diseases.
- The term "medical reserve corps" was replaced with “NMSU medical volunteer staff” in most sections, in order to differentiate from the state Medical Reserve Corps.
- NMSU Nursing needs more time to review this appendix for details about the role of nursing faculty and students. They have engaged in drills such as the Point of Dispensing (POD) training with DOH, and should have input in this plan.
- Discussion was held on issues of overtime, volunteers, and liability. Some medical staff are hourly employees, and may not be able to work overtime. Clarification is needed to define the essential functions for which they will be available. Not all staff have to be present during an incident. We have some time to work through this as the All Hazards plan is going to be updated, and the Fair Labor Standards Act hourly changes have not been implemented yet.
- Per our continuity of operations policy, an employee may be asked to do a job that is not in their job description. In a disaster this may occur, and they are still covered as employees under Worker’s Compensation. Student volunteers, such as those that help with residence hall move-in day, are covered under liability insurance. However, if an employee volunteers to do something outside of the job description, and we have no record that they were asked to do that, then they are responsible for their own medical costs in an incident. Housing has an indemnity waiver for move-in day to cover volunteers.
- Volunteer groups who perform ongoing functions for the university, such as the Regents and the Foundation board members, are identified in the annual risk survey

for liability insurance coverage. Other groups may need to be identified in order to put them in this plan as volunteer medical staff.

- Discussion was held on details in the section for Housing, to clarify whether the term “North campus students” refers to residence halls or single-student housing. The goal here is to close the residence halls for social distancing during an extreme event. For those students who are not able to leave campus, this plan supports the Community management plans by providing services and boxed meals to the area where students are housed. We are talking about a high-hazard communicable illness, Level 2, in which the public health department has declared that we have a serious emerging threat that is going to impact every group that is in close quarters. We wouldn't even be meeting like this. There would be social distancing imposed, travel warnings, it's almost like a quarantine type of situation. One example is a bacterial meningitis outbreak that would encompass a dormitory. So if Garcia East breaks out in meningitis, the east side could be quarantined with separate laundry facilities, and other students could be moved to another housing area. Compare best practices with other institutions.
- Another mitigation strategy, for students who are not yet ill, is to provide prophylactics. Other universities have seen outbreaks of meningitis and mumps. We have not had this kind of situation here. Other states like Texas and Wisconsin require pre-enrollment vaccinations for measles, mumps, rubella (MMR), meningitis, chicken pox, and tetanus, pertussis (TDaP); NMSU does not because it is a barrier to enrollment and we do not have the infrastructure to track vaccinations. Many students are vaccinated in their teenage years, but may not have access to records or may be due for a booster dose. We remind about vaccinations in several ways; however, since we don't have access to vaccination records in the midst of an event, prophylaxis would be a method of choice.
- Revision was made for the section “Research and Graduate Studies” to remove “Graduate Studies” since the actions refer to research operations and animal care. The actions that apply to Graduate Studies are covered under “All Department Heads and Unit Directors”.
- Revision was made to remove the duplicate section of “All Department Heads and Unit Directors”.
- The term Medical Reserve Corps is still listed under the section for Department of Health, and it was left there because that is the correct term for the DOH component. The previous discussion concerning the volunteer terminology for NMSU participants is something to keep in mind for all of our continuity of operations planning.
- In the event of a natural disaster, the plan provides guidance and is flexible. We are all going to do what is needed to mitigate, and will sort out details about funding after. This planning is important to help us keep good records, so that upon a disaster declaration we will be able to apply for recovery reimbursement for our efforts.

- Regarding communications and messaging, the Dean of Students is responsible for working with Housing for messages to students, especially if classes are being canceled, and will also communicate with Campus Health Center for the messaging system. Student Affairs and Student Life should each have a CoOP.
- International and Border Programs updated the Crisis Management Plan, and the revision has been adopted in the All Hazards Emergency Action Plan.
- **ACTION**: Katrina Doolittle to revise the Housing section by moving the closing of the residence halls to Level 3, and keep the last bullet point, “consolidate ill students to create distance”, in Level 2.
- **ACTION**: Members were requested to continue reviewing this appendix, especially in regard to the Level 2 and Level 3 indicators. Determine if the actions are at the right level, as in the previous discussion with housing actions. Send revisions to Katrina Doolittle, as a “red-line” review-tracked changes document.
- **ACTION**: Katrina Doolittle to follow-up with Conni DeBlicke for review of sections for Nursing, and contact Dean Scribner for DACC review. If there are no specific actions for these groups, these sections can be deleted from this appendix.
- **ACTION**: Katrina Doolittle to contact Student Affairs and the Dean of Students for CoOPs and for review of this appendix for actions regarding communications and messaging.
- **ACTION**: Lori McKee will communicate with Bernadette Montoya for the CoOP from Student Affairs.

2. Recent incidents - none

3. Updates - Campus Health Center - Lori McKee

- No flu cases have been reported. Peak flu season is usually seen in February. We are down to the last doses of flu vaccine. We have not seen much respiratory illness, probably due to the long warm fall season. You might see a lot of sick people when they come back after travel and after the break, so that is what we are planning for. One physician is retiring from Campus Health on January 31, and a replacement will be hired. Right now CHC has only four providers.
- CHC cannot hire Dr. Diven, but has made a mutual aid agreement with Fire Protection Services, so Dr. Diven can act as the Medical Director for campus through his association with Fire. He is retired and can only work up to 0.25 FTE.
- Discussion returned to the appendix review for Medical Incident Command. Previously, we were handling this through Campus Health Center; now due to budget constraints, we no longer have the staff for an independent medical incident command. We are planning to work with our first-responder partners as a unified command. We already work well and will continue this good practice.
- Revision to the appendix can be made to move Fire Chief to the Medical Incident Command instead of CDPC.

- In Medical Incident Command section, in Level 1, the last bullet point, the word “solidify” should be changed to “identify” Medical Reserve personnel designation. This is where we need to make a decision about whether we are going to have any NMSU volunteers.
- **ACTION**: Lori McKee to follow up with Chief Lopez for revisions to the Medical Incident Command section of the appendix, to discriminate between the state Medical Reserve and our internal personnel with training in medical services. We may decide not to include our internal staff in this plan.

NEXT MEETING: March 2017

ADJOURN at 3:44 PM.

Prepared by JoAnne Dupre

Distributed 6/12/17 and 9/12/17 Approved by members 9/12/17