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State of New Hampshire
Department of Health and Human Services

NEW HAMPSHIRE HOSPITAL

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Nicholas A. Toumpas
Commissioner

Sheri L. Rockburn
Acting Associate Commissioner

Robert J. MacLeod
Chief Executive Officer

April 28, 2014

Her Excellency, Governor Margaret Wood Hassan
and the Honorable Council
State House
Concord, NH 03301

REQUESTED ACTION

Pursuant to the provisions of NHRSA 4:8, Gifts to the State and Chapter 144:39, II, Laws of 2009, Additional Revenues, authorize the Department of Health and Human Services, New Hampshire Hospital to accept and expend a monetary donation from the New Hampshire Hospital Association, Foundation for Healthy Communities to fund New Hampshire Hospital Pandemic Preparedness and Response initiatives including employee education in the amount of \$7,000 effective upon Governor and Executive Council approval through June 30, 2014, and further authorize the allocation of these funds in the accounts below.

05-95-94-940010-8028 HEALTH AND SOCIAL SERVICES, DEPT. OF HEALTH AND HUMAN SERVICES, HHS: NEW HAMPSHIRE HOSPITAL, NEW HAMPSHIRE HOSPITAL, BIOTERRORISM HOSP PREPAREDNESS

Fiscal Year	Class/Object	Class Title	Current Modified Budget	Increase (Decrease) Amount	Revised Modified Budget
SFY 2014	005-402895	NHH Assn-Bioterrorism Hosp Preparedness	\$0.00	\$7,000.00	\$7,000.00
		Total Revenue	\$0.00	\$7,000.00	\$7,000.00
SFY 2014	054-500527	Grants to Organizations	\$0.00	\$7,000.00	\$7,000.00
		Total Expense	\$0.00	\$7,000.00	\$7,000.00

EXPLANATION

In accordance with the U.S. Centers for Disease Control and Prevention and Public Health Emergency Response Cooperative Agreement, the New Hampshire Hospital Association distributed funds to assist New Hampshire Hospital in Pandemic Preparedness and Response to any emergency impacting New Hampshire.

The monetary donation received from the New Hampshire Hospital Association, Foundation for Healthy Communities is to be utilized to support the education and integration of facility specific plans involving New Hampshire Hospital's Pandemic Preparedness and Response and the Public Health Emergency Response objectives: (a) support key personnel to attend training and conferences; (b) revision of Epidemic Response Plans including controlling airborne infections; (c) review/revision of workforce vaccination plans; (d) continue planning, training and drills/exercises; and (e) other activities directly linked to Statewide or Hospital After Action Reports/Improvement Plans.

In response to the anticipated two-part question, "Can these funds be used to offset General Funds?" and "What is the compelling reason for not offsetting General Funds?" New Hampshire Hospital offers the following information: These funds may not be used to offset General Funds as they are specifically granted to New Hampshire Hospital for the purpose of providing the services described above, in accordance with federal grant requirements.

Area served: Statewide.

Source of funds: These funds are 100% Other Funds from the New Hampshire Hospital Association, Foundation for Healthy Communities.

Attached is the Notice of the Grant Award. Notice of these funds was received on February 21, 2014.

In the event that these "Other Funds" become no longer available, General Funds will not be requested to support this program.

Respectfully submitted,

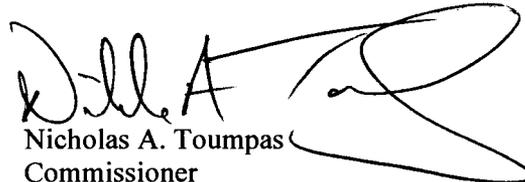


Robert J. MacLeod, DHA, FACHE
Chief Executive Officer



Sheri L. Rockburn
Acting Associate Commissioner

Approved by:



Nicholas A. Toumpas
Commissioner

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FEB 21 2014

BUSINESS OFFICE
NH HOSPITAL



February 13, 2014

Robert MacLeod
CEO
New Hampshire Hospital
36 Clinton Street
Concord, NH 03301

Dear Mr. MacLeod,

In accordance with the Hospital Preparedness Program (HPP) grant from the U.S. Department of Health and Human Services, Office of the Assistant Secretary for Preparedness and Response, (ASPR), the New Hampshire Hospital Association (NHHA) is pleased to distribute funds again this year to assist you in preparing to respond to any emergency affecting New Hampshire. These funds are released to you because the following conditions have been met:

- Reporting forms for previous funding have been submitted
- All paperwork such as survey forms, contact information, responses to requests for data (including daily bed status data), etc. has been received
- Your Hospital Emergency Management Coordinators or designee continue to participate in the bi-monthly meetings (mandatory attendance at 5 of 6 meetings a year)
- Your hospital continues to participate in the Hospital Mutual Aid Network
- Your hospital spends funding as intended by the grant guidance
- Your hospital continues to integrate emergency preparedness and response activities as a participating member in your healthcare coalition (including public health network, police, fire, EMS, health officers, emergency management) and State partners (including NH Department of Safety and NH Department of Health and Human Services)
- You have self-certified that the hospital is in compliance with the 11 elements of the National Incident Management System.

2014 Funding Allocations

The funds being distributed to your hospital now are in accordance with the allocation methodology developed by the Implementation and Sustainability sub-committee of the Hospital Emergency Preparedness Group. The allocation strategy is based on the following considerations:

- Recommended expenditures will be for work with the healthcare coalition to meet the capabilities described in the grant guidance, training and exercising and maintenance and sustainability of equipment inventory, and support for participation of the Hospital Emergency Management Coordinator.
- Training and exercise expenses are largely based on numbers of personnel participating which correlates to number of staffed beds.

Allocations breakdown:

- \$7,000 for New Hampshire Hospital
- \$16,500 for critical access hospitals
- \$28,500 for hospitals over 25 but under 200 beds

- \$30,000 for hospitals over 200 but under 300 beds
- \$32,000 for hospitals over 300 beds

Total allocations to hospitals for January 2014: \$600,000

Spending Plan for January 2014 Allocation

The following items are allowable expenditures in accordance with the ASPR Hospital Preparedness Program grant guidance:

- Participation in the regional healthcare coalition and meeting the eight capabilities as outlined in the guidance (see attachment). The guidance is designed to align with the CDC Public Health Preparedness grant. The focus has shifted from facility-based planning to a region-wide, healthcare system focused priority. Although hospitals receiving funding are expected to maintain preparedness, they are also expected to meaningfully participate in the development of healthcare coalitions in their regions.
- Ensure participation of your Emergency Management Coordinator in required bimonthly (5 of 6 per year) meetings of the Hospital Emergency Management Group, and other recommended meetings and trainings. A designee may temporarily stand in for the Coordinator, should something prevent the coordinator from attending. Also to attend national conferences, related training and exercises, as deemed appropriate by the State.
- Ensure that your Emergency Management Coordinator has the tools and training to do their work efficiently, in the preparedness of the hospital and in response to an emergency, which affects the hospital. Tools may include technology solutions such as cell phones, pagers, radios, tablet computers, emergency management software, etc.
- All hospitals now have a baseline of basic equipment for personal protection and other functions of emergency preparedness such as evacuation. Hospitals are expected to use funds to sustain the equipment and maintain par levels of emergency preparedness equipment purchased with ASPR funds. Your Emergency Preparedness Representative has received tools to assist in that process.
- Maintenance of past priorities such as decontamination, evacuation and surge capacity
- Annual review and revision of written Emergency Operations Plan
- Training of hospital staff in emergency preparedness. Examples of appropriate training including first receiver training (initial and refresher), evacuation plans and equipment, NIMS, HICS, individual response position training. Staff salaries can be reimbursed with ASPR funds while they attend training, but ASPR funds cannot pay for the salaries of those who replace the person attending training.
- ASPR funds can pay for planning for, implementation of and participation in exercises as long as they are conducted in accordance with the Homeland Security Exercise Evaluation Program guidelines in the ASPR grant guidance and include participation from healthcare coalition members.
- Evacuation planning, equipment, training and exercises
- Interoperable communications
- Mass fatality planning

- National Incident Management System NIMS compliance*
- Other priorities specific to your facility that complements grant goals, if determined appropriate by the State

* Annual self-certification of NIMS compliance in all 11 elements is required for funding.

Financial Reporting Requirements for ASPR HPP Allocation

Estimated Budget (for each allocation): prepare an estimated budget and justification for how the allocation will be expended. The justification must include how each item fulfills the individual hospital response to the capabilities. The emergency preparedness contact designated for your hospital will use the "*ASPR HPP Estimated Budget*" form to submit this information.

Expenditure Reports (biennial, January and July): prepare a detailed report on how the ASPR HPP funding was *actually* spent and a description of how outcomes derived from the use of the funding helped to meet the capabilities. The emergency preparedness contact designated for your hospital will use the "*ASPR HPP Expenditure Report*" to submit this information. **Invoices/receipts should be submitted with the form for single purchases/expenditures over \$7500.**

Audit Controls - The money you are receiving is from the Federal "Hospital Preparedness Program" CFDA #93.889.

As the contractor for the State, NHHA is responsible for appropriate expenditures of the allocations and the monitoring thereof. During the course of the year, we are required to periodically document how the money is being spent. This can be done by randomly selecting a hospital to request copies of invoices to substantiate purchases or by visiting a hospital to observe the way the money has been utilized.

It is very important that the conditions described above are completely adhered to accordance with the set schedule and that requests for additional documentation, site visits, reviews or data requests be fulfilled in a timely manner. Failure to comply with requirements by the deadlines set could result in a delay of future allocations.

It is a privilege to work with all of the hospitals on emergency preparedness. We is dedicated to meeting the needs of the hospitals while collaborating with local and state partners on this very important project.

If you have any questions, please contact me at (603) 415-4261 or dyeager@nhha.org.

Sincerely,



Deborah A. Yeager
Director of Emergency Preparedness