



Policies and Procedures

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Record of Changes

Date Accepted	Section Changed	Notice
12/17/15	Section IV—NPHCC Assets	Notice sent to Steering Committee via email 12/8/15

I. Personnel and Subcommittees

See Attachment 7 for Personnel and Subcommittee Summary
See NPHCC Bylaws for more Personnel and Subcommittee information.

A. Coordinator Evaluation

1. A performance review/evaluation will be conducted for the Coordinator annually.
 - a. The evaluation will be led by the Chairman with assistance of the Fiscal Agent.
 - b. The evaluation will be sent to all Steering Committee members for their input.
 - c. The evaluation will be reviewed at the next SC meeting with the Coordinator.

II. Membership

More information found in NPHCC Bylaws.

A. Core Medical

1. The agencies of the Core Medical group (see Appendix 3 of Bylaws—Organizational Chart) will provide three persons who can cast votes for their agency (see Attachment 4—Membership Agreement)

B. Support Entities

1. A representative for each Support section (see Appendix 3 of Bylaws—Organizational Chart) will be nominated and voted on by the Steering Committee (SC).
2. The section representative will serve a 1-year term, with no term limits. See Section I above.
3. The section representative will have voting rights of the SC.
4. The representative of each of the Support agencies will list two other contacts among their section who can cast a vote for their section at SC meetings.
5. Two emergency managers will remain on the SC as active, voting members, since that is how NPHCC was structured from the beginning. This will be reevaluated when/if one of them chose to step down from the SC.

III. Reimbursement and Funding Requests

All reimbursement and funding requests will follow the guidelines defined in the NPHCC Bylaws.

A. Process for Equipment and Supply Purchases

1. Any member requesting funding from NPHCC must complete a Request for Funding form (see Attachment 1), delineating items or services requested, the amount of funding requested, how the request fits into NPHCC goals and if the request is consistent with allowable purchase guidelines.
2. The requesting entity will submit the request to the NPHCC Coordinator or designee at least one week prior to the Steering Committee meeting; the request will then be forwarded to all members for a vote at the Steering Committee meeting.

3. There is a \$2,000 spending limit per steering committee entity per contract year for equipment and supplies (not including sustainability and maintenance equipment). Agencies in the Core Medical group (hospitals and public health) will each get the allotted \$2,000 and each section of the Support group will divide the \$2,000 among their section. See By-laws for organizational chart.
4. Only one-quarter of the \$2,000 will be allowed each quarter for the Support group.
5. Purchasing sustainability and maintenance equipment and supplies will be done as a group or bought in volume if possible to save money by receiving volume discounts.
6. NDHHS requires prior approval of purchases exceeding \$2,000.
7. Approval will follow voting guidelines delineated in the NPHCC Bylaws.
8. Funding reimbursement requires the following documentation:
 - a. Request for funding form (Attachment 1)
 - b. An invoice
 - c. Proof of any bids required
 - d. A cancelled check showing payment (if payment is not made directly to vendor)
 - e. A memorandum of agreement (MOA) regarding use of the product/service, where applicable

B. Travel Expenses

1. Reimbursement will be made upon submission of a signed Expense Report (see Attachment 2) and appropriate receipts.
2. Contact NPHCC Coordinator for an Excel copy of the Expense Report

C. Requests for Training Reimbursement

1. NPHCC will reimburse up to \$1,500 per member facility annually towards training expenses.
2. Agencies in the Core Medical group (hospitals and public health) will each get the allotted \$1500 and each section of the Support group will divide the \$1500 among their section.
3. Documentation required for reimbursement:
 - a. Training Reimbursement form (see Attachment 3)
 - b. A certificate of attendance or completion
 - c. All related receipts

D. Exercise Stipends

1. Each Steering Committee member agency can request funding to conduct an exercise.
2. Core Medical agencies will be eligible to each receive \$200. Support agencies and their constituents are eligible to each receive \$200 and will be reviewed and awarded on a case-by-case basis. (see Bylaws, Appendix 3)
3. To be eligible the exercise must pertain to disaster preparedness and the NPHCC Coordinator and health departments must be invited to participate.

4. Reimbursement will be paid upon receipt of an After Action Report submitted to the NPHCC Coordinator.

IV. NPHCC Assets

A. Inventory and Resource Management

1. The NPHCC Coordinator is responsible for maintaining a current list of NPHCC assets and resources
2. Each NPHCC entity is responsible for conducting inventory annually of any resources and/or assets held for or purchased by NPHCC and providing the updates to the Coordinator and updating Memoranda of Understanding (MOUs) as appropriate.

B. Trailers

1. Mobile Medical Asset
 - a. See Annex B of Emergency Support Plan
2. Bioterrorism (SWNPHD) and Decontamination (CH) trailers
 - a. Bought with West Central Medical Response System (WCMRS)/NPHCC dollars
 - b. Is and will remain property of NPHCC
 - c. Insurance, registration, and licensing will be paid for by the housing agency
 - d. Maintenance of the trailer itself will be the responsibility of NPHCC
 - e. MOU will be signed and updated with each agency

C. Disaster Surge Caches

1. Disaster caches have been established and placed at each NPHCC hospital for times of emergency response.
2. The NPHCC Coordinator, Coordinator Back-up, and/or Steering Committee have the authority to direct the deployment of the disaster surge caches in response to an emergency.
3. Disaster caches have been gifted back to each hospital
 - a. The NPHCC Coordinator will not conduct an inventory on these caches
 - b. The hospitals agree to continue to maintain these caches above and beyond their normal inventory and rotate the inventory to keep it from outdated.
 - c. The NPHCC Coordinator will keep documentation (MOUs) from each hospital that is housing disaster cache supplies. The MOU will be sent out annually to each hospital for updates and signatures.
 - d. Annually, each hospital will inventory their cache supplies, notify coordinator when complete, and sign the MOU.
4. Cache Usage Policy
 - a. The HICS Form 257—*Resource Accounting Record* (see Attachment 5 below) will be filled out by the transferring facility and a copy provided to the NPHCC Coordinator within 30 days of the event.

- b. The facility activating or requesting the medical surge cache will provide a written report, Medical Surge Cache Usage Report (see Attachment 6 below), to the NPHCC Coordinator within 30 days of the event.
- c. Medical Surge Cache items may be shared with response organizations other than the hospital; however, the NPHCC Coordinator or steering committee must approve any allocation of the cache items. They must follow the procedure listed in this section.
- d. Each hospital shall notify the NPHCC Coordinator as soon as possible upon internal use of any medical surge cache supplies.
- e. Each facility may contact the NPHCC Coordinator for additional assistance with transportation of the cache items.
- f. If more than one facility is requesting cache supplies, the coordinator will convene the steering committee or ad hoc leadership committee to determine allocation of cache supplies.

V. Medical Reserve Corp (MRC) Support

A. NPHCC Support of MRC

1. NPHCC Coordinator will sit on MRC Steering Committee as appropriate
2. Financial support will be provided as allowed and available by DHHS and the HPP grant
3. Assistance and support will be provided for MRC activities and exercises as appropriate
4. NPHCC will promote and incorporate MRC into disaster planning and activities as appropriate

B. Financial Support

1. NPHCC will provide MRC \$2,000 annually to pay for MRC activities.
2. NPHCC will include MRC in the mass notification system. Expenses for this will be taken out of the \$2,000 annual stipend.
3. NPHCC will pay the Coordinator's salary as per her contract with the MRC Steering Committee. Changes in salary will be voted on by NPHCC Steering Committee.
4. Financial support will be reviewed annually or as necessary.
5. Changes to MRC financial support will be made by NPHCC Steering Committee according to their bylaws, policies, and procedures.

C. MRC Reporting

1. The MRC Coordinator will provide the NPHCC Steering Committee a monthly time tracking to include the activities and tasks completed and the time spend on each.
2. The NPHCC Coordinator (unless otherwise deemed) is responsible for establishing and carrying out an annual evaluation process for the MRC Coordinator.

3. The NPHCC Coordinator (unless otherwise deemed) is responsible for reviewing and updating the MRC Coordinator's contract annually and getting appropriate signatures.

Attachment 1 – REQUEST FOR PRE-APPROVAL OF EXPENDITURE

See: Hospital Preparedness Program (HPP) Request for Pre-approval of Expenditure

Held by NPHCC Coordinator

Attachment 3 - TRAINING REIMBURSEMENT FORM

A copy of all receipts, registration invoice, and a certificate of class participation must be attached. Turn in to NPHCC Coordinator.

1. Name & Position/Title: _____

2. Organization/Agency: _____

3. Name of Meeting or Workshop: _____

4. Location of Meeting or Workshop: _____

5. Date of Attendance: _____

6. Summarize reason for attendance and how it fits into the Healthcare Preparedness Capabilities guidelines: _____

7. Cost of Meeting:

Registration Fee:	
Airfare:	
Ground Transportation:	
Meal Expense:	
Lodging (including taxes):	
Miscellaneous (describe):	
Total Expenses	

8. Name and Address of person or agency that will receive the reimbursement:

Training Stipend: \$1500 per entity per fiscal year without prior approval.

The amount of the training stipend remaining for this agency/section before this request: \$ _____

The amount of the training stipend remaining for this agency/section after this request: \$ _____

Attachment 4 – MEMBERSHIP AGREEMENT

Organization Information

Organization Name _____

Street Address _____

City _____ State _____ Zip _____

Daytime Phone _____ - _____ Secondary Phone _____ - _____

Fax: _____

Member Information

1. Primary Contact Name: _____

Daytime Phone: _____ - _____ Cell: _____ - _____

E-mail: _____

2. Alternate Contact Name: _____

Daytime Phone: _____ - _____ Cell: _____ - _____

E-mail: _____

3. Alternate Contact Name: _____

Daytime Phone: _____ - _____ Cell: _____ - _____

E-mail: _____

NPHCC NON-VOTING membership:

I have read and agree to follow the NPHCC by-laws (found at www.swhealth.ne.gov) as outlined by the NPHCC Steering Committee. I understand that a violation of the by-laws may result in termination of my organization's membership to NPHCC. We agree to attend Steering Committee meetings. All agencies within the healthcare system are eligible for this membership type.

Signature: _____

Primary contact signature _____ Date _____

Chief Executive Officer or primary contact's supervisor _____ Date _____

NPHCC STEERING COMMITTEE member:

My agency agrees to have a representative sit on the NPHCC Steering Committee. We agree to follow the NPHCC by-laws (found at www.swhealth.ne.gov), attend Steering Committee meetings and will have voting privileges. I understand this membership type is appointed and approved by the Steering Committee.

Signature: _____

Primary contact signature _____ Date _____

Chief Executive Officer or primary contact's supervisor _____ Date _____

Attachment 6 -- NPHCC Medical Surge Cache Usage Report

Date: _____

Hospital activating cache: _____

Type of Event (natural disaster, man-made, technological, hazmat): _____

Location of Event: _____

Item(s) Used	Account of item used	Quantity Used	Date Replenished

Signature of individual completing form: _____

Attachment 7 – Personnel Summary

Committee	Person	Appointed	Date to Step Down and/or Reappoint
Coordinator	Heidi	August 1, 2014	Never! ☺
*Leadership Subcommittee	Coordinator	Ad hoc	
	WCDHD	Ad hoc	
	SWNPHD	Ad hoc	
	Chairman	Ad hoc	
	EM	Ad hoc	
By-Law Subcommittee	Wanda	May 20, 2015	June 30, 2016
	Myra	May 20, 2015	June 30, 2016
	Needs filled		
Plan Update Subcommittee	Angie	May 20, 2015	June 30, 2016
	Sally	May 20, 2015	June 30, 2016
	Needs filled		
Budget Subcommittee	Myra (FA)	May 20, 2015	Ongoing as FA
	Dari	May 20, 2015	June 30, 2016
	Pat	May 20, 2015	June 30, 2016
	Laurie	May 20, 2015	June 30, 2016
Chairman	Laurie	July 1, 2014	*June 30, 2016
Section: EMS	Vince		
Section: Volunteers	Joanna	8/27/15	June 30, 2016
Section: LTCF	Billie	8/27/15	June 30, 2016
*See by-laws			