

Quarterly Report

Name and address of reporting institution:

Lawrence Public Library
707 Vermont St.
Lawrence, KS 66044-2371

Project Title: Together Prepared Continuity of Health Information Award

Name of person submitting report: Cathy “Cat” Rooney Howland

Email address: catr@ku.edu

Telephone number: 785-727-0808 (c) 785-864-4095 (w)

Reporting Period start date: Oct 15, 2009

Reporting Period end date: January 14, 2010

Publicity:

Publicity and promotional activities during this quarter primarily revolved around informing the community about the various aspects of the project and preparedness resources for the general public and vulnerable populations.

1. On October 19, 2009, team member Kim Ens, Lawrence Public Health Department presented a 30-minute presentation to 20 people at the InterHab Aging Resource Network – Emergency Preparedness Summit. The presentation was on Together Prepared, specifically how it started, what we have accomplished, goals, mission, vision, and grants, including library call center, website, and mobile van preparedness training plan.
2. On December 14, 2009, team members Teri Smith, Douglas County Emergency Management Director, Alexandria Norman, Community Preparedness, and another staff member gave a presentation on the calendars/kits project which is co-sponsored by Together Prepared to the Boys and Girls Club Administration and talked about this grant.
3. On December 17, 2009, team members Teri Smith, Douglas County Emergency Management Director, and Bob Newton, Public Information Officer for Emergency Operations, gave a brief presentation on the Together Prepared Library Project at a meeting of the Douglas County Public Information Officers group, comprising of PIO's in the community from agencies such as Emergency Management, Sheriff, University of Kansas, local school districts, Red Cross, Health Dept., Headquarters Counseling Service, District Attorney, and City of Lawrence. They embraced the idea that this would be another avenue for disseminating their emergency information during an emergency/crisis/disaster situation.

4. On January 12, 2010, team member Kim Ens, Lawrence Public Health Department, provided a 20-minute overview to Kansas Association of Community Action Programs comprised of 12 representatives for the community-based organizations working with seniors in Shawnee County. She spoke about Together Prepared and this grant including the call center plans, the website, and the book mobile preparedness campaign. This group expressed interest in starting something similar to Together Prepared.

Outreach:

No training given this quarter.

Target audience:

The target audience's needs have not changed since our initial assessment.

Goals, Outcomes, Objectives:

Other outcomes for this quarter include:

Project Team Meetings

Our Team Members met as a whole body monthly and our subcommittees on finance and guidelines meet several times this quarter.

Finalize First Draft of Guidelines

The first draft of the guidelines focused on general administration and call center protocols which have been reviewed and fine-tuned by the Team Members at the December 2009 meeting. The report details:

- 1) Who the key administrative, technical and volunteer partners are,
- 2) Objectives of the call center,
- 3) Users, service types, and scope of services of the call center,
- 4) Call capacity,
- 5) Equipment needs, and
- 6) Phone system.

Important policies on chain of command, triggers to activate the call center, and operating hours were also determined. (*See attached guidelines report.*)

Mobile Van Sites and Preparedness Training

The mobile van project sites have been confirmed and are Cottonwood, Inc., Housing Authority, and Vintage Park. They have differing needs and requirements so the training for each will be developed specifically for each site. Cottonwood, Inc. is a facility for developmentally challenged adults. Though it has established disaster/emergency policies, particular procedures at the group homes had not been addressed. The mobile van project will assist in developing these actions. Lawrence/Douglas County Housing Authority, which administers government housing, including a large multi-age, multi-economic residential area, does not have a disaster/emergency plan in place nor does

Vintage Park. Vintage Park is a residential living community for older adults in Baldwin City, Kansas. Assisting with plan development will be the training for these two facilities.

Volunteer Recruitment and Management

Marion Wilbur has agreed to take on the role of volunteer coordinator of the call center volunteers. Lori Johns, the new Director of the Roger Hill Volunteer Center (RHVC), starts work in late January and has been briefed on our request for RHVC to help recruit volunteers.. Our first meeting will be February 11, 2010.

Evaluation

The first six-month evaluation was conducted by Glen White, Director of the Research and Training Center on Independent Living, University of Kansas. He gave us high ratings for setting a solid foundation to accomplish the goals of the project and getting the project underway. (*See attached evaluation report.*)

Website Development

We are stepping up activities to develop the website. The website subcommittee met with the web designer in December and will be giving him additional information in January so he can compile an initial web design by February or March.

Phone Lines/Technology and Library Infra-Structure

Twelve refurbished telephones were purchased for the call center at the very low cost of \$720.

Impacts and Observations:

When a disaster response, such as the H1N1 outreach and vaccination period is lengthy, it would put to big of a drain on the library capacities and volunteer resources; thus, we have determined the call center activation will be for short durations (3 to 5 days at a time) and at critical moments. The library's infrastructure and financial resources are also not able to handle the potential calls for a medium to large threat disaster event. Our efforts to identify possible funding sources are ongoing in an attempt to secure additional funding for sustainability and to address the financial obligations of the phone system and larger disaster events.

A surprise issue we have is trying to come up with an appropriate and public appealing name for the call center. It sounds easy, but it has not been to date.

We have also fined-tuned our timeline for specific outcomes to facilitate an actual simulation of a disaster and call center response for the duration of the grant.

Planned Activities:

For the next quarter we plan to:

1. Continue Team Member and subcommittee meetings.
2. Draft additional guidelines for the call center.
3. Recruit volunteers.
4. Begin contacting external partners for support and assistance.
5. Continue with mobile book van planning and outreach.

Draft Guidelines for the Together Prepared Library
1/14/2010

Introduction

Together Prepared Library's mission is to enhance access to "all-hazards" preparedness resources before, during, and after a public health threat or disaster/emergency in Douglas County, with an emphasis on serving vulnerable populations. All-hazards is a term that refers to any public health threats (i.e., bird flu, novel H1N1, SARS), natural disasters (i.e., severe storms, flooding) and man-made disasters (i.e., nuclear plant explosions, fires), terrorism (i.e., bombs, shootings) and other emergencies (i.e., chemical spills, power outages). In this document, the term all-hazards maybe interchanged with the statement "public health threat or disaster/emergency." Vulnerable populations include economically disadvantaged, culturally or geographically isolated, limited English language proficiency, physically, cognitively or sensory disabled, elderly or very young, mentally ill or chemically dependent, chronically ill and homeless.

The project has three components to meet the mission, which are to be administered by the Lawrence Public Library:

- 1) Dedicated **call line** (which is a separate number from the Library's main number) activated with certain triggers and staffed by live operators or through a phone message referring the public to the website to receive up-to-date information.
- 2) **Website** that offers information, advice, resources and community linkages and includes the latest information on the status of any public health threats or events, and disaster/emergency situations.
- 3) **Preparedness Mobile Van Outreach** program, which will provide similar information that is on the website, as well as advice and resources to three agencies, organizations or residences serving vulnerable populations.

Key Partners

The primary partners responsible for the development and administration (logistical, operational, technical and legal aspects) of the project are

- ° The Lawrence Public Library,
- ° Lawrence-Douglas County Health Department,
- ° Douglas County Emergency Management, and
- ° University of Kansas, Research and Training Center on Independent Living.

Table 1 depicts the above primary key administrative partners and their representatives for this project as well as support from city and county offices. Other community partners listed are involved in providing additional technical expertise and/or training in utilities management, library management, call center operations and coordination, and/or volunteer recruitment and management.

**Table 1: Key Administrative, Technical and Volunteer Partners
and Representatives For Call Line.**

| Key Administrative Partners | Representatives |
|---|--|
| Library Management | Lawrence Public Library <ul style="list-style-type: none"> ◦ Director ◦ Building Maintenance Coordinator ◦ Information Technology Coordinator ◦ Financial Officer ◦ Call Center Volunteer Supervisor |
| Public Health | Lawrence-Douglas County Public Health Department <ul style="list-style-type: none"> ◦ Preparedness Coordinator ◦ Director of Policy and Planning ◦ Douglas County Medical Reserve Corps ◦ VISTA Volunteer |
| Emergency Management | Douglas County Emergency Management <ul style="list-style-type: none"> ◦ Director ◦ Assistant Director ◦ Duty Officers ◦ Planner ◦ Community Preparedness |
| Communications | Public Information Officers <ul style="list-style-type: none"> ◦ Public Health Department ◦ Emergency Management ◦ Lawrence Public Library ◦ KU (Life Span and RTCIL) ◦ County wide PIO which includes city and county |
| Vulnerable Populations | KU, Research & Training Center on Independent Living (RTCIL) <ul style="list-style-type: none"> ◦ Director ◦ Project Coordinator |
| Local Government | <ul style="list-style-type: none"> ◦ City Manager ◦ County Administrator ◦ County Attorney ◦ Director of Legal Services, City of Lawrence |
| Key Technical & Volunteer Partners | Representatives |
| Utilities | Sunflower Broadband and ATD (phone system provider) |
| Library management | University of Kansas Medical Center, KS Outreach & Technology Liaison |
| Call Centers | 9-1-1 KU Information Line GaDuGi Safe Center Bert Nash Headquarters Kansas Department of Health and Environment Hotline Marketing Agencies (will list if they become partners) |
| Volunteer Agencies | Library volunteers Roger Hill volunteers CERT-Emergency Management volunteers Medical Reserve Corps-Public Health Department volunteers |

An advisory team has been assembled to direct the development of the center. This team meets monthly and is comprised of experts in the fields of public health, library management , emergency management, vulnerable populations, and communications. Lawrence Public Library will carry out the daily operations of the call line, website and the mobile van outreach projects in accordance with the Library’s policies and procedures and the guidelines established in this document.

The objectives of the *call line* are to:

- 1) Be the point of contact in Douglas County for all-hazards preparedness information.
- 2) Effectively route calls for non-medical or non-emergency information on all hazards events to the call line which is adequately staffed and equipped to handle them.
- 3) Disseminate information to the public in anticipation of, during and after a public health threat or disaster/emergency to better inform the public and reduce unnecessary calls to the health department, emergency management office, hospital, and possibly other call centers and 9-1-1.
- 4) Disseminate information throughout the year on all-hazards preparedness to the public with an emphasis on inclusion of vulnerable populations.

Users, Service Types and Scope of Services

Table 2 is a summary of the intended users, service type and scope of service that the *Together Prepared Library* will provide.

Table 2: Definitions of Users, Service Type and Delivery and Scope of Services for the *Together Prepared Library Center*.

| Terms | Definition |
|------------------------------------|---|
| Users or Target Populations | General public, vulnerable populations and organizations/agencies serving vulnerable populations. |
| Service Type and Delivery | Provide non-medical services through <i>Call Line</i> recorded messages, <i>Website</i> , information providers (call line operators when call line active and through presentations and training given by partners), written materials, and a preparedness Library mobile van <i>Outreach</i> project. |
| Scope of Services | Information is on multiple topics including the status of any current event or events in the areas of public health threats or disasters/emergencies along with general and specific all-hazards preparedness tips. |

Together Prepared Library is designed to provide non-medical services, meaning it provides information to the public that does not require a licensed medical clinician such as a Registered Nurse to provide it. Table 3 delineates the similarities and differences between a non-medical and medical service type structure for a call center. The non-medical description in Table 3 describes the plans for the project.

While the concentration of the current grant is on designing a non-medical call center, it is a natural step to, at some point and under a different grant, develop guidelines for a medical service model. This would allow for clinical guidance to be given to the public under extreme situations. Also, it would make for an easier transition from non-medical to medical operations if a crisis became extreme such as what happened in 2003 in Canada with a SARS outbreak where 10,000 people were quarantined and received information on quarantine status and treatment over the public health hotline.

Table 3: Non-Medical or Medical Service Types and Service Delivery Methods for Call Centers.

| Service Type: Non-Medical | Service Type: Medical |
|--|--|
| • Recorded information on current event status | • Recorded information on current event status |
| • Information on current event through FAQs, fact sheets, press releases, and resource and referral lists given by information providers | • Information on current event through FAQs, fact sheets, press releases, public service announcements, and resource and referral lists given by information providers |
| • Information on all-hazards prevention and planning tips | • Information on all-hazards prevention and planning tips |
| | • Answering questions from the public on medically related issues such as about symptoms and treatments |
| Service Delivery Methods | Service Delivery Methods |
| • Recorded phone messages | • Recorded phone messages |
| • Telephone | • Telephone |
| • Website | • Website |
| • Written materials | • Written materials |
| • Library van outreach projects | |
| • Information providers | • Information providers |
| | • Registered Nurses |

Levels, Indicators and Triggers

The dedicated phone line will be activated with operators answering the *call line* under certain situations. These circumstances are referred to as Level 1, Level 2, or Level 3 situations and are in keeping with definitions used in emergency management (see Table 4). When the center is at a Level 1 situation, it will not be answered by an operator; rather a recorded message will play referring the caller to the website for preparedness and other information. Even when the call line is handled by operators the first voice a caller will hear is a recorded message providing brief information and referral to the website, then they will be in sequence for a live operator.

Table 4: Situation Levels and Triggers for Call Center Activation.

| Level # and Situation | Indicators | Triggers | Chain of Command | Staffing | Hours/Shifts |
|--|--|---|---|---|--|
| Level 1 Watch Low intensity | Conditions indicate a public health, natural, or man-made event/disaster may occur. | There is approved information available to assist the public in being better prepared for a possible public health, natural, or man-made event/disaster. | 1. 1. Public Health Preparedness Coordinator, Emergency Management Director, or Library Director can suggest activating the call center based on the trigger(s) in their offices. 2. 2. Call center is activated upon the command of the Library Director who notifies Emergency Management Director and Public Health Preparedness Coordinator. | Minimal staffing of 1 or 2 library staff to update website and phone messages. Library plans to upgrade to 24 trunks in 2010. This is the maximum number of calls the library structure can handle. | Operational M-F, 8 am – 5 pm Only open short durations, 3 to 5 day periods. |
| Level 2 Partial Activation Medium intensity | Limited staff activation normally following a public health, natural, or man-made event/disaster. | 1. Public health department. Together Prepared Library Call Line, or the Library has received an increased number of calls about event beyond what they can handle. 2. AND/OR Level 1 Trigger. | Same as Level 1. | 28 on-site volunteers in the call center area of the Library and off site volunteers. The library infrastructure and financial resources are not established to meet this volume of calls. | Operational: M-F 8 am- 5 pm 4-hour shifts (hourly breaks) Open 3 to 5 day periods only. |
| Level 3 Full Activation High intensity Surge support can be used for 24-hr service or peak-hr service | Full staff activation. Possible 24 hour Emergency Operations Center staffing. State and Federal assistance may be requested. | Same as Level 2 Triggers. | Same as Level 1. | 40 onsite in the call center area of the Library and off site volunteers. The library infrastructure and financial resources are not established to meet this volume of calls. | Operational: M-F 8 am- 5 pm 4-hour shifts (hourly breaks) Open 3 to 5 day periods only. |

The call center area of the library is the computer center in the basement and is equipped with 12 phone jacks, 12 computers and desks.

Call Capacity

To estimate the call capacity the Agency for Health Care Research and Quality (AHRQ) contact surge calculator model was used (www.ahrq.gov/research/health). Douglas County population is 114,748. When you take out the number of children below age 15, you have the figure for the population able to contact the call center. This number is 80,324. When the public perception of the risk is low, up to 5% of the population may contact the call center, when it is medium up to 10%, and high up to 15%. If we estimate that 70% of the public will contact the center by phone and another 30% will get the information from the website, we can expect 2811 phone callers

and 1204 web hits. This averages to 937 call per day and 117 per hour. The Table below depicts the number of contacts per percentage of population who determine the risks to be low, medium or high. It also assumes we will be only open for short period of time (3 to 5 days) and covering an 8 hour day. **AHEQ emphasizes directing the public to use the website for obtaining up to date information to reduce the number of calls to the center.**

Table 5: Estimate Contacts to Call Line and Website by the Percentage of the Population Perception of the Risk is Low, Medium or High.

| Channel | Potential Contacts Per Channel By Perceived Risk Factors | | |
|--|--|---------|----------|
| | Low 5% | Med 10% | High 15% |
| Phone Contacts | 2811 | 5622 | 8434 |
| Web Site Contacts | 1204 | 2409 | 3615 |
| Average Contacts Per Day Requiring Staffing Resources | 937 | 1874 | 2811 |
| Average Contacts Per Hour Requiring Staffing Resources | 117 | 232 | 351 |

The following are the staffing and phone trunks requirements to handle the volume of estimated calls at our trigger point Levels 1, 2, and 3 as it corresponds with percentage of potential contacts.

| Situation | % of Potential Public Contacts To The Call Center | Staffing and Trunk Requirements |
|-----------------------------------|---|---|
| Level 1 Watch | 5% | The channel is phone message that refers callers to website. This requires 1 or 2 library administrative staff to keep the phone message updated, coordinate updates to website, and to listen to messages, OR a combination of · 1 or 2 administrative staff to coordinate updates and · 12- 15 volunteers to answer calls · 24 Trunks (Library plans to upgrade to 24 Trunks in 2010) |
| Level 2 Partial Activation | 10% | · 28 volunteers for answering calls · 40 Trunks |
| Level 3 Full Activation | 15% | · 40 volunteers for answering calls · 55 Trunks |

Call center equipment and supply list

- _computer lab smartboard
- _printers
- _flip chart and markers
- _whiteboard and markers
- _table and chairs
- _food, water* and other supplies

* No eating is allowed at the computer/phone stations. Beverages can only be in approved containers (squeeze bottles) to prevent spillage and damage to equipment. Food will be allowed in a designated area.

Operator stations

- _phones
- _headsets (still need to find what is compatible with the new phones)
- _computer with internet access
- _operator guide (key support info)
- _pen and paper
- _forms (call log sheets, protocols, referral guide, how to deal with difficult calls)

Phone System Configuration

The current situation allows for handing a Level 1 situation in the number of phones and trunk capacity.

- Single entry point or dedicated line (our own number and call center system) versus using the library main number. A service provider designs it to route calls.
- Up-front messages – recorded messages that are easy to change with situation. The callers will always hear a 1 minute recorded message first thing, and if in a Level 2 or 3 situations with phone operators the caller will get periodic 1 minute messages while waiting for a live operator. The messages will refer the person to website and build on information to reduce the need for an operator to handle the questions.
- Automatic Call Distribution (ACD) – call routed to first available operator.
- Upgrade from a 10 analog phone lines to a digital T-1 trunk with 24 lines with battery back-up system for short term.
- 12 phones and computer stations.
- Generator for power of the call center area of library during power-outage.

Below are the subsections to be fine tuned or filled-out next

General Call Handling Procedures

Information process

1. Volunteers will on provide scripted information (fact sheets and (FAQ), press releases, resources and referral lists).

2. Once a Level 1, 2, or 3 is activated then the call line will be provided scripted information from the lead PIO (Public Information Officer) agency.
3. During a Level 3 an Emergency Operations Center (EOC) will be established and a call line liaison either on site or off site will be the go between the activities of the EOC and the call center.
4. Scripted information will be provided to each volunteer in their resource packet and it will be immediately be posted on the website.
5. Call line supervisor will be notified by the call line EOC liaison with quick information updates spurred by media reports.
6. Should volunteers receive the same questions that are not addressed in the scripted information, the call center supervisor will notify the XXX with a request for information to be delivered as soon as possible or within 24 hours. Volunteers will tell callers that the information is being researched and to check the website within the next 24-72 hours. For persons without access to a computer they will be asked to call back then.

Staffing Descriptions

Using the Incident Command System (ICS) staffing structure

1. Command staff (supervisor)
2. Logistics (1 lead)
3. Volunteer Coordinator (administrative lead)
4. Volunteer Operators
5. Building Maintenance, Computer and Supplies support
6. Others (external liaison)

Volunteer Recruitment and Management

Volunteer Training

Who, what, when and where on training

1. How to manage calls
2. What information to provide
3. Referrals
4. Resources
5. ICF 100 and 700

Surge Assistance

Disseminating Information about Call line and Activities

Public information/media campaign

During disaster/emergency directed by ICS

Preparedness Mobile Van Project

**Together Prepared Library Project
Six-Month Evaluation-May 2009 through October 2009**

**Conducted by Glen W. White, Ph.D.
January 25, 2010**

This evaluation is to determine if project activities are moving effectively towards meeting the three project objectives. The review of activity outcomes for the first six- months of the project show good to often excellent demonstrable progress in accomplishing grant deliverables.

| Objective 1: Enhance public access to public health and preparedness resources through materials, staff, Internet and call center. | |
|--|---|
| Activity Outcomes | Evaluator's Comments |
| <ul style="list-style-type: none"> • At the onset, the administrative structure was in place, including a 10- member working group, project manager; other contractual services were also arranged as needed. The working group (Team), including the project manager, convened monthly meetings, exceeding timetable expectations. Two subcommittees were formed: a) guideline development and b) future funding. • A total of 14 publicity and promotional activities to inform the public about and to seek support of the project were presented by various Team members. Two training sessions to the public on the issues of public health and preparedness were also conducted. • The Team invited Information Officers from the health department, emergency management, and library to be involved in this project. The project will continue outreach to other Information Officers when the call center is about to be launched. • Team members and library staff attended training conducted by Rebecca Brown, advisor for the project from the University of Kansas Medical Center Dykes Library. • Six other forms of education/training were attended by various Team members to assist with this grant. • The Library obtained the necessary bandwidth, phones and additional trunk lines as identified in the grant timetable. • Team members gathered information on existing call centers, determined applicability to the Together Prepared | <p>Excellent foundation building efforts were set in place to move toward meeting the three objectives of the grant.</p> <p>The project benefited from a well-organized Team that is focused on realistic, yet attainable outcomes. The Team members have already sought and received training, compiled initial guidelines to operate the Call Center, and assessed the Library's infrastructure and Call Center demands to operate during a disaster situation.</p> <p>Excellent number of publicity and promotional activities conducted by Team members. Consultation by Information Officers into the Team helped increase the outcome quality of this objective.</p> <p>The Team is on target with project administration by obtaining equipment, developing guidelines, and anticipation of additional needs beyond the capacity of this grant to sustain and expand the infrastructure of library, such as a back-up generator to keep the Call Center fully operational in case of a power loss.</p> |

| | |
|--|---|
| <p>Library project, and drafted initial guidelines for the new Call Center.</p> <ul style="list-style-type: none"> The Team began assessment of library's infrastructure, Call Center's needs, costs, and potential grants and/or contributors. The Team is continuing to search for ongoing funding and sustainability. This grant task was scheduled for the last six months of the project. However, Team members advanced the timelines to address the need for more equipment, software, and to reimburse monthly maintenance costs incurred to have a full scale operation to meet all three disaster situation levels. | |
| <p>Objective 2: Develop a website that offers advice, information, resources, community linkages, preparedness self evaluation, health, and safety information for general public and vulnerable populations.</p> | |
| <p>Activity Outcomes</p> | <p>Evaluator's Comments</p> |
| <ul style="list-style-type: none"> Team members extensively researched designs and content on existing websites. The results of this analysis were presented to the Team at several meetings for further discussion. The web designer has been briefed and a new schedule for website design and implementation drafted. <p>Website site development has been delayed in part this first 6 months, since one of the key personnel involved has been addressing the demands of the public health threat of H1N1.</p> | <p>Good start to determine likes and dislikes of established websites, discuss information to include on the website, and to meet with web designer.</p> <p>The outcome of this objective has been somewhat delayed with the initial website development being deferred. Activities are planned to bring it up to speed in the upcoming months particularly since outreach with H1N1 is slowing down.</p> |
| <p>Objective 3: Pilot an outreach program using the library mobile van to inform agencies servicing vulnerable populations about disaster preparedness and response.</p> | |
| <p>Outcomes</p> | <p>Comments</p> |
| <ul style="list-style-type: none"> Activities are on schedule with the identification and recruitment of three potential mobile van training sites. The scope and content of training that would most benefit vulnerable populations is also starting to be developed. Most of the work of this objective is scheduled for next six months. | <p>The Team has made very good progress and the activities initiated during this reporting period are within the grant proposal's stated timeline.</p> |