National Network/Libraries of Medicine (NN/LM)
Southeast Atlantic (SE/A) Emergency Preparedness & Response Committee

May 28, 2008
Vinoy Renaissance Resort, St. Petersburg, FL

Attending:
Dan Wilson, Chair, *Virginia*
Jie Li, *Alabama*
Nadine Dexter, *Florida*
Allison Howard, *Florida*
Geddy Paulaitis, *Florida*
Teresa Knott, *Maryland*
Susan Clark, *Mississippi*
Charles Sequi Caballero, *Puerto Rico*
Marcia Epelbaum, *Tennessee*
Tom Singarella, *Tennessee* ("proxy" for Richard Nollan)

Absent:
Robert James, *North Carolina*
Richard Nollan, *Tennessee*
Sandra Oelschlegel, *Tennessee*
Jean Siebert, *West Virginia*
Leah Pellegrino, *District of Columbia*
Kevin Bradford, *Georgia*
Felicia Yeh, *South Carolina*

Ex-Officio:
Janice Kelly, *Executive Director, SE/A NN/LM*
Beth Wescott, *Network Access Coordinator, SE/A NN/LM*
Susan Yowell, *Project Assistant & Recorder, Virginia*

8:30 AM Welcome and Introduction (Janice)
- some planning for this initiative began pre-Katrina, but the widespread damage caused by Katrina provided more momentum
- continuation of services has been the emphasis of NN/LM's planning
- the Committee is the result of the task force that Dan chaired two years ago—some of the current Committee members were part of the original task force (Charles, Nadine, Robert, Sandy, Jean)
- the task force's "summit meeting" in Ocean Springs, MS in February 2007, provided the model for how the other NN/LM regions could organize for emergency preparedness
- today Dan will give an overview of the national plan, and we will see how it can best be implemented within SE/A

Introduction to the NN/LM Emergency Preparedness & Response Plan (Dan):
- Major accomplishments to date: national plan has been developed and approved by the Network Office and the Associate Directors of the eight regions
- the online toolkit is operational
- the RML offices have established "buddy" relationships with each other
- regional emergency preparedness and response structures have been put in place
- the structure of the plan can be easily adapted to accommodate regional differences
- risks have been identified for each region, both natural disasters and human-caused
- a simplified approach to disaster planning has been adopted, consisting of two components: preparedness and response
- momentum has been created, assisting in implementing the plan throughout the regions

Goals for network members:
- remember the toll free number to call in emergency: 1-800-DEV-ROKS
- develop a disaster plan—plans will vary by situation and needs; provide for human safety as well as unique resources
- develop a service continuity plan—prioritize key resources
- find a back-up library—some members already have informal back-up relationships
- Beth: cited the example of the libraries in Tennessee who have done this through their association—some used MOUs, and others used less formal, verbal agreements
- Tennessee and North Carolina are in the forefront with regard to developing partnerships

Four elements of disaster planning:
- risk assessment
- human safety
- preservation of unique resources
- service continuity (access to online resources, reference assistance, ILL, access to core print materials)—eg. Rick Wallace at ETSU and his "disaster cart" containing a laptop loaded with essential resources as well as some key print sources on the cart.
  - Cindy Love is compiling a list of core books—there is much interest
  - databases—Access Emergency Medicine, etc.

For information to help with risk assessment and human safety:
- FEMA page—lists of disaster declarations by state
- state emergency management pages
- sample plans like UT and UVA on toolkit—safety procedures for various incidents

Preservation of unique resources:
- contact a commercial salvage company (Belfor, BMS, Munters, etc.) in advance—free assessments are available
- determine what materials are worth spending a lot of money on—what is irreplaceable or extremely valuable?—there is a 48 hour window between materials getting wet and mold beginning to grow—sometimes less, depending on the conditions

Service continuity planning:
- involves identifying essential services and resources and making plans to keep them available whenever possible from off-site, in an emergency
- get IT people together with emergency planners to find out what back-ups are in place, how services can be maintained from off-site
- create a salvage priority "map" of your site to direct emergency responders
- Emergency Access Initiative (EAI)—NLM is working with publishers to set up a system that will grant temporary access to full-text online journals (300+ titles) to network members in an emergency. Access will be available through the RML—they can give the password and help determine the lenth of time of access.
- emphasis on point-of-care resources—still in process. Maria Collins is working with Elsevier, University of Chicago, and Academy of Pediatrics. Focus will be on pediatrics, infectious diseases and emergency medicine. They are still working on the interface—will be linked to the PubMed web pages. Time available will be determined on a case-by-case basis. Janice: there is discussion now about the process and the results—access will most likely be through proxy into the publishers' sites from PubMed.

State Reports

Florida: **Nadine (Florida State), Geddy (University of Miami):**
- FSU has set up a back-up server at a rented site outside of Florida at a nominal cost per month. Other universities could not guarantee that FSU's information would be their first priority in an emergency. They have a separate Telex account in Georgia.
- Janice: how will the 3 state coordinators work together? Nadine: not decided yet.
- Marcia: in Tennessee, having several coordinators does work well, especially in a large state with many members and a high risk (such as Florida) for disasters
- Geddy: his library, Calder Medical at the University of Miami is part of the larger institutional plan. They do have back-up generator power available. The region has many hospitals and other network members, all of whom have much experience with hurricanes in the area. Many of the resources that would be needed are provided by the main campus library, which is 10 miles away, so internet access would be of primary importance.

*SE/A RML***: Janice (SE/A RML, University of Maryland, Baltimore):**
- continuing to work on the RML buddy plan, also how to have the 1-800 telephone number re-routed to the buddy RML in the event of an emergency
- focusing on methods for working from home for some services
- monitoring other projects, eg. Disaster Information Management Research Center (DIMRC)
- NLM is looking at possibilities for community involvement of libraries through their disaster information community outreach program—this is a year to 18 months out

*Tennessee***: Tom (UT Memphis), Marcia (Vanderbilt):**
- Tom: UT has updated its plans, available on a wiki
- Dan: the UT Memphis plan is also linked to the online toolkit, and has been very popular
- Tom: their focus encompasses all types of emergencies, focusing on how to keep emergencies from becoming disasters
- consulted with Tulane regarding rescuing computers, keeping resources going
- experience is that all staff put families first, so plans should include encouragement for families and pets, etc.
- Marcia: became an "emergency" person when at Stanford in 1999 during the earthquake, where they found 1 million books on the floor afterward. So many things were affected; i.e. shelving dominoed and books flew from the mezzanine level to the floor below.
- in Tennessee and at Vanderbilt, they do have a plan (not the recovery part), and they evacuate to the basement when warnings are given
- when evacuated, they can provide some services from off-site, through use of pagers as well as computers
- core textbooks are shelved in a specific area—a small reference area. Other books would be replaced by electronic versions.

Maryland: **Teresa (University of Maryland, Baltimore):**
- Maryland has a long-standing plan for service continuity. The University has contracted with off-site means of back-up, providing for a variety of scenarios, i.e. avian influenza, etc.
- they have learned that there is no back-up for the university's proxy server
- still working on outreach to network members in their area

Florida: **Allison (University of South Florida):**
- their situation is very disjointed because they are on different campuses and communication is difficult
- they have identified their essential collections, marked and charted
- a Google Group is being used for working from off-site
- Dan asked about the outreach component—back-up availablility to members?
- Allison: no formal agreements in place

Puerto Rico: **Charles (University of Puerto Rico):**
- Puerto Rico has no association and no plan for it
- he has talked with some hospital librarians

- does not have a written plan; they are discussing, looking at other plans
- most likely, academic/resource libraries will take the lead to organize a meeting, help with networking

Alabama: **Jie (University of South Alabama):**
- the University has a plan and is testing their mass email system and other methods of notification; tests have gone well
- library has an emergency plan, but does not yet include a service continuity component
- has recommended putting all core resources in one place
- they are now located in a hospital building, so should have power available in an emergency
- Judy Burnham and Scott Pluchak have talked about how to maintain electronic resources
- in the Alabama Hospital Libraries Association, no one has a disaster plan except for UAB
- she will get the word out

Mississippi: **Susan Clark (University of Mississippi):**
- Ada is retiring, and Susan is new to the committee
- her institution (University of Mississippi Medical Center) has a plan in place for human safety during emergency events
- MEMA also addresses safety issues
- service continuity—University of South Mississippi is the only resource library—few hospital libraries are left
- still working out the server situation
- more consumer health resources are available
- MISHIN available—helps once power is restored
- membership fee is very reasonable
- Janice: Galileo, GaIN—great access, opportunities available, some free—easy access to PubMed, etc.

Virginia: **Dan, Susan Yowell (University of Virginia):**
- Susan: maintaining awareness, consciousness-raising about disaster planning at UVa's HSL
- held a Table-Top Exercise involving library department heads, IT and web people, using a severe winter storm as the scenario—learned many interesting things about off-site back-up, service provision from off-site, etc.
- Dan: Virginia has no state organization for HSLs, so it is challenging to get the word out—currently working with local groups

Comments:
- Janice: recent NN/LM survey of members showed that the number of existing plans is low, but there was a high rate of response, indicating much interest
- Marcia: small cards with checklist is very helpful, have a head-count place
- Jie: floor managers are responsible for checking offices, etc. IT manager gave tapes to different people
- Beth: survey showed that most members are hospital libraries

Table-Top Exercise (TTE)—scenarios, identifying roles, recommendations (Dan)
Dan gave an overview of the TTE held at the SE/A RML meeting in March, which included Nedra Cook, as the hospital librarian involved in the incident, Suresh as the state coordinator and resource library representative, and Beth as the RML's representative, via telephone. The "players" talked through the reporting and coordinating of the response, according to the procedures designated in the plan.

Scenario #1: N**o help needed.** The network member is able to handle the response within its institution or locally, according to its level of preparedness and the viability of its existing disaster plan. Reporting: the network member should post a message or messages on the Toolkit describing the incident and how they are dealing with it, and any lessons learned. (The form for reporting an incident will be available on the Toolkit.)

Scenario #2: **Assistance required, back-up library contacted.**
- Network member and back-up library activate service continuity plan
- RML Office (1-800-DEV-ROKS) is notified of incident and if DOCLINE should be re-routed
- RML Office notifies Regional Coordinator of incident
- RML Office and Regional Coordinator bring in additional resources (resource libraries, RML, buddy RML, NLM), if necessary
- RML Office is notified when services have been restored
- Regional Coordinator follows up and provides report to RML Office

The template for use by the regional/state coordinators will also be avaible from the Toolkit.

Scenario #3: N**o back-up library, or unable to contact back-up library**

- Network member contacts RML Office (1-800-DEV-ROKS) about the incident
- Network member requests from RML Office any services that may be needed
- RML Office notifies Regional Coordinator of Incident and coordinate a response
- Network member notifies RML Office when services have been restored
- Regional Coordinator performs follow-up and reports to RML Office

In this scenario, the coordinators will play a larger role. At this point, the Regional/State coordinator can activate more of a team approach, incorporating resource libraries, etc. as needed.

Scenario #4: **No communication.** In the event that there is no communication from either the affected Network member or its back-up library, the RML Office will re-route (de-activate) DOCLINE (if aware of the situation) and contact the Regional Coordinator, but no other response will be initiated pending re-establishment of communication.

This was based on Ada's advice, given her experience during and after Katrina.

Comments:

- Janice: availability of "disaster awards," to help with recovery efforts—help to fund replacement equipment (computers), subscription/memberships to consortia for back-up, etc.
- three awards of up to $5,000 each. No one in Mississippi asked for more than what they really needed—mostly for computers and textbooks, but also for MISHIN memberships.
- the awards did extend to some free clinics, especially physicians that were non-members, and who stayed in the area.
- awards focused on service continuity
- Beth: some of the computers were used by the public to fill out required forms

Catastrophic event: all players are involved and have roles—network members, back-up libraries, resource libraries, NN/LM RML offices, RML Library, buddy RMLs, the Network Office, NLM, and publishers and vendors. The structure is in place for dealing with a disaster of major proportions, even though much of the structure will not be part of the immediate response, as they would brought in as part of the service continuity/recovery portion (NLM, publishers/vendors).

Roles of the regional/state coordinators:
- promote awareness of the 1-800-DEV-ROKS number for members to contact their RML NN/LM office
- promote training that is available through SOLINET—some NN/LM funding may be available to help with costs to members
- promote the Toolkit, especially the availability of the templates for disaster planning, the "First Aid" page, resources such as NEDCC
- some training may be provided via webcast
- Janice: there is a training award available, and funding might be helpful to bring in SOLINET to do training at a meeting, etc. NN/LM is focusing on service continuity, and outsourcing the salvage training to regional organizations (SOLINET, AMIGOS, WESTPAS, etc.)

Baseline assessment results (Dan)
- Dan showed the slides that Cindy Olney had presented at the NN/LM Directors' meeting at MLA earlier in the month
- overall, there were many "don't know" responses to questions asking whether members had plans, and were part of institutional plans, also many "yes" answers to questions about whether they would like help developing plans
- so far, information specific to our region is not available, but the answers do indicate a great need for assistance to members in this area

MOU overview (Dan)
- gave the example of UVa and UNC working out a way to provide back-up ILL services to each other in an emergency; tested during a conference with successful results
- the two libraries have not set up an MOU—the relationship is informal and not documented except in their disaster plans

- Janice: the Express Awards are MOUs—some are reviewed by legal departments for institutions and some are not. Could these be addenda to the by-laws of consortia—that way the agreements would be amongst the members, not the institutions—no legal review necessary.
- Tom: believes the written agreement is important because of turnover in positions—the agreement would provide transition information, details—the MOU can be just informal, not binding—expressive of an understanding.
- Allison: asked how MISHIN differs from other organizations—perhaps other areas could used MISHIN as a model
- Susan C.: MISHIN is fee-based, has members rather than libraries, includes other entities, i.e. law practices, clinics, etc.

Discussion:
- Janice: cited experience with MOUs that were incorporated in the by-laws of consortia in the Chicago area; i.e. back-up relationships were developed among members and documented as amendments to the by-laws in order to facilitate providing reference or other assistance for someone who was out on medical leave or away on vacation for a period of time. The librarians shared common information such as fax numbers, DOCLINE info, etc. The arrangement was informal but effective, avoiding the necessity for legal review of a MOU.
- Nadine: they will discuss this idea in the Florida HS Libraries Association meeting, which starts today, here at the Vinoy.
- Marcia: wondered if MOUs could be created without any signatures attached—would this help with the legal issues?
- Dan: recommended starting within the region before bringing in outside area
- Dan and Janice: communication is the critical thing to establish, and working out access to point-of-care resources (EAI)
- *Unbound Medicine:* can be downloaded to PDA's, is EBM-based
- Janice: reminder to check the state pages on the NN/LM site for additional local links to resources and assistance, i.e. GoLocal, which may help sustain, also links to non-medical resources
- Janice: NLM is looking to license more resources and will link them in GoLocal, i.e. the AHA guide, nursing home databases.
- brief discussion followed on sustainability and costs of this initiative

Ideas for promotion by state—use of existing networks?
- Florida and Tennessee have strong state associations that will help promote the plan
- for Puerto Rico, Charles will use the DOCLINE list to push out the 1-800 number and will try to put together a meeting—there are 13 members there
- Georgia has strong associations/organizations in place
- Florida, Georgia, South Carolina, North Carolina and Maryland all have strong AHEC networks as well

Promotion in the SE/A:
- Janice: can incorporate in exhibits, listserv notices, and meetings

- Marcia: urged to publish everything, because so many cannot attent meetings
- Janice: funding is available for state-wide planning meetings
- Beth: put info at the top of DOCLINE requests?
- discussion about marketing the 1-800 number at meetings
- in Maryland, will work on an email to send to all on the directory, also promote through MAHSL
- Mississippi: MS Biomedical Library Association, state organizations, MISHIN, consortium in mid-state—more outreach
- Beth: poster for Hawaii
- Allison: list of Veterans Administration (VA) hospitals would be good
- Beth: the VA system was very successful in preparing for and responding to Katrina
- Alabama: may apply for a grant to get the hospital libraries together.

Discussion of goals for this year—May 2008 to May 2009
- would 50% be a good success rate for members to have plans in place?
- Marcia: would like to target 70% of members in her state to have plans within the year
- Janice: NN/LM will be doing another assessment in two years
- have four state planning awards given out—some states will not need them, so this may not be a good indicator of success—awards can be given to associations
- assess how well the plan functions if it is used in an actual emergency
- track what training is done in the region—state coordinators can report to Beth about training activities in their areas
- send suggestions for promoting the plan and the toolkit
- state coordinators take the initiative at the state/regional meetings
- Janice will work with the Seattle RML with regard to contact information, etc. for our region
- Nadine: add list of speakers to the wiki—help find speakers
- agendas of state meetings on the wiki
- Marcia: Red Cross also offers good training
- volunteer associations offer training
- Allison: connect a pop-up survey to templates, etc. on Toolkit?
- Tom: promote 1-800 everywhere—MLA Focus, etc.
- Marcia: get email list for all medical libraries in the state? She will send to all.
- Allison: create a CD?
- consensus—frequent sendings of the 1-800 number and Toolkit URL is important
- mascot ideas? promotional items—bookmarks?

The meeting concluded with thanks to all for attending, and especially for Janice for making the meeting possible by funding from SE/A.

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Meeting notes respectfully submitted by Susan Yowell, September 18, 2008.