

# MEETING IN PROGRESS

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## **GMHA Board of Trustees**

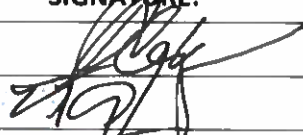




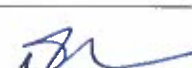

Wednesday, January 29, 2025 | 5:00 p.m.

Zoom Video Conference

05:10pm

## GMHA Board of Trustees Meeting ATTENDANCE SHEET

Wednesday, January 29, 2025 | 5:00 p.m. | Zoom Video Conference

	NAME:	TITLE:	SIGNATURE:
Board of Trustees	Theresa Obispo	Chairperson	
	Edgar Aguilar	Vice-Chairperson	
	Sharon Davis	Secretary	ABSENT
	Sonia Siliang	Treasurer	Zoom
	Michael Um, MD	Trustee	Zoom
	Teresa Damian-Borja, DPM	Trustee	Zoom
	Antoinette Kleiner	Trustee	
	Suzanne Lobaton	Trustee	
Executive Management/Medical Staff	Lillian Perez-Posadas, MN, RN	Hospital Administrator/CEO	
	Verrad Nyame, MD	Associate Administrator, Medical Services	Zoom
	Rizaldy Tugade	Associate Administrator of Operations	
	Rodalyn Gerardo	Assistant Administrator, Operations	Rmagennis / Zoom
	Ana Belen Rada	Assistant Administrator, Professional Support Services	
	Christine Tuquero	Assistant Administrator, Nursing Services	Zoom
	Liezl Concepcion	Deputy Assistant Administrator, Nursing Services	
	Yukari Hechanova	Chief Financial Officer	
	Danielle Manglona	Administrator of Quality, Patient Safety and Regulatory Compliance	
	Jeffery Shay, MD	Medical Staff President	
	Jordan Pauluhn	Legal Counsel	
	Robert Weinberg	Legal Counsel	
Guest(s)	NAME:	TITLE:	SIGNATURE:
	Conie N. Santos		
	TERESA CALLO		Zoom
	DAVEY EDMUNSON		Zoom

# GMHA Board of Trustees Meeting

## ATTENDANCE SHEET

Wednesday, January 29, 2025 | 5:00 p.m. | Zoom Video Conference

	NAME:	TITLE:	SIGNATURE:
Guest (s)	Diana Ruiz		Zoom
	Diana Pinera		Zoom
	Olivia		Zoom
	Miriam Hernandez		Zoom
	Greg Rodriguez		Zoom
	Julie's iPhone		Zoom
	NDA YAP		Zoom
	Cheryl Rivera		Zoom
	Justine Camacho		Zoom
	Geoff's iPhone		Zoom
	Tom Camacho		Zoom
	Pedro Alfonso		Zoom
	Cindy Hanson		Zoom
	Carolee Cruz		Zoom
	Yvonne Cruz		Zoom
	Jackie Pereira		Zoom

Kyle Dallman

J. Hernandez (PH)

John

Rhonda Celorio

Chadley Aol

Robert M. [unclear]

iPhone 4S (Sandra [unclear])

[Signature]

Zoom

Zoom

Zoom

Zoom

Zoom

# AGENDA

## Guam Memorial Hospital Authority – Board of Trustees Meeting

January 29, 2025 | 5:00 p.m. | Zoom Video Conference

**BOARD MEMBERS:** Theresa Obispo, Chairperson; Edgar Aguilar, Vice-chairperson; Sharon Davis, Secretary; Sonia Siliang, Treasurer; Michael Um, MD, Trustee; Teresa Damian-Borja, MD, Trustee, Antoinette Kleiner, Trustee, Suzanne Lobaton, Trustee

Notice: Closed Executive Session to discuss attorney-client privilege confidential Case Settlement and Resolution Agreement Offer in A. CV1072-13; B. HHS/OCR Resolution Agreement Offer for GMHA #19-328681 Only Board Members, the Court Reporter, select Members of the Administration and Legal Counsel will be “admitted” for the executive session and all other participants will be placed in the “waiting room” until executive session ends the board reconvenes for regular session.

Item	Owner
<b>I. Welcoming   Call Meeting to Order and Determination of Quorum</b>	Trustee Obispo
<b>II. Closed Executive Session</b> A. CV1072-13 / Settlement / Kikuchi v. GMHA B. HHS/OCR Resolution Agreement Offer for GMHA #19-328681	All Trustees Legal Counsel (J. Pauluhn)
<b>III. Open Government Compliance</b> A. Publication, January 22, 2025 B. Publication, January 27, 2025 C. GovGuam Notices Portal & Website Posting	
<b>IV. Review and Approval of the Minutes</b> A. November 26, 2024	All Trustees
<b>V. Guam Memorial Hospital Volunteers Association Report</b>	GMHVA President
<b>VI. Pediatric Patient Family Advisory Council (PFAC) Report</b>	Jackie Pereira
<b>VII. Management’s Report</b> A. Above-Step Recruitment Petition for Elizabeth Blas & Wilma Hermosura	Executive Management
<b>VIII. Old Business</b> None	All Trustees
<b>IX. New Business - Board Subcommittee Reports</b>	
A. Joint Conference and Professional Affairs 1. Res. No. 2025-10, Relative to the Reappointment of Active Medical Staff Privileges 2. Res. No. 2025-11, Relative to the Appointment of Provisional Medical Staff Privileges 3. Res. No. 2025-12, Relative to the Appointment of Active Associate Medical Staff Privileges 4. Res. No. 2025-13, Relative to the Appointment of Provisional Allied Health Professional Staff Privileges 5. Strategic Objective 5: Engage Physicians	Trustee Dr. Um
B. Human Resources 1. Res. No. 2025-14, Relative to Creating the Position of Revenue Cycle Management Administrator for Fiscal Services Division 2. Res. No. 2025-15, Relative to Appointment of the Guam Memorial Hospital’s Director of Respiratory Care 3. Res. No. 2025-16 & 2025-17, Relative to Appointment of the Guam Memorial Hospital’s Antibiotic Stewardship Program Leaders 4. Res. No. 2025-18, Relative to Appointment of the Guam Memorial Hospital’s Director of Pharmacy 5. Res. No. 2025-19, Relative to implementing the 25% work differential pay to all Nursing Technicians in the Nursing Division 6. Strategic Objective 4: Engage the Healthcare Workforce	Chairperson Obispo, Lobaton



<b>Item</b>	<b>Owner</b>
C. Facilities, Capital Improvement Projects, and Information Technology 1. COVID-19 2021, 2022 & 2023 After Action Report (AAR)/Improvement Plan (AAR/IP) Guam Memorial Hospital and Skilled Nursing Facility 2. Critical Infrastructure Projects (\$20M ARPA Funding) 3. Strategic Objective 2: Enhance Infrastructure & Technology	Trustee Davis
D. Quality and Safety 1. Strategic Objective 3: Transform Healthcare Services	Trustee Kleiner
E. Finance and Audit 1. Res. No. 2025-09, Relative to Approval of COVID-19 Patient Receivable Accounts Batch No. 2025-001 2. Strategic Objective 1: Achieve Financial Viability	Vice-Chairperson Aguilar
F. Governance, Bylaws, and Strategic Planning 1. Strategic Objective 6: Engage & Partner with the Community	Trustee Dr. Damian-Borja, Siliang
<b>X. Public Comment</b>	
<b>XI. Adjournment</b>	Chairperson Obispo

**ATTORNEY'S WRITTEN RECOMMENDATION TO  
THE GUAM MEMORIAL HOSPITAL AUTHORITY BOARD OF TRUSTEES  
TO  
ENTER EXECUTIVE SESSION**

I Jordan Lawrence Pauluhn, attorney for the Guam Memorial Hospital Authority (GMHA), hereby expressly recommend that the GMHA Board of Trustees enter into executive session to discuss ongoing and/or threatened litigation involving GMHA, including but not limited to,

- (1) Settlement negotiations pertaining to litigation against GMHA pending in the Superior Court of Guam, Case No. CV1072-13; and
- (2) Settlement negotiations pertaining to threatened litigation or that may be reasonably expected against GMHA by the United States Department of Health and Human Services, Office of Civil Rights.

This 22nd day of January, 2025.



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**Jordan Lawrence Pauluhn**, Legal Counsel  
Guam Memorial Hospital Authority

**DECLARATION UNDER PENALTY OF PERJURY**  
**OF**  
**JORDAN LAWRENCE PAULUHN**  
**Legal Counsel to the Guam Memorial Hospital Authority**

My name is Jordan Lawrence Pauluhn. I am legal counsel to the Guam Memorial Hospital Authority (GMHA), over the age of eighteen years, and fully competent to make these statements from my own personal knowledge.

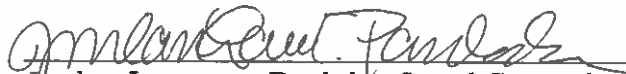
On January 29, 2025, upon my recommendation and the affirmative vote of a majority of the members of the GMHA Board of Trustees present, the Board of Trustees entered into executive session from which the public was excluded. The subject(s) of discussion was (were) the following:

- (1) Settlement negotiations pertaining to litigation against GMHA pending in the Superior Court of Guam, Case No. CV1072-13; and
- (2) Settlement negotiations pertaining to threatened litigation or that may be reasonably expected against GMHA by the United States Department of Health and Human Services, Office of Civil Rights.

No other matters other than pending or threatened litigation involving the Guam Memorial Hospital Authority were discussed during that portion of the meeting from which the public was excluded.

I declare under penalty of perjury under the laws of Guam that the foregoing is true and correct.

Executed this 29<sup>th</sup> day of January, 2025.

  
Jordan Lawrence Pauluhn, Legal Counsel  
Guam Memorial Hospital Authority

## Forever In Our Hearts - In Loving Memory

**Dolores Blas San Nicolas**

May 3, 1946 - December 29, 2024



Lovingly known as "Elling", "Ms. Dee"

"Blas Family - Asan"

Of Machanao, Dededa and originally from Asan

*In her new life, Dolores will be greeted at the gates of heaven by her,*

Husband: †Fernando Mendiola San Nicolas

Parents: †Tomas Leon Guerrero Blas and †Maria Castro Blas

Brothers and Sister: †Juan Castro Blas, †Francisco Castro Blas, †Jesus Castro Blas, †Laling Blas Benavente

Sisters and Brother-in-Law: †Marcella Dorothea Blas, †Evangeline Pangelinan Blas, †Jose Duenas Benavente

Parents-in-Law: †Vicente Taijito San Nicolas and †Carmen Mendiola San Nicolas

Brothers and Sisters-in-Law: †Francisco A. &amp; Catalina S. San Nicolas, †Gregorio A. &amp; †Matilde L. San Nicolas, †Maria SN. &amp; †Pedro S. Rojas, †Tomas SN. &amp; †Vicente C. Trelas, †Rita SN. &amp; †Ramon F. Quitugua, †Acemcion SN. &amp; †Domingo S. Santos, †Jesus M. &amp; †Vicenta L. San Nicolas, †Florescia SN. &amp; †Greg SN. Torre, †Florencio M. &amp; †Marie P. San Nicolas, †Ricardo M. San Nicolas, †Ignacio M. San Nicolas, †Jose M. San Nicolas

Godson: †Alex Blas Suba; Special First Cousin: †Maria Castro Quenga

Children, Sons-in-Law, Daughter-in-Law and Grandchildren:

Doris San Nicolas Nault and Jeffrey Scott Nault

June Blas San Nicolas and Carl Joseph Guerrero (Jonah San Nicolas Quintanilla)

Gina Marie Blas San Nicolas (Noah Matthew San Nicolas, Connor Matthew San Nicolas)

Fred Michael San Nicolas and Elaine Vitskovitsky

*Dolores's love and memories will forever be cherished and missed by her loving,*

Children, Sons-in-Law, Daughter-in-Law and Grandchildren:

Doris San Nicolas Nault and Jeffrey Scott Nault

June Blas San Nicolas and Carl Joseph Guerrero (Jonah San Nicolas Quintanilla)

Gina Marie Blas San Nicolas (Noah Matthew San Nicolas, Connor Matthew San Nicolas)

Fred Michael San Nicolas and Elaine Vitskovitsky

Brothers, Sisters and their Spouses:

Nonito "Nito" C. Blas, Gregorio "Greg" C. &amp; Elaine T. Blas, Jose "Joe" C. &amp; Amelia "Amy" B. Blas, Maria "Mary" B. &amp; Miguel "Mike" A. Chamberlain, Fred C. &amp; Jessica B. Blas, Joanna Margaret C. Blas, Josephine B. Leon Guerrero, Rosa-Antonette "Anne" C. Blas, Antonio "Tony" C. &amp; Clarissa "Lisa" T. Blas, Vicente "Benny" C. &amp; Judy G. Blas, Rosalind "Rose" C. Blas, Dorothy "Dottie-Dot" C. Blas

She will also be remembered and missed by numerous nieces, nephews, cousins, godchildren, extended family and friends.

**Last Respects will be held Friday, January 24, 2025 from 8:00am to 11:30am at Niño Perdido y Sagrada Familia Catholic Church, Asan. Mass for a Christian Burial will be offered at 12:00pm (noon). Followed by Interment Services at Guam Memorial Park, Leyang Barrigada.**

## CLASSIFIEDS

424 Route 8 • Maite, Guam 96910 F: 671.475.8900/01 • F: 671.475.8922

## PUBLIC NOTICE

For: Regular Board Meeting Date: Friday, January 24, 2025 Time: 12:30 p.m.

Place: GGRF Conference Room

Zoom Meeting Link: <https://us06web.zoom.us/j/81409504697?pwd=Vab5a1bEVhQy1MBGcRBGZlUkUuSesqA.1>YouTube Channel: [https://www.youtube.com/channel/UCGdR3yXRE32IB\\_K944J73UQ](https://www.youtube.com/channel/UCGdR3yXRE32IB_K944J73UQ)**DEFINED CONTRIBUTION** I. Call to Order; II. Review and Approval of Board Minutes:

A. 12/20/2024 Regular Meeting; III. Correspondence: A. None; IV. Director's Report;

V. Third Party Administrator's Report: A. Contribution Report- December 2024;

VI. Standing Committee Reports: A. Investment Committee - 1. Action on Fund

Manager(s) - Searches; 2. Action on Fund Manager(s) - Watch; B. Members and Benefits

Committee; VII. Old Business: A. None; VIII. New Business: A. None; IX. Open Discussion

/ General Public Input; X. Announcements; XI. Adjournment

**DEFINED BENEFIT** I. Call to Order; II. Review and Approval of Board Minutes:

A. 12/20/2024 Regular Meeting; III. Correspondence: A. None; IV. Director's Report;

V. Legal Counsel's Report: A. None; VI. Treasurer's Report of Financial Status: A. Cash

Flow - Principal Drawdown Authorization; VII. Standing Committee Reports:

A. Investment Committee - 1. Action on Fund Manager(s) - Searches; 2. Action on Fund

Manager(s) - Watch; B. Members and Benefits Committee - 1. Approval of Retirement

Benefits; VIII. Old Business: A. None IX. New Business: A. Appointment of Retiree

Advocate to the GovGuam Health Insurance Negotiation Team for FY2026;

X. Open Discussion / General Public Input; XI. Announcements; XII. Adjournment

For individuals requiring special accommodations, please contact 475-8900/01.

/s/ Paula M. Blas, Director

This ad is paid with government funds by GGRF.



## GUAM MEMORIAL HOSPITAL AUTHORITY

ATURIDAT ESPETAT MIMURIAT GUAHAN



## Board of Trustees Meeting

Date: Wednesday, January 29, 2025

Time: 5:00 p.m.

Meeting will take place via Zoom Video Conferencing

Meeting ID: 889 2781 9303

Passcode: 807879

## AGENDA:

- I. Call Meeting to Order and Determination of Quorum; II. Closed Executive Session Re: A. CV1072-13; B. HHS/OCR Resolution Agreement Offer for GMHA #19-328681; III. Open Government Compliance: A. Publication, January 22, 2025; B. Publication, January 27, 2025; C. GovGuam Notices Portal & Website Posting; IV. Approval of the Minutes: A. November 28, 2024; V. Guam Memorial Hospital Volunteers Association Report; VI. Pediatric Patient Family Advisory Council (PFAC) Report; VII. Management's Report: A. Above-Step Recruitment Petition for Elizabeth Blas & Wima Hemosura; VIII. Old Business: None; IX. New Business - Board Subcommittee Reports: A. Joint Conference and Professional Affairs: 1. Res. 2025-10, Reappointment of Active Medical Staff Privileges; 2. Res. 2025-11, Appointment of Provisional Medical Staff Privileges; 3. Res. 2025-12, Appointment of Active Associate Medical Staff Privileges; 4. Res. 2025-13, Appointment of Provisional Allied Health Professional Staff Privileges; 5. Strategic Objective 5: Engage Physicians; B. Human Resources: 1. Res. 2025-14, Creating the Position of Revenue Cycle Management Administrator for Fiscal Services Division; 2. Res. 2025-15, Appointment of the Guam Memorial Hospital's Director of Respiratory Care; 3. Res. 2025-16 & 2025-17, Appointment of the Guam Memorial Hospital's Antibiotic Stewardship Program Leaders; 4. Res. 2025-18, Appointment of the Guam Memorial Hospital's Director of Pharmacy; 5. Res. 2025-19, Implementing the 25% work differential pay to all Nursing Technicians in the Nursing Division; 6. Strategic Objective 4: Engage the Healthcare Workforce; C. Facilities, Capital Improvement Projects, and Information Technology: 1. COVID-19 2021, 2022 & 2023 After Action Report (AAR)/Improvement Plan (AARIP) Guam Memorial Hospital and Skilled Nursing Facility; 2. Critical Infrastructure Projects (\$20M ARPA Funding); 3. Strategic Objective 2: Enhance Infrastructure & Technology; D. Quality and Safety: 1. Strategic Objective 3: Transform Healthcare Services; E. Finance and Audit: 1. Res. 2025-09, Approval of COVID-19 Patient Receivable Accounts Batch No. 2025-001; 2. Strategic Objective 1: Achieve Financial Viability; F. Governance, Bylaws, and Strategic Planning: 1. Strategic Objective 6: Engage & Partner with the Community; X. Public Comment; XI. Adjournment

For special accommodations, please contact Theo Pangelinan, EEO Officer, at (671) 647-2104, Monday through Friday from 8:00 a.m. to 5:00 p.m.

/s/ Lilian Perez-Pasadas, MN, FN  
Hospital Administrator/CEO

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**LOURDES A. LEON GUERRERO**  
Honorable Governor  
Maga'haga

**JOHN "JO" GUINAGA**  
Executive Manager

**AIRPORT GUAM**

**JOSHUA F. TENORIO**  
Honorable Lt. Governor  
Sigando Maga'hagi

**ARTEMIO "BOCKY" HERNANDEZ, Ph.D.**  
Deputy Executive Manager

P.O. Box 8778, Tamuning, GU 96913 • Tel: (671) 646-0200

### INVITATION FOR BID

#### JANITORIAL AND MAINTENANCE SERVICES

#### IFB No. GIAA-001-FY25

Deadline for Registration for Pre-Bid Conference & Site Visit (Single Point of Contact)	Pre-Bid Conference & Site Visit	Deadline for Receipt of Written Questions (Single Point of Contact)	Bid Submission Deadline
01/24/2025 5:00 p.m. (ChST)	01/24/2025 9:00 a.m. (ChST)	01/31/2025 5:00 p.m. (ChST)	02/14/2025 2:00 p.m. (ChST)

For additional information, contact Ms. Kathrina Bayson, the Single Point of Contact, via email at: [glaifb125@guamairport.net](mailto:glaifb125@guamairport.net)

The complete IFB packet and any addenda are available for public inspection at the GIAA Administration Office and for download from GIAA's website at [www.guamairport.com](http://www.guamairport.com). All Prospective bidders must register by submitting to GIAA the Acknowledgement of Receipt Form included as part of this IFB. GIAA shall not be liable for failure to provide notice(s) or addenda to any prospective bidder who does not submit an Acknowledgement of Receipt Form. GIAA reserves the right to reject any and all bids or offers and to waive any and all informalities, and such rejection or waiver will be in GIAA's best interest.

AD PAID FOR BY: ATURIDAT PUEYTON BATRON AUREN ENTENASOMAT GUAMAN

**The Honorable LOURDES A. LEON GUERRERO**  
Maga'haga • Governor

**The Honorable JOSHUA F. TENORIO**  
Sigando Maga'hagi • Lieutenant Governor

### INVITATION FOR BID

#### GOVERNMENT HOUSE REPAIRS

*The Honorable Lourdes A. Leon Guerrero, Governor of Guam and Honorable Joshua F. Tenorio, Lt. Governor of Guam, through, the Director of Department of Public Works (DPW), Vincent P. Arriola, Announces the solicitation of a sealed proposal for:*

#### Project No. 500-S-1066-L-AGH

**Bid Security must accompany bid-15% of total bid amount and may be Cash, Bid Bond, Certified or Cashier's Check made payable to:**  
**Treasurer of Guam**

**Non-Refundable Fee: \$25.00 (Twenty-Five Dollars) required as Payment for each Bid Documents.**

**Availability of Documents: January 24, 2025, CIP / Contracts Administration, Ground Floor, Federal Highway Building, DPW, Upper Tumon.**

**Please present receipt from the One-Stop Cashier - Building A, DPW, Upper Tumon.**

**Pre-Bid Conference: February 3, 2025, 9:00 am, Division of Capital Improvement (CIP) Ground Floor, CIP Conference Room, Upper Tumon. Pre-Bid and Site Visit is Mandatory**

**Bid Submission: February 12, 2025, 2:00 p.m. One (1) original and one (1) copy must be submitted @ CIP Division, Ground Floor, TMC Building, DPW.**

Department of Public Works reserves the right to reject any or all proposals and to waive any imperfection in the proposals, which in its sole and absolute judgment will serve the Government of Guam Interests.

**/s/ VINCENT P. ARRIOLA**  
Director

*This Ad Paid for with Government Funds*

542 North Marine Corps Drive, Tamuning, Guam 96913 • (671) 646-3121/3232 • Fax (671) 649-6178

**RAY CRUZ HADDOCK, ESQ.**  
**PACIFIC LAW PROFESSIONALS, PLLC**  
277 Chalan Santo Papa  
Hagåtña, Guam 96910  
Telephone: 671-477-0000  
mail@pacnwpro.com  
Attorneys for Petitioner

**IN THE SUPERIOR COURT OF GUAM**  
**IN THE MATTER OF THE ESTATE**  
**OF**  
**MARGARITA PEREZ PANGELINAN,**  
**DECEASED.**  
**PROBATE CASE NO. PR0049-24**  
**NOTICE TO CREDITORS**

Notice is given by the undersigned, Joaquin Perez Pangelinan, Administrator of the Estate of Margarita Perez Pangelinan, deceased, to the creditors of, and all persons having claims against Guam or estate or against said decedent, that within (60) days after the first publication of this notice they either file their claims in the office of the Clerk of the Superior Court of Guam, or exhibit them with the necessary vouchers to PACIFIC LAW PROFESSIONALS, PLLC 277 Chalan Santo Papa Hagåtña, Guam 96910, the same being the place for the transaction of the business of said Estate.

Dated: 10/24/2024.

**BY: /s/ JOAQUIN PEREZ PANGELINAN**  
Administrator

**LUJAN & WOLFF LLP**  
Attorneys at Law  
Suite 300, DNA Building  
238 Archbishop Flores Street  
Hagåtña, Guam 96910  
Telephone (671) 477-8064  
Facsimile (671) 477-5297  
Attorneys for Administratrix Eugenia Fejerang

**IN THE SUPERIOR COURT OF GUAM**  
**IN THE MATTER OF THE ESTATE**  
**OF**  
**EUGENIO MILLONES VEGAFRIA,**  
**Deceased.**  
**PROBATE CASE NO. PR0082-24**  
**NOTICE TO CREDITORS**

NOTICE IS HEREBY GIVEN by the undersigned, EUGENIA FEJERANG, Administratrix of the Estate of EUGENIO MILLONES VEGAFRIA also known as EUGENIO MILLONES VEGAFRIA JR., Decedent, to the creditors of Decedent and all persons having claims against Decedent, that within sixty (60) calendar days after the first publication of this notice, they must file their claims, with the necessary vouchers, in the office of the Clerk of the Superior Court of Guam, or present their claims, with the necessary vouchers, to Administratrix at the Law Office of Lujan & Wolff LLP, Suite 300, DNA Building, 238 Archbishop Flores Street, Hagåtña, Guam 96910.

Dated: 10-23-24

**/s/EUGENIA FEJERANG**  
Administratrix

**U.S. PROBATION/PRETRIAL SERVICES OFFICE**  
**DISTRICTS OF GUAM**  
**AND THE NORTHERN MARIANA ISLANDS**

**EMPLOYMENT VACANCY ANNOUNCEMENT:**  
**GUP25-01**

**POSITION:** U.S. Probation/Pretial Services Officer

**POSITION TYPE:** Full-Time Permanent, Excepted Service

**SALARY:** \$50,927 to \$62,639 plus 11.88% Cost of Living Allowance (COLA), which is subject to change (Starting salary is dependent upon qualifications and experience; Promotion potential to higher classification level without further competition)

**CLOSING DATE:** Open until filled; preference given to applications received by Friday, January 31, 2025 at by 5:00 PM ChST

**LOCATION OF VACANCY:** Saipan, District of the Northern Mariana Islands

The complete announcement, A078 application form, and position description are available at our website at <http://www.gup.uscourts.gov>

*The U.S. Probation Office is an Equal Opportunity Employer.*

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email [adsales@postguam.com](mailto:adsales@postguam.com)



### GUAM MEMORIAL HOSPITAL AUTHORITY

ATURIDAT ESPETAT MIMURIAT GUAMHAN



**Board of Trustees Meeting**  
Date: **Wednesday, January 29, 2025**  
Time: **5:00 p.m.**  
Meeting will take place via Zoom Video Conferencing  
Meeting ID: 889 2761 9303  
Passcode: 907678

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For special accommodations, please contact Theo Pangelinan, EEO Officer, at (671) 647-2104, Monday through Friday from 8:00 a.m. to 5:00 p.m.

**/s/ Lillian Perez-Posedas, MN, RN**  
Hospital Administrator/CEO

*This advertisement is paid with government funds by the GMHA.*

# GMHA Board of Trustees Meeting

 PRINT

## GMHA Board of Trustees Meeting

MEETING



 **Posted on:** 01/21/2025 01:24 PM

 **Posted by:** Justine Camacho, BOT Admin. Asst. - Janet Mandapat

 **Meeting Date:** 01/29/2025 05:00 PM


 **Department(s):**

**GUAM MEMORIAL HOSPITAL AUTHORITY (/notices?department\_id=51)**

 **Division(s):** HOSPITAL ADMINISTRATION (/notices?division\_id=178)

 **Notice Topic(s):** BOARD MEETING (/notices?topic\_id=76)

 **Types of Notice:** MEETING (/notices?type\_id=5)

 **For Audience(s):** PUBLIC (/notices?public=1)

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**AGENDA**

Guam Memorial Hospital Authority – Board of Trustees Meeting  
January 29, 2025 | 5:00 p.m. | Zoom Video Conference

**BOARD MEMBERS:** Theresa Obispo, Chairperson; Edgar Aguilar, Vice-chairperson; Sharon Davis, Secretary; Sonia Siliang, Treasurer; Michael Um, MD, Trustee; Teresa Damian-Borja, MD, Trustee, Antoinette Kleiner, Trustee, Suzanne Lobaton, Trustee

Notice: Closed Executive Session to discuss attorney-client privilege confidential Case Settlement and Resolution Agreement Offer in A. CV1072-13; B. HHS/OCR Resolution Agreement Offer for GMHA #19-328681 Only Board Members, the Court Reporter, select Members of the Administration and Legal Counsel will be “admitted” for the executive session and all other participants will be placed in the “waiting room” until executive session ends the board reconvenes for regular session.

**Item****Owner****I. Welcoming | Call Meeting to Order and Determination of Quorum**

Trustee  
Obispo  
All Trustees  
Legal  
Counsel (J.  
Pauluhn)

**II. Closed Executive Session**

- A. CV1072-13 / Settlement / Kikuchi v. GMHA
- B. HHS/OCR Resolution Agreement Offer for GMHA #19-328681

**III. Open Government Compliance**

- A. Publication, January 22, 2025
- B. Publication, January 27, 2025
- C. GovGuam Notices Portal & Website Posting

**IV. Review and Approval of the Minutes**

- A. November 26, 2024

All Trustees

**V. Guam Memorial Hospital Volunteers Association Report**

GMHVA  
President

**VI. Pediatric Patient Family Advisory Council (PFAC) Report**

Jackie Pereira

**VII. Management's Report**

- A. Above-Step Recruitment Petition for Elizabeth Blas & Wilma Hermosura

Executive  
Management

**VIII. Old Business**

None

All Trustees

**IX. New Business - Board Subcommittee Reports****A. Joint Conference and Professional Affairs**

Trustee Dr.  
Um

1. Res. No. 2025-10, Relative to the Reappointment of Active Medical Staff Privileges
2. Res. No. 2025-11, Relative to the Appointment of Provisional Medical Staff Privileges
3. Res. No. 2025-12, Relative to the Appointment of Active Associate Medical Staff Privileges
4. Res. No. 2025-13, Relative to the Appointment of Provisional Allied Health Professional Staff Privileges
5. Strategic Objective 5: Engage Physicians

**B. Human Resources**

Chairperson  
Obispo



1. Res. No. 2025-14, Relative to Creating the Position of Revenue Cycle Management Administrator for Fiscal Services Division
2. Res. No. 2025-15, Relative to Appointment of the Guam Memorial Hospital's Director of Respiratory Care
3. Res. No. 2025-16 & 2025-17, Relative to Appointment of the Guam Memorial Hospital's Antibiotic Stewardship Program Leaders
4. Res. No. 2025-18, Relative to Appointment of the Guam Memorial Hospital's Director of Pharmacy
5. Res. No. 2025-19, Relative to implementing the 25% work differential pay to all Nursing Technicians in the Nursing Division
6. Strategic Objective 4: Engage the Healthcare Workforce

**C. Facilities, Capital Improvement Projects, and Information Technology**

Trustee  
Davis

1. COVID-19 2021, 2022 & 2023 After Action Report (AAR)/Improvement Plan (AAR/IP) Guam Memorial Hospital and Skilled Nursing Facility
2. Critical Infrastructure Projects (\$20M ARPA Funding)
3. Strategic Objective 2: Enhance Infrastructure & Technology

**D. Quality and Safety**

Trustee  
Kleiner

1. Strategic Objective 3: Transform Healthcare Services

**E. Finance and Audit**

Vice-  
Chairperson  
Aguilar

1. Res. No. 2025-09, Relative to Approval of COVID-19 Patient Receivable Accounts Batch No. 2025-001
2. Strategic Objective 1: Achieve Financial Viability

**F. Governance, Bylaws, and Strategic Planning**

1. Strategic Objective 6: Engage & Partner with the Community

Trustee Dr.  
Damian-  
Borja, Siliang

**X. Public Comment**

**XI. Adjournment**

Chairperson  
Obispo

**Regular Meeting of the  
Guam Memorial Hospital Authority  
Board of Trustees**  
Tuesday, November 26, 2024 | 5:00 p.m.  
Zoom Video Conference

**ATTENDANCE**

**Board Members**

**Present:** Edgar Aguilar, Sharon Davis,  
Sonia Siliang, Dr. Michael Um, Dr. Teresa  
Damian-Borja, Antoinette Kleiner &  
Suzanne Lobaton  
**Absent:**

**Absent:** Theresa Obispo, Dr. Verrad Nyame, Dr. Jeffery Shay

**Guests:** Hilda Pellacani, Julianne Hernandez (PDN), Tony Aguon,  
Sydie Taisacan, Rayna Cruz, Cindy Hanson, Patty Camacho,  
Aida Yap & Justine Camacho

**Leadership**

**Present:** Lillian Perez-Posadas, Rizaldy  
Tugade, Rodalyn Gerardo, Ana Belen  
Rada, Christine Tuquero, Liezl  
Concepcion, Yuka Hechnova, Danielle  
Manglona, Jordan Pauluhn & Robert  
Weinberg

ISSUE/TOPIC/DISCUSSIONS	DECISION(S)/ACTION(S)	RESPONSIBLE PARTY	REPORTING TIMEFRAME	STATUS
<b>I. CALL MEETING TO ORDER AND DETERMINATION OF QUORUM</b>				
	After notices were duly issued pursuant to Title 5 GCA, Chapter 8, Open Government Law, Section 8107(a) and with a quorum present, Trustee Davis called to order the regular meeting of the GMHA Board of Trustees at 5:00 p.m. on Tuesday, November 26, 2024, via Zoom Video Conferencing.	Chairwoman - Theresa Obispo	None	None
<b>II. OPEN GOVERNMENT COMPLIANCE</b> A. Publication, November 19, 2024 B. Publication, November 24, 2024 C. GovGuam Notices Portal & Website Posting	The Announcement of the Open Government Compliance was made.	Admin. Assistant - Janet Mandapat	None	Informational
<b>III. REVIEW AND APPROVAL OF MINUTES</b>				
A. October 30, 2024	Trustee Kleiner motioned, and it was seconded by Trustee Aguilar to approve the October 30, 2024 minutes as presented with corrections. The motion carried with all ayes.	All Trustees	None	Approved
<b>IV. GUAM MEMORIAL HOSPITAL VOLUNTEERS ASSOCIATION REPORT</b>				
	The following are some of the highlights: ➢ The 2024 GMHVA Holiday Raffle is ongoing, the Drawing will be held on December 5, 2024, at 4:00 pm at the Guam Premium Outlet Food Court. ➢ Save the date, the 2025 GMHVA Charity Ball will be held on Saturday, April 26, 2025. ➢ The 2025 event will honor the 1965 founding member of the Guam Memorial Hospital Volunteers Association also known as the Pink Ladies Mrs. Margaret Ann Jones.	GMHVA President - Hilda Pellacani	None	Informational



	<ul style="list-style-type: none"> <li>➤ MHVA's goal is to raise \$80K which is aimed towards the purchase of two vehicles for Guam Memorial Hospital.</li> <li>➤ The Artist who will be working on the mural for the Pediatric Ward Art Project - Bringing Colors to Healing is scheduled to begin work soon.</li> <li>➤ GMHVA will be sponsoring the Daisy Award Program. A program that recognizes nurses who provide exceptional care to patients.</li> </ul>	GMHVA President - Hilda Pellacani	None	Informational
<b>V. MANAGEMENT'S REPORT</b>				
A. Pacific Island Health Officers Association (PIHOA)	<p>GMHA's Mrs. Perez-Posadas attended the 75<sup>th</sup> PIHOA Executive Board Meeting held at the College of Micronesia National Campus Gymnasium on November 18 - 22, 2024 in Pohnpei, FSM.</p> <p>PIHOA'S mission is to improve the health and well-being of U.S. Affiliated Pacific Islands (USAPI) communities by providing, through consensus, a unified credible voice in health issues of regional significance.</p>	Executive Management	None	Informational
B. Fiscal Review Committee Meeting/DOA	<p>The Guam Legislative Bill No. 355-37 (COR), "An act to appropriate revenues over the adopted revenues in Public Law 37-42 was signed on November 06, 2024. GMHA is set to receive \$20M in additional funding for FY2025</p> <p>The \$20M appropriated funds received from the Government of Guam will be managed by the Department of Administration. A vendor invoice listing will be provided and submitted to Director Mr. Edward Bim and his Team.</p>			
C. Guam Economic and Development Agency - Professional Consultant Services	<p>The following are some of the highlights:</p> <ul style="list-style-type: none"> <li>• In response to the GEDA's RFP, GEDA Officials are reviewing the proposals received.</li> <li>• GMHA is awaiting feedback from the panel on the final selection and decision.</li> </ul>			
D. Nursing Staffing Solution Agencies	<p>The following are some of the highlights:</p> <ul style="list-style-type: none"> <li>• GMHA continues to scale back on the reliance and dependability of our Travel Nurses with now just one Travel Agency being utilized NuWest.</li> <li>• Just this year 2024 we started out with 42 travel nurses and now we are currently down to 25.</li> </ul>			



<p>E. New Nomination for Board of Trustee</p> <p>F. Above-Step Recruitment Petition for Julianne Bernadette Lalic</p>	<ul style="list-style-type: none"> <li>GMHA has recruited 59 new nurses and has lost 38 nurses. Last year's retention rate was 75% and currently, we are up to 87% which is great, there is progress. The national healthcare retention rate is 90% or higher. GMHA is getting close to that.</li> </ul> <p>The following are some of the highlights:</p> <ul style="list-style-type: none"> <li>New Nominee representing the Allied Health Profession, Krista B. Blankenship Pharm.D.</li> <li>The scheduled date of Confirming Hearing from the Guam Legislature will be forthcoming.</li> </ul> <p>The following are some of the highlights:</p> <ul style="list-style-type: none"> <li>A recommended above-step recruitment for Julianne Bernadette Lalic was made.</li> <li>Based on exceptional qualifications Mrs. Perez-Posadas has recommended a Salary of \$63,728 Grade N Step 5.</li> <li>This will now move to the Main Board of Trustees Meeting next month for its Final Review and Approval.</li> </ul>	Executive Management	None	Informational
<p><b>VI. OLD BUSINESS</b></p> <p>None</p>		All Trustees	None	None
<p><b>VII. NEW BUSINESS</b></p> <p>A. Joint Conference and Professional Affairs</p> <ol style="list-style-type: none"> <li>Res. 2025-06, Relative to the Reappointment of Active Medical Staff Privileges</li> <li>Res. 2025-07, Relative to the Appointment of Active Associate Medical Staff Privileges</li> <li>Res. 2025-08, Relative to the Appointment of Provisional Medical Staff Privileges</li> </ol>	<p>Trustee Dr. Um motioned, and it was seconded by Trustee Kleiner to approve Res. 2025-06, 2025-07 &amp; 2025-08 as presented. The motion carried with all ayes.</p> <p>The following are some of the highlights:</p> <ul style="list-style-type: none"> <li>Also discussed today was the idea of stretching the physician's and providers privileges from 2 to 3 years.</li> <li>A request to the Guam Legislature would be to have a Controlled Substance Registration (CSR). All physicians shall obtain a license. The CSR is required prior to applying for a federal DEA certificate. This is a good way to keep track of who's prescribing what or who's able to prescribe certain medications.</li> <li>GMHA's OB/GYN Dr. Jonathan Sidell has officially retired.</li> </ul>	<p>Chairperson JCPA -Trustee Dr. Michael Um</p> <p>Chairperson JCPA -Trustee Dr. Michael Um</p>	<p>None</p> <p>None</p>	<p>Approved</p> <p>Informational</p>



4. CY2023 Strategic Goal: 5 Engage Physicians	A Working Session to review and update the Strategic Plan Objectives is ongoing. Together with the Planning Department Team they are currently updating and evaluating the plans objectives more updates will be forthcoming.	Chairperson JCPA - Trustee Dr. Michael Um	None	Informational
B. Human Resources	Continued efforts to recruit interested parties to become part of the Team GMHA, ongoing job fairs, and career days are being hosted throughout the island.	Personnel Services Administrator - Tony Aguon	None	Informational
1. CY2023 Strategic Goal: 4 Engage the Healthcare Workforce	<p>The following are some of the highlights:</p> <ul style="list-style-type: none"> <li>➤ GMHA is currently in the process of applying for a \$50K grant from USDA.</li> <li>➤ The Purpose of this grant is to procure the much-needed emergency radios for the hospital.</li> </ul> <p>A Working Session to review and update the Strategic Plan Objectives is ongoing. Together with the Planning Department Team they are currently updating and evaluating the plans objectives more updates will be forthcoming.</p>			
C. Facilities, Capital, Improvement Projects, and Information Technology	<p>The following are some of the highlights:</p> <ul style="list-style-type: none"> <li>• GMHA is currently tracking 52 projects.</li> <li>• <b>Drawdown:</b></li> <li>• 12 Projects \$966,683</li> <li>• <b>Projects Complete:</b></li> <li>• 17% \$989,885</li> <li>• <b>PO Issued/Pending Project Completion:</b></li> <li>• 52% \$9,510,312</li> <li>• <b>Active Solicitation:</b></li> <li>• 14% \$8,075,005</li> <li>• <b>Pending Solicitation/On Hold:</b></li> <li>• 17% \$1,424,799</li> </ul> <p>A Working Session to review and update the Strategic Plan Objectives is ongoing. Together with the Planning Department Team they are currently updating and evaluating the plans objectives more updates will be forthcoming.</p>	<p>Chairperson FAC, CIP &amp; IT - Trustee Sharon Davis</p> <p>Deputy Asst. Admin. of Operations - Rodalyn Gerardo</p>	None	Informational
1. USDA Community Facilities Grant				
2. Critical Infrastructure Projects (\$20M ARPA Funding)				
3. CY2023 Strategic Goal 2: Enhance Infrastructure & Technology	A Working Session to review and update the Strategic Plan Objectives is ongoing. Together with the Planning Department Team they are currently updating and evaluating the plans objectives more updates will be forthcoming.	Deputy Asst. Admin. of Operations - Rodalyn Gerardo	None	Informational



<p><b>D. Quality and Safety</b></p> <ol style="list-style-type: none"> <li>1. Sentinel Events</li> <li>2. Patient Family Advisory Council (PFAC)</li> <li>3. Employee Pulse Survey - Just Culture</li> <li>4. National Library of Medicine Grant - Chuukese Translators</li> </ol>	<p>The following are some of the highlights:</p> <ul style="list-style-type: none"> <li>• A soft reminder for all trustees, please ensure that your gmha.org email address is working and you have access in case a Sentinel event occurs you will be able to receive the notification.</li> <li>• The Patient Family Advisory Council (PFAC) will have a community member come to the Full BOT meetings once a quarter for 10 minutes to discuss the efforts of the hospital's Pediatric Patient and Family Engagement Council.</li> <li>• The pulse survey was recently completed with a lower response rate this year.</li> <li>• As an incentive, the EEO Team was able to put out a raffle prize which consisted of gift certificates. The staff had the option to put in their name for a chance to be entered into the raffle.</li> <li>• The National Library of Medicine has approved a hospital grant for GMHA.</li> <li>• The funds will be used for recruitment, training, and certification. GMHA has identified one hospital staff member, 3 more additional members are needed.</li> <li>• The translation into their native tongues so that the patient population receives information in the language that they can understand best.</li> <li>• The focus will soon be the translation of GMHA's existing documents.</li> </ul>	<p>Chairperson Quality &amp; Safety - Trustee Antoinette Kleiner</p>	<p>None</p>	<p>Informational</p>
<ol style="list-style-type: none"> <li>5. GMHA AAR/IP 2024 Radiation Incident - Mass Casualty (FSE) GMH</li> <li>6. GMHA AAR/IP 2024 Radiation Incident - Mass Casualty (FSE) SNF</li> </ol>	<p>The following are some of the highlights:</p> <ul style="list-style-type: none"> <li>• In collaboration with the Guam U.S. Naval Base and Island Wide, GMHA conducted a Radiation Incident Mass Casualty Full Scale Exercise in August 2024.</li> <li>• The different departments in the hospital were able to learn from the exercise and know what are the gaps or issues that need addressing.</li> <li>• One of the issues that will need to be addressed is because each department has its own plans we were seeing some overlaps. To make it more consistent there were recommendations to</li> </ul>	<p>Deputy Asst. Admin. of Operations - Rodalyn Gerardo</p>	<p>None</p>	<p>Informational</p>

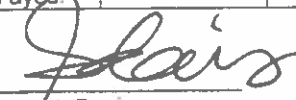


	<p>consolidate.</p> <ul style="list-style-type: none"> <li>The Plans can be located on our MCN which is online. In the event of a power outage, hard copies can be retrieved from a binder that is kept in a file cabinet specific to that.</li> <li>The Planning Department Team will be working to update our mass casualty plan which is a work in progress.</li> </ul>	Deputy Asst. Admin. of Operations - Rodalyn Gerardo	None	Informational
7. A-PS800 Patient Safety Program 2024	The Patient Safety Program has been approved and is awaiting Chairwoman Obispo's Signature.	Patient Safety & Regulatory Compliance - Danielle Manglona	None	Informational
8. CY2023 Strategic Goal 3: Transform Healthcare Services	A Working Session to review and update the Strategic Plan Objectives is ongoing. Together with the Planning Department Team they are currently updating and evaluating the plans objectives more updates will be forthcoming.			
E. Finance and Audit	The Committee has agreed to Table this item as it is pending further review from the Fiscal Team.	Chairperson F&A - Trustee Edgar Aguilar	None	Tabled
1. Resolution Relative to Approval of Patient Receivable Accounts Batch No. 2025-003				
2. CY2023 Strategic Goal: 1 Achieve Financial Viability	A Working Session to review and update the Strategic Plan Objectives is ongoing. Together with the Planning Department Team they are currently updating and evaluating the plans objectives more updates will be forthcoming.	Chief Financial Officer - Yukari Hechanova	None	Informational
F. Governance, Bylaws, and Strategic Planning	The following are some of the highlights:	Chairperson Gov. Bylaws & Strategic Planning - Trustee Damian-Borja	None	Informational
1. CY2023 Strategic Goal 6: Engage & Partner with the Community	<ul style="list-style-type: none"> <li>Discussions on the Physician's parking are ongoing.</li> <li>Talks on acquiring land across the current Physician's parking possibly under Guam Chamoru Land Trust.</li> <li>GMHA's plans to put in an additional 38 parking stalls on the center island are forthcoming. The estimated time to complete the project is 1 year.</li> </ul>			

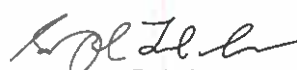



VIII. PUBLIC COMMENT				
		Public Comment	None	None
IX. ADJOURNMENT				
	There being no further business matters for discussion, Trustee Davis declared the meeting adjourned at 6:24 p.m. motioned and seconded. The motion carried with all ayes.	All Board members	None	Approved

Transcribed by:   
Janet U. Mandapat  
Administrative Assistant

Submitted by:   
Sharon J. Davis  
Secretary

**CERTIFICATION OF APPROVAL OF MINUTES:** The minutes of the October 30, 2024 regular session meeting were accepted and approved by the GMHA Board of Trustees on this 26<sup>th</sup> day of November 2024.

Certified by:   
for Theresa C. Obispo  
Chairperson







# GUAM MEMORIAL HOSPITAL AUTHORITY

ATURIDAT ESPETAT MIMURIAT GUAHAN

850 Governor Carlos Camacho Road, Tamuning, Guam 96913

Operator: (671) 647-2330 or 2552 | Fax: (671) 649-5508



November 8, 2024

## MEMORANDUM

TO: Hospital Administrator/CEO

FROM: Chief Financial Officer

SUBJECT: **ABOVE-STEP PETITION:  
ELIZABETH BLAS – ACCOUNTING TECHNICIAN II**

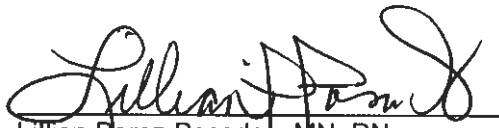
I am recommending an above-step recruitment for Ms. Elizabeth Blas, pursuant to Title 4GCA Ch. 6 § 6205, based on exceptional qualifications. Ms. Blas was selected for the Accounting Technician II position. The initial offer is Grade I, Step 1 at \$34,886 per annum. In consideration of Ms. Blas' years of experience, certifications, and training in the healthcare industry, I am therefore recommending Grade I, Step 4 at \$39,004 per annum.

Ms. Blas has devoted over 25 years of her time in the healthcare industry. She is a retired medical biller from the Rota Health Center, a Commonwealth Healthcare Corporation in the CNMI. She has also added years of service in medical billing from her time at the Guam Regional Medical City. Ms. Blas has and continues to assist the RCM team focusing mainly on Medicaid and MIP/MAP claims. Her primary role is to ensure timely filing and to prevent denials and duplicate submissions. In addition, with Ms. Blas' current employment with GMHA as a Limited Term Appointment, our Medicaid and MIP/MAP billing and collections have increased tremendously and we have been able to minimize the number of denials and rejected claims.

I am seeking your favorable consideration of my request as we continue to build capacity in GMHA's Revenue Cycle Management – Patient Affairs – Billing Section. Thank you!

  
Yukari Hechanova

☒ Approved      ☐ Disapproved

  
Lillian Perez-Posadas, MN, RN  
Hospital Administrator/CEO

Date: 11/8/2024

#17535

**RECEIVED**

NOV 12 2024

**HR, GMHA**



# GUAM MEMORIAL HOSPITAL AUTHORITY

ATURIDAT ESPETAT MIMURIAT GUAHAN

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## MEDIA RELEASE

December 5, 2024

Pursuant to 4GCA § 6303.1 – Transparency and Disclosure

### PETITION FOR ABOVE-STEP RECRUITMENT


The Guam Memorial Hospital Authority is proposing to grant above-step recruitment for the following position:

#### ACCOUNTING TECHNICIAN II

(PG – I: Step 1 \$34,886.00 P/A to Step 10 \$47,891.00 P/A)

This position is in the classified service within the GMHA Fiscal Services Division. To view the proposed above-step petition, please visit our website at [www.gmha.org](http://www.gmha.org), under main page Important Public Notices.

Comments are welcomed and may be submitted to the Human Resources Department no later than December 19, 2024, at [human.resources@gmha.org](mailto:human.resources@gmha.org). Should you have any questions, please contact the Human Resources Department at 647-2171/2409.

  
TONY C. AGUON, MPA  
Personnel Services Administrator



# GUAM MEMORIAL HOSPITAL AUTHORITY

ATURIDAT ESPETAT MIMURIAT GUAHAN

850 Governor Carlos Camacho Road, Tamuning, Guam 96913  
Operator: (671) 647-2330 or 2552 | Fax: (671) 649-5508



November 8, 2024

## MEMORANDUM

TO: Hospital Administrator/CEO

FROM: Chief Financial Officer

SUBJECT: **ABOVE-STEP PETITION:  
WILMA HERMOSURA – ACCOUNTING TECHNICIAN II**

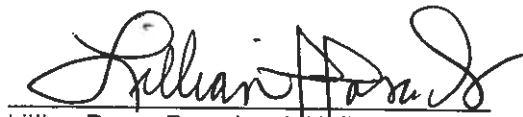
I am recommending an above-step recruitment for Ms. Wilma Hermosura, pursuant to Title 4GCA Ch. 6 § 6205, based on exceptional qualifications. Ms. Hermosura was selected for the Accounting Technician II position. The initial offer is Grade I, Step 1 at \$34,886 per annum. In consideration of Ms. Hermosura's years of experience, certifications, and training in the healthcare industry, I am therefore recommending Grade I, Step 4 at \$39,004 per annum.

Ms. Hermosura has worked in the healthcare industry for more than 20 years. She gained most of her experience in patient accounting and medical billing while working at the Guam Regional Medical City and the Adult Health Care Clinic. She has and continues to assist the RCM team focusing mainly on Medicare. Her primary role is to ensure timely and efficient filing and to prevent denials and duplicate submissions. In addition, with Ms. Hermosura's current employment with GMHA as a Limited Term Appointment, our Medicare billing and collections have increased tremendously and we have been able to minimize the number of denials and rejected claims.

I am seeking your favorable consideration of my request as we continue to build capacity in GMHA's Revenue Cycle Management – Patient Affairs – Billing Section. Thank you!

  
Yukari Hechanova

[ ☒ ] Approved [ ☐ ] Disapproved

  
Lillian Perez-Posadas, MN, RN  
Hospital Administrator/CEO

Date: 11/8/2024

#17536  
**RECEIVED**

NOV 12 2024

**HR, GMHA** 



# GUAM MEMORIAL HOSPITAL AUTHORITY

ATURIDĀT ESPETĀT MIMURIĀT GUĀHĀN

850 Governor Carlos Camacho Road, Tamuning, Guam 96913  
Operator: (671) 647-2330 or 2552 | Fax: (671) 649-5508



## MEDIA RELEASE

December 5, 2024

Pursuant to 4GCA § 6303.1 – Transparency and Disclosure

### PETITION FOR ABOVE-STEP RECRUITMENT

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(PG – I: Step 1 \$34,886.00 P/A to Step 10 \$47,891.00 P/A)

This position is in the classified service within the GMHA Fiscal Services Division. To view the proposed above-step petition, please visit our website at [www.gmha.org](http://www.gmha.org), under main page Important Public Notices.

Comments are welcomed and may be submitted to the Human Resources Department no later than December 19, 2024, at [human.resources@gmha.org](mailto:human.resources@gmha.org). Should you have any questions, please contact the Human Resources Department at 647-2171/2409.

TONY C. AGUON, MPA  
Personnel Services Administrator





# GUAM MEMORIAL HOSPITAL AUTHORITY

## ATURIDÅT ESPETÅT MIMURIÅT GUÅHÅN

850 Governor Carlos Camacho Road, Tamuning, Guam 96913  
Operator: (671) 647-2330 or 2552 | Fax: (671) 649-5508



### BOARD OF TRUSTEES Official Resolution No. 2025-09

#### "RELATIVE TO APPROVAL OF COVID-19 PATIENT RECEIVABLE ACCOUNTS BATCH NO. 2025-001"

**WHEREAS**, the Guam Memorial Hospital Authority ("the Hospital") is a public corporation and an autonomous instrumentality of the Government of Guam; and

**WHEREAS**, the Hospital has not been consistent in applying the accounts receivable allowance when collection from government, insurer or patient is deemed unlikely; and

**WHEREAS**, the Board of Trustees Finance and Audit Sub-Committee met on October 10, 2024 and reviewed Batch No. 2025-001 to write off 316 COVID patient accounts in the total amount of \$6,607,141.37 and recommended that the Board of Trustees approve to write-off these patient receivable accounts as presented that are justified for write-off; and

**RESOLVED**, that the Board of Trustees hereby approves that the Hospital authorize the Chief Financial Officer to apply the write-offs in the detailed Aged Trial Balance, and be it further

**RESOLVED**, that the GMHA Board of Trustees hereby accepts and approves the recommendation of the Finance and Audit Sub-Committee and adopts the Batch No. 2025-001 for write-off, and be it further

**RESOLVED**, that the Chairperson certifies and the Secretary attests to the adoption of this resolution.

**DULY AND REGULARLY ADOPTED ON THIS 29<sup>th</sup> DAY OF JANUARY, 2025.**

Certified By:

Theresa C. Obispo  
Chairperson

Attested By:

Sharon J. Davis  
Secretary



# GUAM MEMORIAL HOSPITAL AUTHORITY

## ATURIDÁT ESPETÁT MIMURIÁT GUÁHÂN

850 Governor Carlos Camacho Road, Tamuning, Guam 96913  
Operator: (671) 647-2330 or 2552 | Fax: (671) 649-5508



### BOARD OF TRUSTEES Official Resolution No. 2025-10

#### “RELATIVE TO THE REAPPOINTMENT OF ACTIVE MEDICAL STAFF PRIVILEGES

<u>Practitioner</u>	<u>Department</u>	<u>Specialty</u>	<u>Expiration Date</u>
Daniel Hartmann, MD.	Emergency	Emergency Medicine	November 30, 2026
Carl von Trampe, MD.	Emergency	Emergency Medicine	November 30, 2026
Scott Erickson, MD.	Emergency	Emergency Medicine	November 30, 2026
Michael LaRoy, MD.	Emergency	Emergency Medicine	November 30, 2026
Joel Rubio, MD.	Medicine	Endocrinology	November 30, 2026

**WHEREAS**, the above listed practitioners met the basic requirements for Active Medical Staff Membership as determined by the appropriate Medical Staff Departments and Committees pursuant to the GMHA Medical Staff Bylaws, Article IV, Section 4.2; and

**WHEREAS**, the Medical Executive Committee met on November 27, 2024 and the Joint Conference and Professional Affairs Committee recommended approval of Active Medical Staff Membership reappointment for the above listed practitioners; and

**WHEREAS**, all reappointments to Active Medical Staff Membership require Board approval; now, therefore be it

**RESOLVED**, that the Board of Trustees approves this recommendation to reappoint the above named practitioners to Active Medical Staff as recommended; and, be it further

**RESOLVED**, that the Board of Trustees directs the Hospital Administrator to duly notify the practitioners listed above and all Hospital and Medical Departments of these reappointments; and be it further

**RESOLVED**, that the Board of Trustees Chairperson certifies and the Board of Trustees Secretary attests to the adoption of this Resolution.

**DULY AND REGULARLY ADOPTED ON THIS 29<sup>th</sup> DAY OF JANUARY, 2025.**

Certified by:

Theresa C. Obispo  
Chairperson

Attested by:

Sharon J. Davis  
Secretary





# GUAM MEMORIAL HOSPITAL AUTHORITY

## ATURIDĀT ESPETĀT MIMURIĀT GUĀHĀN

850 Governor Carlos Camacho Road, Tamuning, Guam 96913  
Operator: (671) 647-2330 or 2552 | Fax: (671) 649-5508



### BOARD OF TRUSTEES Official Resolution No. 2025-11 “RELATIVE TO THE APPOINTMENT OF PROVISIONAL MEDICAL STAFF PRIVILEGES

<u>Practitioner</u>	<u>Department</u>	<u>Specialty</u>	<u>Expiration Date</u>
Sungwook Kim, DPM	Surgery	Podiatry	November 30, 2025

**WHEREAS**, the above listed practitioners met the basic requirements for Provisional Medical Staff Membership as determined by the appropriate Medical Staff Departments and Committees pursuant to the GMHA Medical Staff Bylaws, Article IV, Section 4.3; and

**WHEREAS**, the Medical Executive Committee email voted on November 27, 2024 and the Joint Conference and Professional Affairs Committee recommended approval of Provisional Medical Staff Membership appointment for the above listed practitioner; and

**WHEREAS**, all appointments to Provisional Medical Staff Membership require Board approval; now, therefore be it

**RESOLVED**, that the Board of Trustees approves this recommendation to appoint the above named practitioners to Provisional Medical Staff as recommended; and, be it further

**RESOLVED**, that the Board of Trustees directs the Hospital Administrator to duly notify the practitioners listed above and all Hospital and Medical Departments of these appointments; and be it further

**RESOLVED**, that the Board of Trustees Chairperson certifies and the Board of Trustees Secretary attests to the adoption of this Resolution.

**DULY AND REGULARLY ADOPTED ON THIS 29<sup>th</sup> DAY OF JANUARY, 2025.**

Certified by:

Theresa C. Obispo  
Chairperson

Attested by:

Sharon J. Davis  
Secretary



# GUAM MEMORIAL HOSPITAL AUTHORITY

## ATURIDÅT ESPETÅT MIMURIÅT GUÅHÅN

850 Governor Carlos Camacho Road, Tamuning, Guam 96913  
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### BOARD OF TRUSTEES Official Resolution No. 2025-12

#### **“RELATIVE TO THE APPOINTMENT OF ACTIVE ASSOCIATE MEDICAL STAFF PRIVILEGES”**

<b><u>Practitioner</u></b>	<b><u>Department</u></b>	<b><u>Specialty</u></b>	<b><u>Expiration Date</u></b>
Emmanuel Omoba, MD	Radiology	Radiology	November 30, 2026
Stace Bradshaw, MD	Radiology	Radiology	November 30, 2026
Ish Gulati, MD	Pediatric	Pediatric (Tele-Med)	November 30, 2026
Moshe Cohn, MD	Pediatric	Pediatric (Tele-Med)	November 30, 2026
Christopher Tan, MD	Pediatric	Cardiology	November 30, 2026

**WHEREAS**, the above listed practitioners met the basic requirements for Active Associate Medical Staff Membership as determined by the appropriate Medical Staff Departments and Committees pursuant to the GMHA Medical Staff Bylaws, Article IV, Section 4.2; and

**WHEREAS**, the Medical Executive Committee met on November 27, 2024 and the Joint Conference and Professional Affairs Committee recommended approval of Active Associate Medical Staff Membership appointment for the above listed practitioner; and

**WHEREAS**, all appointments to Active Associate Medical Staff Membership require Board approval; now, therefore be it

**RESOLVED**, that the Board of Trustees approves this recommendation to appoint the above named practitioners to Active Associate Medical Staff as recommended; and, be it further

**RESOLVED**, that the Board of Trustees directs the Hospital Administrator to duly notify the practitioners listed above and all Hospital and Medical Departments of these appointments; and be it further

**RESOLVED**, that the Board of Trustees Chairperson certifies and the Board of Trustees Secretary attests to the adoption of this Resolution.

**DULY AND REGULARLY ADOPTED ON THIS 29<sup>th</sup> DAY OF JANUARY, 2025**

Certified by:

Theresa C. Obispo  
Chairperson

Attested by:

Sharon J Davis  
Secretary





# GUAM MEMORIAL HOSPITAL AUTHORITY

## ATURIDÁT ESPETÁT MIMURIÁT GUÁHÅN

850 Governor Carlos Camacho Road, Tamuning, Guam 96913  
Operator: (671) 647-2330 or 2552 | Fax: (671) 649-5508



### Board of Trustees Official Resolution No. 2025-13

#### **“RELATIVE TO THE APPOINTMENT OF PROVISIONAL ALLIED HEALTH PROFESSIONAL STAFF PRIVILEGES”**

<u>Practitioner</u>	<u>Department</u>	<u>Specialty</u>	<u>Expiration Date</u>
Sangjung Kim, CRNA	Anesthesia	Certified Registered Nurse Anesthetist	October 31, 2025

**WHEREAS**, the above listed practitioners met the basic requirements for Allied Health Professional Staff Membership as determined by the appropriate Medical Staff Departments and Committees pursuant to the GMHA Medical Staff Bylaws, Article VII, Section 7.2; and

**WHEREAS**, the Medical Executive Committee met on November 27, 2024 and the Joint Conference and Professional Affairs Committee recommended approval of Provisional Allied Health Staff Membership appointment for the above listed practitioner; and

**WHEREAS**, all appointments to Provisional Allied Health Professional Staff Membership require Board approval; now, therefore be it

**RESOLVED**, that the Board of Trustees approves this recommendation to appoint the above named practitioners to Provisional Allied Health Professional Staff as recommended; and, be it further

**RESOLVED**, that the Board of Trustees directs the Hospital Administrator to duly notify the practitioners listed above and all Hospital and Medical Departments of these appointments; and be it further

**RESOLVED**, that the Board of Trustees Chairperson certifies and the Board of Trustees Secretary attests to the adoption of this Resolution.

**DULY AND REGULARLY ADOPTED ON THIS 29<sup>th</sup> DAY OF JANUARY, 2025.**

Certified by:

Theresa C. Obispo  
Chairperson

Attested by:

Sharon J. Davis  
Secretary



# GUAM MEMORIAL HOSPITAL AUTHORITY

## ATURIDĀT ESPETĀT MIMURIĀT GUĀHĀN

850 Governor Carlos Camacho Road, Tamuning, Guam 96913  
Operator: (671) 647-2330 or 2552 | Fax: (671) 649-5508



### BOARD OF TRUSTEES Official Resolution No. 2025-14

#### "RELATIVE TO CREATING THE POSITION OF REVENUE CYCLE MANAGEMENT ADMINISTRATOR FOR FISCAL SERVICES DIVISION"

- WHEREAS,** the request for the creation of the Revenue Cycle Management Administrator position was received by the Human Resources Department on July 27, 2023 at the recommendation of the Chief Financial Officer; and
- WHEREAS,** the creation of this position is centered on the need to enhance the Fiscal Services Division and identify key personnel to efficiently administer emerging healthcare revenue cycle processes and revenue generation hospital-wide; and
- WHEREAS,** the Human Resources Office conducted the position classification study and submitted its recommendation to the Hospital Administrator/CEO on October 10, 2024 to create the Revenue Cycle Management Administrator; and
- WHEREAS,** the provisions of 4 GCA, Chapter 6 § 6303 (d)(2) — Transparency and Disclosure for the creation of position have been met; and
- WHEREAS,** the proposed class specification of the position is Guam Memorial Hospital Authority (GMHA) specific and does not affect any other agency outside the Authority; and
- WHEREAS,** the Executive Management Council on October 14, 2024, voted to move forward with the creation of the Revenue Cycle Management Administrator; and
- WHEREAS,** the Human Resources Subcommittee on January 14, 2025 recommended approval to accept the Hospital Administrator/CEO's petition to create and establish the Revenue Cycle Management Administrator position in the classified service; now therefore be it
- RESOLVED,** that the GMHA Board of Trustees accepts the Human Resources Subcommittee's recommendation and approves the attached proposed class specification for the Revenue Cycle Management Administrator, and be it further
- RESOLVED,** that the Board of Trustees Chairperson certifies and the Secretary attests to the adoption of this Resolution.

**DULY AND REGULARLY ADOPTED ON THIS 29<sup>th</sup> DAY OF JANUARY 2025.**

Certified by:

Theresa C. Obispo  
Chairperson

Attested by:

Sharon J. Davis  
Secretary



## **Revenue Cycle Management Administrator (GMHA)**

### **NATURE OF WORK IN THIS CLASS:**

Administers the Revenue Cycle Management (RCM) departments within the Fiscal Services Division at Guam Memorial Hospital Authority (GMHA). This is complex managerial work responsible for the development, application and management of efficient healthcare revenue cycle processes and revenue generation hospital-wide.

**ILLUSTRATIVE EXAMPLES OF WORK:** (These examples do not list all the duties which may be assigned; any one position may not include all the duties listed.)

Orchestrates the development, execution and measurement of all RCM strategies and programs that will aid in achieving financial viability.

Analyzes RCM trends to identify opportunities and threats. Conducts routine analysis to identify gaps and correct components in relation to maximizing cash flow and reimbursement for claims billed to support GMHA operations.

Establishes policies and procedures for the RCM departments in collaboration with the Fiscal Services leadership team.

Leads, communicates and coordinates with all RCM staff to ensure established strategic goals and department objectives are met. Provides effective training and direction to staff regarding streamlining RCM processing in compliance with revenue cycle and regulatory requirements, accrediting bodies, Health Insurance Portability and Accountability Act (HIPAA), Centers for Medicare and Medicaid Services (CMS) standards and other governing requirements.

Collaborates effectively with GMHA leadership, GMHA Information and Communication Technology Department, hospital staff and other related personnel. Cultivates and maintains relationships with external parties including third party payers, vendors, insurance carriers and other related parties.

Maintains knowledge of revenue cycle and regulatory requirements associated with governmental, managed care and commercial payers to optimize reimbursement, accounts receivable and net revenue.

Submits comprehensive reports and correspondence concerning data, research and other related activities.

Performs related work as assigned.

### **MINIMUM KNOWLEDGE, ABILITIES AND SKILLS:**

Knowledge of healthcare revenue cycle management key performance indicators and best practices.

Knowledge of Health Maintenance Organization, Medicare, Medicaid and other governing requirements and regulations relevant to healthcare RCM.

Knowledge of trends and current developments that will contribute to and support the success of healthcare RCM.

Knowledge of RCM systems, applications and methodologies that will aid in efficient healthcare revenue cycle processes.

Ability to interpret and apply pertinent laws, rules, regulations and program guidelines to make sound management decisions.

Ability to direct and perform administrative, consultative and managerial functions towards a medium to large team within a hospital setting.

Ability to compile, analyze and interpret complex data to support informed decision making to achieve targeted objectives.

**Revenue Cycle Management Administrator (GMHA)**

Ability to establish and maintain effective working relationships with internal and external personnel.

Ability to communicate effectively, both orally and in writing.

**MINIMUM EXPERIENCE AND TRAINING:**

Two (2) years of managerial experience in a healthcare environment and

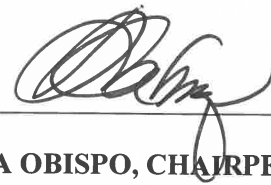
- A. Master's degree in Accounting, Business Administration, Health Administration or related field from a recognized educational institution and two (2) years of professional Revenue Cycle Management experience; **or**
- B. Bachelor's degree in Accounting, Business Administration, Health Administration or related field from a recognized educational institution and three (3) years of professional Revenue Cycle Management experience.

**ESTABLISHED:** January 29, 2025

**PAY GRADE/PLAN:** R (GPP)

**HAY EVALUATION**

KNOW HOW	E+ II 3	350
PROBLEM SOLVING	E 4 (43%)	152
ACCOUNTABILITY	E 4 C	200
TOTAL POINTS:		702



**THERESA OBISPO, CHAIRPERSON**  
**Board of Trustees**



# GUAM MEMORIAL HOSPITAL AUTHORITY

## ATURIDÁT ESPETÁT MIMURIÁT GUÅHÅN

850 Governor Carlos Camacho Road, Tamuning, Guam 96913  
Operator: (671) 647-2330 or 2552 | Fax: (671) 649-5508



### Board of Trustees Official Resolution No. 2025-15

#### **“RELATIVE TO APPOINTMENT OF THE GUAM MEMORIAL HOSPITAL’S DIRECTOR OF RESPIRATORY CARE”**

**WHEREAS**, the United States Code of Federal Regulation §482.57 requires the hospital to demonstrate that a doctor of medicine or osteopathy, who is qualified through documented education, experience, and specialized training, supervises and administers respiratory care services, and

**WHEREAS**, Joleen Aguon, MD, has been determined by GMHA Medical Staff Office to be qualified through such education, training, experience, and licensure as a physician in the Territory of Guam, and

**WHEREAS**, the GMHA Board of Trustees has reviewed the recommendations and qualifications and found the same to be in order; now therefore be it,

**RESOLVED**, that the GMHA Board of Trustees hereby appoints Joleen Aguon, MD as the Director of Respiratory Care for the Guam Memorial Hospital, and be it further

**RESOLVED**, that the Chairperson certifies and the Secretary attests to the adoption of this resolution.

**DULY AND REGULARLY ADOPTED ON THIS 29<sup>th</sup> DAY OF JANUARY, 2025.**

Certified By:

Theresa C. Obispo  
Chairperson

Attested By:

Sharon J. Davis  
Secretary





# GUAM MEMORIAL HOSPITAL AUTHORITY

## ATURIDÅT ESPETÅT MIMURIÅT GUÅHÅN

850 Governor Carlos Camacho Road, Tamuning, Guam 96913  
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### Board of Trustees Official Resolution No. 2025-16

#### **“RELATIVE TO APPOINTMENT OF THE GUAM MEMORIAL HOSPITAL’S ANTIBIOTIC STEWARDSHIP PROGRAM LEADERS”**

**WHEREAS**, the United States Code of Federal Regulation §482.42(a) requires the hospital to demonstrate that an individual (or individuals), who is qualified through education, training, or experience in infectious diseases and/or antibiotic stewardship, has the responsibility for the hospital’s antibiotic stewardship program, including its development and implementation, communication and collaboration on antibiotic use issues, and ensuring competency-based training and education on the practical applications of antibiotic stewardship guidelines, policies, and procedures, and

**WHEREAS**, the Medical Executive Committee President and the Assistant Administrator of Nursing Services both recommend Edgar Magcalas, MD, and Raquel Sperrazzo, PharmD, without hesitation, and

**WHEREAS**, Edgar Magcalas, MD, and Racquel Sperrazzo, PharmD have been determined by GMHA Medical Staff Office and GMHA Human Resources, respectively, to be qualified through education, training, or experience in infectious diseases and/or antibiotic stewardship, and

**WHEREAS**, the GMHA Board of Trustees has reviewed the recommendations and qualifications and found the same to be in order; now therefore be it,

**RESOLVED**, that the GMHA Board of Trustees hereby appoints Dr. Edgar Magcalas and Racquel Sperazzo, PharmD as the Antibiotic Stewardship Leaders for the Guam Memorial Hospital, and be it further

**RESOLVED**, that the Chairperson certifies and the Secretary attests to the adoption of this resolution.

**DULY AND REGULARLY ADOPTED ON THIS 29<sup>th</sup> DAY OF JANUARY, 2025.**

Certified By:

Theresa C. Obispo  
Chairperson

Attested By:

Sharon J. Davis  
Secretary



# GUAM MEMORIAL HOSPITAL AUTHORITY

## ATURIDĀT ESPETĀT MIMURIĀT GUĀHĀN

850 Governor Carlos Camacho Road, Tamuning, Guam 96913  
Operator: (671) 647-2330 or 2552 | Fax: (671) 649-5508



### Board of Trustees Official Resolution No. 2025-17

#### **"RELATIVE TO APPOINTMENT OF THE GUAM MEMORIAL HOSPITAL'S ANTIBIOTIC STEWARDSHIP PROGRAM LEADERS"**

**WHEREAS**, the United States Code of Federal Regulation §482.42(a) requires the hospital to demonstrate that an individual (or individuals), who is qualified through education, training, or experience in infectious diseases and/or antibiotic stewardship, has the responsibility for the hospital's antibiotic stewardship program, including its development and implementation, communication and collaboration on antibiotic use issues, and ensuring competency-based training and education on the practical applications of antibiotic stewardship guidelines, policies, and procedures, and

**WHEREAS**, the Medical Executive Committee President and the Assistant Administrator of Nursing Services both recommend Edgar Magcalas, MD, and Raquel Sperrazzo, PharmD, without hesitation, and

**WHEREAS**, Edgar Magcalas, MD, and Racquel Sperrazzo, PharmD have been determined by GMHA Medical Staff Office and GMHA Human Resources, respectively, to be qualified through education, training, or experience in infectious diseases and/or antibiotic stewardship, and

**WHEREAS**, the GMHA Board of Trustees has reviewed the recommendations and qualifications and found the same to be in order; now therefore be it,

**RESOLVED**, that the GMHA Board of Trustees hereby appoints Dr. Edgar Magcalas and Racquel Sperrazzo, PharmD as the Antibiotic Stewardship Leaders for the Guam Memorial Hospital, and be it further

**RESOLVED**, that the Chairperson certifies and the Secretary attests to the adoption of this resolution.

**DULY AND REGULARLY ADOPTED ON THIS 29<sup>th</sup> DAY OF JANUARY, 2025.**

Certified By:

Theresa C. Obispo  
Chairperson

Attested By:

Sharon J. Davis  
Secretary



# GUAM MEMORIAL HOSPITAL AUTHORITY

## ATURIDÅT ESPETÅT MIMURIÅT GUÅHÅN

850 Governor Carlos Camacho Road, Tamuning, Guam 96913  
Operator: (671) 647-2330 or 2552 | Fax: (671) 649-5508



### Board of Trustees Official Resolution No. 2025-18

#### **“RELATIVE TO APPOINTMENT OF THE GUAM MEMORIAL HOSPITAL’S DIRECTOR OF PHARMACY”**

**WHEREAS**, the United States Code of Federal Regulation §482.25 requires the hospital to demonstrate that a registered pharmacist, who is qualified through documented training or expertise in hospital pharmacy practice and management, is responsible for developing, supervising, and coordinating all the activities of the pharmacy services, including active leadership of those committees responsible for establishing medication-related policies and procedures, and

**WHEREAS**, Jason Boyd, PharmD, has been determined by GMHA Human Resources to be qualified through such education, training, experience, and licensure as a registered pharmacist in the Territory of Guam, and

**WHEREAS**, the GMHA Board of Trustees has reviewed the recommendations and qualifications and found the same to be in order; now therefore be it,

**RESOLVED**, that the GMHA Board of Trustees hereby appoints Jason Boyd, PharmD, as the Director of Pharmacy for the Guam Memorial Hospital, and be it further

**RESOLVED**, that the Chairperson certifies and the Secretary attests to the adoption of this resolution.

**DULY AND REGULARLY ADOPTED ON THIS 29<sup>th</sup> DAY OF JANUARY, 2025.**

Certified By:

Theresa C. Obispo  
Chairperson

Attested By:

Sharon J. Davis  
Secretary





# GUAM MEMORIAL HOSPITAL AUTHORITY

## ATURIDĀT ESPETĀT MIMURIĀT GUĀHAN

850 Governor Carlos Camacho Road, Tamuning, Guam 96913  
Operator: (671) 647-2330 or 2552 | Fax: (671) 649-5508



### BOARD OF TRUSTEES Official Resolution No. 2025-19

#### **“RELATIVE TO IMPLEMENTING THE 25% WORK DIFFERENTIAL TO ALL NURSING TECHNICIANS IN THE NURSING DIVISION”**

**WHEREAS**, GMHA recognizes that all Nursing Technicians in the Nursing Division, as with all its employees, are highly valued, appreciated, and critical to the hospital healthcare team and quality patient services; and

**WHEREAS**, the 2024 Nurse Pay Plan (NPP) implemented and effective on April 01, 2024 has increased the wages of the licensed and certified nursing staff to be comparable to the national average and does not include the Nursing Technicians who are on the General Pay Plan (GPP); and

**WHEREAS**, GMHA recognizes that the Nursing Technicians possess specialized skill sets and perform duties beyond the Hospital Certified Nursing Assistants (CNA) in specialized areas; and

**WHEREAS**, the 2024 adjustment of the NPP impacts the Nursing Technicians compensation to fall less than the Hospital CNAs; and

**WHEREAS**, the actual starting base pay for Nursing Technician under General Pay Plan is only \$15.56; and the latest 2022 data average from the U.S. Bureau of Labor Statistics shows a national mean wage for Clinical Technicians at \$22.07 per hour (\$45,905.00 per annum); and

**WHEREAS**, pursuant to 4GCA §6303. Compensation Policy (c), “Internal equity should be reviewed annually and external competitiveness at least every 3 years”; and

**RESOLVED**, that the Board has determined it is in the best interest of the GMHA to extend a 25% work differential to all GMHA Nursing Technicians in the Nursing Division, to be effective when funds are available, to augment wages to be competitive with the national average and also for recruitment and retention; be it further

**RESOLVED**, that the Board of Trustees Chairperson certifies and the Secretary attests to the adoption of this Resolution.

**DULY AND REGULARLY ADOPTED ON THIS 29<sup>th</sup> DAY OF JANUARY 2025.**

Certified by:

Theresa C. Obispo  
Chairperson


Attested by:

Sharon J. Davis  
Secretary

**GUAM MEMORIAL HOSPITAL AUTHORITY  
REVIEW AND ENDORSEMENT CERTIFICATION**

The signatories on this document acknowledged that they have reviewed and approved the following:

<input type="checkbox"/>	Bylaws	Submitted by Department/Committee: Planning Department
<input type="checkbox"/>	Rules and Regulations	Policy No.:
<input type="checkbox"/>	Policies & Procedures	
<input checked="" type="checkbox"/>	Other: Reports	<p>Guam Memorial Hospital Authority Health Care Provider After Action Report/Improvement Plan (AAR/IP)</p> <p>COVID-19 2021 After Action Report (AAR)/Improvement Plan (AAR/IP) GMH</p>


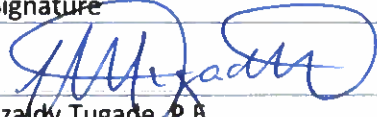
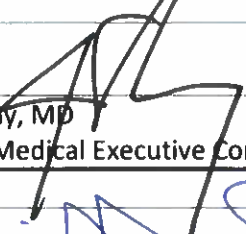
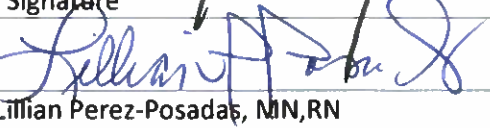
Reviewed/Endorsed	Date	Signature
Title	Therese Paula Pelayo, MBA, MSML Emergency Preparedness Director	
Reviewed/Endorsed	Date	Signature
Title	Rizaldy Tugade, P.E. Associate Administrator of Operations Chairperson, Environment of Care Committee	
Reviewed/Endorsed	Date	Signature
Title	Dr. Jeffrey Shay, MD Chairperson, Medical Executive Committee	
Reviewed/Endorsed	Date	Signature
Title	Lillian Perez-Posadas, MN,RN Hospital Administrator/CEO, Chairperson, Executive Management Council	
Reviewed/Endorsed	Date	Signature
Title	2/18/25	
Title	Theresa Obispo Board of Trustee	
Reviewed/Endorsed	Date	Signature
Title		

\*Use more forms if necessary. All participating departments/committees in developing the policy should provide signature for certification prior to submitting to the Compliance Officer

**GUAM MEMORIAL HOSPITAL AUTHORITY  
REVIEW AND ENDORSEMENT CERTIFICATION**

The signatories on this document acknowledged that they have reviewed and approved the following:

<input type="checkbox"/>	Bylaws	Submitted by Department/Committee: Planning Department
<input type="checkbox"/>	Rules and Regulations	Policy No.:
<input type="checkbox"/>	Policies & Procedures	
<input checked="" type="checkbox"/>	Other: Reports	<p>Guam Memorial Hospital Authority Health Care Provider After Action Report/Improvement Plan (AAR/IP)</p> <p>COVID-19 2021 After Action Report (AAR)/Improvement Plan (AAR/IP) GMH</p>

Reviewed/Endorsed	Date	Signature
	10/24/24	
Title		Therese Paula Pelayo, MBA, MSML Emergency Preparedness Director
Reviewed/Endorsed	Date	Signature
	10.24.24	
Title		Rizaldy Tugade, R.B. Associate Administrator of Operations Chairperson, Environment of Care Committee
Reviewed/Endorsed	Date	Signature
	11/27/2024	
Title		Dr. Jeffrey Shay, MD Chairperson, Medical Executive Committee
Reviewed/Endorsed	Date	Signature
	12/20/2024	
Title		Lillian Perez-Posada, MIN, RN Hospital Administrator/CEO, Chairperson, Executive Management Council
Reviewed/Endorsed	Date	Signature
Title		<del>Therese Obispo</del> <del>Board of Trustee</del>
Reviewed/Endorsed	Date	Signature
Title		

\*Use more forms if necessary. All participating departments/committees in developing the policy should provide signature for certification prior to submitting to the Compliance Officer



**Health Care Provider After Action Report/Improvement Plan (AAR/IP)**

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**Guam Memorial Hospital Authority**

**Health Care Provider  
After Action Report/Improvement Plan (AAR/IP)**

**PANDEMIC EMERGENCY RESPONSE TO CORONAVIRUS  
DISEASE (COVID-19)**

**CALENDAR YEAR 2021 (CY 2021)**

**Actual Naturally Occurring Event Qualifying as a Community-  
Wide Full-Scale Exercise/Event (FSE)**

---

Prepared by  
Planning Department

Prepared for

**GUAM MEMORIAL HOSPITAL (GMH)**

Event Dates:  
March 19, 2020 – May 11, 2023

Report Date:  
May 16, 2024



**GUAM MEMORIAL  
HOSPITAL AUTHORITY**  
ANNUAL REPORT 2023-2024

## Health Care Provider After Action Report/Improvement Plan

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## Health Care Provider After Action Report/Improvement Plan

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### Administrative Handling Instructions

1. Title: Guam Memorial Hospital Authority (GMHA) Health Care Provider After Action Report/Improvement Plan (AAR/IP) Coronavirus 2019 (COVID-19) Community-Wide Full-Scale Exercise/Event (FSE)
2. This AAR/IP is classified as sensitive information that should not be disclosed and is For Official Use Only (FOUO). Safeguard, handle, transmit, and store by appropriate security directives. GMHA prohibits the reproduction of this document, in entirety or in part, without prior approval from GMHA.
3. Dissemination of attached materials is only allowed on a need-to-know basis. When unattended, store in a locked container or area offering sufficient protection against theft, compromise, inadvertent access, and unauthorized disclosure.
4. Prepared by:

Therese Paula Pelayo  
Hospital Planning Supervisor  
Guam Memorial Hospital Authority  
850 Governor Carlos G. Camacho Road  
Tamuning, GU 96913  
671-647-2448 (office)  
[therese.pelayo@gmha.org](mailto:therese.pelayo@gmha.org)

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Tamuning, GU 96913  
671-647-2103 (office)  
[deborah.belanger@gmha.org](mailto:deborah.belanger@gmha.org)

Point of Contact:  
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Guam Memorial Hospital Authority  
850 Governor Carlos G. Camacho Road  
Tamuning, GU 96913  
671-648-6713 (office)  
[wnk@gmha.org](mailto:wnk@gmha.org)

Jeffrey Ventura, MPA  
GMHA Deputy Associate Administrator of Operations/  
Emergency Management Director  
Guam Memorial Hospital Authority  
850 Governor Carlos G. Camacho Road  
Tamuning, GU 96913  
671-648-6745 (office)  
[jeffrey.ventura@gmha.org](mailto:jeffrey.ventura@gmha.org)



## **Health Care Provider After Action Report/Improvement Plan**

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### **Executive Summary**

The After-Action Report/Improvement Plan (AAR/IP) overviews the full-scale exercise related to Coronavirus 2019 (COVID-19). It aims to support the Guam Memorial Hospital and partner agencies in enhancing their responses and recovery efforts for future emergency declarations.

The overall goal of GMHA's emergency response is to minimize serious illness and overall deaths and to provide continuous life-sustaining services in coordination and collaboration with the Guam EOC/Unified Command with a primary focus on the Health and Medical Emergency Support Function 8 (ESF8) roles and responsibilities.

The President of the United States of America declared Coronavirus disease (COVID-19) a National Disaster (4495DR-GU), and GMHA was designated as Guam's COVID-19 hospital under Guam Executive Order 2020-06. GMHA provided care for COVID-19 patients and those with other chronic illnesses requiring emergency medical treatment. GMHA maintained this role throughout 2021 and the duration of the pandemic.

In response, the Government of Guam imposed a general island-wide lockdown in mid-March and introduced a four-step "Pandemic Condition of Readiness" (PCOR) framework under Executive Order 2020-11.

The pandemic led to two significant surges in COVID-19 cases, overwhelming GMHA. Surge 1 occurred from March to April 2020 and Surge 2 spanned August 2020 to January 2021. During these surges, GMHA faced unprecedented demand, with hospital bed occupancy exceeding 95%, which strained medical staff and resources; GMHA implemented immediate emergency measures to ensure patient and staff safety.

GMHA Board of Trustees meeting held on January 13, 2021, reported the hospital's COVID-19 patient count decreased to six (6), with three (3) in the ICU on ventilators, down from peaks of seventeen (17) ICU patients and twelve (12) on ventilators. Vaccination efforts advanced significantly, with eight hundred eighty-five (885) employees vaccinated, totaling one thousand seven hundred twenty-five (1,725) individuals, including Skilled Nursing Facility residents and others vaccinated. Plans were in place to address the anticipated surge in second doses and to extend vaccination to additional front-line workers, with expected vaccine deliveries arriving shortly.

In recognition of its exceptional COVID-19 response, GMHA received two prestigious Healthcare Asia Awards in May 2021: Hospital of the Year and COVID Management Initiative of the Year. Throughout the pandemic, GMH demonstrated effective direction through its coordination with the GMHA Hospital Command Center, Skilled Nursing Facility-COVID Isolation Facility (SNF/CIF) Command Center, and other response partners such as GHS/OCD and GEMHCC members, ensuring robust preparedness, response, recovery, and mitigation efforts.

The Clinical Emergency Preparedness Team (CEPT) developed a new "All-Hazards" Emerging Infectious Disease Plan, known as the Novel Infectious Disease of Concern (NIDC) Response Plan. This plan is undergoing review and endorsement.

## Health Care Provider After Action Report/Improvement Plan

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### Situational Awareness

From 2020 - 2021 the hospital responded to the following COVID-19 peak surges:

Surge 1: March 2020 - April 2020

Surge 2: August 2020 - January 2021

**Expanding Bed Capacity:** GMHA explored various strategies to increase bed capacity and staff resources. These efforts included transferring additional stable, non-acute, non-COVID patients to the SNF, redirecting all administrative nurses to the hospital floors for clinical support, and maintaining collaboration with federal partners to request emergency FEMA clinical staff.

**Elective Surgeries:** As COVID-19 surged, GMHA leadership decided to suspend all outpatient services and elective surgeries on September 21, 2021, until further notice.

**Oxygen and Hemodialysis:** The biggest challenges included a lack of oxygen in the community, no outpatient hemodialysis, and two home concentrators sent out, leaving none in stock.

**GMHA's Care Units & Clinical Emergency Preparedness Team (CEPT):** CEPT remained operational to respond to the evolving COVID-19 situation, with ongoing evaluations and adjustments to meet changing conditions. The Incident Command, consisting of executives, managers, and the Pro-Support head, oversaw the response. A "War Room" was established, meeting twice daily. GMHA also created specialized teams, including physicians, a communication center, unit huddles, education, PPE, tracers, employee health, and OR teams.

**Front-Liner Support:** GMH supported island front-liners in the fight against COVID-19 by training government quarantine facility staff on infection control protocols. GMH employees also conducted N95 Fit Testing and Certification training for multiple Government of Guam agencies. Additionally, GMH was a leading site for front-liners and island residents to receive vaccinations once they became available.

### Major Strengths Identified During Exercise

- Implemented 40 protocols for the clinical and operational management of COVID-19;
- Established a state-of-the-art Telehealth/Telemedicine and Physical Rounder two (2) Program to sustain lifesaving intensive and critical patient care services;
- Created a "War Room" Committee dedicated to the individual clinical management of COVID-19 patients;
- Created a daily briefing document and daily COVID huddles to ensure streamlined communication among all branches of the hospital;
- Established electronic daily wellness checks to mitigate the spread of COVID-19 amongst GMHA staff and keep up with crucial staffing levels.
- GMHA overcame identified challenges.



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### Improvements Recommended:

- GMHA's Pandemic Flu Plan lacked guidance to address the unique challenges of COVID-19, a new virus. No one anticipated the emergency would last over thirty-three (33) months. GMHA adapted using stringent all-hazards infection control measures and best practices for airborne isolation.
- GMHA should update its Pandemic Flu Plan, incorporating relevant protocols and adaptable measures for future situations.
- With support from the Army Corps of Engineers and other agencies, GMHA expanded capacity by building additional units on the third and fourth floors to meet the growing patient demand.
- Relocated various units across the hospital and the Skilled Nursing Facility to maximize patient care areas during the COVID-19 surge.
- A specialized clinical task force was created to analyze and interpret COVID-19 guidance to develop user-friendly protocols, ensuring hospital staff followed best practices for patient and staff safety.
- Infectious disease protocols created by the Infection Prevention and Control Committee (IPCC) and the Medical Executive Committee (MEC) established and executed policies for the prevention of acquisition and control of healthcare-associated infections (HAIs)/conditions. The hospital-wide committee directed the hospital's infection control program. Approved protocols by the IPCC were not readily available to all GMHA staff, and accessing those protocols was difficult. The Clinical Emergency Preparedness Team (CEPT) improved the process of distributing the Clinical Emergency Preparedness COVID-19 protocols in CY2021. The CEPT adopted an "all hazards" approach to developing policies and protocols.
- Improved inventory management by incorporating a burn rate for GMHA supplies and coordinating with external agencies to ensure proper distribution and avoid overuse. Materials Management tracked and sent out daily burn rate reports.
- The Incident Commander directed the Safety and Security Administrator to collaborate with nursing departments to train new and onboarding staff in DECON procedures, PPE donning and doffing, and N-95 Fit Testing certification. This training was provided to newly hired GMHA staff, travel nurses, DoD clinical staff, GUNG medics, and other contracted personnel.

## Health Care Provider After Action Report/Improvement Plan

### SECTION 1: CY 2021 Exercise/Event Overview

Exercise/Event Name: COVID-19

Exercise/Event Start Date: **March 19, 2020**

Exercise/Event End Date: **May 11, 2023**

Duration: **1,149 Days**

#### Type of Exercise/Event Completed:

Check the type of exercise completed, as listed below

##### *Discussion-Based Exercise*

☐ Seminar

☐ Workshop ☐ Tabletop

☐ Games

##### *Operations-Based Exercise*

☐ Drill

☒ Full-Scale Exercise

☐ Functional Exercise

☒ Emergency Event

#### Capabilities

##### 1. Guam Homeland Security / Office of Civil Defense:

- a) Coordinate and support emergency response and recovery priority objectives.
- b) Establish and maintain a modified operational unified command structure and process that appropriately integrates all critical stakeholders during a potentially catastrophic event and
- c) GHS/OCD led the evaluation of the overall emergency response and recovery activities and plans related to power outages, port operations, mass care, critical infrastructure, and tourism.

##### 2. Guam Memorial Hospital Authority:

- a) Implement GMHA's Pandemic Flu Plan and COVID-19 Clinical Emergency Preparedness Protocol (COVID-19) information/guidance published by the CDC and adapted to the Hospital Environment for emergency response and recovery. Capabilities include a Hospital Incident Command System, Interoperable Communications, and Collaboration with federal and local emergency response partners.
- b) Create Infection control and decontamination policies, follow the CDC's best practices, and effectively respond throughout the pandemic. The Clinical Emergency Response Team developed a new "All-Hazards" Emerging Infectious Disease Plan, known as the Novel Infectious Disease of Concern (NIDC) Response Plan.

#### 1. Planning

The Emergency Management Plan (EMP) Policy 101 establishes a structured program addressing mitigation, preparation, response, and recovery for various disasters and emergencies. This approach, known as the "all hazards" approach, ensures the hospital is adequately prepared to handle a wide range of emergencies that affect the healthcare environment at Guam Memorial Hospital Authority (GMHA), including both Guam Memorial



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Hospital (GMH) and the Skilled Nursing Facility, also known as the Alternate Care Site (SNF/ACS).

### **2. Communications**

To prevent misuse or overloading during emergencies, GMHA's emergency management communications security and protocols focused on safeguarding communication equipment and systems such as radios and telephones.

### **3. Risk Management**

GMHA established Care units and Clinical Emergency Preparedness (CEP) to manage risks associated with COVID-19. A dedicated "War Room" committee was established to manage COVID-19 patient care. A state-of-the-art Telehealth/Telemedicine and Physical Rounder 2 Program was developed. Daily COVID-19 huddles were conducted to streamline communication; Daily Electronic Wellness checks were established to mitigate the spread of COVID-19 among staff and the public.

### **4. Community Preparedness & Participation**

The hospital established a staff, volunteers, and community vaccination program. COVID-19 Testing implemented. GMH provided receipts storage and staging (RSS) for Guam and the outer islands.

### **5. Intelligence & Information Sharing & Dissemination**

Data and analysis are critical elements in conducting risk assessments for potential threats and hazards. Various resources are accessible for gathering information, such as local and federal law enforcement agencies, the FBI, Department of Homeland Security, Guam Homeland Security Office of Civil Defense, CDC, NWS, Fusion Center, and other relevant investigative entities. Internal and external briefings are held within the Hospital Incident Command Center and EOC at GHS/OCD. Intelligence and information sharing also occur during huddles throughout emergency response operations.

**Scenario:** Actual naturally occurring event qualifying as a community-wide full-scale exercise/Event (FSE)

**Location:** Guam and Western Pacific Region

#### **Partners:**

The Guam Memorial Hospital Authority (GMHA) partners are as follows: Guam Medical Regional City (GRMC), the U.S. Naval Hospital Guam (USNHG), local and federal Emergency Medical Services (EMS), Department of Public Health & Social Services (DPHSS), the Guam Behavioral Health and Wellness Center (GBHWC). Agency partners: Guam Homeland Security/Office of Civil Defense (GHS/OCD) Unified Command to include all Emergency Support Functions and Incident Command System (ICS) Sections; the Office of the Governor of Guam; Guam Emergency Management Healthcare Coalition (GEMHCC), and representatives of the local Media.

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**Participants:**

U.S. Department of Health and Human Services (both ASPR and CDC), Department of Homeland Security / Federal Emergency Management Agency (FEMA), Department of Public Health and Social Services (DPHSS), Army Corps of Engineers (USACE), Private Sector Healthcare Clinics/Centers, Department of Agriculture (DOAg), Guam Visitors Bureau (GVB), Guam Police Department (GPD), Guam Fire Department (GFD), Guam Department of Education (GDOE), Port Authority of Guam (PAG), Mayor's Council of Guam (MCOG), A.B. International Airport Authority (GIAA), Consolidated Commissions on Utilities (CCU), Guam Customs and Quarantine Agency (CQA), Guam Behavioral Health and Wellness Center (GBHWC), Guam Homeland Security/Office of Civil Defense (GHS/OCD), American Red Cross Guam Chapter (ARC), Salvation Army Guam Corps, Guam Chamber of Commerce, Guam Hotel and Restaurant Association (GHRA), Guam National Guard (GUNG), United States Air Force (USAF), United States Coast Guard Sector Guam (USCG), United States Naval Hospital Guam (USNH), Guam Regional Medical City (GRMC)

**Number of Participants:**

List the total number of Participating Agencies

- 26



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### **SECTION 2: Exercise/Event Design Summary**

#### **Exercise Purpose and Design**

The local and federal emergency declarations prompted GMHA to take the lead in coordinating emergency response and recovery efforts for COVID-19. GMHA updated and implemented portions of the Emergency Management Plan (EMP) and worked with key stakeholders to test and evaluate their EMPs and Emergency Operations Plans (EOPs).

GMHA's primary goals in response and recovery efforts were to:

- Conduct and maintain situational awareness. Activate and implement relevant GMHA Emergency Operations Plans.
- Establish a Hospital Incident Command System (HICS) and Hospital Command Centers (HCCs) for communication and implementation of GMHA's EOPs as directed by GMHA Executive Leadership.
- Maintain communication with Guam and GMHA's Emergency Support Function 8 Coordinators to facilitate interaction with Guam's Emergency Operations Center.

#### **Objectives and Capabilities**

**The following objectives address planning, intelligence, communication, community preparedness and participation, and risk management capabilities:**

**Objective No. 1** – Continued preparedness, response, recovery, and mitigation phases via Command, Control, Communications, and Coordination between GMHA Hospital Command Center (HCC), SNF/CIF Command Center, Other Response Partners (DPHSS, GUNG, GHS/OCD, and GEMHCC Members).

- Activate GMHA's Pandemic Influenza Plan and or similar plans to adapt specific procedures from various policies conforming to the operation and emergency response success.
- Activate GMHA's modified Hospital Incident Command Center and the COVID-19 Isolation Facility (CIF) Command Center at the SNF, along with ESF-8 Coordinators. The COVID-19 emergency response affected both the main hospital and the SNF/CIF, requiring two Incident Command Centers.
- Continue using GMHA's HICS to ensure command, control, and communication between the hospital, SNF, Guam EOC, DPHSS ESF8/RAC, COVID-19 Non-emergency Transport Team, and other health and medical stakeholders, including alternate care sites (e.g., SNF/CIF, GRMC, ISO FAC, QFAC).

**Objective No. 2** – Expanding GMHA's bed capacity and medical service capabilities for surge patients associated with COVID-19 and logistical readiness and documentation (e.g., medical

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supplies & equipment, utility systems, etc.).

- Monitor and report daily patient/resident census, bed capacities, negative pressure room usage, cardiac monitoring, ventilator usage (adult and neonatal), ER holding census, and other metrics to HHS and the Guam EOC to support requests for federal assistance in staffing, equipment, PPE, and supplies.
- Implement contingency plans to handle COVID-19 surges, including creating dedicated care units and overflow areas and relocating non-COVID units to expand capacity for surge events like mass casualties or active shooter incidents.
- Communicate and collaborate with Guam ESF8 (GMHA, DPHSS, GBHWC) located at the Guam EOC (within GHS/OCD) and other members of the Guam Emergency Management Healthcare Coalition (e.g., GUNG, GRMC, USNHG, GFD) for managing medical surge, medical supplies and equipment, healthcare professionals and/or use of facilities as needed, including the utilization/testing of the Guam ESAR-VHP;
- Communicate with DPHSS and GUNG for their assistance to help expand its existing capacities to accommodate the influx of patients such as Mass Fatality (Morgue Container Reefer) about expanding GMH and Morgue storage capacities and
- Communicate logistical needs and support with DPHSS Laboratory for medical supplies (i.e., Pfizer Vaccine, Moderna Vaccine, Johnson and Johnson Vaccine, REGEN-COV (Casirivimab/imdevimab), Lilly (Bamlanivimab/Etesevimab), Vaccine, COVID-19 Test Kits (Antigen Rapid and Polymerase Chain Reaction (PCR), COVID-19 Booster Vaccines, etc.).

**Objective No. 3** - The Preservation of Our Healthcare Workers by adapting the latest evolving COVID-19 guidance and best practices published by the CDC and the WHO translating them into GMHA COVID-10 Emergency Response Protocols for COVID-19 personnel responding.

- Create initial Decontamination (DECON) procedures for Front liners (GMHA and GFD/EMS) emergency response to mitigate unwanted transmission of the Coronavirus and safe work practices.
- Protect the safety and well-being of GMHA staff by employing new security screening measures at the Emergency Department and the hospital's main entrance as a standard precaution.
- Establish GMHA's Clinical Emergency Preparedness Team (CEPT) responsible for developing, monitoring, evaluating, and modifying hospital-wide policies, procedures, and protocols initiated by Medical Staff for clinical emergency preparedness services. Changes highlight pre-COVID-19 Standard Operating Procedures (SOP) or any new COVID-19 mandatory guidance for healthcare workers from the CDC, translated into user-friendly documents. Provide and document "Quality Patient Care in a Safe Environment" for all of GMHA's patients and restrict patient visitation (when appropriate). The new protocols and procedures will be based on the latest CDC and WHO guidance and adapted to hospital operations for the safety of the healthcare workers and safety and security decontamination (DECON) procedures.

**Objective No. 4** - Sustain Continuity of Operations (COOP) at the Hospital, Catholic Social



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Services (CSS), and SNF/CIF of Quality Patient and Resident Care Services in a Safe Environment.

- Plan discharges for qualified patients that ensure bed availability for COVID-19 Patients surging into the hospital.
- Track human resources (e.g., shift changes), medical supplies, and equipment and the status of critical infrastructure (e.g., emergency generators, HVAC system, etc.).
- Communicate with the media and Joint Information Center (JIC) to inform the community of any changes to the hospital's visiting hours.
- Ensure all communications lines are open via phone, iConnect radios, and Motorola radios to the Hospital Command Center.
- Build additional Negative Pressure/BUV capability in patient rooms to ensure a safe working environment.

### **Objective No. 5 - Ongoing Response Operations Safety Just In Time (JIT) Training.**

- JIT training in the Hospital Command Center with new personnel and refresher training with existing personnel to include staff competency checks by Safety Department to ensure proficiency.

## **Scenario Summary**

The COVID-19 pandemic necessitated continuous evaluation and flexibility. Effective organizational leadership and communication were crucial, encompassing swift decision-making, strategic resource planning, and robust support for staff. Leaders had to adapt to shifting conditions, manage resources efficiently, and keep staff informed and motivated. Clear communication with both internal and external stakeholders was essential for transparency and reassurance. Monitoring outcomes and gathering feedback were vital to refining GMHA's emergency response. Overall, the pandemic underscored the importance of adaptability, strong leadership, and effective communication in managing unprecedented crises.

The COVID-19 pandemic needed an agile and responsive approach as it unfolded. Management and staff maintained relentless vigilance and adaptability. Organizational leadership played a pivotal role in navigating this crisis, requiring swift decision-making and a proactive stance in resource allocation and staff management. Leaders needed to continually reassess and adjust strategies to address emerging challenges, from surges in patient numbers to changes in healthcare guidelines. Effective communication was integral, ensuring that healthcare professionals and the public received timely, accurate information to foster trust and adherence to evolving protocols. Moreover, the ability to monitor key performance indicators and solicit feedback facilitated continuous improvement in GMHA's response efforts, revealing strengths and areas for enhancement. This experience highlighted the critical importance of resilience and cohesive leadership in managing and mitigating the impacts of such an extraordinary public health emergency.

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As a result, GMHA created the Infection Prevention and Control Committee (IPCC) to address immediate emergency management needs related to infectious diseases. This committee formed the Clinical Emergency Preparedness Team (CEPT) to address protocols, policies, and procedures such as The Novel Infectious Disease of Concern (NIDC) Response Plan.



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### Response & Recovery Sequence of Events

The calendar Year 2021 (CY2021)

GMHA remained committed to delivering high-quality patient care for both COVID-19 and non-COVID-19 patients. In response to the pandemic, GMHA established the Clinical Emergency Response Team (CEPT) to create or update numerous policies and procedures. The CEPT, formed by the Infection Prevention and Control Committee (IPCC), addressed immediate emergency management needs related to infectious diseases. The CEPT researched and developed a comprehensive "All-Hazards" Emerging Infectious Disease Plan. The Novel Infectious Disease of Concern (NIDC) Response Plan is undergoing review and endorsement by all relevant committees. The GMHA Emergency Preparedness Manual will incorporate the NIDC Response Plan for Infectious Diseases.

January 2021, Eight hundred eighty-five (885) employees were vaccinated, with four hundred fifty (450) having received their second dose and one thousand seven hundred twenty-five (1,725) people vaccinated, including six (6) SNU residents and eight hundred thirty-four (834) others: the hospital reassessed vaccine supplies and extended vaccination to other front-line workers. A surge in second dose appointments occurred on January 15-16, 2021. The COVID-19 Isolation Facility (CIF) reported zero (0) patients.

The hospital vaccinated seventy-six percent (76%) of employees and physician providers with a goal of 90% by the end of March. The vaccination clinic operated three (3) times a week, offering the Johnson & Johnson single-dose vaccine to patients at discharge upon request. However, wider distribution was limited due to Department of Public Health and Social Services (DPHSS) constraints. The hospital launched a discharge vaccination campaign for acute care, urgent care, ER, and outpatient services patients.

GMH received Two (2) prestigious Healthcare Asia Awards for its response to COVID-19 in May. GMH garnered the Hospital of the Year and COVID Management Initiative of the Year on Guam at the Healthcare Asia Awards 2021.

In June 2021, Ninety percent (90%) of staff were fully vaccinated against COVID-19.

By August 2021, the hospital suspended outpatient services to accommodate the influx of patients. The COVID-19 census and the demands on the hospital reached a critical point. GMH focused on maintaining staff and one Operating Room (OR) for emergency cases. The remaining staff and resources supported the continued influx of COVID-19 patients, particularly those who needed ICU and Telemetry care.

GMHA introduced telemedicine technology to bring Intensive Care Unit (ICU) doctors to Guam.

In September 2021, GMH suspended all elective surgeries. The Intensive Care Unit (ICU) reached absolute capacity at 14 patients. GMH's teams worked hard to ensure the highest quality care for all patients despite bed and staffing shortages. GMH worked to expand bed capacity and staff resources. Stable, non-acute, non-COVID patients moved to the SNF, rerouting all administrative nurses to the hospital floors for clinical support. GMH worked with federal partners requesting emergency FEMA clinical staff.

As of September 21, 2021, GMH COVID-19 outstanding items were as follows:

- Conduct a walk-through to address all remaining issues for CARE 3 and Pediatrics Care 3 with 19 Monitors operational and Pediatrics with a PICU in 319 A&B operational.

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- **Nursing Staff Shortages:** Additional nursing staff remained in constant dialogue with both travel Companies. The earliest arrival of travel nurses was arriving by the end of October. There was no formal notification of DOD Nurse arrivals, but informal communication stated the hospital might receive approximately fifteen (15) nurses.
- **FEMA reimbursements:** GMHA is actively pursuing vaccination, medical supplies, and overtime costs.
- **Door signage:** Requisitions for metal plates or alternatives will be prepared. Metal plates remain status quo.
- **40ft container for Morgue:** GMHA submitted a DLAN ticket requesting GMHA Materials Management to obtain three (3) quotes for materials to proceed with the purchase.
- **Tier for disciplinary actions:** Employee Health will transmit the Flu Shot policy to Executive Management. This is a work-in-progress government-wide policy; the Department of Administration (DOA) will give guidance on it.
- **Algorithm for unvaccinated COVID-19-positive employees:** Results went through Care units and the Clinical Emergency Preparedness Team (CEPT) to attach to the policy of swabbing staff. The policy will route for signature and approval.
- **Hemodialysis machines:** Request for DLAN remains status quo. RFQ for Hemodialysis machines is still pending GHS/GSA.
- **COVID-19 Isolation Facility (CIF):** During the Island's COVID-19 response, GMH staff transformed the SNF into a COVID Isolation Facility (CIF). This facility was designed to care for patients recovering from the virus who no longer required acute hospital care but were not yet ready for full discharge. The conversion helped alleviate pressure on GMH by freeing up critical acute care beds for those in need.

In November 2021, the Infection Control Committee created a Chairperson role. Numerous policies and procedures underwent policy review.

GMHA also purchased two new C-Arm machines ensuring the highest quality imaging for patients, including those diagnosed with COVID-19 and patients undergoing procedures at Guam's public hospital.



## Health Care Provider After Action Report/Improvement Plan

### Improvement Plan

This plan was developed specifically for the Guam Memorial Hospital Authority (GMHA) to make the necessary Plan (TCRP) improvements based upon the summarized information contained within this After Action Report (AAR) feedback from the incident; email messages; chat group messages; and the feedback generated from the COVID-19

Required Improvement / Recommendation	Describe Corrective Action Completed	Primary Responsible Leaders(s)	Responsible Department(s)	Start Date	Completion Date
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<p>GMHA's Pan-Flu Plan did not have the guidance direct the hospital properly, especially due to COVID-19. COVID-19 was unique in relation to a new virus that no one properly prepared for. No one predicted that the duration of this emergency would last for more than 33+ months. A comparable pandemic of this magnitude has not been seen in over 100 years. GMHA had to adapt to the situation by implementing the most stringent infection control measures and incorporating the best practices, adapting to the situation to the best of our ability in relation to standard precautions and airborne isolation.</p> <p>GMHA will need to develop an updated Pandemic Preparedness Plan that incorporates the protocols previously developed that remain relevant depending on the situation.</p>	<p>The Clinical Emergency Response Taskforce, known as the Clinical Emergency Preparedness Team (CEPT), researched and developed a new "All-Hazards" Emerging Infectious Disease Plan for review and endorsement. This plan is known as the Novel Infectious Disease of Concern (NIDC) Response Plan.</p>	<p>GMHA CEPT Infection Control Planning</p>	<p>Infection Control Clinical Departments Planning</p>	<p>September 2022</p>	<p>February 2023</p>
<p>Build additional capabilities and capacities in existing units, such as more electrical circuits to power medical equipment, more negative pressure capabilities through the units, and procure additional central monitoring systems for telemetry services.</p>	<p>Request for assistance with external local and federal partners to assist GMHA Complete A/E Design and Construct/Renovate</p>	<p>GMHA Leadership Team</p>	<p>Applicable Divisions/Departments, FM, Planning, Nursing, Compliance</p>	<p>August 2020</p>	<p>September 2020</p>
<p>A Clinical Emergency Preparedness Team (CEPT) was created to develop COVID-19 protocols for staff to use as guidance that ensures proper procedures and best practices incorporated to the overall safety of all.</p>	<p>Creation of a Clinical Emergency Disseminate a circular to inform all staff that they are "essential."</p>	<p>GMHA Leadership Team</p>	<p>All GMHA Clinical Departments Nursing, Infection Control,</p>	<p>June 2020</p>	<p>August 2021</p>
<p>Monitor/Update/Publish the daily hospital inventory burn rate info for everyone's situational awareness.</p>	<p>In Collaboration with Materials Management, share the burn rate with the Emergency Operations Center for their</p>	<p>GMHA Leadership Team</p>	<p>Materials Management Department, Incident Commander</p>	<p>April 2020</p>	<p>June 2021</p>

## Health Care Provider After Action Report/Improvement Plan

Required Improvement / Recommendation	Describe Corrective Action Completed	Primary Responsible Leaders(s)	Responsible Department(s)	Start Date	Completion Date
<p>corporate Burn rate for GMHA inventory and distribution to maximize supply count, avoiding over-distribution;</p>	<p>Situational awareness, support, and assistance to ensure hospital supplies and equipment availability are priorities during this Public Health Emergency.</p>				
<p>training in the Hospital Command Center with new personnel.</p>	<p>Activate during Pandemic Emergencies and send to Guam Emergency Operations Center.</p>	<p>GMHA Leadership Team</p>	<p>Materials Management Department, Incident Commander</p>	<p>March 2020</p>	<p>May 2023</p>
<p>increase N-95 Fit Testing and certified fit-testers through 3M.</p>	<p>• The incident commander initiated and guided the safety and security administrator to work with the staff nurse training officer and other nursing departments to collaborate and train clinical and non-clinical staff (new staff). Onboarding during orientation is provided.</p>	<p>GMHA Leadership Team</p>	<p>All GMHA Departments/ Units</p>	<p>April 2020</p>	<p>May 2023</p>
	<p>DECON training, PPE Donning and Doffing procedures, and N-95 Fit Testing certification for all newly hired GMHA staff, travel nurses on boarding, DoD clinical staff, GUNG Medics, and all other new contracted personnel provided by</p>				

## Health Care Provider After Action Report/Improvement Plan

### APPENDIX A: ACRONYMS ACRONYMS

Acronym	Meaning
AAR/IP	After Action Report/Improvement Plan
ASPR	Administration for Strategic Preparedness and Response
ARC	American Red Cross Guam Chapter
USACE	Army Corps of Engineers
CEP	Care Units & Clinical Emergency Preparedness
CEPT	Care Units & Clinical Emergency Preparedness Team
CIF	COVID Isolation Facility
DECON	Decontamination
CDC	Centers for Disease Control
CCU	Consolidated Commissions on Utilities
COVID-19	Coronavirus 2019
COR	Condition of Readiness
CBRNE/WMD	Chemical, Biological, Radiological, Nuclear and Explosives/Weapons of Mass Destruction
CY	Calendar Year
DOAg	Department of Agriculture
DHS	Department of Homeland Security
FEMA	Federal Emergency Management Agency
DPHSS	Department of Public Health and Social Services
DOA	Department of Administration
DoD	Department of Defense
EMP	Emergency Management Plan
EOC	Emergency Operations Center
EOP	Emergency Operations Plan
ESF8	Emergency Support Function 8
FBI	Federal Bureau of Investigation
FSE	Full-Scale Exercise/Event
GBHWC	Guam Behavioral Health and Wellness Center
GDOE	Guam Department of Education
GEMHCC	Guam Emergency Management Healthcare Coalition
GFD	Guam Fire Department
GIAA	Guam A.B. International Airport Authority
GHS/OCD	Guam Homeland Security/Office of Civil Defense
GHRA	Guam Hotel and Restaurant Association
GMHA	Guam Memorial Hospital Authority
GMH	Guam Memorial Hospital
GUNG	Guam National Guard
GPD	Guam Police Department
GRMC	Guam Regional Medical Center
GVB	Guam Visitors Bureau
HAIs	Healthcare-associated infections (HAIs)/conditions
HICS	Hospital Incident Command/Center System
IC	Incident Commander
IPCC	Infection Prevention and Control Committee
JIC	Joint Information Center
MCP	Mass Casualty Plan
MCOG	Mayor's Council of Guam
MEC	Medical Executive Committee
NIDC	Novel Infectious Diseases of Concern (NIDC) Response Plan
NIS	None in Stock
NWS	National Weather Service
O2	Oxygen
OR	Operating Room
PAG	Port Authority of Guam
PPE	Personal Protective Equipment
SNF/ACS	Skilled Nursing Facility-Alternate Care Site
SNF/CIF	Skilled Nursing Facility-COVID Isolation Facility (CIF)
TCRP	Tropical Cyclone Response Plan



## **Health Care Provider After Action Report/Improvement Plan**

**End of Report.**

**GUAM MEMORIAL HOSPITAL AUTHORITY  
REVIEW AND ENDORSEMENT CERTIFICATION**

The signatories on this document acknowledged that they have reviewed and approved the following:

<input type="checkbox"/>	Bylaws		Submitted by Department/Committee: Planning Department
<input type="checkbox"/>	Rules and Regulations		Policy No.:
<input type="checkbox"/>	Policies & Procedures		
<input checked="" type="checkbox"/>	Other: Reports		<p>Guam Memorial Hospital Authority Health Care Provider After Action Report/Improvement Plan (AAR/IP)</p> <p>COVID-19 2021 After Action Report (AAR)/Improvement Plan (AAR/IP) SNF</p>


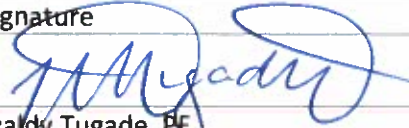
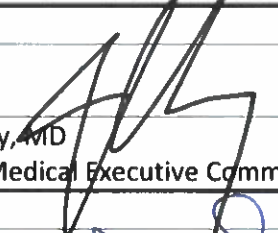
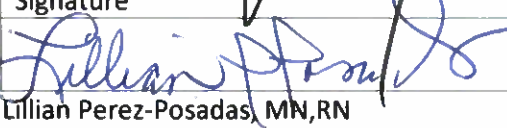
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Title	Lillian Perez-Posadas, MN,RN Hospital Administrator/CEO, Chairperson, Executive Management Council	
Reviewed/Endorsed	Date 2/18/21	Signature 
Title	Theresa Obispo Board of Trustee	
Reviewed/Endorsed	Date	Signature
Title		

\*Use more forms if necessary. All participating departments/committees in developing the policy should provide signature for certification prior to submitting to the Compliance Officer

**GUAM MEMORIAL HOSPITAL AUTHORITY  
REVIEW AND ENDORSEMENT CERTIFICATION**

The signatories on this document acknowledged that they have reviewed and approved the following:

<input type="checkbox"/>	Bylaws	Submitted by Department/Committee: Planning Department
<input type="checkbox"/>	Rules and Regulations	Policy No.:
<input type="checkbox"/>	Policies & Procedures	
<input checked="" type="checkbox"/>	Other: Reports	<p>Guam Memorial Hospital Authority Health Care Provider After Action Report/Improvement Plan (AAR/IP)</p> <p>COVID-19 2021 After Action Report (AAR)/Improvement Plan (AAR/IP) SNF</p>

Reviewed/Endorsed	Date	Signature
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Reviewed/Endorsed	Date	Signature
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Reviewed/Endorsed	Date	Signature
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Reviewed/Endorsed	Date	Signature
Title		

\*Use more forms if necessary. All participating departments/committees in developing the policy should provide signature for certification prior to submitting to the Compliance Officer

**Health Care Provider After Action Report/Improvement Plan (AAR/IP)**

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**Guam Memorial Hospital Authority**

**Health Care Provider  
After Action Report/Improvement Plan (AAR/IP)**

**PANDEMIC EMERGENCY RESPONSE TO CORONAVIRUS  
DISEASE (COVID-19)**

**CALEDNAR YEAR 2021 (CY 2021)**

**Actual Naturally Occurring Event Qualifying as a Community-  
Wide Full-Scale Exercise/Event (FSE)**

---

**Prepared by  
Planning Department**

**Prepared for**

**SKILLED NURSING FACILITY/ALTERNATE CARE SITE  
(SNF/ACS)**

**Event Dates:  
March 19, 2020 – May 11, 2023**

**Report Date:  
May 16, 2024**



**GUAM MEMORIAL  
HOSPITAL AUTHORITY**  
ASUNCION OF THE VIRGIN MARY GUAM



## Health Care Provider After Action Report/Improvement Plan

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## Health Care Provider After Action Report/Improvement Plan

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### Administrative Handling Instructions

1. Title: Guam Memorial Hospital Authority (GMHA) Health Care Provider After Action Report/Improvement Plan (AAR/IP) Coronavirus 2019 (COVID-19) Community-Wide Full-Scale Exercise/Event (FSE)
2. This AAR/IP is classified as sensitive information not to be disclosed and For Official Use Only (FOUO). Safeguard, handle, transmit, and store by appropriate security directives. GMHA prohibits the reproduction of this document, in entirety or in part, without prior approval from GMHA.
3. At a minimum, dissemination of attached materials is only allowed on a need-to-know basis. When unattended, store in a locked container or area offering sufficient protection against theft, compromise, inadvertent access, and unauthorized disclosure.

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## Health Care Provider After Action Report/Improvement Plan

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### Executive Summary

The After Action Report/Improvement Plan (AAR/IP) overviews the full-scale COVID-19 exercise. The AAR/IP is designed to assist Skilled Nursing Facilities (SNF/ACS) and partner agencies in improving response and recovery efforts during COVID-19 and future infectious disease emergency responses.

The Skilled Nursing Facility (SNF) is also referred to as the Skilled Nursing Unit (SNU). The SNF represents the building, and the SNU represents the clinical unit of Guam Memorial Hospital Authority.

The following response priorities for emergency management are:

- **Life Safety:** Ensuring the safety and well-being of patients, staff, and the public.
- **Incident Management:** Efficiently manage the incident and coordinate resources, response teams, and agencies involved in the emergency.
- **Property Protection:** Preventing or minimizing damage to property, infrastructure, and other assets and expanding negative-pressure isolation rooms.
- **Stabilization:** Stabilize the situation to prevent further escalation and begin recovery efforts as quickly as possible.

GMHA reduced severe illness and fatalities at the Skilled Nursing Facility (SNF) while ensuring the continued delivery of life-sustaining services. The hospital initially activated a modified Incident Command system at SNF. GMH also implemented daily COVID-19 huddles, which included the SNU, and developed several infectious disease policies and Clinical Standard Operating Procedures.

Originally, the SNF was converted into a COVID-19 Isolation Facility (CIF). Eventually, SNF B-Wing underwent renovations to transform B-Wing into an Alternate Care Site (ASC).

At the onset of the COVID-19 pandemic, GMHA assessed its supplies and equipment to manage incoming passengers possibly infected with the virus. The hospital also launched refresher training on the island's pandemic plan. The Skilled Nursing Facility (SNF) was designated as the COVID-19 Isolation Facility (CIF). Interagency preparedness meetings were held to ensure the SNF/CIF sixty (60) bed capacity was fully stocked with essential supplies, materials, equipment, medication, and staffing.

Relocating SNF residents to Guam Memorial Hospital (GMH) posed a primary concern due to the unwanted virus transmission to an already vulnerable population. GMHA requested and was granted a waiver by the Centers for Medicare and Medicaid Services (CMS) as the Authority Having Jurisdiction (AHJ) to oversee and ensure the residents' safety and well-being.

Once residents safely relocated to GMH, the SNF converted to the COVID-19 Isolation Facility (CIF). The initial plan involved relocating residents, preparing SNF to transform into the CIF, and turning over the facility to the Department of Public Health and Social Services (DPHSS) to temporarily staff and operate. However, DPHSS, as the lead agency for public health emergencies, needed more staff, training, equipment, and supplies to accomplish objectives during a public health emergency for the community. Therefore, GMH adapted and overcame challenges in managing the CIF with staff, materials, and supplies.

## Health Care Provider After Action Report/Improvement Plan

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To address the widespread outbreak of COVID-19 hospitalizations and the chronic shortage of beds, GMHA had no other feasible option but to request FEMA Category B - Emergency Protective Measure funds to construct an Alternative Care Site (ACS) facility at GMHA's Skilled Nursing Facility (SNF). The purpose of ACS was to expand medical care capacity through temporary facility upgrades intended to meet the immediate medical care needs determined by current and future projected COVID-19 patient care in Guam.

In response to emergencies such as the COVID-19 pandemic or other mass casualty events, GMHA activated its patient overflow protocol, which included utilizing the Skilled Nursing Facility (SNF) as a critical component of its emergency management plan. The SNF played a vital role in GMHA's response strategy. To ensure staff readiness, GMHA implemented a comprehensive training program focused on emergency management and care, including the hazard mitigation strategy of sheltering-in-place. This approach was crucial, as no other Alternate Care Site (ACS) in Guam could handle COVID-19 patients.

GMHA's ACS model incorporated a non-acute care ACF Model, which included increasing bed capacity and enhancing capabilities for minor acuity care for COVID-19 and non-COVID-19 patients. Specifically, Wings A and C would accommodate these patients, while the isolated B-Wing at the SNF could serve the highly vulnerable population of Guam residents. GMH COVID-19 patients not ready to go home but no longer require acute care may be moved to wing-B negative pressure rooms. Minor structural modifications enabled the SNF to continue providing non-acute care, treatment, and long-term care. Critically ill COVID-19 patients requiring intensive care and ventilator support were transferred to the Intensive Care Unit (ICU) at the main hospital.

Throughout Calendar Year (CY) 2021, the hospital displayed resiliency by adapting, overcoming shortfalls, and filling gaps where needed. This resiliency is demonstrated throughout the entire island. Island agencies unified and progressively cooperated to respond and mitigate numerous issues (e.g., quarantine, isolation, additional staffing, additional Personal Protective Equipment (PPE), and transportation). GMHA, certified by the CMS as a participating provider for Medicare and Medicaid services, complied with 42 CFR 483, titled *Requirements for Long Term Care Facilities*.

GMHA unofficially took the lead from the Department of Public Health and Social Services (DPHSS) for this public health emergency, providing needed leadership/guidance, staffing, interagency training, shared medical supplies and equipment, and accommodating numerous requests beyond the capability and capacity as a public hospital.

In September 2021, GMH Non-COVID-19 patients moved to the SNF, rerouting all administrative nurses to the hospital floors for clinical support. GMH worked with federal partners to request emergency FEMA clinical staff.

### Major Strengths Identified During Exercise

GMH/SNF activated its COVID-19 Incident Command Post to respond to and recover from the pandemic. This unprecedented event posed significant challenges for GMHA's management and staff relative to applicable emergency operations plans. Reflecting on the positive aspects, GMHA's and SNF staff and management generated the following emergency response and recovery success stories:



## **Health Care Provider After Action Report/Improvement Plan**

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- SNF effectively utilized various active Chat groups (e.g., GMHA leadership, GMHA executive and divisions, SNF administration) as a primary mode of communication to implement and observe applicable parts of its response and establish and sustain a virtual Hospital Incident Command Center.
- SNF staff and Incident Command Post effectively implemented their respective response plan checklists that resulted in SNF maintaining a safe environment of care and sustaining continuity of quality patient care by (1) securing the entrance of the building fostered screening of staff before reporting to their respective duties. Before the public health emergency, SNF/CIF established a response plan to mitigate infection control within the facility; (2) diligently and tirelessly cleaning and mopping to disinfect affected areas facility-wide from the movement of staff and infected patients, and (3) SNF administration lead by SNF Nursing Supervisor created a response team dedicated only to SNF COVID-19 operations.

### **Improvements Recommended:**

Gathered from different departments in responding to the public health emergency, the SNF COVID-19 emergency response and recovery team identified several improvement opportunities during this event. SNF/CIF identified the primary areas for entry and exit. Recommendations listed and grouped according to primary objectives to control infection at SNF/CIF aligned to CMS guidelines:

#### **Improvement Opportunities and Recommendations:**

- As critical situational information was communicated via various Chat groups, GMHA/SNF continued to utilize and rely upon Chat groups as another effective mode of communication during "all hazards" emergency response and recovery efforts, as it allowed GMHA to maintain a virtual Hospital Command Center throughout the emergency.
- Procure adequate and suitable PPEs and equipment.
- SNF/CIF stressed to all clinical staff and management that "essential" employees remain responsible for coordinating with their supervisors relative to GMHA's/SNF's implementation of its Emergency Management Plan and other Emergency Operations Plans. Disseminated a circular to all staff that all employees are "essential."
- GMHA/SNF stressed to all staff and management that the "Post" shift will not be on standby. Staff will be on standby if called in to prepare for the upcoming change.
- SNF/CIF Security and FM met with nursing and operations to prepare and maintain inventory levels for "all-hazards" events. Island Equipment filled the shortage and low pressure of liquid oxygen and distributed the portable oxygen tanks.
- Nurses will add portable HEPA filters in the negative pressure rooms to their checklists in their units and departments.
- SNF developed a patient/visitor guide containing CMS's management plans.

## Health Care Provider After Action Report/Improvement Plan

### SECTION 1: CY 2021 Exercise/Event Overview

Exercise/Event Name: COVID-19

Exercise/Event Start Date: March 19, 2020

Exercise/Event End Date: May 11, 2023

Duration: 1,149 Days

#### Type of Exercise/Event Completed:

Check the type of exercise completed, as listed below

##### *Discussion-Based Exercise*

☐ Seminar

☐ Workshop

☐ Tabletop

☐ Games

##### *Operations-Based Exercise*

☐ Drill

☒ Full-Scale Exercise

☐ Functional Exercise

☒ Emergency Event

#### Capabilities

1. Guam Homeland Security / Office of Civil Defense:

- a) Coordinate and support emergency response and recovery priority objectives.
- b) Establish and maintain a modified operational unified command structure and process that appropriately integrates all critical stakeholders during a potentially catastrophic event; and
- c) Led the evaluation of the overall emergency response and recovery activities and plans related to power outages, port operations, mass care, critical infrastructure, and tourism.

2. Guam Memorial Hospital Authority:

- a) Coordinate and support emergency response and recovery priority objectives, prepare the delivery of vital response equipment and services to Skilled Nursing Facility;
- b) Establish and maintain an operational unified command structure and process that appropriately integrates all critical stakeholders during a potentially unprecedented event and
- c) Lead the evaluation of the overall emergency response and recovery activities and plans related to power outages, A/C, and other circumstances that may impede facility operation.

3. Skilled Nursing Facility/Acute Care Site (SNF/ACS):

- a) Implement GMHA's emergency response and recovery capabilities relative to internal Emergency Operations Plans (e.g., COVID-19 Response Plan to include Hospital Incident Command System, Interoperable Communications, and Collaboration with Internal Department Emergency Response Partners) and
- b) Evaluate GMHA's COVID-19 Response Plan for continuous life-sustaining services coordinating with the Guam EOC/Unified Command, focusing primarily on the Health and Medical Emergency Support Function 8 (ESF8) roles and responsibilities.



## Health Care Provider After Action Report/Improvement Plan

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### 1. Planning

The Emergency Management Plan (EMP) implemented a comprehensive program to manage mitigation, preparation, response, and recovery across various disaster scenarios. This "all hazards" approach guarantees that the Guam Memorial Hospital Authority (GMHA)—encompassing both Guam Memorial Hospital (GMH) and the Skilled Nursing Facility (SNF/ACS), also referred to as the Alternate Care Site—is well-equipped to address a broad spectrum of emergencies impacting the healthcare environment.

### 2. Communication

Emergency management communications security and protocol focus on safeguarding communications equipment and systems, such as radios and telephones, during emergencies to prevent misuse or overloading.

### 3. Risk Management

The Guam Memorial Hospital Authority (GMHA) and the SNF, represented by the medical and administrative staff and the governing body, established an Infection Control Program to reduce the risk of acquiring and transmitting healthcare-associated infections (HAIs). They also created an infection Control Orientation and In-Service policy to train staff in infection control for new and existing employees.

### 4. Community Preparedness & Participation

A staff, volunteer, and community vaccination program was established. COVID-19 testing implemented. GMH provided receipt storage and staging (RSS) for Guam and the outer islands.

### 5. Intelligence & Information Sharing & Dissemination

Data and analysis are critical in conducting risk assessments for potential threats and hazards. Various resources are accessible for gathering information, such as local and federal law enforcement agencies, FBI, Department of Homeland Security, Guam Homeland Security Office of Civil Defense, CDC, NWS, Fusion Center, and other relevant investigative entities. Internal and external briefings are held within the Hospital Incident Command Structure (HICS) and externally with GHS/OCD. Intelligence and information sharing also occurred during department/unit meetings, referred to as huddles, throughout emergency response operations.

**Scenario:** Actual naturally occurring event qualifying as a community-wide full-scale exercise/Event (FSE)

**Location:** Guam and Western Pacific Region

**Partners:**

The Guam Memorial Hospital Authority (GMHA) partners are as follows: Guam Medical Regional City (GRMC), the U.S. Naval Hospital Guam (USNHG), local and federal Emergency Medical Services (EMS), Department of Public Health & Social Services (DPHSS), the Guam Behavioral Health and Wellness Center (GBHWC). Agency partners: Guam Homeland Security/Office of Civil Defense (GHS/OCD) Unified Command to include all

## **Health Care Provider After Action Report/Improvement Plan**

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Emergency Support Functions and Incident Command System (ICS) Sections; the Office of the Governor of Guam; Guam Emergency Management Healthcare Coalition (GEMHCC), and representatives of the local Media.

**Participants:**

U.S. Department of Health and Human Services (both ASPR and CDC), Department of Homeland Security / Federal Emergency Management Agency (FEMA), Department of Public Health and Social Services (DPHSS), Army Corps of Engineers (USACE), Private Sector Healthcare Clinics/Centers, Department of Agriculture (DOAg), Guam Visitors Bureau (GVB), Guam Police Department (GPD), Guam Fire Department (GFD), Guam Department of Education (GDOE), Port Authority of Guam (PAG), Mayor's Council of Guam (MCOG), A.B. International Airport Authority (GIAA), Consolidated Commissions on Utilities (CCU), Guam Customs and Quarantine Agency (CQA), Guam Behavioral Health and Wellness Center (GBHWC), Guam Homeland Security/Office of Civil Defense (GHS/OCD), American Red Cross Guam Chapter (ARC), Salvation Army Guam Corps, Guam Chamber of Commerce, Guam Hotel and Restaurant Association (GHRA), Guam National Guard (GUNG), United States Air Force (USAF), United States Coast Guard Sector Guam (USCG), United States Naval Hospital Guam (USNH), Guam Regional Medical City (GRMC)

**Number of Participants:**

List the total number of Participating Agencies

- 
- 26



## **Health Care Provider After Action Report/Improvement Plan**

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### **SECTION 2: Exercise/Event Design Summary**

#### **Exercise Purpose and Design**

The Skilled Nursing Facility, also known as the Alternate Care Site (SNF/ACS) with the Nursing Department, coordinated emergency response and recovery efforts, prompting GMHA to implement its COVID-19 Response Plan. As a result, SNF/ACS and other vital stakeholders tested and evaluated their respective Emergency Management Plans (EMPs) and Emergency Operations Plans (EOPs).

The primary purpose of SNF/ACS's response and recovery efforts was to:

- Provide quality patient care to COVID-19 patients at the COVID-19 Isolation Facility (CIF) at the SNF.
- Conduct situational assessments, maintain situational awareness, and activate/implement applicable GMHA Emergency Operations Plans (e.g., GMHA COVID-19 Response Plan and any other applicable GMHA EOPs);
- Establish a Hospital Incident Command System (HICS) and Hospital Command Centers (HCCs), established first as a modified HCC/HICS located at the GMHA Command Center at the GMHA boardroom and then transitioned to a modified HCC/HICS via GMHA's Leadership Chat group. These modified HCCs/HICS were used as the means to manage communications and implement SNF/ACS applicable EOPs as deemed appropriate by GMHA Executive Leadership (e.g., Hospital Administrator/CEO or designee); and
- Establish and maintain communications with SNF/ACS - GMHA's Emergency Support Function 8 Coordinators (ESF8 Coordinators) to effectively liaise with Guam's Emergency Operations Center (EOC).

#### **Objectives and Capabilities**

##### **Planning and Intelligence Capabilities:**

**Objective No. 1** – SNF/ACS Situational COVID-19 - Updates, reports, awareness, and preparedness fostered by communications between internal and external partners (e.g., GMHA Incident Command Post, SNF/ACS Admin, CDC Updates from DPHSS, JIC, GMHA Leadership Team).

- Activate GMHA's / SNF Response Plan;
- Activate GMHA's / SNF Command Center and Coordinators;
- Establish GMHA's HICS to effect command, control, and communications between GMHA's Hospital, Skilled Nursing Facility, the Guam EOC, and other possible Health and Medical Stakeholders.

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### **Intelligence and Communications Capabilities:**

**Objective No. 2** Logistical Readiness and Documentation of the same (e.g., Medical Supplies & Equipment, Utility Systems).

- Gathering data and monitoring bed capacities and capabilities and implementing contingency plans to handle patient overflow or other emergencies (e.g., loss of critical infrastructure and essential resources); and
- Communicate and collaborate with Guam ESF8 (GMHA, DPHSS, GHS) located at the Guam EOC (within GHS/OCD) and other members of the Guam Emergency Management Healthcare Coalition (e.g., GRMC, USNHG, GFD) to manage medical surges, medical supplies and equipment, healthcare professionals, and the use of facilities as needed, including the utilization/testing of the Guam ESAR-VHP.

### **Community Preparedness and Participation Capabilities:**

**Objective No. 3** - Continuity of Quality Patient and Resident Care Services in a Safe Environment.

- The entrance screening method for COVID-19 symptoms is activated outside the main entrance and secondary entry point of SNF/ACS for staff and other essential personnel who are assisting and responding to COVID-19.
- Protect the safety and well-being of patients, visitors, and staff by employing safe work practices, standard precautions, environment of care assessments/rounds, and taking other proactive measures needed to remedy workplace hazards and infections and prevent their reoccurrence and
- Track human resources (e.g., shift changes), medical supplies, and equipment and the status of critical infrastructure (e.g., Emergency Generators, HVAC System); communicate and coordinate shortfalls or system failures to Nursing Supervisor (the IC Designee) and executive leadership; and respond to resolve the same.
- Communications with the GFD or any private transport, transporting a COVID-19 patient into the facility and relaying to the COVID-19 charge nurse, SNF/ACS Security stationed on the primary and/or secondary entrance of SNF/ACS will assist and escort the patient to the designated route during the transfer.

### **Objective No. 4 – COVID-19 Patient Transfer to SNF/ACS Protocol**

- Activate the SNF/ACS Guard for arriving GFD, GMH, and private transport transferring COVID-19 patients. Please make sure that they comply with all protocols set up by the GMHA Incident Commander and leaders regarding Proper PPEs, donning, and doffing procedures to avoid cross-contamination.
- Establish route of entry and exit protocol created by the GMHA COVID-19 Incident Commander, and SNF/ACS guards will guide, monitor, and coordinate to charge nurse or nurse station.



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### **Communications Capabilities**

**Objective No. 5** - SNF/ACS Ongoing safe and secure care environment maintenance.

- Ensure all communications lines are open via phone, iConnect radios, and Motorola radios to the Hospital Command Center, Nurse Station, and Security, assisting with screening and control.
- Establish the traffic flow pattern and overflow plan.

### **Risk Management Capabilities**

**Objective No. 6** – Ongoing COVID-19 Response Plan

- Training Hospital Command Center new personnel.
- Development of Skilled Nursing Facility (SNF/ACS) guide for screening and management plans to mitigate infection within facilities that address both GMH and SNF/ACS.

### **Scenario Summary**

As the pandemic evolved in Calendar Year 2021, the need for a flexible and scalable healthcare response led SNF to transition from a COVID-19 Isolation Facility (CIF) model to an Alternate Care Site (ACS) model to address better the diverse needs of both COVID-19 and non-COVID-19 patients. Recognizing that the healthcare system was under increasing strain, GMHA adopted a non-acute care ACS model designed to expand bed capacity and provide minor acuity care. The transition involved repurposing the B-Wing at SNF to accommodate non-acute patients, including those with COVID-19 who no longer required intensive care but were not yet ready to be discharged. The B-Wing would adapt to handle a range of patients with lower acuity levels, freeing up acute care resources for critically ill patients. Thus, the isolated B-Wing of the Skilled Nursing Facility (SNF), previously designated as the COVID-19 Isolation Facility, was repurposed to serve the most vulnerable populations—particularly patients with significant underlying health conditions who required specialized, non-acute care in a controlled environment.

The transition to an Alternate Care Site allowed GMHA to effectively manage the healthcare needs of patients at varying levels of severity, without overwhelming the hospital's critical care capacity. In particular, the B-Wing of the SNF, which was to be constructed with negative pressure rooms for isolation purposes, became an essential space for managing patients who were no longer in need of acute COVID-19 care but still required ongoing medical attention for future infectious disease emergencies such as COVID-19. This space was ideally suited for patients who could not yet return home, offering a secure setting to recover while minimizing the risk of transmission to other populations. Minor structural modifications were made to SNF/ACS to enable it to continue providing both long-term care and treatment for non-acute patients, ensuring that its role as a vital healthcare resource was maintained in the midst of the crisis. These adaptations were a crucial part of GMHA's strategic response to manage surges in

## **Health Care Provider After Action Report/Improvement Plan**

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COVID-19 cases while also meeting the needs of individuals requiring ongoing care for chronic conditions or recovery from illness

For patients who remained critically ill and required intensive care, such as those needing ventilator support, GMHA transferred them to the main hospital's Intensive Care Unit (ICU), where the necessary resources and specialized staff were available. This system of tiered care, with clearly defined roles for each facility and wing, ensured that patients received the appropriate level of care at every stage of their illness. The conversion of SNF from a COVID-19 Isolation Facility to an Alternate Care Site exemplified the flexibility of GMHA's approach to healthcare delivery during the pandemic. By adapting its infrastructure and care models, GMHA was able to manage both the immediate surge in COVID-19 cases and the longer-term needs of the community, thereby supporting the broader public health recovery efforts.

### **Response & Recovery Sequence of Events**

January 2021- March 2021: Beds, metal frames, pallets of ventilators, and fifteen (15) bedside tables transferred from SNF/ACS to GMH from SNF/ACS B-wing. In addition, in February 2021, sixteen (16) bedframes returned from GMH. Four (4) yellow barriers utilized during the COVID-19 operation were returned to GMH.

March 2021-SNF prepared to re-open operations of SNF as an extended-term care facility. SNF patients temporarily situated at Catholic Social Services were transferred to SNF. Twelve (12) patients/residents completed the transfer. SNF Guards implemented the parking policy to track vehicles in the main parking. Security gives directives to inform the nursing supervisor when visitors are on-site. The Centers for Medicare and Medicaid Services (CMS) survey team is on-site for life safety. The CMS survey team asked the SNF security team leader to conduct a walkthrough and discuss the protocol for entrance screening procedures and both first- and second-floor entry and exit points.

June 2021-SNF security informed Facilities Maintenance (FM) that the generator annunciator indicated a low fuel light turned on—a strong diesel odor detected. Diesel flowed from the fuel tank. The Communication Center activated the Guam Fire Department (GFD) to respond. AAO, Facilities Maintenance (FM) Manager, SNF, and GMH FM personnel on site. Post 1 informed and failed to notify the Safety and Security Administrator about the activation of CODE YELLOW. Environmental Protection Agency representatives, Associate Administrator of Operations (AAO), planning chief, security chief, and FM manager are on site to assess the investigation report. On June 2, 2021, at 1900 hours, GMHA security was on site regarding the spill incident. Security tracked the spill to locate the leaching pond and collect all contaminated shrubs for damage control in compliance with EPA.

July 2021-Compliance on-site at SNF regarding the evacuation plan for the second floor. Security updated stakeholders on SNF informational signs and directional signage. Security proposed the use of CCTV upgrades.

GMH compliance orders SNF security to complete all fields for visitor sign-in sheets per CMS guidelines. Security provided guards with the Conditional of Readiness Access Level (CORAL) Policy for review and advised them to take an in-service class to implement the visitation policy.

August 2021- SNF implemented masks at all times, including visitors in the patient's room. If



## **Health Care Provider After Action Report/Improvement Plan**

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visitors remove their masks, they should be away from the patient. SNF administration implemented a one-visitor-at-a-time policy with a thirty (30) minute limit per visitor. The administration required weekly swabbing for SNF staff. Employees need to clear Employee Health if they are in non-compliance with swabbing.

A security guard rover detected a burnt wire smell, prompting contact with the SNF FM leader. Security coordinated the patient's transfer from the room. An FCU fan coil unit and exhaust fan in room 109 burned. The fire alarm failed to activate and was reported to the vendor for repairs.

FM reported that the Fire Alarm (FA) System was down. An ILSM was created, and a facility-wide fire watch was activated. FM notified the communication center, safety, and Barrigada Fire Station. The communications center announced the FA system impairment via the public address system.

SNF FM conducted fire pump testing, which failed to activate. No alarm or notification was activated. The compartment doors and the rolled-up fire compartment gate did not activate. FM staff informed safety and security, the communication center, and Post 1 about the failed fire pump test. FM Electrical was on site to fix the fire pump system. The fire annunciator showed LCL 1 trouble on display, which was reported to FM.

SNF suspended visitation until further notice because a patient in room 126 was infected and tested positive for COVID-19. The facility activated COVID-19 protocols. Swabbing was implanted for all SNF patient residents and nursing staff exposed to infected patients/residents. The nursing supervisor requested security assistance due to three residents/patients' combative behavior, refusing to get swabbed. SNF administration directed staff to wear full PPEs, N95 masks, gloves, and face shields during patient interaction.

September 2021-SNF septic tank inoperable with both motors down. Security assisted after hours in monitoring the status and informed the FM on duty. Security also turned off the sewage motor each time Todu Mauleg pumped. Phoenix Pacific Inc. reported that the fire alarm system, including the fire annunciator, was fully restored. Barrigada Fire Station notified SNF that the Fire Alarm System was fully functioning.

October 2021-GMH Compliance was on site to do ILSM in service on the second floor for CMS life safety compliance. Security is performing a facility-wide fire watch every hour. SNF visitation was suspended, including all drop-offs for patients due to residents and staff contracting COVID-19—mandatory infection control training given to SNF. On November 11, 2021, visitation opened per CMS guidelines.

November 2021-New visitation guidelines implemented. COVID-19 outbreak within the facility. Security informed visitors of the risks before allowing visitation in compliance with CMS guidelines. Infection control education conducted for staff.

Guam Homeland Security/ Office of Civil Defense staff were on-site regarding ventilators secured at the B-wing.

December 2021: AAO, Planning Department, Safety and Security, VIPs, FEMA, and other GMHA leaders conducted a meeting at B-wing. Security staff tested positive for COVID-19 and the protocol.

## Health Care Provider After Action Report/Improvement Plan

### Improvement Plan

The plan was developed specifically for the Guam Memorial Hospital Authority (GMHA) to make the necessary Plan (TCRP) improvements based upon the summarized information contained within this After Action Report feedback from the incident; email messages; chat group messages; and the feedback generated from the COVID-19

Required Improvement / Recommendation	Describe the Corrective Action Completed	Primary Responsible Leader(s)	Responsible Department(s)	Start Date	Completion Date
We will continue to utilize and rely upon chat groups as another effective mode of communication during "all hazards" emergency response and recovery efforts, as they allow us to maintain a virtual Hospital Command Center throughout the event.	Utilize all effective modes of communication during EMP and EOP Activations (including chat groups).	GMHA Incident Command Post	All GMHA/SNF Divisions/Depts.	August 27, 2021	May 11, 2023
The COVID-19 Incident chat continues to remain operational for situational awareness following the end of the pandemic date of May 11, 2023					
Procure adequate and suitable PPEs	To be issued from every Department responding to the event	GMHA Leadership Team/SNF Administration	Applicable Divisions/Depts., SNF Administration / SNF Nursing	August 27, 2021	May 11, 2023
Nurses will add to their checklist in their units and departments the requirement that portable HEPA filters be in the unfavorable pressure rooms.	Update Nursing Policies to include a checklist for portable HEPA filters.	GMHA Leadership Team SNF Admin	Applicable Divisions/Depts., Nursing	August 27, 2021	May 11, 2023



## Health Care Provider After Action Report/Improvement Plan

### GMHA IMPROVEMENT PLAN (CONT'D)

Required Improvement / Recommendation	Describe the Corrective Action Completed	Primary Responsible Leader(s)	Responsible Department(s)	Start Date	Completion Date
GMH and SNF develop a patient/visitor guide containing the EOC management plans cited by CMS.	Distribute guides during EOP Activations at GMH and SNF.	GMHA Leadership Team	All GMHA Departments/ Units	August 27, 2021	November 2021
SNF developed Systematic Entrance screening procedures in response to CMS citations.	This will be implemented at the SNF entrance on both the first and second floors.	GMHA/SNF Leadership Team	SNF Security	January 2021	November 2021
IF Security created an Entry and Exit protocol ring patient transfer, BLS training, and the CNA certification test to mitigate or avoid cross-contamination from outsiders taking the class to resident.	Being implemented for better control of cross-contamination of infection	GMHA/SNF Incident Command Post	SNF Security	June 2021	December 2021



## Health Care Provider After Action Report/Improvement Plan

### APPENDIX A: ACRONYMS ACRONYMS

Acronym	Meaning
AAR/IP	After Action Report/Improvement Plan
APR	Administration for Strategic Preparedness and Response
ARC	American Red Cross Guam Chapter
AAJ	Authority Having Jurisdiction
AAO	Associate Administrator of Operations
USAGE	U.S. Army Corps of Engineers
CDC	Centers for Disease Control
CEP	Care Units & Clinical Emergency Preparedness
CIF	COVID-19 Isolation Facility
CCU	Consolidated Commissions on Utilities
CEO	Chief Executive Officer
COVID-19	Coronavirus 2019
COR	Condition of Readiness
CBRNE/WMD	Chemical, Biological, Radiological, Nuclear and Explosives/Weapons of Mass Destruction
CY	Calendar Year
DOAg	Department of Agriculture
DHS	Department of Homeland Security
FEMA	Federal Emergency Management Agency
DPHSS	Department of Public Health and Social Services
EMP	Emergency Management Plan
EOC	Emergency Operations Center
TOP	Emergency Operations Plan
ESF8	Emergency Support Function 8
FBI	Federal Bureau of Investigation
FSE	Full-Scale Exercise/Event
FM	Facilities Maintenance
GBHWC	Guam Behavioral Health and Wellness Center
GDOE	Guam Department of Education
GEMHCC	Guam Emergency Management Healthcare Coalition
GFD	Guam Fire Department
GIAA	Guam A.B. International Airport Authority
GHS/OC	Guam Homeland Security/Office of Civil Defense
GHRA	Guam Hotel and Restaurant Association
GMHA	Guam Memorial Hospital Authority
GMH	Guam Memorial Hospital
GUNG	Guam National Guard
GP	Guam Police Department
GRMC	Guam Regional Medical Center
GVB	Guam Visitors Bureau
HAIs	Healthcare-associated infections (HAIs)/conditions
HICS	Hospital Incident Command/Center System
IC	Incident Commander
IPCC	Infection Prevention and Control Committee
JIC	Joint Information Center
MCP	Mass Casualty Plan
MCOG	Mayor's Council of Guam
NWS	National Weather Service
O2	Oxygen
OR	Operating Room
PAG	Port Authority of Guam
PPE	Personal Protective Equipment
SNF/ACS	Skilled Nursing Facility-Alternate Care Site
SNF/ACS-CIF	Skilled Nursing Facility/Alternate Care Site –COVID-19 Isolation Facility
SNU	Skilled Nursing Unit (Clinical)
TCRP	Tropical Cyclone Response Plan

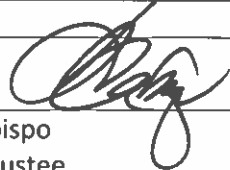
## Health Care Provider After Action Report/Improvement Plan

End of Report.

**GUAM MEMORIAL HOSPITAL AUTHORITY  
REVIEW AND ENDORSEMENT CERTIFICATION**

The signatories on this document acknowledged that they have reviewed and approved the following:

<input type="checkbox"/>	Bylaws	Submitted by Department/Committee: Planning Department
<input type="checkbox"/>	Rules and Regulations	Policy No.:
<input type="checkbox"/>	Policies & Procedures	
<input checked="" type="checkbox"/>	Other: Reports	<p>Guam Memorial Hospital Authority Health Care Provider After Action Report/Improvement Plan (AAR/IP)</p> <p>COVID-19 2022 After Action Report (AAR)/Improvement Plan (AAR/IP) GMH</p>

Reviewed/Endorsed	Date	Signature
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Title	Dr. Jeffrey Shay, MD Chairperson, Medical Executive Committee	
Reviewed/Endorsed	Date	Signature
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Reviewed/Endorsed	Date 2/18/25	Signature 
Title	Theresa Obispo Board of Trustee	
Reviewed/Endorsed	Date	Signature
Title		


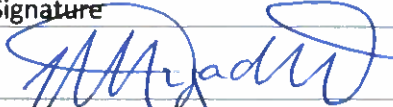
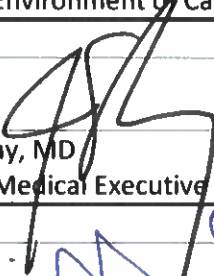
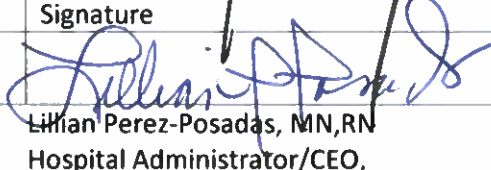

\*Use more forms if necessary. All participating departments/committees in developing the policy should provide signature for certification prior to submitting to the Compliance Officer



**GUAM MEMORIAL HOSPITAL AUTHORITY  
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<input type="checkbox"/>	Policies & Procedures	
<input checked="" type="checkbox"/>	Other: Reports	<p>Guam Memorial Hospital Authority Health Care Provider After Action Report/Improvement Plan (AAR/IP)</p> <p>COVID-19 2022 After Action Report (AAR)/Improvement Plan (AAR/IP) GMH</p>

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	12/20/2024	
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Reviewed/Endorsed	Date	Signature
		
Title		Therese Obispo Board of Trustee
Reviewed/Endorsed	Date	Signature
Title		

\*Use more forms if necessary. All participating departments/committees in developing the policy should provide signature for certification prior to submitting to the Compliance Officer

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## Health Care Provider After Action Report/Improvement Plan

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## Health Care Provider After Action Report/Improvement Plan

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### Administrative Handling Instructions

1. Title: Guam Memorial Hospital Authority (GMHA) Health Care Provider After Action Report/Improvement Plan (AAR/IP) Coronavirus 2019 (COVID-19) Community-Wide Full-Scale Exercise/Event (FSE)
2. This AAR/IP is classified as sensitive information that should not be disclosed and is For Official Use Only (FOUO). Safeguard, handle, transmit, and store by appropriate security directives. GMHA prohibits the reproduction of this document, in entirety or in part, without prior approval from GMHA.
3. Dissemination of attached materials is only allowed on a need-to-know basis. When unattended, store in a locked container or area offering sufficient protection against theft, compromise, inadvertent access, and unauthorized disclosure.
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## **Health Care Provider After Action Report/Improvement Plan**

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### **Executive Summary**

The After-Action Report/Improvement Plan (AAR/IP) overviews the full-scale exercise event related to the coronavirus 2019 pandemic (COVID-19). Its purpose is to support the Guam Memorial Hospital (GMHA) and partner agencies in enhancing their responses and recovery efforts for future emergency declarations.

The overall goal of GMHA's emergency response is to minimize serious illness and overall deaths and to provide continuous life-sustaining services. The hospital performed these services in coordination and collaboration with the GMHA Hospital Incident Command System (HCIS), Guam Homeland Security/Office of Civil Defense (GHS/OCD), and Guam Emergency Operations Center (EOC)/Unified Command, with a primary focus on the Health and Medical Emergency Support Function 8 (ESF8) roles and responsibilities.

GMHA implemented vital measures to mitigate its impact and sustain operations. These included expanding medical services, securing medical supplies, and enhancing public information. The hospital put in place emergency procedures to protect and treat patients, manage high patient volumes, and ensure adequate care throughout the pandemic.

GMHA faced nursing and medical staff shortages due to the pandemic. The shortage strained the hospital's ability to respond to the increased demand for care. Staffing challenges prompted GMHA to seek assistance from the Guam Department of Education (GDOE), but GDOE needed more resources to fulfill this requirement. Consequently, GMHA contracted over seventy (70) nurses from Medical Solutions and more than three hundred (300) nurses from NuWest to address the critical shortage. These travel nurses were crucial in treating over seven hundred (700) COVID-19 patients during the surges.

Nursing and Material Management reports indicated shortfalls in Personal Protective Equipment (PPE), which affected medical and administrative staff. Eventually, the Administration for Strategic Preparedness and Response (ASPR) Strategic National Stockpile (SNS) supplemented PPE equipment. The Federal Emergency Management Agency (FEMA) and other government agencies supported PPE requests.

GMHA operates 161 licensed acute care beds. Bed occupancy exceeded 95% during surges, overwhelming medical staff and resources. This high patient load necessitated the construction of an Alternative Care Site (ACS) to expand capacity and manage the influx of COVID-19 patients.

GMHA requested FEMA Category B - Emergency Protective Measure funds to build an Alternate Care Site (ACS) at the Skilled Nursing Facility (SNF). The ACS's design enhanced medical care capacity and addressed immediate and projected patient needs.

The ACS adopted a Non-Acute Care model that included increasing bed availability and the ability to provide minor acuity care for both COVID-19 and non-COVID-19 patients. Constructing an isolated B-Wing at the SNF would give GMHA the capacity to accommodate highly vulnerable populations. The plan included making minor structural alterations to meet the needs of Non-Acute Care patients. GMH admitted critically ill COVID-19 patients requiring intensive care to the main hospital.

## Health Care Provider After Action Report/Improvement Plan

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GMHA's response to the COVID-19 pandemic involved extensive operational adjustments and resource allocations to manage high patient loads and staff shortages. Establishing the ACS and strategically using FEMA funds were pivotal in expanding care capacity and addressing immediate healthcare needs during a crisis. Continuous monitoring and adaptation of strategies remain essential to managing ongoing and future challenges.

The Clinical Emergency Response Team (CEPT) developed a new "All-Hazards" Emerging Infectious Disease Plan, known as the Novel Infectious Disease of Concern (NIDC) Response Plan. This plan is undergoing review and endorsement.

### **Situational Awareness**

CY 2022, the hospital responded to the following COVID-19 peak surges:

Surge 3: January 8, 2022 - March 31, 2022

Surge 4: April 1, 2022 - June 30, 2022

Surge 5: July 1, 2022 - December 31, 2022

The Guam Homeland Security Office of Civil Defense (GHS/OCD) used a Disaster LAN (DLAN) system as a tool for shared situational awareness and workflow-based information management.

**Medical Supply Shortages:** DLAN Ticket No. 9629 1925 hours, submitted on February 2, 2022, requested pharmaceutical inventory support of the anti-viral agent remdesivir. Remdesivir is the only Federal Drug Administration (FDA) approved anti-viral agent to treat patients over twelve (12) years of age and hospitalized with COVID-19. GMH had fifty-eight (58) treatment courses and anticipated utilizing five (5) treatments per day during peak census. The additional inventory of remdesivir was necessary to treat the anticipated influx of COVID-19 hospitalized patients. GMH targeted the need for one hundred (100) treatment courses over and above the existing fifty-eight (58). Emergency Operations Center located at the GHS/OCD did not approve the DLAN ticket due to internal hospital financial restraints instead of logistical issues. Eventually, medication was available without shipping delays.

As of February 4, 2022, at 0500 hours, the GMHA census reported to GHS/OCD consisted of one hundred sixty-two (162) admitted patients, twenty-eight (28) testing positive for COVID-19, and fifteen (15) Persons Under Investigation (PUI) for COVID-19.

The hospital's medical supplies experienced shortages of disposable isolation gowns and sterile pre-filled standard saline syringes for IV line flushing.

DLAN Ticket No. 9654 1647 hours, requested inventory support of sterile pre-filled standard saline syringes for IV line flushing. The saline flushes are a component of basic IV medication tubing management and essential for vascular access device maintenance to reduce the risk of bloodstream infections. A national shortage of standard saline flushes was reported due to a recall of two hundred sixty-seven million (267,000,000) from the supply chain. GMH utilized approximately four hundred eighty (480) syringes (5ml or 10ml) daily. The pre-filled standard saline syringes shortage is expected until May 2022. Therefore, the hospital requested a three (3) month inventory.

**Staff Shortages:** DLAN Ticket No. 9659 1700 hours, submitted on behalf of GMHA, requested



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Guam National Guard (GUNG) Support for the Emergency Room (ER) and Intensive Care Unit (ICU) for COVID-19 Operations. GUNG supplied three (3) Medics assigned to the ER and ICU. The GUNG request was extended until June 30, 2022.

**Strategic National Stockpile:** GMHA coordinated the exchange of the Strategic National Stockpile (SNS) ventilators. One hundred six (106) ventilators were due for preventive maintenance (August 2022). The one (1) to one (1) ventilator swap decreased the total number to forty-one (41).

**Morgue Capacity:** The refrigerated container known as the Reefer used for morgue overflow returned to the Port Authority of Guam in October of CY 2022.

**Health and Safety:** The hospital implemented employee screening at the main entrance and administered Moderna and Pfizer COVID-19 vaccines to employees to mitigate the spread of COVID-19 within the hospital.

### Major Strengths Identified During Exercise

- Implemented forty 40 protocols for the clinical and operational management of COVID-19;
- Established a state-of-the-art Telehealth/Telemedicine and Physical Rounder two (2) Program to sustain lifesaving intensive and critical patient care services;
- Created a "War Room" Committee dedicated to the individual clinical management of COVID-19 patients;
- Created a daily briefing document and daily COVID huddles to ensure streamlined communication among all branches of the hospital;
- Established electronic daily wellness checks to mitigate the spread of COVID-19 amongst GMHA staff and keep up with crucial staffing levels.
- GMHA overcame identified challenges.

### Improvements Recommended:

- GMHA's Pandemic Flu Plan needed more guidance to address the unique challenges of COVID-19, a new virus. No one anticipated the emergency would last over thirty-three (33) months. GMHA adapted using stringent all-hazards infection control measures and best practices for airborne isolation.
- GMHA should update its Pandemic Flu Plan, incorporating relevant protocols and adaptable measures for future situations.
- With support from the Army Corps of Engineers and other agencies, GMHA expanded capacity by building additional units on the third and fourth floors to meet the growing patient demand.
- Relocated various units across the hospital and the Skilled Nursing Facility to maximize patient care areas during the COVID-19 surge.
- The Infection Prevention and Control Committee (IPCC) created a specialized clinical task force to analyze and interpret COVID-19 guidance to develop user-friendly protocols, ensuring hospital staff followed best practices for patient and staff safety.

## **Health Care Provider After Action Report/Improvement Plan**

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- Infectious disease protocols created by the IPCC and the Medical Executive Committee (MEC) established and executed policies to prevent acquiring and controlling healthcare-associated infections (HAIs)/conditions. The hospital-wide committee directed the hospital's infection control program. Approved protocols by the IPCC were not readily available to all GMHA staff, and accessing those protocols was difficult. The Clinical Emergency Preparedness Team (CEPT) improved the process of distributing the Clinical Emergency Preparedness COVID-19 protocols. The CEPT adopted an "all hazards" approach to developing policies and protocols.
- Improved inventory management by incorporating a burn rate for GMHA supplies and coordinating with external agencies to ensure proper distribution and avoid overuse. Materials Management tracked and sent out daily burn rate reports.
- The Incident Commander directed the Safety and Security Administrator to collaborate with nursing departments to train new and onboarding staff in DECON procedures, PPE donning and doffing, and N-95 Fit Testing certification. The hospital provided to newly hired GMHA staff, travel nurses, DoD clinical staff, GUNG medics, and other contracted personnel.



## Health Care Provider After Action Report/Improvement Plan

### SECTION 1: CY 2021 Exercise/Event Overview

**Exercise/Event Name:** COVID-19

**Exercise/Event Start Date:** March 19, 2020

**Exercise/Event End Date:** May 11, 2023

**Duration:** 1,149 Days

**Type of Exercise/Event Completed:**

Check the type of exercise completed, as listed below

*Discussion-Based Exercise*

☐ Seminar

☐ Workshop ☐ Tabletop

☐ Games

*Operations-Based Exercise*

☐ Drill

☒ Full-Scale Exercise

☐ Functional Exercise

☒ Emergency Event

### Capabilities

1. Guam Homeland Security / Office of Civil Defense:

- a) Coordinate and support emergency response and recovery priority objectives.
- b) Establish and maintain a modified operational unified command structure and process that appropriately integrates all critical stakeholders during a potentially catastrophic event and
- c) GHS/OCD led the evaluation of the overall emergency response and recovery activities and plans related to power outages, port operations, mass care, critical infrastructure, and tourism.

2. Guam Memorial Hospital Authority:

- a) Implement GMHA's Pandemic Flu Plan and COVID-19 Clinical Emergency Preparedness Protocol's (COVID-19) information/guidance published by the CDC and adapted to the Hospital Environment for emergency response and recovery. Capabilities include a Hospital Incident Command System, Interoperable Communications, and Collaboration with federal and local emergency response partners.
- b) Create Infection control and decontamination policies, follow the CDC's best practices, and effectively respond throughout the pandemic.

### 1. Planning

The Emergency Management Plan (EMP) Policy 101, revised and approved in November 2022, establishes a structured program addressing mitigation, preparation, response, and recovery for various disasters and emergencies. This approach, known as the "all hazards" approach, ensures the hospital is adequately prepared to handle a wide range of emergencies that affect the healthcare environment at Guam Memorial Hospital Authority (GMHA), including both Guam Memorial Hospital (GMH) and the Skilled Nursing Facility, also known as the Alternate Care Site (SNF/ACS).

## Health Care Provider After Action Report/Improvement Plan

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### 2. Communication

To prevent misuse or overloading during emergencies, GMHA's emergency management communications security and protocols focused on safeguarding communication equipment and systems such as radios and telephones.

### 3. Risk Management

GMHA established Care units and Clinical Emergency Preparedness (CEP) to manage risks associated with COVID-19. Executive management created a dedicated "War Room" committee to manage COVID-19 patient care. A state-of-the-art Telehealth/Telemedicine and Physical Rounder 2 Program was developed. Daily COVID-19 huddles were conducted to streamline communication; GMH established Daily Electronic Wellness checks to mitigate the spread of COVID-19 among staff and the public.

### 4. Community Preparedness & Participation

The hospital established a staff, volunteers, and community vaccination program. COVID-19 Testing implemented. GMH provided receipts storage and staging (RSS) for Guam and the outer islands.

### 5. Intelligence & Information Sharing & Dissemination

Data and analysis are critical in assessing potential threats and hazards. Various resources are accessible for gathering information, such as local and federal law enforcement agencies, the FBI, Department of Homeland Security, Guam Homeland Security Office of Civil Defense, CDC, NWS, Fusion Center, and other relevant investigative entities. Internal and external briefings were held within the Hospital Incident Command Structure (HICS) and with GHS/OCD. Intelligence and information sharing also occur during department/unit meetings, called huddles, throughout emergency response operations.

**Scenario:** Actual naturally occurring event qualifying as a community-wide full-scale exercise/Event (FSE)

**Location:** Guam and Western Pacific Region

**Partners:**

The Guam Memorial Hospital Authority (GMHA) partners are as follows: Guam Medical Regional City (GRMC), the U.S. Naval Hospital Guam (USNHG), local and federal Emergency Medical Services (EMS), Department of Public Health & Social Services (DPHSS), the Guam Behavioral Health and Wellness Center (GBHWC). Agency partners: Guam Homeland Security/Office of Civil Defense (GHS/OCD) Unified Command to include all Emergency Support Functions and Incident Command System (ICS) Sections; the Office of the Governor of Guam; Guam Emergency Management Healthcare Coalition (GEMHCC), and representatives of the local Media.

**Participants:**

U.S. Department of Health and Human Services (both ASPR and CDC), Department of Homeland Security / Federal Emergency Management Agency (FEMA), Department of Public Health and Social Services (DPHSS), Army Corps of Engineers (USACE), Private Sector



## Health Care Provider After Action Report/Improvement Plan

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Healthcare Clinics/Centers, Department of Agriculture (DOAg), Guam Visitors Bureau (GVB), Guam Police Department (GPD), Guam Fire Department (GFD), Guam Department of Education (GDOE), Port Authority of Guam (PAG), Mayor's Council of Guam (MCOG), A.B. International Airport Authority (GIAA), Consolidated Commissions on Utilities (CCU), Guam Customs and Quarantine Agency (CQA), Guam Behavioral Health and Wellness Center (GBHWC), Guam Homeland Security/Office of Civil Defense (GHS/OCD), American Red Cross Guam Chapter (ARC), Salvation Army Guam Corps, Guam Chamber of Commerce, Guam Hotel and Restaurant Association (GHRA), Guam National Guard (GUNG), United States Air Force (USAF), United States Coast Guard Sector Guam (USCG), United States Naval Hospital Guam (USNH), Guam Regional Medical City (GRMC)

**Number of Participants:**

List the total number of Participating Agencies

- 26

## Health Care Provider After Action Report/Improvement Plan

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### SECTION 2: Exercise/Event Design Summary

#### Exercise Purpose and Design

The local and federal emergency declarations prompted the Guam Memorial Hospital Authority (GMHA) to take the lead in coordinating emergency response and recovery efforts for COVID-19. In response, GMHA updated and implemented portions of the Emergency Management Plan (EMP) and worked with key stakeholders to test and evaluate their EMPs and Emergency Operations Plans (EOPs).

GMHA's primary goals in response and recovery efforts were to:

- Conduct and maintain situational awareness. Activate and implement relevant GMHA Emergency Operations Plans.
- Establish a Hospital Incident Command System (HICS) and Hospital Command Centers (HCCs) to communicate and implement GMHA's EOPs as directed by GMHA Executive Leadership.
- Maintain communication with Guam and GMHA's Emergency Support Function 8 Coordinators to facilitate interaction with Guam's Emergency Operations Center.

#### Objectives and Capabilities

**The following objectives address planning, intelligence, communication, community preparedness and participation, and risk management capabilities:**

**Objective No. 1** - Continued preparedness, response, recovery, and mitigation phases via command, control, communications, and coordination between GMHA Hospital Incident Command Center (HCC), SNF/CIF Command Center, and other response partners (GHS/OCD and GEMHCC Members)

- GMHA's Pandemic Influenza Plan or similar plans should be activated to adapt specific procedures from various policies conforming to the operation and emergency response success.
- Activate GMHA's modified Hospital Incident Command Center, the COVID-19 Isolation Facility (CIF) Command Center at the SNF, and ESF-8 Coordinators. The COVID-19 emergency response affected the main hospital and the SNF/CIF, requiring two Incident Command Centers.

Continue using GMHA's HICS to ensure command, control, and communication between the hospital, SNF, Guam EOC, DPHSS ESF8/RAC, COVID-19 Non-emergency Transport Team, and other health and medical stakeholders, including alternate care sites (e.g., SNF/CIF, GRMC, ISOFAC, QFAC).



## Health Care Provider After Action Report/Improvement Plan

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**Objective No. 2** – Expanding GMHA's bed capacity and medical service capabilities for surge patients associated with COVID-19 and logistical readiness and documentation (e.g., medical supplies & equipment, utility systems).

- Monitor and report daily patient/resident census, bed capacities, negative pressure room usage, cardiac monitoring, ventilator usage (adult and neonatal), ER holding census, and other metrics to HHS and the Guam EOC to support requests for federal assistance in staffing, equipment, PPE, and supplies.
- Implement contingency plans to handle COVID-19 surges, including creating dedicated care units and overflow areas and relocating non-COVID units to expand capacity for surge events like mass casualties or active shooter incidents.
- Communicate and collaborate with Guam ESF8 (GMHA, DPHSS, GBHWC) located at the Guam EOC (within GHS/OCD) and other members of the Guam Emergency Management Healthcare Coalition (e.g., GUNG, GRMC, USNHG, GFD) for managing medical surge, medical supplies and equipment, healthcare professionals and/or use of facilities as needed, including the utilization/testing of the Guam ESAR-VHP.
- Communicate with DPHSS and GUNG for their assistance to help expand its existing capacities to accommodate the influx of patients, such as Mass Fatality (Morgue Container Reefer), about expanding GMH and Morgue storage capacities.
- Communicate logistical needs and support with DPHSS Laboratory for medical supplies (i.e., Pfizer Vaccine, Moderna Vaccine, Johnson and Johnson Vaccine, REGEN-COV (Casirivimab/imdevimab), Lilly (Bamlanivimab/Etesevimab), Vaccine, COVID-19 Test Kits (Antigen Rapid and Polymerase Chain Reaction (PCR), COVID-19 Booster Vaccines, etc.).

**Objective No. 3** - the preservation of our healthcare workers by adapting the latest evolving COVID-19 guidance and best practices published by the CDC and the WHO, translating them into GMHA COVID-19 Emergency Response Protocols for COVID-19 Standard Operating Procedures ensuring the safety of all patients and personnel.

- Create initial Decontamination (DECON) procedures for Front liners (GMHA and GFD/EMS) emergency response to mitigate unwanted transmission of the Coronavirus and safe work practices.
- Protect the safety and well-being of GMHA staff by employing new security screening measures at the Emergency Department and the hospital's main entrance as a standard precaution.
- Establish GMHA's Clinical Emergency Preparedness Team (CEPT) responsible for developing, monitoring, evaluating, and modifying hospital-wide policies, procedures, and protocols initiated by Medical Staff for clinical emergency preparedness services. Changes highlight pre-COVID-19 Standard Operating Procedures (SOP) or any new COVID-19 mandatory guidance for healthcare workers from the CDC, translated into user-friendly documents. Provide and document "Quality Patient Care in a Safe Environment" for all GMHA's patients and restrict patient visitation (when appropriate). The new protocols and procedures will be based on the latest CDC and WHO guidance and adapted to hospital

## Health Care Provider After Action Report/Improvement Plan

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operations for the healthcare workers' safety and Security decontamination (DECON) procedures.

**Objective No. 4** - Sustain Continuity of Operations (COOP) at the Hospital, Catholic Social Services (CSS), and SNF/CIF of Quality Patient and Resident Care Services in a Safe Environment.

- Plan discharges for qualified patients that ensure bed availability for COVID-19 Patients surging into the hospital.
- Track human resources (e.g., shift changes), medical supplies, equipment, and critical infrastructure status (e.g., emergency generators, HVAC system, etc.).
- Communicate with the media and Joint Information Center (JIC) to inform the community of any changes to the hospital's visiting hours.
- Ensure all communications lines are open via phone, iConnect radios, and Motorola radios to the Hospital Command Center.
- Build additional Negative Pressure/BUV capability in patient rooms to ensure a safe working environment.

**Objective No. 5** - Ongoing Response Operations Safety Just In Time (JIT) Training.

- JIT training in the Hospital Command Center with new personnel and refresher training with existing personnel to include staff competency checks by Safety Department to ensure proficiency.

### Scenario Summary

Due to its rapidly changing nature, the COVID-19 pandemic required constant reassessment and flexibility. Strong organizational leadership and communication were essential, involving quick decision-making, strategic planning of resources, and consistent support for staff. Leaders had to adjust to evolving conditions, manage resources effectively, and maintain open communication with and motivation for their teams. Transparency and reassurance were key, requiring clear communication with both internal and external stakeholders. Continuously monitoring outcomes and collecting feedback were crucial for refining GMHA's emergency response. In summary, the pandemic highlighted the vital role of adaptability, leadership, and communication in navigating unprecedented crises.

The COVID-19 pandemic involved a responsive and adaptable approach as it unfolded unpredictably. Management and staff maintained relentless vigilance and adaptability. Organizational leadership was instrumental in addressing the crisis, requiring quick decisions and proactive management of resources and staff. Leaders had to continually reassess and adjust their strategies to cope with emerging issues, such as patient surges and evolving healthcare guidelines. Timely and effective communication was essential to ensure that healthcare professionals and the public received timely, accurate information, helping build trust and promote adherence to changing protocols. Additionally, monitoring key performance



## **Health Care Provider After Action Report/Improvement Plan**

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indicators and collecting feedback allowed for ongoing improvements in the hospital's response efforts, revealing both strengths and areas for growth. This experience underscored the importance of resilience and cohesive leadership in managing and mitigating the impact of such a significant public health emergency.

As a result, GMHA created the Infection Prevention and Control Committee (IPCC) to address immediate emergency management needs related to infectious diseases. This committee formed the Clinical Emergency Preparedness Team (CEPT) to address protocols, policies, and procedures such as The Novel Infectious Disease of Concern (NIDC) Response Plan.



## Health Care Provider After Action Report/Improvement Plan

### Response & Recovery Sequence of Events

Calendar Year 2022 (CY2022)

January 8, 2022 - March 31, 2022 Surge 3:

During Peak Surge 3, COVID-19 created an immediate threat to the general public's health and safety, requiring emergency response and protective measures. GMH provided protective measures for public health emergencies. This emergency threatened the lives, health, and safety of the public. Table 1 shows from CY 2022, from January through March, thousand hundred forty (1,140) patients were admitted and treated for COVID-19 over a three (3) month period.

Table 1. GMH COVID-19 Patient Census Admitted to GMH Care Units During Surge 3

MONTH	CY2022
January	361
February	608
March	171
TOTAL	1140

Source: GMH COVID-19 Admissions submitted to Federal Emergency Management Public Assistance Program Project No. 676924 CATEGORY B - Emergency Protective Measures GMHA - COVID-19 Surge Medical Staffing Contract Nurses Peak Surge 3 (January 8, 2022 – March 31, 2022)

As of February 8, 2022, the Department of Public Health and Social Services (DPHSS) reported eight hundred forty-four (844) new cases of COVID-19 from one thousand nine hundred ninety (1,990) specimens analyzed on February 7, 2022.

Guam Homeland Security produced an Incident Action Plan from February to March 2022. Guam remained in the Pandemic Condition of Readiness 3 (PCOR3). This report identified COVID-19 risks to the hospital. In response to these risks, the hospital implemented and maintained safety and protective measures for staff, visitors, and healthcare workers.

GMH created a contingency plan for unexpected patient surges such as the Skilled Nursing Facility/ Alternate Care site (SNF/ACS). GMHA developed a system to manage and reduce unexpected surges of positive ambulatory and non-ambulatory COVID-19 patients. The hospital established strategies for promoting patient safety, identifying risks, and evidence-based practices. GMH formed a program to identify and analyze strategies promoting patient safety from nurses' perspectives. GMH created negative pressure care units within the hospital. The hospital established a 3-stage zone process before entering or exiting identified exclusion zones within the care units (hot, warm, and cold). GMH developed and implemented a modified decontamination (Policy title "Adapted Technical Decontamination in the Environment of Care" Safety and Security Departments Policy) procedure specifically for COVID-19. The modified decontamination policy addresses entering and exiting exclusion

## Health Care Provider After Action Report/Improvement Plan

zones within the care units (I-VI, COVID HD) to ensure maximum personnel safety and containment.

GMH created a hospital-wide hazardous process policy that safely and effectively transfers COVID-19-positive patients throughout the various departments and services within the Hospital (Policy title "Transfer-19 procedure" Safety and Security Departments Policy). This coordinated procedure alerts everyone in the hospital about transferring COVID-19-positive patients using identified pre-determined routes. These routes minimize or eliminate any unnecessary risks of exposure.

GMH created Conditions of Readiness Access Levels (C.O.R.A.L.) Safety and Security policy. This policy is activated during any emergency response, mitigation effort, and recovery operation the hospital may engage in.

The hospital developed an INCIDENT ACTION PLAN SAFETY ANALYSIS (ICS215A) policy to accommodate various restriction levels of access for all GMHA facilities. This manifested 100% occupancy accountability required for a safe, secure, and controlled operational environment.

Guam Homeland Security/Office of Civil Defense Emergency Operations Center (EOC) announced that as of February 12, 2022, **EOC Level 2 Activation** was modified further to 0800-1700 shifts only (8/7 operations). [EOC Level 2 Activation staffing means Level 3 staffing plus select Emergency Support Functions (ESF) will change to modified **EOC Level 3 Activation**, 0800-1700 shifts only, Monday to Friday only (8/5 operations). [EOC Level 3 Activation staffing means GHS/OCD leadership, command staff, and select staff members. Select RACs/ESF Coordinators will operate from their respective agencies.] During this time, Agency Briefings, Situation Report development, Incident Action Plan development, and Agency Situation/Status Board updating will continue virtually. Likewise, the maintenance of the RAC's ICS-214 and message/resource request processes via the Disaster LAN will continue.

April 1, 2022 - June 30, 2022 Surge 4:

GMH experienced another surge from April to June 2022. Table 2. GMH COVID-19 Patient Census reflects an increase in patients. Three hundred eighty-seven COVID-19-positive patients were admitted to GMH.

Table 2. GMH COVID-19 Patient Census Admitted to GMH Care Units During Surge 4

MONTH	CY2022
April	104
May	71
June	212
TOTAL	387

Source: GMH COVID-19 Admissions submitted to Federal Emergency Management Public Assistance Program Project No. 698742 CATEGORY B - Emergency Protective Measures GMHA - COVID-19 Surge Medical Staffing Contract Nurses Peak Surge 4 (April 1, 2022 – June 30, 2022)

## Health Care Provider After Action Report/Improvement Plan

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Policy 6201-60 established the Infection, Prevention, and Control Committee (IPCC) on May 5, 2022. The IPCC formed the Clinical Emergency Preparedness Team (CEPT) to address immediate emergency management needs related to infectious diseases. The Clinical Emergency Response Team (CEPT) created or updated numerous policies and procedures. The CEPT researched and developed a comprehensive "All-Hazards" Emerging Infectious Disease Plan. The Novel Infectious Disease of Concern (NIDC) Response Plan is undergoing the hospital's review and endorsement certification process. The GMHA Emergency Preparedness Manual will incorporate the NIDC Response Plan for Infectious Diseases.

GMHA notified the Joint Information Center on June 4, 2022, of Guam's three hundred sixty-fifth (365<sup>th</sup>) COVID-19-related fatality. The patient was a forty-nine (49) year-old male, vaccinated with one booster, with underlying health conditions, who tested positive on May 8, 2022.

As of June 21, 2022, the Guam Department of Public Health and Social Services (GDPHSS) reported thirty-three (33) new COVID-19 cases from tests performed from December 16, 2022, to December 18, 2022, bringing the total to fifty-nine thousand seven hundred nine (59,709) cases. There were seven (7) COVID-19-related hospitalizations, including four hundred eleven (411) deaths and five (5) COVID-19-related hospitalizations.

To alleviate the overcrowding of COVID-19 deceased, GMH requested, through the emergency operation center (EOC), assistance from supporting private sector and government agencies to establish a temporary morgue.

The Guam Immunization Program reported that as of September 21, 2022, one hundred forty thousand one hundred eight (140,108) eligible residents (six months and older) were fully vaccinated. These totals included fourteen thousand fifty-five (14,055) residents aged twelve to seventeen. Nine thousand seventy-seven (9,077) residents aged five to eleven received their first dose of a two-dose series. In contrast, seven thousand four hundred forty-seven (7,447) residents in the same age group have completed their two-dose series. Two hundred forty-nine (249) residents aged six (6) months to four (4) years received their first dose of a two (2) dose series. Additionally, seventy thousand six hundred sixty-seven (70,667) eligible residents have received their first (1<sup>st</sup>) booster shots, and twelve thousand seven hundred six (12,706) eligible residents received their second (2<sup>nd</sup>) booster shot.

July 1, 2022 - December 31, 2022 Surge 5:

GMH experienced Surge 5 from July until December 2022. Table 3. GMH COVID-19 Patient Census indicates an increase in patients. One thousand fifty-seven (1,057) COVID-19-positive patients admitted to GMH.

Table 3. GMH COVID-19 Patient Census Admitted to GMH Care Units During Surge 5



## Health Care Provider After Action Report/Improvement Plan

MONTH	CY2022
July	234
August	406
September	224
October	13
November	54
December	126
<b>TOTAL</b>	<b>1057</b>

Source: GMH COVID-19 Admissions submitted to Federal Emergency Management Public Assistance Program Project No. 713199 CATEGORY B - Emergency Protective Measures  
GMHA - COVID-19 Surge Medical Staffing Contract Nurses Peak Surge 5 (July 1, 2022 – December 31, 2022)

In July 2022, GMHA launched the Newborn Intensive Care Unit (NICU) Telemedicine Service. GMH continued to serve as Guam's primary COVID-19 hospital throughout the pandemic. The hospital's employees were instrumental in addressing the crisis through robust preparedness, response, recovery, and mitigation efforts. Effective command, control, communications, and coordination were maintained between the GMHA Hospital Command Center (HCC), the SNF/CIF Command Center, and other response partners such as GHS/OCD and GEMHCC members.

The Care Units and Clinical Emergency Preparedness Team (CEPT) at GMHA remained active and responsive to the ever-evolving situation. Continuous and consistent evaluations allowed for timely adjustments to protocols and procedures, ensuring that the hospital could adapt to current conditions and maintain situational awareness throughout the pandemic.

.As of December 19, 2022, the Joint Information Center (JIC) Release No. 1156 reported a total of fifty-nine thousand seven hundred nine (59,709) officially reported COVID-19 cases, four hundred eleven (411) deaths, seventy-five (75) cases in active isolation, and fifty-nine thousand two hundred twenty-three (59,223) cases not in active isolation.

As part of the COVID-19 recovery, the Federal Emergency Management Agency (FEMA) provided public Assistance grants.

# Health Care Provider After Action Report/Improvement Plan

## Improvement Plan

The plan was developed specifically for the Guam Memorial Hospital Authority (GMHA) to make the necessary plan (TCRP) improvements based upon the summarized information contained within this After Action Report feedback from the incident; email messages; chat group messages; and the feedback generated from the COVID-19

Required Improvement / Recommendation	Describe Corrective Action Completed	Primary Responsible Leaders(s)	Responsible Department(s)	Start Date	Completion Date
<p>GMHA's Pan-Flu Plan did not correctly guide the hospital to COVID-19. COVID-19 was unique as a new virus that no one adequately prepared for. No one predicted this emergency to go on for over 33+ months. A comparable Pandemic had not been seen in over 100 years. GMHA had to adapt to the situation using the most stringent infection control measures and incorporate the best practices to adapt to the problem to the best of our ability regarding stand precautions and airborne isolation.</p> <p>GMHA will need to develop an updated Pandemic Plan incorporating previously developed protocols that remain relevant depending on the situation.</p>	<p>The Clinical Emergency Response Taskforce, known as the Clinical Emergency Preparedness Team (CEPT), researched and developed a new "All-Hazards" Emerging Infectious Disease Plan referred to as the Novel Infectious Disease of Concern (NIDC) Response Plan. This plan is undergoing committee review and endorsement certification.</p>	<p>GMHA CEPT Infection Control Planning</p>	<p>Infection Control Clinical Departments Planning</p>	<p>September 2022</p>	<p>February 2023</p>
<p>Build additional capabilities and capacities in existing units, such as more electrical circuits to power medical equipment and more negative pressure capabilities through the units, and procure additional central monitoring systems for telemetry services.</p>	<p>Request for assistance with external local and federal partners to assist GMHA Complete A/E Design and Construct/Renovate</p>	<p>GMHA Leadership Team</p>	<p>Applicable Divisions/Departments, FM, Planning, Nursing, Compliance</p>	<p>August 2020</p>	<p>September 2020</p>
<p>Create a Clinical Emergency Preparedness Team (CEPT) task force to develop COVID-19 protocols and staff to use as guidance that ensures proper procedures and best practices incorporated for the overall safety of all.</p>	<p>Creation of a Clinical Emergency Disseminate a circular to inform all staff that they are "essential."</p>	<p>GMHA Leadership Team</p>	<p>All GMHA Clinical Departments Nursing, Infection Control,</p>	<p>June 2020</p>	<p>Aug 2021</p>
<p>Monitor/Update/Publish daily hospital inventory burn rate for staff situational awareness.</p>	<p>In Collaboration with Materials Management, share the burn rate with the Emergency Operations Center for</p>	<p>GMHA Leadership Team</p>	<p>Materials Management Department, Incident Commander</p>	<p>April 2020</p>	<p>June 2021</p>



## Health Care Provider After Action Report/Improvement Plan

### GMHA IMPROVEMENT PLAN (CONT'D)

Required Improvement / Recommendation	Describe Corrective Action Completed	Primary Responsible Leaders(s)	Responsible Department(s)	Start Date	Completion Date
corporate Burn rate for GMHA inventory id distribution to maximize supply count, avoiding over-distribution;	Situational awareness, support, and assistance to ensure hospital supplies and equipment availability are priorities during this Public Health Emergency.  Activate during Pandemic Emergencies and send to Guam Emergency Operations Center.	GMHA Leadership Team	Materials Management Department, Incident Commander	March 2020	May 2023
Training in the Hospital Command Center th new personnel.  ncrease N-95 Fit Testing and certified fit- sters through 3M.	<ul style="list-style-type: none"> <li>The incident commander initiated and guided the safety and security administrator to work with the staff nurse-training officer and other nursing departments to collaborate and train clinical and non-clinical staff (new staff). GMH provided orientation onboarding to new staff.</li> </ul> <p>DECON training, PPE Donning and Doffing procedures, and N-95 Fit Testing certification for all newly hired GMHA staff, travel nurses on boarding, DoD clinical staff, GUNG Medics, and all other new contracted personnel provided by the hospital.</p>	GMHA Leadership Team	All GMHA Departments/ Units	April 2020	May 2023



## Health Care Provider After Action Report/Improvement Plan

### APPENDIX A: ACRONYMS ACRONYMS

Acronym	Meaning
AAR/IP	After Action Report/Improvement Plan
ASPR	Administration for Strategic Preparedness and Response
ARC	American Red Cross Guam Chapter
USACE	Army Corps of Engineers
CEP	Care Units & Clinical Emergency Preparedness
CEPT	Care Units & Clinical Emergency Preparedness Team
CIF	COVID Isolation Facility
DECON	Decontamination
CDC	Centers for Disease Control
CCU	Consolidated Commissions on Utilities
COVID-19	Coronavirus 2019
COR	Condition of Readiness
CBRNE/WMD	Chemical, Biological, Radiological, Nuclear and Explosives/Weapons of Mass Destruction
CY	Calendar Year
DOAg	Department of Agriculture
DHS	Department of Homeland Security
FEMA	Federal Emergency Management Agency
DPHSS	Department of Public Health and Social Services
DOA	Department of Administration
DoD	Department of Defense
EMP	Emergency Management Plan
EOC	Emergency Operations Center
EOP	Emergency Operations Plan
ESF8	Emergency Support Function 8
FBI	Federal Bureau of Investigation
FSE	Full-Scale Exercise/Event
GBHWC	Guam Behavioral Health and Wellness Center
GDOE	Guam Department of Education
GEMHCC	Guam Emergency Management Healthcare Coalition
GFD	Guam Fire Department
GIAA	Guam A.B. International Airport Authority
GHS/OCD	Guam Homeland Security/Office of Civil Defense
GHRA	Guam Hotel and Restaurant Association
GMHA	Guam Memorial Hospital Authority
GMH	Guam Memorial Hospital
GUNG	Guam National Guard
GPD	Guam Police Department
GRMC	Guam Regional Medical Center
GVB	Guam Visitors Bureau
HAIs	Healthcare-associated infections (HAIs)/conditions
HICS	Hospital Incident Command/Center System
IC	Incident Commander
IPCC	Infection Prevention and Control Committee
JIC	Joint Information Center
MCP	Mass Casualty Plan
MCOG	Mayor's Council of Guam
MEC	Medical Executive Committee
NIDC	Novel Infectious Diseases of Concern (NIDC) Response Plan
NIS	None in Stock
NWS	National Weather Service
O2	Oxygen
OR	Operating Room
PAG	Port Authority of Guam
PPE	Personal Protective Equipment
SNF/ACS	Skilled Nursing Facility-Alternate Care Site
SNF/CIF	Skilled Nursing Facility-COVID Isolation Facility (CIF)
TCRP	Tropical Cyclone Response Plan

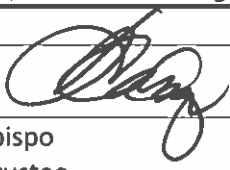
## **Health Care Provider After Action Report/Improvement Plan**

**End of Report.**

**GUAM MEMORIAL HOSPITAL AUTHORITY  
REVIEW AND ENDORSEMENT CERTIFICATION**

The signatories on this document acknowledged that they have reviewed and approved the following:

<input type="checkbox"/>	Bylaws	Submitted by Department/Committee: Planning Department
<input type="checkbox"/>	Rules and Regulations	Policy No.:
<input type="checkbox"/>	Policies & Procedures	
<input checked="" type="checkbox"/>	Other: Reports	<p>Guam Memorial Hospital Authority Health Care Provider After Action Report/Improvement Plan (AAR/IP)</p> <p>COVID-19 2022 After Action Report (AAR)/Improvement Plan (AAR/IP) SNF</p>

Reviewed/Endorsed	Date	Signature
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Reviewed/Endorsed	Date	Signature
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Title	Dr. Jeffrey Shay, MD Chairperson, Medical Executive Committee	
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Title		


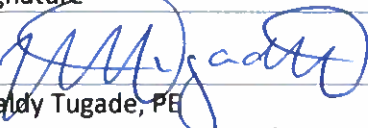
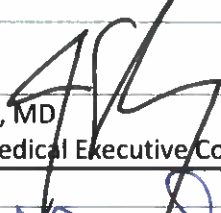
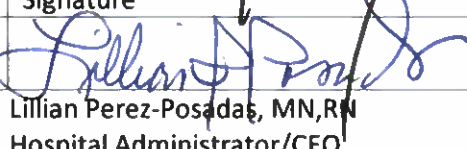

\*Use more forms if necessary. All participating departments/committees in developing the policy should provide signature for certification prior to submitting to the Compliance Officer



**GUAM MEMORIAL HOSPITAL AUTHORITY  
REVIEW AND ENDORSEMENT CERTIFICATION**

The signatories on this document acknowledged that they have reviewed and approved the following:

<input type="checkbox"/>	Bylaws	Submitted by Department/Committee: Planning Department
<input type="checkbox"/>	Rules and Regulations	Policy No.:
<input type="checkbox"/>	Policies & Procedures	
<input checked="" type="checkbox"/>	Other: Reports	<p>Guam Memorial Hospital Authority Health Care Provider After Action Report/Improvement Plan (AAR/IP)</p> <p>COVID-19 2022 After Action Report (AAR)/Improvement Plan (AAR/IP) SNF</p>

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Title		Therese Obispo Board of Trustee
Reviewed/Endorsed	Date	Signature
Title		

\*Use more forms if necessary. All participating departments/committees in developing the policy should provide signature for certification prior to submitting to the Compliance Officer

**Health Care Provider After Action Report/Improvement Plan (AAR/IP)**

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**Guam Memorial Hospital Authority**

**Health Care Provider  
After Action Report/Improvement Plan (AAR/IP)**

**PANDEMIC EMERGENCY RESPONSE TO CORONAVIRUS  
DISEASE (COVID-19)**

**CALEDNAR YEAR 2022 (CY 2022)**

**Actual Naturally Occurring Event Qualifying as a Community-  
Wide Full-Scale Exercise/Event (FSE)**

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**Prepared by  
Planning Department**

**Prepared for**

**SKILLED NURSING FACILITY/ALTERNATE CARE SITE  
(SNF/ACS)**

**Event Dates:  
March 19, 2020 – May 11, 2023**

**Report Date:  
May 16, 2024**



## Health Care Provider After Action Report/Improvement Plan

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## Health Care Provider After Action Report/Improvement Plan

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### Administrative Handling Instructions

1. Title: Guam Memorial Hospital Authority (GMHA) Health Care Provider After Action Report/Improvement Plan (AAR/IP) Coronavirus 2019 (COVID-19) Community-Wide Full-Scale Exercise/Event (FSE)
2. This AAR/IP classified sensitive information should not be disclosed and should be for official use only (FOUO). Safeguard, handle, transmit, and store by appropriate security directives. GMHA prohibits the reproduction of this document, in entirety or in part, without prior approval from GMHA.
3. At a minimum, dissemination of attached materials is only allowed on a need-to-know basis. When unattended, store in a locked container or area offering sufficient protection against theft, compromise, inadvertent access, and unauthorized disclosure.

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## Health Care Provider After Action Report/Improvement Plan

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### Executive Summary

This After-Action Report/Improvement Plan (AAR/IP) overviews the full-scale exercise event related to Coronavirus 2019 (COVID-19). It aims to support the Skilled Nursing Facility (SNF/ACS) and partner agencies by enhancing their responses and recovery efforts for future emergency declarations.

The Skilled Nursing Facility (SNF) is also referred to as the Skilled Nursing Unit (SNU). The SNF represents the building, and the SNU represents the clinical unit of Guam Memorial Hospital Authority.

The overall goal of GMHA's emergency response is to minimize serious illness and overall deaths and to provide continuous life-sustaining services in coordination and collaboration with the Guam EOC/Unified Command with a primary focus on the Health and Medical Emergency Support Function 8 (ESF8) roles and responsibilities.

The hospital initially activated a modified Incident Command system at SNF. GMH also implemented daily COVID-19 huddles, which included SNU, and developed several infectious disease policies and Clinical Standard Operating Procedures.

GMHA continued COVID-19 response and recovery efforts throughout CY 2022. The hospital displayed resiliency by adapting, overcoming shortfalls, and filling gaps where needed. This display of resiliency was demonstrated throughout the entire island. Island agencies unified and cooperated to progressively move forward, responding to and mitigating numerous issues (e.g., quarantine, isolation, additional staffing, additional Personal Protective Equipment or PPE, transportation). GMHA, certified by the CMS as a participating provider for Medicare and Medicaid services, complied with 42 CFR 483, titled *Requirements for Long Term Care Facilities*.

GMHA unofficially took the lead from the Department of Public Health and Social Services (DPHSS) for this public health emergency, providing needed leadership/guidance, staffing, interagency training, shared medical supplies and equipment, and accommodating numerous requests beyond our capability and capacity as a public hospital.

As part of the Island's COVID-19 response, GMH staff worked to convert wing B of the Skilled Nursing Facility into a COVID-19 Isolation Facility (CIF) to hold virus patients who no longer needed acute hospital care but were not ready for complete discharge. This helped free up much-needed acute care beds at GMH. COVID-19 emergency operations continued throughout CY 2022.

During patient surges from a mass casualty incident, the hospital activates its emergency protocol CODE RED to alert the Skilled Nursing Facility (SNF) to activate and convert SNF B-Wing to the Acute Care Site (ACS). The ACS receives Guam Memorial Hospital (GMH) patient overflow. This remains a part of GMHA's Emergency Management Plan (EMP) since 1995. Given challenging variables, GMHA trained its staff to be resilient, including mastering the hazard mitigation strategy of sheltering-in-place. Previously, no other facility or ACS could receive GMHA patients. This practice continues to be evident throughout the duration of the pandemic. GMHA transferred social case occupants from GMH to SNF/ACS. Social cases are defined as individuals with downgraded care levels who no longer need acute care but have no home to go to or no family to care for them. More acute care beds for

## Health Care Provider After Action Report/Improvement Plan

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COVID-19 and non-COVID-19 patients became available by decompressing the hospital. GMHA's Discharge Planning Team conducted assessments and determined that GMHA had to decompress its low-acuity social case patients to the SNF, creating additional capacity at the hospital.

### Major Strengths Identified During Exercise

GMHA/SNF activated its COVID-19 Incident Command Post to respond to and recover from the pandemic. This unprecedented event posed significant challenges for GMHA's management and staff relative to effectuating applicable emergency operations plans. Reflecting first on the positive aspects, GMHA's and SNF staff and management generated the following emergency response and recovery success stories:

- SNF effectively utilized various active Chat groups (e.g., GMHA Leadership, GMHA Executive and Divisional, SNF Administration headed by Dr. Vicente Duenas) as a primary mode of communication to implement and observe applicable parts of its response and establish and sustain a virtual Hospital Incident Command Center.
- SNF staff and Incident Command Post effectively implemented their respective response plan checklists that resulted in SNF/ACS maintaining a safe environment of care and sustaining continuity of quality patient care by (1) securing the entrance of the building fostered screening of staff before reporting to their respective duties. Before the public health emergency, SNF/ACS established a response plan to mitigate infection control within the facility; (2) diligently and tirelessly cleaning and mopping to dis-infect affected areas facility-wide as a result of the movement of staff and infected patients, and (3) SNF/ACS administration lead by SNF Nursing Supervisor created response a team dedicated only to SNF COVID-19 operations.

### Improvements Recommended:

SNF/ACS emergency response and recovery from COVID-19 identified several improvement opportunities during this event, as gathered from different departments involved in responding to this public health emergency. The primary areas for entry and exit were identified. Recommendations are listed and grouped according to the primary objectives to control infection at SNF/ACS aligned to CMS guidelines:

#### Improvement Opportunities and Recommendations:

- As critical situational information was communicated via various Chat groups, GMHA/SNF continued to utilize and rely upon Chat groups as another effective mode of communication during "all hazards" emergency response and recovery efforts, as it allowed GMHA to maintain a virtual Hospital Command Center throughout the emergency.
- Procure adequate and suitable PPEs and equipment.
- SNF/ACS stressed to all clinical staff and management that "essential" employee remains responsible for coordinating with their supervisors relative to GMHA's/SNF's implementation of its Emergency Management Plan and other Emergency Operations Plans. Disseminated a circular to all staff that all employees are "essential."



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- GMHA/SNF stressed to all staff and management that the "Post" shift will not be on standby. Staff will be on standby if called in to prepare for the upcoming shift.
- SNF/ACS Security and FM met with nursing and operations to prepare and maintain inventory levels for "all-hazards" events. Shortage and low pressure of the liquid oxygen filled from Island Equipment and distributed the portable oxygen tanks.
- Nurses will add portable HEPA filters in the unfavorable pressure rooms to their checklists in their units and departments.
- SNF developed a patient/visitor guide containing CMS's management plans.

## Health Care Provider After Action Report/Improvement Plan

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### SECTION 1: CY 2021 Exercise/Event Overview

Exercise/Event Name: COVID-19

Exercise/Event Start Date: **March 19, 2020**

Exercise/Event End Date: **May 11, 2023**

Duration: **1,149 Days**

#### Type of Exercise/Event Completed:

Check the type of exercise completed, as listed below

##### *Discussion-Based Exercise*

☐ Seminar

☐ Workshop

☐ Tabletop

☐ Games

##### *Operations-Based Exercise*

☐ Drill

☒ Full-Scale Exercise

☐ Functional Exercise

☒ Emergency Event

#### Capabilities

##### 1. Guam Homeland Security / Office of Civil Defense:

- a) Coordinate and support emergency response and recovery priority objectives.
- b) Establish and maintain a modified operational unified command structure and process that appropriately integrates all critical stakeholders during a potentially catastrophic event and
- c) Led the evaluation of the overall emergency response and recovery activities and plans related to power outages, port operations, mass care, critical infrastructure, and tourism.

##### 2. Guam Memorial Hospital Authority:

- a) Coordinate and support emergency response and recovery priority objectives, prepare the delivery of vital response equipment and services to Skilled Nursing Facility;
- b) Establish and maintain an operational unified command structure and process that appropriately integrates all critical stakeholders during a potentially unprecedented event and
- c) Lead the evaluation of the overall emergency response and recovery activities and plans related to power outages, A/C, and other circumstances that may impede facility operation.

##### 3. Skilled Nursing Facility/Acute Care Site (SNF/ACS):

- a) Implement GMHA's emergency response and recovery capabilities relative to internal Emergency Operations Plans (e.g., COVID-19 Response Plan to include Hospital Incident Command System, Interoperable Communications, and Collaboration with Internal Department Emergency Response Partners) and
- b) Evaluate GMHA's COVID-19 Response Plan for continuous life-sustaining services coordinating with the Guam EOC/Unified Command, focusing primarily on the Health and Medical Emergency Support Function 8 (ESF8) roles and responsibilities.



## Health Care Provider After Action Report/Improvement Plan

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### 1. Planning

The Emergency Management Plan (EMP) approved in November 2022 establishes a structured program addressing mitigation, preparation, response, and recovery for various disasters and emergencies. This approach, known as the "all hazards" approach, ensures the hospital is adequately prepared to handle a wide range of emergencies that affect the healthcare environment at Guam Memorial Hospital Authority (GMHA), including both Guam Memorial Hospital (GMH) and the Skilled Nursing Facility, also known as the Alternate Care Site (SNF/ACS).

### 2. Communication

SNF/ACS emergency management communications security and protocol focus on safeguarding communications equipment and systems, such as radios and telephones, during emergencies to prevent misuse or overloading.

### 3. Risk Management

The Guam Memorial Hospital Authority (GMHA) and the SNF/ACS, represented by the medical and administrative staff and the governing body, established an Infection Control Program to reduce the risk of acquiring and transmitting healthcare-associated infections (HAIs). An infection Control Orientation and In-Service policy will train staff in infection control for new and existing employees.

### 4. Community Preparedness & Participation

A staff, volunteer, and community vaccination program was established. COVID-19 testing implemented. GMH provided receipt storage and staging (RSS) for Guam and the outer islands.

### 5. Intelligence & Information Sharing & Dissemination

Data and analysis are critical in conducting risk assessments for potential threats and hazards. Various resources are accessible for gathering information, such as local and federal law enforcement agencies, FBI, Department of Homeland Security, Guam Homeland Security Office of Civil Defense, CDC, NWS, Fusion Center, and other relevant investigative entities. Briefings are held internally within the Hospital Incident Command Structure (HICS) and externally with GHS/OCD. Intelligence and information sharing also occur during department/unit meetings, called huddles, throughout emergency response operations.

**Scenario:** Actual naturally occurring event qualifying as a community-wide full-scale exercise/Event (FSE)

**Location:** Guam and Western Pacific Region

**Partners:**

The Guam Memorial Hospital Authority (GMHA) partners are as follows: Guam Medical Regional City (GRMC), the U.S. Naval Hospital Guam (USNHG), local and federal Emergency Medical Services (EMS), Department of Public Health & Social Services (DPHSS), the Guam Behavioral Health and Wellness Center (GBHWC). Agency partners: Guam Homeland Security/Office of Civil Defense (GHS/OCD) Unified Command to include all



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Emergency Support Functions and Incident Command System (ICS) Sections; the Office of the Governor of Guam; Guam Emergency Management Healthcare Coalition (GEMHCC), and representatives of the local Media.

**Participants:**

U.S. Department of Health and Human Services (both ASPR and CDC), Department of Homeland Security / Federal Emergency Management Agency (FEMA), Department of Public Health and Social Services (DPHSS), Army Corps of Engineers (USACE), Private Sector Healthcare Clinics/Centers, Department of Agriculture (DOAg), Guam Visitors Bureau (GVB), Guam Police Department (GPD), Guam Fire Department (GFD), Guam Department of Education (GDOE), Port Authority of Guam (PAG), Mayor's Council of Guam (MCOG), A.B. International Airport Authority (GIAA), Consolidated Commissions on Utilities (CCU), Guam Customs and Quarantine Agency (CQA), Guam Behavioral Health and Wellness Center (GBHWC), Guam Homeland Security/Office of Civil Defense (GHS/OCD), American Red Cross Guam Chapter (ARC), Salvation Army Guam Corps, Guam Chamber of Commerce, Guam Hotel and Restaurant Association (GHRA), Guam National Guard (GUNG), United States Air Force (USAF), United States Coast Guard Sector Guam (USCG), United States Naval Hospital Guam (USNH), Guam Regional Medical City (GRMC)

**Number of Participants:**

List the total number of Participating Agencies

- 
- 26

## **Health Care Provider After Action Report/Improvement Plan**

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### **SECTION 2: Exercise/Event Design Summary**

#### **Exercise Purpose and Design**

The Skilled Nursing Facility, also known as the Alternate Care Site (SNF/ACS) with the Nursing Department, coordinated emergency response and recovery efforts, prompting GMHA to implement its COVID-19 Response Plan. As a result, SNF/ACS and other critical stakeholders tested and evaluated their respective Emergency Management Plans (EMPs) and Emergency Operations Plans (EOPs).

The primary purpose of SNF/ACS's response and recovery efforts was to:

- Provide quality patient care to COVID-19 patients at the COVID-19 Isolation Facility (CIF) at the SNF.
- Conduct situational assessments, maintain situational awareness, and activate/implement applicable GMHA Emergency Operations Plans (e.g., GMHA COVID-19 Response Plan and any other applicable GMHA EOPs);
- Establish a Hospital Incident Command System (HICS) and Hospital Command Centers (HCCs), established first as a modified HCC/HICS located at the GMHA Command Center at the GMHA boardroom and then transitioned to a modified HCC/HICS via GMHA's Leadership Chat group. These modified HCCs/HICS were used as the means to manage communications and implement SNF/ACS applicable EOPs as deemed appropriate by GMHA Executive Leadership (e.g., Hospital Administrator/CEO or designee); and
- Establish and maintain communications with SNF/ACS - GMHA's Emergency Support Function 8 Coordinators (ESF8 Coordinators) to effectively liaise with Guam's Emergency Operations Center (EOC).

#### **Objectives and Capabilities**

##### **Planning and Intelligence Capabilities:**

**Objective No. 1** – SNF/ACS Situational COVID-19 - Updates, Reports, Awareness, and Preparedness fostered by communications between internal and external partners (e.g., GMHA Incident Command Post, SNF/ACS Admin, CDC Updates from DPHSS, JIC, GMHA Leadership Team).

- Activate GMHA's / SNF Response Plan;
- Activate GMHA's / SNF Command Center and Coordinators;
- Establish GMHA's HICS to effect command, control, and communications between GMHA's hospital, the Skilled Nursing Facility, the Guam EOC, and other possible Health and Medical Stakeholders.

##### **Intelligence and Communications Capabilities:**

## **Health Care Provider After Action Report/Improvement Plan**

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**Objective No. 2** Logistical Readiness and Documentation (e.g., Medical Supplies & Equipment, Utility Systems).

- Monitor bed capacities and capabilities and implement contingency plans to handle patient overflow or other emergencies (e.g., loss of critical infrastructure and essential resources); and
- Communicate and collaborate with Guam ESF8 (GMHA, DPHSS, GHS) located at the Guam EOC (within GHS/OCD) and other members of the Guam Emergency Management Healthcare Coalition (e.g., GRMC, USNHG, GFD) to manage medical surge, medical supplies and equipment, healthcare professionals, and use of facilities as needed, including the utilization/testing of the Guam ESAR-VHP.

### **Community Preparedness and Participation Capabilities:**

**Objective No. 3** - Continuity of Quality Patient and Resident Care Services in a Safe Environment.

- Entrance screening method for COVID-19 symptoms activated outside the main entrance and secondary entry point of SNF/ACS for staff and other essential personnel assisting and responding to COVID-19.
- Protect the safety and well-being of patients, visitors, and staff by employing safe work practices, standard precautions, environment of care assessments/rounds, and taking other proactive measures needed to remedy workplace hazards, and infections and prevent their reoccurrence and
- Track human resources (e.g., shift changes), medical supplies, and equipment and the status of critical infrastructure (e.g., Emergency Generators, HVAC System); communicate and coordinate shortfalls or system failures to Nursing Supervisor (the IC Designee) and executive leadership; and respond to resolve the same.
- Communications with the GFD or any private transport, transporting a COVID-19 patient into the facility and relaying to the COVID-19 charge nurse, SNF/ACS Security stationed on the primary and secondary entrance of SNF/ACS will assist and escort the patient to the designated route during the transfer.

### **Objective No. 4 – COVID-19 Patient Transfer to SNF/ACS Protocol**

- Activate the SNF/ACS Guard for arriving GFD, GMH, and private transport transferring COVID-19 patients. Make sure that they comply with all protocols set up by the GMHA Incident Commander and leaders regarding Proper PPEs, donning, and doffing procedures to avoid cross-contamination.
- Establish route of entry and exit protocol created by the GMHA COVID-19 Incident Commander, and SNF/ACS guards will guide, monitor, and coordinate to charge nurse or nurse station.



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### **Communications Capabilities**

**Objective No. 5** - SNF/ACS Ongoing maintenance of a safe and secure care environment.

- Ensure all communications lines are open via phone, I Connect radios, and Motorola radios to the Hospital Command Center, Nurse Station, and Security, assisting with screening and control.
- Establish the traffic flow pattern and overflow plan, which was created by the chief planner and approved by AAO.

### **Risk Management Capabilities**

**Objective No. 6** – Ongoing COVID-19 Response Plan

- Training in the Hospital Command Center with new personnel.
- Development of Skilled Nursing Facility (SNF/ACS) guide for screening and management plans to mitigate infection within facilities that address both GMH and SNF/ACS.

### **Scenario Summary**

COVID-19 was an evolving situation that required consistent evaluation and adjustments to meet changing conditions. Effective organizational leadership and communication were crucial for decision-making, planning, organizing resources, leading employees to achieve objectives, and monitoring outcomes.

The GMHA/SNF response to COVID-19 provided a comprehensive strategy for managing healthcare operations during the crisis, ensuring effective coordination, command, and control across GMHA's Hospital and Skilled Nursing Facility (SNF), as well as with key stakeholders such as the Guam Emergency Operations Center (EOC) and other health agencies. The plan involved activating the GMHA/SNF Command Center, establishing the Hospital Incident Command System (HICS) for communication, and monitoring bed capacity to manage medical surges. It also addressed critical infrastructure and resource management, including emergency generators and medical supplies, while ensuring collaboration with agencies like ESF8, DPHSS, and GHS to respond to the emergency effectively. Protocols were implemented to screen staff and essential personnel for COVID-19, maintain patient and staff safety through standard infection control practices, and track human resources and equipment needs.

Further, the plan outlined processes for safely managing COVID-19 patient transfers, including using proper personal protective equipment (PPE) and establishing entry and exit routes for patient transport. Security measures were enforced at both primary and secondary entry points of the SNF/ACS to prevent cross-contamination, with designated staff assisting with patient transfers and escorting them through the facility. Communication channels, including radios and phones, were set up to ensure ongoing coordination between the Hospital Command Center, nurse stations, and security. The plan also covered training programs for new personnel, traffic flow management, and creating an SNF/ACS guide to mitigate infection risks within the facility.

## **Health Care Provider After Action Report/Improvement Plan**

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The goal was to ensure a swift, organized, and safe response to healthcare needs during the public health emergency.

Additionally, SNU developed infectious disease policies, plans, and clinical Standard Operating Procedures to support the ongoing response to the crisis.

### **Response & Recovery Sequence of Events**

The Islands Pandemic Plan identified the Skilled Nursing Facility (SNF) as the designated COVID-19 Isolation Facility (CIF), a critical role in ensuring the safety of the community during the public health emergency. In preparation for this responsibility, a series of interagency preparedness meetings were conducted on-site at SNF to ensure the facility was ready to accommodate its 60-bed capacity for COVID-19 patients. These meetings focused on ensuring that SNF had the necessary supplies, materials, equipment, medications, and staffing to provide high-quality patient care in a safe and controlled environment. The facility's readiness was vital in meeting the urgent healthcare needs of the population, while minimizing the risk of virus transmission, especially to vulnerable populations.

To safeguard residents from potential exposure to COVID-19, a decision was made to relocate SNF's residents to the Guam Memorial Hospital (GMH). This was done out of concern for the virus's potential to spread to an already vulnerable group of individuals. In response, GMHA requested and was granted a waiver from the Centers for Medicare and Medicaid Services (CMS) as the Authority Having Jurisdiction (AHJ) to oversee the safety and well-being of the residents during this transition. Once residents were safely relocated to GMH, SNF was converted into the COVID-19 Isolation Facility (CIF). The original plan had been for SNF to remain operational as a long-term care facility while simultaneously being transformed into a CIF, with staffing and operational management provided by the Department of Public Health and Social Services (DPHSS). However, DPHSS, as the lead agency for public health emergencies, was overwhelmed by the magnitude of the situation and lacked sufficient staff, equipment, and training to meet the demands of managing a public health crisis on this scale. As a result, GMHA adapted its approach, taking over the management and operation of the CIF with its own staff, materials, and resources.

In January 2022, GMHA submitted an amendment to FEMA to support the SNF/Alternate Care Facility (ACF) project. The amendment was part of a broader initiative to respond to the Public Health Emergency declaration and ensure that the Government of Guam could provide safe, adequate healthcare to the community. An Alternate Care Site (ACS) or Alternate Care Facility (ACF) is designated as a "warm site," which means it remains ready to activate and provide additional capacity and capability during emergencies. The GMHA SNF, located in Barrigada Heights and certified by CMS to operate long-term care beds, was designated as Guam's All-Hazards ACS. This designation ensured that the facility remained prepared to provide vital services during both health crises and other emergencies, offering essential temporary healthcare capacity to help meet the community's needs.

SNF received two brand-new chillers to support daily and emergency operations. In addition, SNF Alternate Care Facility (ACF) materials arrived. They included fifty-four over-bed tables. Surveyed old equipment and replaced it with new tables.

March 2022: The contractor removed two containers, removed concrete bulkheads, and installed new concrete. Installed a new forty-foot container.

## **Health Care Provider After Action Report/Improvement Plan**

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April 2022- SNF/ACS received forty-eight (48) medical-surgical beds partially funded through the FEMA Public Assistance grant. Tagged, tested, and utilized beds

May 2022- SNF/ACS booster pump replacement completed. SNF requested an alternate vehicle to deliver meals to SNF.

August 2022-Guam experienced island-wide power outages. Submitted a DLAN ticket requesting to exempt GMHA & SNF/ACS from planned power outages. GPA responded to GMHA and SNF/ACS, acknowledging the request and concurring. Guam Memorial Hospital in Tamuning (GPA Feeder P401) and the Skilled Nursing Facility in Barrigada (GPA Feeder P311) are exempted from planned outages. Both facilities are not a part of the outage schedule and remain a priority for power service.



## Health Care Provider After Action Report/Improvement Plan

### Improvement Plan

The plan was developed specifically for the Guam Memorial Hospital Authority (GMHA) to make the necessary Plan (TCRP) improvements based upon the summarized information contained within this After Action Report feedback from the incident; email messages; chat group messages; and the feedback generated from the COVID-19

Required Improvement / Recommendation	Describe the Corrective Action Completed	Primary Responsible Leader(s)	Responsible Department(s)	Start Date	Completion Date
We will continue to utilize and rely upon chat groups as another effective mode of communication during "all hazards" emergency response and recovery efforts. They allowed us to maintain a virtual hospital command center throughout the event.	Utilize all effective modes of communication during EMP and EOP Activations (including chat groups).	GMHA Incident Command Post	All GMHA/SNF Divisions/Depts.	August 27, 2021	May 11, 2023
The COVID-19 Incident chat continues to remain operational for situational awareness following the end of the pandemic date of May 11, 2023					
Procure adequate and suitable PPEs	To be issued from every Department responding to the event	GMHA Leadership Team/SNF Administration	Applicable Divisions/Depts., SNF Administration / SNF Nursing	August 27, 2021	May 11, 2023
Nurses will add to their checklist in their units and departments the requirement that portable HEPA filters be in the negative pressure rooms.	Update Nursing Policies to include a checklist for portable HEPA filters.	GMHA Leadership Team SNF Admin	Applicable Divisions/Depts., Nursing	August 27, 2021	May 11, 2023

Required Improvement / Recommendation	Describe the Corrective Action Completed	Primary Responsible Leader(s)	Responsible Department(s)	Start Date	Completion Date
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GMH and SNF develop a patient/visitor guide containing the EOC management plans cited by CMS.	Distribute guides during EOP Activations at GMH and SNF.	GMHA Leadership Team	All GMHA Departments/ Units	August 2021	November 2021
SNF developed Systematic Entrance screening procedures in response to CMS citations.	This will be implemented at the SNF entrance on both the first and second floors.	GMHA/SNF Leadership Team	SNF Security	January 2021	November 2021
SNF Security created Entry and Exit protocols during patient transfer, BLS training, and the CNA certification tests to mitigate cross-contamination from outsiders taking the class to the resident.	Being implemented for better control of cross-contamination of infection	GMHA/SNF Incident Command Post	SNF Security	June 2021	December 2021

## Health Care Provider After Action Report/Improvement Plan

### APPENDIX A: ACRONYMS ACRONYMS

Acronym	Meaning
AAR/IP	After Action Report/Improvement Plan
APR	Administration for Strategic Preparedness and Response
ARC	American Red Cross Guam Chapter
AAJ	Authority Having Jurisdiction
AAO	Associate Administrator of Operations
USAGE	U.S. Army Corps of Engineers
CDC	Centers for Disease Control
CEP	Care Units & Clinical Emergency Preparedness
CIF	COVID-19 Isolation Facility
CCU	Consolidated Commissions on Utilities
CEO	Chief Executive Officer
COVID-19	Coronavirus 2019
COR	Condition of Readiness
CBRNE/WMD	Chemical, Biological, Radiological, Nuclear and Explosives/Weapons of Mass Destruction
CY	Calendar Year
DOAg	Department of Agriculture
DHS	Department of Homeland Security
FEMA	Federal Emergency Management Agency
DPHSS	Department of Public Health and Social Services
EMP	Emergency Management Plan
EOC	Emergency Operations Center
TOP	Emergency Operations Plan
ESF8	Emergency Support Function 8
FBI	Federal Bureau of Investigation
FSE	Full-Scale Exercise/Event
FM	Facilities Maintenance
GBHWC	Guam Behavioral Health and Wellness Center
GDOE	Guam Department of Education
GEMHCC	Guam Emergency Management Healthcare Coalition
GFD	Guam Fire Department
GIAA	Guam A.B. International Airport Authority
GHS/ OCD	Guam Homeland Security/Office of Civil Defense
GHRA	Guam Hotel and Restaurant Association
GMHA	Guam Memorial Hospital Authority
GMH	Guam Memorial Hospital
GUNG	Guam National Guard
GPD	Guam Police Department
GRMC	Guam Regional Medical Center
GVB	Guam Visitors Bureau
HAIs	Healthcare-associated infections (HAIs)/conditions
HICS	Hospital Incident Command/Center System
IC	Incident Commander
IPCC	Infection Prevention and Control Committee
JIC	Joint Information Center
MCP	Mass Casualty Plan
MCOG	Mayor's Council of Guam
NWS	National Weather Service
O2	Oxygen
OR	Operating Room
PAG	Port Authority of Guam
PPE	Personal Protective Equipment
SNF/ACS	Skilled Nursing Facility-Alternate Care Site
SNF/ACS-CIF	Skilled Nursing Facility/Alternate Care Site –COVID-19 Isolation Facility
TCRP	Tropical Cyclone Response Plan




## **Health Care Provider After Action Report/Improvement Plan**

**End of Report.**

**GUAM MEMORIAL HOSPITAL AUTHORITY  
REVIEW AND ENDORSEMENT CERTIFICATION**

The signatories on this document acknowledged that they have reviewed and approved the following:

<input type="checkbox"/>	Bylaws		Submitted by Department/Committee: Planning Department
<input type="checkbox"/>	Rules and Regulations		Policy No.:
<input type="checkbox"/>	Policies & Procedures		
<input checked="" type="checkbox"/>	Other: Reports		<p>Guam Memorial Hospital Authority Health Care Provider After Action Report/Improvement Plan (AAR/IP)</p> <p>COVID-19 2023 After Action Report (AAR)/Improvement Plan (AAR/IP) GMH</p>


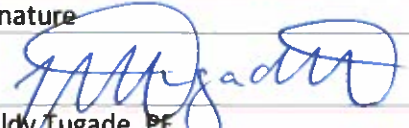
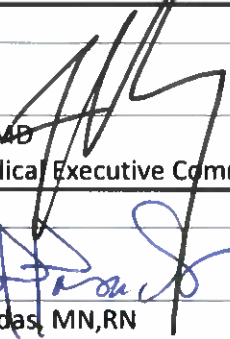
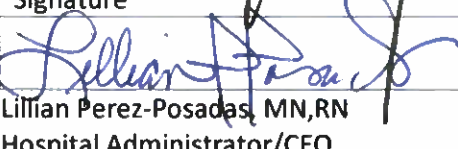

Reviewed/Endorsed	Date	Signature
Title	Therese Paula Pelayo, MBA, MSML Emergency Preparedness Director	
Reviewed/Endorsed	Date	Signature
Title	Rizaldy Tugade, PE Associate Administrator of Operations Chairperson, Environment of Care Committee	
Reviewed/Endorsed	Date	Signature
Title	Dr. Jeffrey Shay, MD Chairperson, Medical Executive Committee	
Reviewed/Endorsed	Date	Signature
Title	Lillian Perez-Posadas, MN,RN Hospital Administrator/CEO, Chairperson, Executive Management Council	
Reviewed/Endorsed	Date	Signature
Title	2/18/25	
Title	Theresa Obispo Board of Trustee	
Reviewed/Endorsed	Date	Signature
Title		

\*Use more forms if necessary. All participating departments/committees in developing the policy should provide signature for certification prior to submitting to the Compliance Officer

**GUAM MEMORIAL HOSPITAL AUTHORITY  
REVIEW AND ENDORSEMENT CERTIFICATION**

The signatories on this document acknowledged that they have reviewed and approved the following:

<input type="checkbox"/>	Bylaws	Submitted by Department/Committee: Planning Department
<input type="checkbox"/>	Rules and Regulations	Policy No.:
<input type="checkbox"/>	Policies & Procedures	
<input checked="" type="checkbox"/>	Other: Reports	<p>Guam Memorial Hospital Authority Health Care Provider After Action Report/Improvement Plan (AAR/IP)</p> <p>COVID-19 2023 After Action Report (AAR)/Improvement Plan (AAR/IP) GMH</p>

Reviewed/Endorsed	Date	Signature
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	11/27/2024	
Title		Dr. Jeffrey Shay, MD Chairperson, Medical Executive Committee
Reviewed/Endorsed	Date	Signature
	12/20/2024	
Title		Lillian Perez-Posadas, MN, RN Hospital Administrator/CEO, Chairperson, Executive Management Council
Reviewed/Endorsed	Date	Signature
		
Title		Therese Obispo Board of Trustee
Reviewed/Endorsed	Date	Signature
Title		

\*Use more forms if necessary. All participating departments/committees in developing the policy should provide signature for certification prior to submitting to the Compliance Officer



**GUAM MEMORIAL  
HOSPITAL AUTHORITY**

# Health Care Provider After Action Report/Improvement Plan

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## Health Care Provider After Action Report/Improvement Plan

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### Administrative Handling Instructions

1. Title: Guam Memorial Hospital Authority (GMHA) Health Care Provider After Action Report/Improvement Plan (AAR/IP) Coronavirus 2019 (COVID-19) Community-Wide Full-Scale Exercise/Event (FSE)
2. This AAR/IP is classified as sensitive information that should not be disclosed and is For Official Use Only (FOUO). Safeguard, handle, transmit, and store following appropriate security directives. GMHA prohibits the reproduction of this document, in entirety or in part, without prior approval from GMHA.
3. Dissemination of attached materials is only allowed on a need-to-know basis. When unattended, they should be stored in a locked container or area, offering sufficient protection against theft, compromise, inadvertent access, and unauthorized disclosure.
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## **Health Care Provider After Action Report/Improvement Plan**

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### **Executive Summary**

The After Action Report/Improvement Plan (AAR/IP) provides an overview of the full-scale exercise conducted in response to the Coronavirus 2019 (COVID-19) pandemic. Its primary goal is to support Guam Memorial Hospital (GMH) and its partner agencies in enhancing their emergency response capabilities and recovery efforts, with a focus on improving future responses to similar crises.

The GMH emergency response aimed to minimize severe illness and death while ensuring the continuation of life-sustaining services. The hospital achieved Life safety through close coordination with the GMHA Hospital Incident Command System (HCIS), Guam Homeland Security/Office of Civil Defense (GHS/OCD), and the Guam Emergency Operations Center (EOC)/Unified Command. Special attention was given to the roles and responsibilities outlined within the Health and Medical Emergency Support Function 8 (ESF8). This AAR/IP aims to advance and enhance overall response effectiveness for future emergencies by identifying strengths and areas for improvement.

During the COVID-19 pandemic, GMH was Guam's primary hospital for COVID-19 care. The hospital's staff managed the crisis effectively through strong command, control, and communication, working closely with key partners such as the GMHA Hospital Incident Command System (HICS), the Skilled Nursing Facility COVID Isolation Facility (SNF/CIF) Command Center, GHS/OCD, and the Guam Emergency Management Healthcare Coalition (GEMHCC).

The Infection Prevention and Control Committee (IPCC) and the Medical Executive Committee (MEC) developed protocols to prevent and control healthcare-associated infections (HAIs) and other conditions. To improve the process, the IPCC created the Clinical Emergency Preparedness Team (CEPT) to enhance the process of developing and distributing COVID-19 protocols. By adopting an "all hazards" approach, the CEPT established and implemented policies that made protocols more accessible and streamlined the hospital's response.

A key initiative of the CEPT was the creation of the Novel Infectious Disease of Concern (NIDC) Response Plan, which outlined the hospital's approach to emerging infectious diseases. Additionally, the CEPT developed the "Transfer-19 Procedure" policy, which standardized the safe transfer of COVID-19-positive patients within the hospital. The CEPT and GMHA's Care Units played a critical role in adapting to the pandemic's evolving challenges. Through ongoing evaluations and assessments, they made timely adjustments to strategies and operations, ensuring effective situational awareness and a swift response.

Additionally, GMH implemented the Conditions of Readiness Access Levels (CORAL) policy to streamline emergency response and recovery efforts and created The Incident Action Plan Safety Analysis (ICS215A) policy to ensure strict occupancy and access control across all GMH facilities, enhancing overall safety and security.

To address the challenge of COVID-19-related fatalities and avoid overcrowding, GMH coordinated with the GHS/EOC and enlisted support from both private and public sectors to establish a temporary morgue.

## **Health Care Provider After Action Report/Improvement Plan**

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Guam Memorial Hospital also encompasses the Skilled Nursing Facility, a long-term care operation. As part of the Island's COVID-19 response, GMH staff worked to convert the building into a COVID-19 Isolation Facility (CIF) to hold virus patients who no longer needed acute hospital care but were not ready for complete discharge. This process freed up much-needed acute care beds at GMH. GMHA processed, and the Federal Emergency Management Agency (FEMA) Public Assistance Grant Program obligated several COVID-19 reimbursements.

GMH also supported other Island front-liners in the fight against COVID-19. The hospital's team trained quarantine facility government staff on proper infection control protocols. GMH employees also initiated N95 Fit Testing and Certification training amongst several Government of Guam agencies. GMH was among the leading sites for front-liners and Island residents to get vaccinations when the vaccines were ready.

### **Situational Awareness**

Calendar Year 2023 (CY2023)

The hospital responded to the following COVID-19 peak surge:

Surge 6: January 1, 2023 - May 11, 2023.

The CEPT continued to establish and execute policies for the prevention of acquisition and control of healthcare-associated infections (HAIs)/conditions. The Clinical Emergency Preparedness Team (CEPT) improved the process of distributing the Clinical Emergency Preparedness COVID-19 protocols.

In the midst of responding to COVID-19, the hospital experienced unauthorized access to its network and systems on March 4, 2023. GMHA IT network and systems staff, in coordination and collaboration with interagency emergency response partners, discussed network and systems disaster restoration and rebuilding.

The hospital medical, clinical, and professional support staff responded by implementing a manual mode process to support COVID-19 patient care. The unauthorized access lasted forty-six (46) days, ending on April 18, 2023.

The Centers for Disease Control (CDC) announced that the federal COVID-19 Public Health Emergency declaration ended May 11, 2023.

GMHA finalized its comprehensive Infection Control Program, ensuring the organization has a functioning coordinated process to reduce the risk of endemic and epidemic Healthcare-Associated Infections (HAIs) and optimize the use of resources through a robust preventive program.

### **Major Strengths Identified During Exercise**

- Implemented forty 40 protocols for the clinical and operational management of COVID-19;
- Established a state-of-the-art Telehealth/Telemedicine and Physical Rounder two (2) Program to sustain lifesaving intensive and critical patient care services;
- Created a "War Room" Committee dedicated to the individual clinical management of COVID-19 patients;
- Created a daily briefing document and daily COVID huddles to ensure streamlined



## Health Care Provider After Action Report/Improvement Plan

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communication among all branches of the hospital;

- Established electronic daily wellness checks to mitigate the spread of COVID-19 amongst GMHA staff and keep up with crucial staffing levels.
- GMHA overcame identified challenges.

### Improvements Recommended:

- GMHA's Pandemic Flu Plan lacked guidance to address the unique challenges of COVID-19, a new virus. No one anticipated the emergency would last over thirty-three (33) months. GMHA adapted using stringent all-hazards infection control measures and best practices for airborne isolation.
- GMHA should update its Pandemic Flu Plan, incorporating relevant protocols and adaptable measures for future situations.
- With support from the Army Corps of Engineers and other agencies, GMHA expanded capacity by building additional units on the third and fourth floors to meet the growing patient demand.
- Relocated various units across the hospital and the Skilled Nursing Facility to maximize patient care areas during the COVID-19 surge.
- The Infection Prevention and Control Committee (IPCC) created a specialized clinical task force to analyze and interpret COVID-19 guidance to develop user-friendly protocols, ensuring hospital staff followed best practices for patient and staff safety.
- Infectious disease protocols created by the IPCC and the Medical Executive Committee (MEC) established and executed policies to prevent acquiring and controlling healthcare-associated infections (HAIs)/conditions. The hospital-wide committee directed the hospital's infection control program. Approved protocols by the IPCC were not readily available to all GMHA staff, and accessing those protocols was difficult. The Clinical Emergency Preparedness Team (CEPT) improved the process of distributing the Clinical Emergency Preparedness COVID-19 protocols. The CEPT adopted an "all hazards" approach to developing policies and protocols. The CEPT developed the Novel Infectious Disease of Concern (NIDC) Response Plan.
- Improved inventory management by incorporating a burn rate for GMHA supplies and coordinating with external agencies to ensure proper distribution and avoid overuse. Materials Management tracked and sent out daily burn rate reports.
- The Incident Commander directed the Safety and Security Administrator to collaborate with nursing departments to train new and onboarding staff in DECON procedures, PPE donning and doffing, and N-95 Fit Testing certification. The hospital provided to newly hired GMHA staff, travel nurses, DoD clinical staff, GUNG medics, and other contracted personnel.



## Health Care Provider After Action Report/Improvement Plan

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### SECTION 1: 2021–2023 Exercise/Event Overview

Exercise/Event Name: COVID-19

Exercise/Event Start Date: March 19, 2020

Exercise/Event End Date: May 11, 2023

Duration: 1,149 Days

#### Type of Exercise/Event Completed:

Check the type of exercise completed, as listed below

##### *Discussion-Based Exercise*

☐ Seminar

☐ Workshop ☐ Tabletop

☐ Games

##### *Operations-Based Exercise*

☐ Drill

☒ Full-Scale Exercise

☐ Functional Exercise

☒ Emergency Event

### Capabilities

#### 1. Guam Homeland Security / Office of Civil Defense:

- a) Coordinate and support emergency response and recovery priority objectives.
- b) Establish and maintain a modified operational unified command structure and process that appropriately integrates all critical stakeholders during a potentially catastrophic event and
- c) GHS/OCD led the evaluation of the overall emergency response and recovery activities and plans related to power outages, port operations, mass care, critical infrastructure, and tourism.

#### 2. Guam Memorial Hospital Authority:

- a) Implement GMHA's Pandemic Flu Plan and COVID-19 Clinical Emergency Preparedness Protocol (COVID-19) information/guidance published by the CDC and adapted to the hospital environment for emergency response and recovery. Capabilities include Hospital Incident Command System, Interoperable Communications, and Collaboration with federal and local emergency response partners.
- b) Create Infection control and decontamination policies, order best practices set forth by the CDC, and effectively respond throughout the pandemic.

### 1. Planning

The updated Emergency Management Plan (EMP) Policy 101 establishes a structured program addressing mitigation, preparation, response, and recovery for a variety of disasters and emergencies. This approach, known as the "all hazards" approach, ensures the hospital is adequately prepared to handle a wide range of emergencies that affect the healthcare environment at Guam Memorial Hospital Authority (GMHA), including both Guam Memorial

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Hospital (GMH) and the Skilled Nursing Facility, also known as the Alternate Care Site (SNF/ACS).

### **2. Communication**

To prevent misuse or overloading during emergencies, GMHA's emergency management communications security and protocols focused on safeguarding communication equipment and systems such as radios and telephones.

### **3. Risk Management**

GMHA established Care units and Clinical Emergency Preparedness (CEP) to manage risks associated with COVID-19. Executive management established a dedicated "War Room" for COVID-19 patient care. A state-of-the-art Telehealth/Telemedicine and Physical Rounder 2 Program was developed. The hospital conducted Daily COVID-19 huddles to streamline communication. The hospital established Daily Electronic Wellness checks to mitigate the spread of COVID-19 among staff and the public.

### **4. Community Preparedness & Participation**

The hospital established a staff, volunteers, and community vaccination program. COVID-19 Testing implemented. GMH provided receipts storage and staging (RSS) for Guam and the outer islands.

### **5. Intelligence & Information Sharing & Dissemination**

Data and analysis are critical in assessing potential threats and hazards. Various resources are accessible for gathering information, such as local and federal law enforcement agencies, the FBI, Department of Homeland Security, Guam Homeland Security Office of Civil Defense, CDC, NWS, Fusion Center, and other relevant investigative entities. Internal and external briefings were held within the Hospital Incident Command Structure (HICS) and with GHS/OCD. Intelligence and information sharing also occur during department/unit meetings, called huddles, throughout emergency response operations.

**Scenario:** Actual naturally occurring event qualifying as a community-wide full-scale exercise/Event (FSE)

**Location:** Guam and Western Pacific Region

**Partners:**

The Guam Memorial Hospital Authority (GMHA) partners are as follows: Guam Medical Regional City (GRMC), the U.S. Naval Hospital Guam (USNHG), local and federal Emergency Medical Services (EMS), Department of Public Health & Social Services (DPHSS), the Guam Behavioral Health and Wellness Center (GBHWC). Agency partners: Guam Homeland Security/Office of Civil Defense (GHS/OCD) Unified Command to include all Emergency Support Functions and Incident Command System (ICS) Sections; the Office of the Governor of Guam; Guam Emergency Management Healthcare Coalition (GEMHCC), and representatives of the local Media.

**Participants:**

US Department of Health and Human Services (both ASPR and CDC), Department of Homeland

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Security / Federal Emergency Management Agency (FEMA), Department of Public Health and Social Services (DPHSS), Army Corps of Engineers (USACE), Private Sector Healthcare Clinics/Centers, Department of Agriculture (DOAg), Guam Visitors Bureau (GVB), Guam Police Department (GPD), Guam Fire Department (GFD), Guam Department of Education (GDOE), Port Authority of Guam (PAG), Mayor's Council of Guam (MCOG), AB International Airport Authority (GIAA), Consolidated Commissions on Utilities (CCU), Guam Customs and Quarantine Agency (CQA), Guam Behavioral Health and Wellness Center (GBHWC), Guam Homeland Security/Office of Civil Defense (GHS/OCD), American Red Cross Guam Chapter (ARC), Salvation Army Guam Corps, Guam Chamber of Commerce, Guam Hotel and Restaurant Association (GHRA), Guam National Guard (GUNG), United States Air Force (USAF), United States Coast Guard Sector Guam (USCG), United States Naval Hospital Guam (USNH), Guam Regional Medical City (GRMC)

**Number of Participants:**

List the total number of Participating Agencies

- 26



## **Health Care Provider After Action Report/Improvement Plan**

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### **SECTION 2: Exercise/Event Design Summary**

#### **Exercise Purpose and Design**

The local and federal emergency declarations prompted the Guam Memorial Hospital Authority (GMHA) to take the lead in coordinating emergency response and recovery efforts for COVID-19. In response, GMHA updated and implemented portions and worked with key stakeholders to test and evaluate their Emergency Management Plans (EMPs) and Emergency Operations Plans (EOPs).

GMHA's primary goals in response and recovery efforts were to:

- Conduct and maintain situational awareness. Activate and implement relevant GMHA Emergency Operations Plans.
- Establish a Hospital Incident Command System (HICS) and Hospital Command Centers (HCCs) to communicate and implement GMHA's EOPs as directed by GMHA Executive Leadership.
- Maintain communication with Guam and GMHA's Emergency Support Function 8 Coordinators to facilitate interaction with Guam's Emergency Operations Center.

#### **Objectives and Capabilities**

**The following objectives address planning, intelligence, communication, community preparedness and participation, and risk management capabilities:**

**Objective No. 1** - Continued preparedness, response, recovery, and mitigation phases via command, control, communications, and coordination between GMHA Hospital Incident Command Center (HCC), SNF/CIF Command Center, and other response partners (GHS/OCD and GEMHCC Members)

- GMHA's Pandemic Influenza Plan or similar plans should be activated to adapt specific procedures from various policies conforming to the operation and emergency response success.
- Activate GMHA's modified Hospital Incident Command Center, the COVID-19 Isolation Facility (CIF) Command Center at the SNF, and ESF-8 Coordinators. The COVID-19 emergency response affected both the main hospital and the SNF/CIF, requiring two Incident Command Centers.

Continue using GMHA's HICS to ensure command, control, and communication between the hospital, SNF, Guam EOC, DPHSS ESF8/RAC, COVID-19 Non-emergency Transport Team, and other health and medical stakeholders, including alternate care sites (e.g., SNF/CIF, GRMC, ISOFAC, QFAC).

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**Objective No. 2** – Expanding GMHA's bed capacity and medical service capabilities for surge patients associated with COVID-19 and logistical readiness and documentation (e.g., medical supplies & equipment, utility systems).

- Monitor and report daily patient/resident census, bed capacities, negative pressure room usage, cardiac monitoring, ventilator usage (adult and neonatal), ER holding census, and other metrics to HHS and the Guam EOC to support requests for federal assistance in staffing, equipment, PPE, and supplies.
- Implement contingency plans to handle COVID-19 surges, including creating dedicated care units and overflow areas and relocating non-COVID units to expand capacity for surge events like mass casualties or active shooter incidents.
- Communicate and collaborate with Guam ESF8 (GMHA, DPHSS, GBHWC) located at the Guam EOC (within GHS/OCD) and other members of the Guam Emergency Management Healthcare Coalition (e.g., GUNG, GRMC, USNHG, GFD) for managing medical surge, medical supplies and equipment, healthcare professionals and use of facilities as needed, including the utilization/testing of the Guam ESAR-VHP.
- Communicate with DPHSS and GUNG for their assistance in expanding its existing capacities to accommodate the influx of patients, such as mass fatality (morgue container reefer), about expanding GMH and morgue storage capacities.
- Communicate logistical needs and support with DPHSS Laboratory for medical supplies (i.e., Pfizer Vaccine, Moderna Vaccine, Johnson and Johnson Vaccine, REGEN-COV (Casirivimab/imdevimab), Lilly (Bamlanivimab/Etesevimab), Vaccine, COVID-19 Test Kits (Antigen Rapid and Polymerase Chain Reaction (PCR), COVID-19 Booster Vaccines).

**Objective No. 3** - the preservation of our healthcare workers by adapting the latest evolving COVID-19 guidance and best practices published by the CDC and the WHO, translating them into GMHA COVID-19 Emergency Response Protocols for COVID-19 Standard Operating Procedures ensuring the safety of all patients and personnel.

- Create initial Decontamination (DECON) procedures for Front liners (GMHA and GFD/EMS) emergency response to mitigate unwanted transmission of the Coronavirus and safe work practices.
- Protect the safety and well-being of GMHA staff by employing new security screening measures at the Emergency Department and the hospital's main entrance as a standard precaution.
- Establish GMHA's Clinical Emergency Preparedness Team (CEPT) responsible for developing, monitoring, evaluating, and modifying hospital-wide policies, procedures, and protocols initiated by Medical Staff for clinical emergency preparedness services. Changes highlight pre-COVID-19 Standard Operating Procedures (SOP) or any new COVID-19 mandatory guidance for healthcare workers from the CDC, translated into user-friendly documents. Provide and document "Quality Patient Care in a Safe Environment" for all of GMHA's patients and restrict patient visitation (when appropriate). The new protocols and procedures will be based on the latest CDC and WHO guidance and adapted to hospital



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operations for the healthcare workers' safety and Security decontamination (DECON) procedures.

**Objective No. 4** - Sustain Continuity of Operations (COOP) at the Hospital, Catholic Social Services (CSS), and SNF/CIF of Quality Patient and Resident Care Services in a Safe Environment.

- Plan discharges for qualified patients that ensure bed availability for COVID-19 Patients surging into the hospital.
- Track human resources (e.g., shift changes), medical supplies, equipment, and critical infrastructure status (e.g., emergency generators, HVAC system).
- Communicate with the media and Joint Information Center (JIC) to inform the community of any changes to the hospital's visiting hours.
- Ensure all communications lines are open via phone, iConnect radios, and Motorola radios to the Hospital Command Center.
- Build additional Negative Pressure/BUV capability in patient rooms to ensure a safe working environment.

**Objective No. 5** - Ongoing Response Operations Safety Just In Time (JIT) Training.

- JIT training in the Hospital Command Center with new personnel and refresher training with existing personnel to include staff competency checks by Safety Department to ensure proficiency.

### Scenario Summary

The COVID-19 pandemic presented an evolving challenge that required continuous evaluation and adaptation. To navigate these changes, GMHA's leadership remained agile and responsive, regularly assessing the situation and adjusting strategies to ensure a relevant and practical response. By closely monitoring the crisis and integrating new information, the hospital effectively managed resources and maintained a high standard of patient care.

Strong leadership and communication were essential in this dynamic environment. Leaders excelled in decision-making, resource management, and guiding staff to achieve the hospital's objectives. Clear and consistent communication ensured that all employees were aligned with evolving plans and protocols, supporting the efficient execution of tasks and fostering a cohesive work environment. This collaboration was critical for monitoring outcomes and making timely adjustments to meet the ongoing challenges of the pandemic.

The pandemic highlighted the need for a responsive and adaptable approach, requiring vigilance and continuous reassessment of strategies in the face of patient surges and changing healthcare guidelines. Timely and effective communication built trust and promoted adherence to evolving protocols, while ongoing monitoring and feedback facilitated improvements in the hospital's response. Daily COVID-19 huddles ensured streamlined communication among all



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divisions of the hospital. This experience reinforced the importance of resilience, cohesive leadership, and adaptability in managing a public health crisis.

GMHA established the Infection Prevention and Control Committee (IPCC) to address urgent infectious disease management needs. The IPCC formed the Clinical Emergency Preparedness Team (CEPT), which developed critical policies and protocols, including the Novel Infectious Disease of Concern (NIDC) Response Plan, to enhance the hospital's preparedness for the current and future infectious disease emergencies. The CEPT was instrumental in identifying federal COVID-19 guidance and implementing it in GMHA's policies, procedures, and protocols.

### Response & Recovery Sequence of Events

The federal COVID-19 Public Health Emergency (PHE) declaration ended on May 11, 2023. Throughout Calendar Year (CY) 2023, GMHA continued delivering high-quality care to COVID-19 and non-COVID-19 patients. The Clinical Emergency Response Team (CEPT) played a vital role in this effort, creating and updating numerous policies, procedures, and protocols. Additionally, the CEPT developed a new "All-Hazards" NIDC Response Plan to address emerging infectious diseases. This plan is undergoing the hospital's review and endorsement certification process.

January 1, 2023 – May 11, 2023 Peak Surge 6:

GMH experienced another COVID-19 surge during the first half of CY2023. Table 1. The GMHA COVID-19 census during peak Surge 6 from January 1, 2023 – May 11, 2023.

Table 1. GMHA COVID-19 Patient Census Admitted to GMH Care Units During Surge 6

Month	CY2023
January	228
February	282
March	36
April	71
May	54
<b>TOTAL</b>	<b>671</b>

Source: GMHA COVID-19 Admissions submitted to Federal Emergency Management Public Assistance Program Project No. 728047 CATEGORY B - Emergency Protective Measures GMHA - COVID-19 Surge Medical Staffing Contract Nurses Peak Surge 6 (January 1, 2023 – May 11, 2023)

By the end of March 2023, the Guam Homeland Security Office of Civil Defense reported a total of sixty-one thousand one hundred thirty-nine (61,139) officially reported cases, four hundred fifteen (415) deaths, forty-three cases in active isolation, and sixty-one thousand six hundred eighty-one (61,681) cases not in active isolation.

As of April 2023, GMHA finalized the comprehensive Infection Control Program to ensure the organization has a functioning coordinated process to reduce the risk of endemic and epidemic Healthcare-Associated Infections (HAIs) and optimize the use of resources through a robust preventive program. This program developed numerous hospital-wide policy updates related to

## **Health Care Provider After Action Report/Improvement Plan**

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infectious diseases and the NIDC Response Plan.

The federal government announced the COVID-19 pandemic end date of May 11, 2023. As a result, the hospital resumed normal operations and continued to process and close out Public Assistance Federal Emergency Management Agency (FEMA) grants based on FEMA guidelines.

# Health Care Provider After Action Report/Improvement Plan

## Improvement Plan

The plan was developed specifically for the Guam Memorial Hospital Authority (GMHA) to make the necessary Plan (TCRP) improvements based upon the summarized information contained within this After Action Report feedback from the incident; email messages; chat group messages; and the feedback generated from the COVID-19

Required Improvement / Recommendation	Describe Corrective Action Completed	Primary Responsible Leaders(s)	Responsible Department(s)	Start Date	Completion Date
<p>MHA's Pan-Flu Plan did not have the guidance to de the hospital properly, especially regarding VID-19. COVID-19 was unique as a new virus t no one adequately prepared for. No one dicted this emergency would go on for over 33+ nths. A comparable Pandemic of this magnitude ; not been seen in over 100 years. GMHA had to apt to the situation using the most stringent action control measures and incorporate the best ctices to adapt to the problem to the best of our lity in terms of stand precaution and airborne lation.</p> <p>MHA will need to develop an updated Pandemic Plan incorporating previously developed tocols that remain relevant depending on the ation.</p>	<p>The Clinical Emergency Response Taskforce, known as the Clinical Emergency Preparedness Team (CEPT), researched and developed a new "All-Hazards" Emerging Infectious Disease Plan, referred to as the Novel Infectious Disease of Concern (NIDC) Response Plan. This plan is undergoing committee review and endorsement certification.</p>	<p>GMHA CEPT Infection Control Planning</p>	<p>Infection Control Clinical Departments Planning</p>	<p>September 2022</p>	<p>February 2023</p>
<p>Build additional capabilities and capacities in stng units, such as more electrical circuits to ver medical equipment, more negative pressure abilities through the units, and procure additional tral monitoring systems for telemetry services.</p>	<p>Request for assistance with external local and federal partners to assist GMHA Complete A/E Design and Construct/Renovate</p>	<p>GMHA Leadership Team</p>	<p>Applicable Divisions/Dep ts., FM, Planning, Nursing, Compliance</p>	<p>August 2020</p>	<p>September 2020</p>
<p>Create a task force that keeps abreast with the est federal guidance to develop hospital protocols t staff to use as guidance that ensures proper ocedures and best practices incorporated for the erall safety of all.</p>	<p>Creation of a Clinical Emergency Disseminate a circular to inform all staff that they are "essential."</p>	<p>GMHA Leadership Team</p>	<p>All GMHA Clinical Departments Nursing, Infection Control,</p>	<p>June 2020</p>	<p>Aug 2021</p>
<p>Monitor/Update/Publish the daily hospital inventory urn rate for staff situational awareness.</p>	<p>In Collaboration with Materials Management, share the burn rate with the Emergency Operations Center for</p>	<p>GMHA Leadership Team</p>	<p>Materials Management Department, Incident Commander</p>	<p>April 2020</p>	<p>June 2021</p>



## Health Care Provider After Action Report/Improvement Plan

### GMHAIMPROVEMENT PLAN (CONT'D)

Required Improvement / Recommendation	Describe Corrective Action Completed	Primary Responsible Leaders(s)	Responsible Department(s)	Start Date	Completion Date
corporate Burn rate for GMHA inventory id distribution to maximize supply count, avoiding over-distribution;	Situational awareness, support, and assistance to ensure hospital supplies and equipment availability are priorities during this Public Health Emergency.  Activate during Pandemic Emergencies and send to Guam Emergency Operations Center.	GMHA Leadership Team	Materials Management Department, Incident Commander	March 2020	May 2023
Training in the Hospital Command Center with new personnel.  Increase N-95 Fit Testing and certified fit- testers through 3M.	<ul style="list-style-type: none"> <li>The incident commander initiated and guided the safety and security administrator to work with the staff nurse training officer and other nursing departments to collaborate and train clinical and non-clinical staff (new staff). GMHA provided orientation training ensuring onboarding.</li> </ul> <p>DECON training, PPE Donning and Doffing procedures, and N-95 Fit Testing certification for all newly hired GMHA staff, travel nurses on boarding, DoD clinical staff, GUNG Medics, and all other new contracted personnel provided by the hospital.</p>	GMHA Leadership Team	All GMHA Departments/ Units	April 2020	May 2023

# Health Care Provider After Action Report/Improvement Plan

## APPENDIX A: ACRONYMS ACRONYMS

Acronym	Meaning
AAR/IP	After Action Report/Improvement Plan
ASPR	Administration for Strategic Preparedness and Response
ARC	American Red Cross Guam Chapter
USACE	Army Corps of Engineers
CEP	Care Units & Clinical Emergency Preparedness
CDC	Centers for Disease Control
CCU	Consolidated Commissions on Utilities
COVID-19	Coronavirus 2019
COR	Condition of Readiness
CBRNE/WMD	Chemical, Biological, Radiological, Nuclear and Explosives/Weapons of Mass Destruction
CY	Calendar Year
DOAg	Department of Agriculture
DHS	Department of Homeland Security
FEMA	Federal Emergency Management Agency
DPHSS	Department of Public Health and Social Services
EMP	Emergency Management Plan
EOC	Emergency Operations Center
EOP	Emergency Operations Plan
ESF8	Emergency Support Function 8
FBI	Federal Bureau of Investigation
FSE	Full-Scale Exercise/Event
GBHWC	Guam Behavioral Health and Wellness Center
GDOE	Guam Department of Education
GEMHCC	Guam Emergency Management Healthcare Coalition
GFD	Guam Fire Department
GIAA	Guam AB International Airport Authority
GHS/ OCD	Guam Homeland Security/Office of Civil Defense
GHRA	Guam Hotel and Restaurant Association
GMHA	Guam Memorial Hospital Authority
GMH	Guam Memorial Hospital
GUNG	Guam National Guard
GPD	Guam Police Department
GRMC	Guam Regional Medical Center
GVB	Guam Visitors Bureau
HAIs	Healthcare-associated infections (HAIs)/conditions
HICS	Hospital Incident Command/Center System
IC	Incident Commander
IPCC	Infection Prevention and Control Committee
JIC	Joint Information Center
MCP	Mass Casualty Plan
MCOG	Mayor's Council of Guam
MEC	Medical Executive Committee
NIDC	Novel Infectious Diseases of Concern (NIDC) Response Plan
NWS	National Weather Service
O2	Oxygen
OR	Operating Room
PAG	Port Authority of Guam
PPE	Personal Protective Equipment
SNF-ACS	Skilled Nursing Facility-Alternate Care Site
SNF/CIF	Skilled Nursing Facility-COVID-19 Isolation Facility (CIF)
TCRP	Tropical Cyclone Response Plan

## **Health Care Provider After Action Report/Improvement Plan**

**End of Report.**



**GUAM MEMORIAL HOSPITAL AUTHORITY  
REVIEW AND ENDORSEMENT CERTIFICATION**

The signatories on this document acknowledged that they have reviewed and approved the following:

<input type="checkbox"/>	Bylaws		Submitted by Department/Committee: Planning Department
<input type="checkbox"/>	Rules and Regulations		Policy No.:
<input type="checkbox"/>	Policies & Procedures		
<input checked="" type="checkbox"/>	Other: Reports		<p>Guam Memorial Hospital Authority Health Care Provider After Action Report/Improvement Plan (AAR/IP)</p> <p>COVID-19 2023 After Action Report (AAR)/Improvement Plan (AAR/IP) SNF</p>

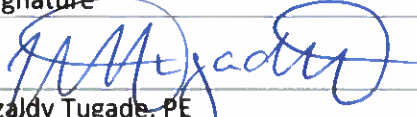
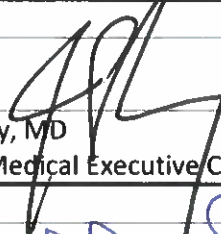
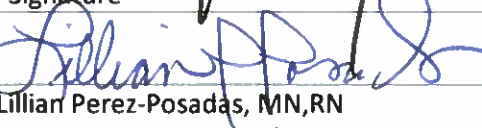

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Reviewed/Endorsed	Date	Signature
Title		

\*Use more forms if necessary. All participating departments/committees in developing the policy should provide signature for certification prior to submitting to the Compliance Officer

**GUAM MEMORIAL HOSPITAL AUTHORITY  
REVIEW AND ENDORSEMENT CERTIFICATION**

The signatories on this document acknowledged that they have reviewed and approved the following:

<input type="checkbox"/>	Bylaws	Submitted by Department/Committee: Planning Department
<input type="checkbox"/>	Rules and Regulations	Policy No.:
<input type="checkbox"/>	Policies & Procedures	
<input checked="" type="checkbox"/>	Other: Reports	<p>Guam Memorial Hospital Authority Health Care Provider After Action Report/Improvement Plan (AAR/IP)</p> <p>COVID-19 2023 After Action Report (AAR)/Improvement Plan (AAR/IP) SNF</p>

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Title		

\*Use more forms if necessary. All participating departments/committees in developing the policy should provide signature for certification prior to submitting to the Compliance Officer

**Health Care Provider After Action Report/Improvement Plan (AAR/IP)**

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**Guam Memorial Hospital Authority**

**Health Care Provider  
After Action Report/Improvement Plan (AAR/IP)**

**PANDEMIC EMERGENCY RESPONSE TO CORONAVIRUS  
DISEASE (COVID-19)**

**CALENDAR YEAR 2023 (CY 2023)**

**Actual Naturally Occurring Event Qualifying as a Community-  
Wide Full-Scale Exercise/Event (FSE)**

---

**Prepared by  
Planning Department**

**Prepared for  
SKILLED NURSING FACILITY (SNF/ACS)**

**Event Dates:  
March 19, 2020 – May 11, 2023**

**Report Date:  
May 16, 2024**



**GUAM MEMORIAL  
HOSPITAL AUTHORITY**  
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## Health Care Provider After Action Report/Improvement Plan

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## Health Care Provider After Action Report/Improvement Plan

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### Administrative Handling Instructions

1. Title: Guam Memorial Hospital Authority (GMHA) Health Care Provider After Action Report/Improvement Plan (AAR/IP) Coronavirus 2019 (COVID-19) Community-Wide Full-Scale Exercise/Event (FSE)
2. This AAR/IP is classified as sensitive information that should not be disclosed and is For Official Use Only (FOUO). Safeguard, handle, transmit, and store by appropriate security directives. GMHA prohibits the reproduction of this document, in entirety or in part, without prior approval from GMHA.
3. At a minimum, dissemination of attached materials is allowed on a need-to-know basis and, when unattended, stored in a locked container or area, offering sufficient protection against theft, compromise, inadvertent access, and unauthorized disclosure.

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## Health Care Provider After Action Report/Improvement Plan

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### Executive Summary

The After Action Report/Improvement Plan (AAR/IP) overviews the full-scale exercise event related to Coronavirus 2019 (COVID-19). This AAR/IP aims to support the Skilled Nursing Facility (SNF/ACS) and partner agencies in enhancing their responses and recovery efforts for future emergency declarations.

The overall goal of GMHA's emergency response is to minimize serious illness and overall deaths and to provide continuous life-sustaining services in coordination and collaboration with the Guam EOC/Unified Command with a primary focus on the Health and Medical Emergency Support Function 8 (ESF8) roles and responsibilities.

The Skilled Nursing Facility (SNF) is called the Skilled Nursing Unit (SNU). The SNF represents the building, and the SNU represents the clinical unit of Guam Memorial Hospital Authority.

Throughout Calendar Year (CY) 2023, GMHA made significant strides in its recovery from COVID-19. The organization redefined the FEMA Public Assistance Alternate Care Site (ACS) scope to secure essential medical supplies and equipment for Skilled Nursing Facility (SNF) residents and social cases. The ACS was designed as a "switch ready" warm site, featuring thirty-eight (38) low-acuity care beds in the A & C Wings, thereby expanding GMHA's acute care bed capacity by twenty-four percent (24%). The B Wing, with its sixteen (16) beds—fourteen (14) regular and two (2) isolation rooms—enables GMHA to manage both high-acuity COVID and non-COVID cases effectively. This configuration maximizes GMHA's total bed capacity, reaching one hundred sixty-one (161) beds. It supports the implementation of the Non-Acute Care Model for the ACS COVID-19 response.

The SNF converted into GMHA's ACS, capable of treating non-acute COVID-19 and non-COVID-19 patients in the A & C Wings while keeping SNF residents safely separated in the B Wing. The revised project budget cut the total cost by seventy-eight percent (78%), reducing the obligated funding (FEMA ACS PA # 151538) from approximately fifteen million three hundred fifty thousand dollars (\$15.35M) to one million nine hundred forty-five thousand three hundred twenty-six dollars and sixty-nine cents (\$1,945,326.69). FEMA also opened streamlined project ACS PA # 673604, temporarily converting the existing SNF into an Alternate Care Site (ACS) during the COVID-19 public health emergency, thus providing additional healthcare capacity for the community with a federal cost share of ninety percent (90%) and local share of ten percent (10%). The total cost of this project was eight hundred forty thousand four hundred ninety-five dollars and ninety-two cents (\$840,492.92). The temporary ACF increased bed capacity by an additional 38 beds. Upgrading the SNF B Wing Isolation increased GMHA's healthcare capacity and capability, allowing the hospital to decompress non-acute COVID and non-COVID patients into the ACS/SNF. Since Guam's Public Health Emergency declaration, GMH has been designated as the island's COVID-19 hospital.

GMHA activated its emergency protocol CODE RED to convert the SNF B-Wing into an Acute Care Site (ACS) to manage patient overflow from Guam Memorial Hospital (GMH) during patient surges from mass casualty incidents. This protocol, part of GMHA's Emergency Management Plan (EMP), has been crucial throughout the pandemic. GMHA staff were trained to handle these situations with resilience, including mastering the strategy of sheltering in place. Previously, no other facility or ACS could accommodate GMHA patients, but this practice has proven effective throughout the pandemic.



## Health Care Provider After Action Report/Improvement Plan

Additionally, GMHA transferred social case occupants—individuals who no longer required acute care but had no home or family to care for them—from GMH to the SNF/ACS. This move created additional acute care beds for both COVID-19 and non-COVID-19 patients by decompressing the hospital. The Discharge Planning Team at GMHA assessed the situation and determined that relocating low-acuity social case patients to the SNF was essential for increasing hospital capacity.

GMHA reduced severe illness and fatalities at the Skilled Nursing Facility (SNF) while ensuring the continued delivery of life-sustaining services. The hospital initially activated a modified Incident Command system at SNF. GMH also implemented daily COVID-19 huddles, which included the SNU, and developed several infectious disease policies and Clinical Standard Operating Procedures.

### Major Strengths Identified During Exercise

GMHA/SNF activated its COVID-19 Incident Command Post to respond to and recover from the pandemic. This unprecedented event posed significant challenges for GMHA's management and staff regarding applicable emergency operations plans. Reflecting first on the positive aspects, GMHA's and SNF staff and management generated the following emergency response and recovery success stories:

- SNF effectively utilized various active Chatgroups (e.g., GMHA Leadership, GMHA Executive and Divisional, SNF Administration headed by Dr. Vicente Duenas) as a primary mode of communication to implement and observe applicable parts of its response and establish and sustain a virtual Hospital Incident Command Center.
- SNF staff and Incident Command Post effectively implemented their respective response plan checklists that resulted in SNF/ACS maintaining a safe environment of care and sustaining continuity of quality patient care by (1) securing the entrance of the building fostered screening of staff before reporting to their respective duties. Before the public health emergency, SNF/ACS established a response plan to mitigate infection control within the facility; (2) diligently and tirelessly cleaning and mopping to dis-infect affected areas facility-wide as a result of the movement of staff and infected patients, and (3) SNF/ACS administration lead by SNF Nursing Supervisor created response team dedicated only to SNF COVID-19 operations.

### Improvements Recommended:

SNF/ACS emergency response and recovery from COVID-19 identified several improvement opportunities during this event, as gathered from different departments involved in responding to this public health emergency. SNF primary areas for entry and exit were identified. Recommendations are listed and grouped according to the primary objectives to control infection at SNF/ACS aligned to CMS guidelines:

#### Improvement Opportunities and Recommendations:

- As critical situational information was communicated via various Chat groups, GMHA/SNF continued to utilize and rely upon Chat groups as another effective mode of communication during "all hazards" emergency response and recovery efforts, as it allowed GMHA to maintain a virtual Hospital Command Center throughout the emergency.
- Procure adequate and suitable PPEs and equipment.

## **Health Care Provider After Action Report/Improvement Plan**

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- SNF/ACS stressed to all clinical staff and management that "essential" employee remains responsible for coordinating with their supervisors relative to GMHA's/SNF's implementation of its Emergency Management Plan and other Emergency Operations Plans. Disseminated a circular to all staff that all employees are "essential."
- GMHA/SNF stressed to all staff and management that the "Post" shift will not be on standby. Staff will be on standby if called in to prepare for the upcoming change.
- SNF/ACS Security and FM met with Nursing and Operations to prepare and maintain inventory levels for "all-hazards" events. Shortage and low pressure on the liquid oxygen filled from Island Equipment and the portable oxygen tanks distributed.
- Nurses will add to their checklist in their units and departments to have portable HEPA filters in the negative pressure rooms.
- SNF developed a patient/visitor guide containing CMS's management plans.

## Health Care Provider After Action Report/Improvement Plan

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### SECTION 1: 2021–2023 Exercise/Event Overview

Exercise/Event Name: COVID-19

Exercise/Event Start Date: March 19, 2020

Exercise/Event End Date: May 11, 2023

Duration: 1,149 Days

#### Type of Exercise/Event Completed:

Check the type of exercise completed, as listed below

*Discussion-Based Exercise*

☐ Seminar

☐ Workshop

☐ Tabletop

☐ Games

*Operations-Based Exercise*

☐ Drill

☒ Full-Scale Exercise

☐ Functional Exercise

☒ Emergency Event

#### Capabilities

1. Guam Homeland Security / Office of Civil Defense:

- a) Coordinate and support emergency response and recovery priority objectives.
- b) Establish and maintain a modified operational unified command structure and process that appropriately integrates all critical stakeholders during a potentially catastrophic event and
- c) Led the evaluation of the overall emergency response and recovery activities and plans related to power outages, port operations, mass care, critical infrastructure, and tourism.

2. Guam Memorial Hospital Authority:

- a) Coordinate and support emergency response and recovery priority objectives, prepare the delivery of vital response equipment and services to the Skilled Nursing Unit;
- b) Establish and maintain an operational unified command structure and process that appropriately integrates all critical stakeholders during a potentially unprecedented event and
- c) Lead the evaluation of the overall emergency response and recovery activities and plans related to power outage A/C and other circumstances that may impede facility operation.

3. Skilled Nursing Facility/Acute Care Site (SNF/ACS):

- a) Implement GMHA's emergency response and recovery capabilities relative to internal Emergency Operations Plans (e.g., COVID-19 Response Plan to include Hospital Incident Command System, Interoperable Communications, and Collaboration with Internal Department Emergency Response Partners) and
- b) Evaluate GMHA's COVID-19 Response Plan for continuous life-sustaining services coordinating with the Guam EOC/Unified Command, focusing primarily on the Health and Medical Emergency Support Function 8 (ESF8) roles and responsibilities.



## Health Care Provider After Action Report/Improvement Plan

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### 1. Planning

The Emergency Management Plan (EMP) approved in November 2022 establishes a structured program addressing mitigation, preparation, response, and recovery for various disasters and emergencies. This approach, known as the "all hazards" approach, ensures the hospital is adequately prepared to handle a wide range of emergencies that affect the healthcare environment at Guam Memorial Hospital Authority (GMHA), including both Guam Memorial Hospital (GMH) and the Skilled Nursing Facility, also known as the Alternate Care Site (SNF/ACS).

### 2. Communication

SNF/ACS emergency management communications security and protocol focus on safeguarding communications equipment and systems, such as radios and telephones, during emergencies to prevent misuse or overloading.

### 3. Risk Management

The Guam Memorial Hospital Authority (GMHA) and the SNF/ACS, represented by the medical and administrative staff and the Governing Body, established an Infection Control Program to reduce the risk of acquiring and transmitting healthcare-associated infections (HAIs): an infection Control Orientation and In-Service policy to train staff in infection control for new and existing employees.

### 4. Community Preparedness & Participation

A staff, volunteers, and community vaccination program was established. COVID-19 Testing implemented. GMH provided receipts storage and staging (RSS) for Guam and the outer islands.

### 5. Intelligence & Information Sharing & Dissemination

Data and analysis are crucial to assessing risk for potential threats and hazards. Various resources are accessible for gathering information, such as local and federal law enforcement agencies, the FBI, Department of Homeland Security, Guam Homeland Security Office of Civil Defense, CDC, NWS, Fusion Center, and other relevant investigative entities. Internal and external briefings were held within the Hospital Incident Command Structure (HICS) and with GHS/OCD. Intelligence and information sharing also occurred during department/unit meetings, called huddles, throughout emergency response operations.

**Scenario:** Actual naturally occurring event qualifying as a community-wide full-scale exercise/Event (FSE)

**Location:** Guam and Western Pacific Region

**Partners:**

The Guam Memorial Hospital Authority (GMHA) partners are as follows: Guam Medical Regional City (GRMC), the U.S. Naval Hospital Guam (USNHG), local and federal Emergency Medical Services (EMS), Department of Public Health & Social Services (DPHSS), the Guam Behavioral Health and Wellness Center (GBHWC). Agency partners: Guam Homeland Security/Office of Civil Defense (GHS/OCD) Unified Command to include all

## Health Care Provider After Action Report/Improvement Plan

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Emergency Support Functions and Incident Command System (ICS) Sections; the Office of the Governor of Guam; Guam Emergency Management Healthcare Coalition (GEMHCC), and representatives of the local Media.

**Participants:**

U.S. Department of Health and Human Services (both ASPR and CDC), Department of Homeland Security / Federal Emergency Management Agency (FEMA), Department of Public Health and Social Services (DPHSS), Army Corps of Engineers (USACE), Private Sector Healthcare Clinics/Centers, Department of Agriculture (DOAg), Guam Visitors Bureau (GVB), Guam Police Department (GPD), Guam Fire Department (GFD), Guam Department of Education (GDOE), Port Authority of Guam (PAG), Mayor's Council of Guam (MCOG), A.B. International Airport Authority (GIAA), Consolidated Commissions on Utilities (CCU), Guam Customs and Quarantine Agency (CQA), Guam Behavioral Health and Wellness Center (GBHWC), Guam Homeland Security/Office of Civil Defense (GHS/OCD), American Red Cross Guam Chapter (ARC), Salvation Army Guam Corps, Guam Chamber of Commerce, Guam Hotel and Restaurant Association (GHRA), Guam National Guard (GUNG), United States Air Force (USAF), United States Coast Guard Sector Guam (USCG), United States Naval Hospital Guam (USNH), Guam Regional Medical City (GRMC)

**Number of Participants:**

List the total number of Participating Agencies

- 26



## **Health Care Provider After Action Report/Improvement Plan**

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### **SECTION 2: Exercise/Event Design Summary**

#### **Exercise Purpose and Design**

The Skilled Nursing Facility, also known as the Alternate Care Site (SNF/ACS) with the Nursing Department, coordinated emergency response and recovery efforts, prompting GMHA to implement its COVID-19 Response Plan. As a result, SNF/ACS and other key stakeholders tested and evaluated their respective Emergency Management Plans (EMPs) and Emergency Operations Plans (EOPs).

The primary purpose of SNF/ACS's response and recovery efforts was to:

- Provide quality patient care to COVID-19 patients at the COVID-19 Isolation Facility (CIF) at the SNF
- Conduct situational assessments, maintain situational awareness, and activate/implement applicable GMHA Emergency Operations Plans (e.g., GMHA COVID-19 Response Plan and any other applicable GMHA EOPs);
- Establish a Hospital Incident Command System (HICS) and Hospital Command Centers (HCCs), established first as a modified HCC/HICS located at the GMHA Command Center at the GMHA boardroom and then transitioned to a modified HCC/HICS via GMHA's Leadership Chat group. These modified HCCs/HICS were used as the means to manage communications and implement SNF/ACS applicable EOPs as deemed appropriate by GMHA Executive Leadership (e.g., Hospital Administrator/CEO or designee); and
- Establish and maintain communications with SNF/ACS - GMHA's Emergency Support Function 8 Coordinators (ESF8 Coordinators) to effectively liaise with Guam's Emergency Operations Center (EOC).

#### **Objectives and Capabilities**

##### **Planning and Intelligence Capabilities:**

**Objective No. 1** – SNF/ACS Situational COVID-19 - Updates, Reports, Awareness, and Preparedness fostered by communications between internal and external partners (e.g., GMHA Incident Command Post, SNF/ACS Admin, CDC Updates from DPHSS, JIC, GMHA Leadership Team).

- Activate GMHA's / SNF Response Plan;
- Activate GMHA's / SNF Command Center and Coordinators;
- Establish GMHA's HICS to make command, control, and communications between GMHA's Hospital and Skilled Nursing Facility, the Guam EOC, and other possible Health and Medical Stakeholders.

##### **Intelligence and Communications Capabilities:**

**Objective No. 2** Logistical Readiness and Documentation (e.g., Medical Supplies &



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Equipment, Utility Systems).

- Monitor bed capacities and capabilities and implement contingency plans to handle patient overflow or other emergencies (e.g., loss of critical infrastructure and essential resources) and
- Communicate and collaborate with Guam ESF8 (GMHA, DPHSS, GHS) located at the Guam EOC (within GHS/OCD) and other members of the Guam Emergency Management Healthcare Coalition (e.g., GRMC, USNHG, GFD) for managing medical surge, medical supplies and equipment, healthcare professionals and use of facilities as needed, including the utilization/testing of the Guam ESAR-VHP.

### Community Preparedness and Participation Capabilities:

**Objective No. 3** - Continuity of Quality Patient and Resident Care Services in a Safe Environment.

- The entrance screening method for COVID-19 symptoms is activated outside the main entrance and secondary entry point of SNF/ACS for staff and other essential personnel assisting and responding to COVID-19.
- Protect the safety and well-being of patients, visitors, and staff by employing safe work practices, standard precautions, environment of care assessments/rounds, and taking other proactive measures needed to remedy workplace hazards and infections and prevent their reoccurrence and
- Track human resources (e.g., shift changes), medical supplies, and equipment and the status of critical infrastructure (e.g., Emergency Generators, HVAC System); communicate and coordinate shortfalls or system failures to Nursing Supervisor (the IC Designee) and Executive Leadership; and respond to resolve the same.
- Communications with the GFD or any private transport, transporting COVID-19 patients into the facility and relay to the COVID-19 charge nurse, SNF/ACS Security stationed on the main and or secondary entrance of SNF/ACS will assist and escort to the designated route during the transfer of the patient.

### Community Preparedness and Participation

**Objective No. 4** – COVID-19 Patient Transfer to SNF/ACS Protocol

- Activate SNF/ACS Guard for arriving GFD transport, GMH, and private transport transferring COVID-19 patients and making sure that they will comply with all protocols set up by the GMHA Incident Commander and leaders regarding Proper PPEs, donning and doffing procedures to avoid cross-contamination.
- Establish route of entry and exit protocol created by the GMHA COVID-19 Incident Commander, and SNF/ACS guards will guide, monitor, and coordinate to charge nurse or nurse station.

### Communications Capabilities

## **Health Care Provider After Action Report/Improvement Plan**

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### **Objective No. 5 - SNF/ACS Ongoing safe and secure care environment maintenance.**

- Ensure all communications lines are open via phone, iConnect radios, and Motorola radios to the Hospital Command Center, Nurse Station, and Security assisting for screening and control.
- Establish the traffic flow pattern and overflow plan, which was created by the chief planner and approved by AAO.

### **Risk Management Capabilities**

#### **Objective No. 6 – Ongoing COVID-19 Response Plan**

- Training in the Hospital Command Center with new personnel.
- Development of Skilled Nursing Facility (SNF/ACS) guide for screening and management plans to mitigate infection within facilities that address both GMH and SNF/ACS.

### **Scenario Summary**

Effective leadership was essential in navigating the uncertainty of the pandemic. Leaders at GMHA remained proactive, continuously monitoring the evolving situation and strategically planning to address emerging challenges. They focused on optimizing resource allocation and providing clear guidance to staff, ensuring that everyone stayed focused on meeting organizational goals, even in such a high-pressure, rapidly changing environment.

Communication played a critical role in the response. Consistent, transparent, and timely updates across all levels of the organization ensured that staff understood the objectives of the response plan and were kept informed of the latest developments and protocols. This facilitated collaboration between departments and helped maintain alignment, allowing staff to stay updated as new information became available.

In addition, leadership involves ongoing assessment of the effectiveness of the strategies implemented throughout the response. By analyzing performance data, leaders identified areas for improvement, refined approaches, and made adjustments to ensure a more effective response. This continuous cycle of evaluation and refinement was crucial for maintaining high standards of care and operations, ensuring the health and safety of patients and staff throughout the pandemic.

GMHA activated a modified Incident Command System at SNF to manage the response. The hospital also held daily COVID-19 huddles, which included the Skilled Nursing Unit (SNU) and developed key infectious disease policies and Clinical Standard Operating Procedures to guide staff and ensure a coordinated and effective response.

### **Response & Recovery Sequence of Events**

## **Health Care Provider After Action Report/Improvement Plan**

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The Islands Pandemic Plan identified SNF as the designated COVID-19 Isolation Facility. Interagency preparedness meetings were conducted on-site (at SNF) to prepare the SNF's 60-bed capacity. To provide quality patient care in a safe environment, GMHA stocked SNF with the supplies, materials, equipment, medication, and staffing. SNF residents relocated to the Guam Memorial Hospital (GMH). The main concern focused on unwanted virus transmission to an already vulnerable population. Centers for Medicare and Medicaid (CMS) granted a waiver to SNF as the Authority Having Jurisdiction (AHJ) to oversee and ensure resident safety and well-being.

Once patients safely relocated to GMH, the SNF became the COVID-19 Isolation Facility or CIF for short. The initial plan was to relocate residents to GMH and prepare the facility to turn over to DPHSS temporarily for DPHSS staff and operation. That did not go as planned, leaving GMHA to adapt and manage the CIF with its staff, materials, and supplies. The facility was later known as the Skilled Nursing Facility/Alternate Care Site (SNF/ACS)

1/26/2023 Project 4495, DR-GU [151538] GMHA submitted the Alternate Care Site ACS to its designated Public Assistance Program Delivery Manager (PDMG) for final review. This included scope and cost adjustments consistent with the above eligibility evaluation. PDMG and Program Delivery Task Force Leader (PDMGTFL) determined that this project, as currently written, is eligible and that a final review and the Consolidated Resource Center (CRC) for the project should complete funding determination.

In April 2023, GMHA finalized the comprehensive Infection Control Program to ensure the organization has a functioning coordinated process to reduce the risk of endemic and epidemic Healthcare-Associated Infections (HAIs) and optimize resource use through a solid preventive program.

On May 11, 2023, the COVID-19 public health emergency ended. GMHA continued to process Public Assistance grants.

August 3, 2023, FEMA reported that the applicant utilized contract services to increase capacity by converting the Skilled Nursing Facility into an Alternate Care Site; the temporary ACS will increase capacity by 38 beds. This version captured a revised Scope of Work/costs in alignment with the current COVID-19 data available and resulted in a de-obligation of funds (\$-13,408,635.81) for this project. Version 2 (v2) covered work completed at 100% fed share. The companion project (PRJ 673604) captured work completed at 90% federal share. Activities are low-risk for patient care revenue and recommend full reimbursement. Final cost eligibility requires sufficient documentation demonstrating compliance with project conditions, regulatory and policy requirements, and incurred costs to support emergency work activities directly related to lessening or eliminating threats to public health because of COVID-19; lack of sufficient documentation may affect final eligibility decisions and associated claimed costs and project was obligated.

September 14, 2023 Scope and cost adjustment evaluations were made. The Public Assistance Program Delivery Manager (PEMG) and Program Delivery Task Force Leader (PDMGTFL) determined that the project was eligible. The Consolidated Resource Center (CRC) would provide a final review and funding determination.

September 30, 2023 Project 4495 DR-GU [673604] Activities "low-likelihood" for patient care revenue and recommended full reimbursement without RAND review. The applicant provided and self-certified the cost summary based on work estimates. Final cost eligibility requires



## **Health Care Provider After Action Report/Improvement Plan**

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sufficient documentation demonstrating compliance with all project conditions and applicable regulatory and policy requirements, including that all costs being requested incurred in support of eligible emergency work activities directly related to lessening or eliminating threats to public health from COVID-19.

October 16, 2023, project obligated.

## Health Care Provider After Action Report/Improvement Plan

### Improvement Plan

The plan was developed specifically for the Guam Memorial Hospital Authority (GMHA) to make the necessary Plan (TCRP) improvements based upon the summarized information contained within this After Action Report and feedback from the incident; email messages; chat group messages; and the feedback generated from the COVID-19

Required Improvement / Recommendation	Describe the Corrective Action Completed	Primary Responsible Leader(s)	Responsible Department(s)	Start Date	Completion Date
Continue to utilize Chatgroups as another effective mode of communication during "all hazards" emergency response and recovery efforts, as it allows us to maintain a virtual Hospital Command Center throughout the event.  *The COVID-19 Incident chat continues to remain operational for situational awareness following the end of the pandemic date of May 11, 2023	Utilize all effective modes of communication during EMP and EOP Activations (including Chatgroups).	GMHA Incident Command Post	All GMHA/SNF Divisions/Depts.	August 27, 2021	May 11, 2023
Procure adequate and suitable PPEs	To be issued from every Department responding to the event	GMHA Leadership Team/SNF Administration	Applicable Divisions/Depts., SNF Administration / SNF Nursing	August 27, 2021	May 11, 2023
Nurses will be adding to their checklist in their units and departments to have portable HEPA filters in the negative pressure rooms.	Update Nursing Policies to include a checklist for portable HEPA filters.	GMHA Leadership Team SNF Admin	Applicable Divisions/Depts., Nursing	August 27, 2021	May 11, 2023

## Health Care Provider After Action Report/Improvement Plan

### GMHAIMPROVEMENT PLAN (CONT'D)

Required Improvement / Recommendation	Describe the Corrective Action Completed	Primary Responsible Leader(s)	Responsible Department(s)	Start Date	Completion Date
<ul style="list-style-type: none"> <li>GMH and SNF developed a patient/visitor guide that contains the management plans of EOC, which CMS cites.</li> </ul>	Distribute guides during EOP Activations at GMH and SNF.	GMHA Leadership Team	All GMHA Departments/ Units	August 21, 2021	November 2021
<ul style="list-style-type: none"> <li>SNF developed Systematic Entrance screening procedures in response to CMS citations.</li> </ul>	This will be implemented at the SNF entrance on both the first and second floors.	GMHA/SNF Leadership Team	SNF Security	January 2021	November 2021
SNF Security created entry and exit protocols during patient transfer, as well as BLS training and CNA certification tests, to mitigate or avoid cross-contamination from outsiders taking the class to the resident.	Being implemented for better control of cross-contamination of infection	GMHA/SNF Incident Command Post	SNF Security	June 2021	December 2021



# Health Care Provider After Action Report/Improvement Plan

## APPENDIX A: ACRONYMS ACRONYMS

Acronym	Meaning
AAR/IP	After Action Report/Improvement Plan
APR	Administration for Strategic Preparedness and Response
ARC	American Red Cross Guam Chapter
AHJ	Authority Having Jurisdiction
USAGE	Army Corps of Engineers
CDC	Centers for Disease Control
CEP	Care Units & Clinical Emergency Preparedness
CIF	Covid-19 Isolation Facility
CCU	Consolidated Commissions on Utilities
COVID-19	Coronavirus 2019
COR	Condition of Readiness
CBRNE/WMD	Chemical, Biological, Radiological, Nuclear and Explosives/Weapons of Mass Destruction
CY	Calendar Year
DOAg	Department of Agriculture
DHS	Department of Homeland Security
FEMA	Federal Emergency Management Agency
DPHSS	Department of Public Health and Social Services
EMP	Emergency Management Plan
EOC	Emergency Operations Center
TOP	Emergency Operations Plan
ESF8	Emergency Support Function 8
FBI	Federal Bureau of Investigation
FSE	Full-Scale Exercise/Event
GBHWC	Guam Behavioral Health and Wellness Center
GDOE	Guam Department of Education
GEMHCC	Guam Emergency Management Healthcare Coalition
GFD	Guam Fire Department
GIAA	Guam A.B. International Airport Authority
GHS/OCD	Guam Homeland Security/Office of Civil Defense
GHRA	Guam Hotel and Restaurant Association
GMHA	Guam Memorial Hospital Authority
GMH	Guam Memorial Hospital
GUNG	Guam National Guard
GPD	Guam Police Department
GRMC	Guam Regional Medical Center
GVB	Guam Visitors Bureau
HAIs	Healthcare-Associated Infections (HAIs)/conditions
HICS	Hospital Incident Command/Center System
IC	Incident Commander
IPCC	Infection Prevention and Control Committee
JIC	Joint Information Center
MCP	Mass Casualty Plan
MCOG	Mayor's Council of Guam
NWS	National Weather Service
O2	Oxygen
OR	Operating Room
PAG	Port Authority of Guam
PPE	Personal Protective Equipment
SNF/ACS-ACS	Skilled Nursing Facility-Alternate Care Site
SNF/ACS-CIF	Skilled Nursing Facility-COVID-19 Isolation Facility (CIF)
SNU	Skilled Nursing Unit
TCRP	Tropical Cyclone Response Plan

## **Health Care Provider After Action Report/Improvement Plan**

**End of Report.**



# GUAM MEMORIAL HOSPITAL AUTHORITY

ATURIDÂT ESPETÂT MIMURIÂT GUÅHÂN

850 Governor Carlos Camacho Road, Tamuning, Guam 96913  
Operator: (671) 647-2330 or 2552 | Fax: (671) 649-5508



February 18, 2025

**VIA ELECTRONIC MAIL**

Honorable Lourdes A. Leon Guerrero

*I Maga'hågan Guåhan*

Ricardo J. Bordallo Governor's Complex

Adelup, GU 96910

RE: Reporting Requirements for Boards and Commissions

Dear Governor Leon Guerrero:

To comply with Ch. 8 of Title 5 GCA, Section 38, §8113.1, Reporting Requirements for Boards and Commissions, the GMHA hereby submits the materials presented and discussed at the January 29, 2025 Meeting of the GMHA Board of Trustees.

Please contact Janet U. Mandapat, Administrative Assistant at (671) 647-2367 or by email at [janet.mandapat@gmha.org](mailto:janet.mandapat@gmha.org) for any questions or clarifications.

Sincerely,

Lillian Perez-Posadas, MN, RN  
Hospital Administrator/CEO





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Operator: (671) 647-2330 or 2552 | Fax: (671) 649-5508



February 5, 2025

**VIA ELECTRONIC MAIL**

Benjamin J.F. Cruz

*Public Auditor*

Office of Public Accountability

Suite 401 DNA Building

238 Archbishop Flores Street

Hagåtña, GU 96910

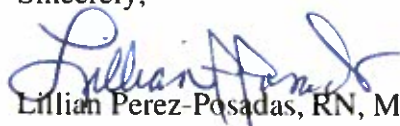
RE: Reporting Requirements for Boards and Commissions

Dear Mr. Cruz:

To comply with Ch. 8 of Title 5 GCA, Section 38, §8113.1, Reporting Requirements for Boards and Commissions, the GMHA hereby submits the recording for the January 29, 2025 GMHA Board of Trustees Meeting via Google Drive as guided by your office.

Please contact Janet U. Mandapat, Administrative Assistant at (671) 647-2367 or by email at [janet.mandapat@gmha.org](mailto:janet.mandapat@gmha.org) for any questions or clarifications.

Sincerely,

  
Lillian Perez-Posadas, RN, MN  
Hospital Administrator/CEO

↓ SENT TO DPA 1110 AUGUST 2025 (MAY 1, 2025) A



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850 Governor Carlos Camacho Road, Tamuning, Guam 96913  
Operator: (671) 647-2330 or 2552 | Fax: (671) 649-5508



February 18, 2025

**VIA ELECTRONIC MAIL**

Honorable Frank Blas Jr.

*Speaker of I Mina'trentai Ocho Na Liheslaturan Guåhan*

163 Chalan Santo Papa

Hagåtña, GU 96910

RE: Reporting Requirements for Boards and Commissions

Dear Speaker Blas:

To comply with Ch. 8 of Title 5 GCA, Section 38, §8113.1, Reporting Requirements for Boards and Commissions, the GMHA hereby submits the materials presented and discussed at the January 29, 2025 Meeting of the GMHA Board of Trustees.

Please contact Janet U. Mandapat, Administrative Assistant at (671) 647-2367 or by email at [janet.mandapat@gmha.org](mailto:janet.mandapat@gmha.org) for any questions or clarifications.

Sincerely,

Lillian Perez-Posadas, MN, RN  
Hospital Administrator/CEO