

HEALTH CARE COALITION TASK FORCE (HCCTF) MEETING

Thursday, November 21, 2019

Minutes

The meeting was called to order at 8:40 a.m..

Roll

Valerie Beynon

Region 1 – Ann Hill

Region 2 – Denise Imbler, Zach Arnett, Melissa Franklin, Holly Kirsch

- Region 3 Leigh Wilsey, Eric Anderson, Rich Ward, Tim Connor, Jim Lyons
- Region 4 Dan Johnson

Region 5 – Lynne Drawdy

Region 6 – Kevin Gingras

Region 7 Broward – Reshena Clark

Region 7 Keys – Cyna Wright

Region 7 Miami-Dade – Marilia Van Keeken

Region 7 Palm Beach – John James

- **FEPA** Eve Rainey
- FACHC Tom Knox

FHCA – Melanie Motiska

FHA – John Wilgis

Florida Dept of Health – Christie Luce, Samantha Cooksey, Dayle Mooney, Dawn Webb, Ty Carhart, Sue James, Brandi Keels, Debbie Kelley, Bobby Mills, Aaron Otis, Brandy Kirkland, Cassie Simmons, Paul Leinas, Melea Jenkins. Federal - Jeanne Eckes-Roper

Changes to the Agenda

Added items for discussion included Category B costs and IRMS.

Approval of Agenda

Moved: Marilia Van Keeken Seconded: Denise Imbler

Approval of Minutes

October 24, 2019 Moved: Ann Hill Seconded: Leigh Wilsey

Approval of Consent Agenda

November 21, 2019 Moved: Ann Hill Seconded: Leigh Wilsey

Reports

Governor's Hurricane Conference

John Wilgis

John Wilgis and John James met and developed the training and workshops based on the coalitions' proposals for the May 17-22, 2020 conference. These include:

Trainings:

- HCEM course (Two day -12 hours)
- AHCA class/computer lab session on ESS (6 hours)
- N HICS (9 hours or 2 days)

Workshops

- Patient movement and tracking
- COOP in healthcare
- Flow of communications based on needs in an emergency (not necessarily PIO)
- Understanding EMS regulations for non-acute and post-acute providers
- HCC integration in response
- Behavioral health support for providers

Train the trainer will be offered at the FEPA conference. There was not enough time on the agenda for Franklin's training suggestions.

Eve Rainey informed attendees that the FEPA conference will be February 3-7 in Daytona Beach. This year's theme is "Beyond the storm," and they will focus on other hazards. The agenda is located on fepa.org where visitors will notice the new G2300 is being offered.

John pointed out that the focus is not to have death by Powerpoint but, to think about what you want to see, i.e. may want someone from the nursing home world.

Pediatric Surge Annex

Samantha Cooksey

The strategy for the Pediatric Surge Annex is to develop a single Florida Pediatric Surge Plan. Each coalition will have a section of the plan outlining capabilities, resources, and processes. Developed by a committee of state and coalition representatives, the overarching document outlines across the board activities. All of the coalitions will upload the same final product to the CAT Tool.

We need each coalition to identify a representative to serve as a member of the state plan development team.

This project is due this year from the HCCs as part of the contract. Ty will workshop the worksheet today but, we need to emphasize the importance of identifying people who know about the HCC in your area and need a clinical person who offers age appropriate resources.

Samantha said they will be using the pediatric pilot results John Wilgis discussed.

Pediatric Surge Worksheet Workshop

Ty Carhart

Ty facilitated an open discussion about the worksheet the coalitions will complete and submit as chapters to the pediatric surge plan.

Bureau Update

Samantha Cooksey/Christie Luce

BPR is purchasing a portable hospital which can fit in a small space and provide 2000 square feet of working space with eight bed capacity. A generator and water bladder are included along with a mobilizer so, it sits on a trailer. The Bureau is developing an MOU for its and use and may pair it with an FIDTN exercise. The Bureau is excited about this asset.

Afternoon Discussion

Category B – Leigh Wilsey – This is a helpful service in a response, but the request needs to come from DEM instead of having the HCC pushing this up. DEM needs to provide training so the HCC could collect the information because, as John Wilgis pointed out, hospitals don't understand recovery.

Eve Rainey from FEPA explained what Category B is and the significance of gathering information from health care facilities for the recovery process. To be eligible, monetary thresholds have to be met. \$28.8 million is Florida's threshold but, each county has their own threshold.

Dayle asked participants to not expect to be the collector of this but, if your local DEM wants to work with you, go ahead. At the state level, our role is keeping you trained for that role at the local level. Eve recommended that HCFs paint a picture when pleading their case and identify all potential applicants in the counties

A good idea would be to invite DEM regional experts to discuss the process at your meetings and invite your comptroller to attend not just your EM. FHA will be glad to facilitate.

FHA is doing a survey of their hospitals and will provide a list of nonprofits to HCCs by request. The AHCA website can also help with looking up HCFs.

TEPW

Sue James

Sue reported that most have received their prework. DOH will finally be working with DEM as a pilot. January and February 2021, we will host regional workshops. DEM, the CHDs, and HCCs will meet together to do their prework in one day and complete it by the end of the day. We will have a snapshot for a three-year plan. DEM will get five trainings including the new G-2300 course.

The January 31 training plans are due in a system then will be rolled to the regional point of contact, and are due February 7 then submitted to the HCC. The HCC portion is due to Dayle on February 17. On March 17, we will have TEPW in the morning and training in the afternoon in 4052/301. The HCC meeting will be the following two days. Your prework due date for your deliverables is now moving from 12/17 to 2/17.

SPOT

Dayle Mooney

The SPOT Team is now under Dayle. She is working on updated needs and will need one person per coalition to serve on it. Please submit names to Dayle. SPOT will meet twice at the end of the January and August meetings. She will send out some information to describe the benefit of SPOT to the HCCs with a list of participants.

Region 3 - Leigh Wilsey;

Region 4 – Franklin Riddle

Region 5 – Lynne Drawdy

Region 7 Miami – Marilia Van Keeken

Region 7 Keys - Cyna Wright

Region 7 Palm Beach - John James

FEPA - will get back to us

Transitions in focus for HCCs

Recommendations for growth, performance

Keels got a discrepancy from the CAT Tool to submitted numbers. We need a definition for member or organization between CAT Tool and Performs. Dayle has spoken with Paul Link about that they don't match up. She recommends not being specific with dates but, that the CAT should be a deliverable.

Contracts

- From Lynne: Could we look more at capabilities than tasks? Measuring capabilities is what we need. Will they be putting out new perf measures? We hope to get guidance at the national conference.
- From Dan: Of tasks to remove? CSC. Dayle said CSC will probably be removed from the contract but, come up with what you must do and find things specific to your region. There are evolving requirements for contracts.
- From Lynne: There are 28 performance measures and numbers 17-22 should be the basis for the contract.
- From Cyna: Sustainability would be helpful. We're having a hard time with strategic outreach addressing infrastructure.
- How do members see your HCC?
 - o as a checkbook
 - Region 3 sees them as training,
 - Region 1 see them as meeting training requirements, for example x number of trainings per year as a requirement?
 - Region 4 thinks training and exercise will increase your membership to meet their requirements.
 - Region 7 Miami is hooking up members with additional training we don't pay for. Deliverables help us determine our training for the year.
- Determine what deliverable are not value added
- Don't need a copy of the sign in sheet since we capture it.
- EmPower is still included in the FOA.
- Participants like the pediatric worksheet and would prefer filling out templates with state driving the train. Can we have a similar setup for a burn plan, for example? Dayle will check into this.
- From Dan: Can capability-based deliverables be written vague enough to offer flexibility but tight enough to accomplish within the 3-5 year window? The deliverable is the verification to show growth.
- Eve will forward two bills to Dayle about DOH and DOE Stop the Bleed kits.

- The costs and breadth of joint full scale exercises were brought up as issues. Debbie offered up the services of TEE.
- Is there something representative you do?
 - Region 4 Treat each county as a coalition
 - Region 3 Coordinating and scheduling trainings and exercises.
 - Region 1 Exercises and trainings.
 - Region 7 Keys Talent development. Bylaws are written vaguely so policies can be developed and easier to change.
 - Region 5 Can the coalitions have input into standardizing and developing temples for deliverables. Some of the templates cause excessive work. The DOH travel form does not include an address to send the check to and we've asked for approval to add this but have not yet received approval.
- It takes four months from release to end of process for the RFP. The old contract is in place until the new contract is implemented.

National Conference

Open Discussion

Marilia mentioned that Attending Hub is a convenient app to help navigate the conference agenda, however, they won't upload presentations until after the sessions.

Dayle requested conference participants review the agenda and provide summaries of the sessions they attend.

Next meeting

We will skip the December meeting and meet in January.