

# Healthcare Coalition Task Force (HCCTF)

MINUTES January 21, 2015 in Veira, Florida 8:00 A.M. – 5:00 P.M. FY 2015-16 2ND MEETING

<b>MEETING CALLED BY</b>	Florida Department of Health, Bureau of Preparedness and Response (BPR)
<b>TYPE OF MEETING</b>	2 <sup>nd</sup> Face-to-Face Meeting for 2015-16 grant year
<b>FACILITATORS</b>	John Wilgis and Jeanine Posey
<b>NOTE TAKER</b>	Lela Shepard
<b>TIMEKEEPER</b>	N/A
<b>ATTENDEES</b>	Connie Bowels (for Benjamin Abes), Southwest Florida Healthcare Preparedness Coalition; Robert Kosiba (for David Theroux) Heartland Healthcare Coalition; Valerie Beynon, BPR; Kim Bowman, BPR; Brett Slocum (for Mary Kay Burns), RDSTF 6 Co-Chair; Rebecca Creighton, RDSTF 7 Co-Chair; Ronnie Fetzko, BPR; Bruce Gottschalk SMRT Commander; April Hinkle, FL Healthcare Association; Ann Hill, Emerald Coast HCC; Carol Jeffers (for Ann Pasik), Suncoast HCC; Holly Kirsch, Big Bend HCC; Tom Knox, FL Association of Community Health Centers; Gary Kruschke, Emerald Coast HCC; Ashley Lee, HERC HCC; Edwardo Leon, Miami-Dade HCC; Kathleen Marr, CHEPC HCC; Tony McLaurin, North Central FL HCC; Randy Ming, CHAMP HCC; Beth Payne, NE FL HCC; Jeanine Posey, BPR; Thomas Robinson, DEM; Ray Runo, Big Bend HCC; Lela Shepard, BPR; Dan Simpson, Tampa Bay HCC; Dan Johnson, Tampa Bay HCC; Kate Flores, Broward HCC; Leigh Wilsey, NE FL HCC; Cyna Wright, Keys HCC; Navin Deonarine, Broward HCC; Dave Freeman, Central FL HCC; Lynn Drawdy, Central FL HCC; John James, Region 7 HERC; Matt Meyers, Central FL HCC; John Wilgis, FHA.

## Meeting Objectives:

1. Provide a Bureau Update.
2. Discuss contract deliverables for FY 2016-17.
3. Discuss options for funding allocation methodology for FY 2016-17.
4. Discuss ASPR grant required full-scale exercise.
5. Discuss Regionalization of Health Care Coalitions.
6. Health Care Coalition updates.

## Agenda

GROUP DISCUSSION

<b>DISCUSSION</b>	WELCOME, OPENING COMMENTS AND INTRODUCTIONS Christie Luce opened the meeting and welcomed attendees; explained purpose of the meeting
<b>CONCLUSIONS</b>	The meeting began with introductions and an overview of the objectives and agenda.

GROUP DISCUSSION

<b>DISCUSSION</b>	<p><b>Bureau Update</b></p> <p>Christie Luce provided the group an update on Mike McHargue. Cindy Dick, Division Director for Emergency Preparedness and Community Support, will stay on until Feb 4 (or possibly later if the candidate they are interested accepts the position). The Division Director candidate is from Washington state and has a background in emergency management.</p> <p>The Bureau is still in the middle of a reorganization, fortunately BPR has already reorganized functionally. Christie also provided an update on the proposed 2016-17 Public Health and Healthcare Preparedness projects and activities, which the Strategic Planning Oversight Team (SPOT) will review at the upcoming</p>
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annual meeting in Orlando Feb 10 and 11.

Christie mentioned the Bureau will stop providing individual hospital contracts starting beginning with the 2016-17 grant year. That money will be provided to the healthcare coalitions for them to determine who needs the funds in their respective regions. Christie also mentioned again the idea on moving to only 7 healthcare coalition contracts (instead of the current 15). This would require those regions with more than one coalition to create an executive board to manage and administer the funds.

Christie also mentioned that the Department and the Division has a new strategic plan, which will be shared with the HCCTF members as soon as the final version has been approved.

Christie Luce and Jeanine Posey also mentioned the site visits by the ASPR project officer, Captain Paul Link. Several HCCs have taken advantage of this technical assistance by ASPR (to provide an assessment of their HCC). Dan Simpson and Dave Freeman both recommended that all HCCs take advantage of this assistance from ASPR. *John Wilgis suggested the HCCTF create a small workgroup to share results of all these site visits. Possibly this summer?* Captain Paul Link will be sharing what he has learned (by doing these site visits) on a FEMA Region 4 call.

#### **Discuss contract deliverables for FY 2016-17**

Jeanine Posey discussed work with legal and BPR contract managers to make sure the deliverables for 2016-17 are approved by the Department (particularly legal) and the Department of Financial Services. Several HCC members expressed need to have clear deliverables, timeframes and templates (if applicable). There was also a discussion about the Ebola funding (which is separate from CDC and ASPR public health and healthcare preparedness grants each year), deliverables and dates. There was also discussion among the task force members about what they have used their funding for (both for the regular CDC and ASPR funds and Ebola). Ebola funds were for an 18 month period. John Wilgis, Christie Luce and Jeanine Posey said federal partners have said Ebola funds could also be used for infectious disease activities, including the Zika virus. John Wilgis mentioned that the Ebola workgroup contact at the Department (in the Division of Epi) has left, and communication about the Ebola funding has not be forthcoming. *Christie said she would have Aaron Otis provide more clarity about the Ebola training that he mentioned at the Training, Exercise, Planning, and Workshop (TEPW) to the HCCTF.*

There was some discussion about infection control projects to fund April Hinkle mentioned that long-term care facilities are always concerned about infection control and to consider working with long-term care facilities on some projects. John Wilgis also mentioned that OSHA has also focused on infection control in the workforce. *It was mentioned that a forthcoming rule is expected (CMS, Joint Commission) and John Wilgis will share an overview of the proposed rule with the HCCTF.*

There was some discussion about the HCC meeting in San Diego. There is an expectation that there will be more interest in HCCs in the next few years, so HCCTF members should be aware that their memberships will likely grow.

#### **Discuss options for funding allocation methodology for FY 2016-17 AND Regionalization concept.**

Jeanine Posey and Christie Luce began a discussion about the funding allocation methodology for the 2016-17 grant year. Christie said the funding methodology needs to be discussed in the context of regionalization. Christie explained how we currently fund the Healthcare Coalitions (a contract with each coalition - 15 in Florida). The Department would like to align the HCC contracts with the 7 RDSTF regions. The Department would like those regions with more than one healthcare coalition to develop an executive committee with representatives from each coalition, so that the Department contracts with one entity within each region. The executive committee would then determine how to distribute those funds within the region. Christie mentioned that Region 1 is already structured this way. Kathleen Marr clarified that the committees are to collectively bring the region together to receive funding (and not oversight). Christie said yes, and that every region is going to work differently, but yes, the idea is to have one entity to receive funding (and not 3 or 4 per region).

It was mentioned that the RDSTF is not a financial entity, so the HCCs would need to find one that is a 501c3 (nonprofit) to receive the funds. Dan Johnson and Dan Simpson (Region 4) discussed how they distribute funds in their region (is by county). Region 5 distributes funds by discipline (not county). Leigh Wilsey mentioned that their local planning council is the 501c3 for their healthcare coalition. Leigh shared with the HCCTF a one-pager she developed on the concept they are considering in her region. Kathleen Marr expressed concerns with "bumping-up" against an "auditing number" because their region is so large.

Christie Luce expects a standard contract for each region, yet each region would then decide the funding mechanism (for example Region 4 funds by county and Region 5 by discipline). How the funds are distributed within the region would be determined by the regional HCC or executive committee created by several HCCs. Christie mentioned that the Department is moving in the same direction when it comes to funding preparedness at the local level. Each local health department would receive a certain amount of funding (instead of positions)

and it would be up to that local health department on how they would spend the funds.

In closing, HCCTF members agreed that Regions 3, 6 and 7 will need to work further with BPR and the Department on this regionalization concept. Dan Simpson said he would work with Regions 3, 6 and 7 to help them if needed. Leigh Wilsey also shared her concept for Region 3. Kathleen Marr said the RDSTF Co-Chairs in Region 7 are not on-board with the regionalization concept and there is no benefit for region 7. Christie Luce said they want to make this work for Region 7 and it may take a little longer for Region 7 to implement.

*Christie Luce said she will work with the RDSTF Health and Medical Co-Chairs to come up with a funding methodology. John Wilgis mentioned the idea of creating an ad hoc workgroup on this topic and looking at what other states have done.*

#### **Discuss ASPR grant required full-scale exercise.**

Jeanine Posey mentioned that Marion County, Region 2, 6 and 4 have not completed their full-scale exercise. These HCCs have until the end of June 2017 to complete their full-scale exercise. There is also an exercise required for this year (but it can be a table top). The level of play is determined by individual partners, for example some regions the hospitals only provided bed availability. Ben St. John's training and exercise staff is working now with Region 1 on a full-scale exercise. HERC (in Region 7) is very experienced with exercises and can help.

Other

John Wilgis mentioned the end of year assessments will be coming up soon. If HCCs would like input in developing the survey instrument, please contact John off-line. The survey is developed in the spring, sent in April and collected and put into Performs (federal database) in May by BPR's finance and administration folks.

#### **Healthcare Coalition Updates**

**Ann Hill (Emerald Coast HCC; Region 1):** They are working hard on their full-scale exercise. They are offering a lot of trainings prior to the exercise. Very busy, things are going well. Ex board meets every other month. They consolidate their coalition related updates into just two emails a month to their members, that way they do not get millions of emails.

**Ray Runo (Big Bend HCC; Region 2):** April 4 week Captain Paul Link will be in town for their assessment. Planning for their spring exercise (May 4), they are using Civic center. Trying to fill gaps they identified last year. They plan to have about 150 people, they are also working with FSU (which saved them \$5K with the civic center).

**Leigh Wilsey (NE Florida HCC; Region 3):** April 12 we are having an Ebola summit. It is an all day workshop (training and exercise). Also in April they are doing an exercise with hospitals and special needs, focusing on evaluations and having hospitals receive patients from other hospitals.

Dan Johnson comment: What about marketing the HCCs at the Governors Hurricane Conference (GHC)? John Wilgis mentioned there will be communication trainings at GHC. Valerie Beynon said she and EMI will be doing a training on functional and access needs. There will also be a round table (Jeanine will also participate). There we discussions about whether HCCs should have a booth at the GHC. *Christie Luce said she would check into the cost and if BPR can pay for one.*

**Dan Simpson (Tampa Bay HCC; Region 4):** They are rotating out old members and brining in new members. Jan 29 is their next HCC meeting. Storage issue for medical surge – we don't have any medical surge, so it is a goal to make sure they have this. March is their exercise (POD exercise dealing with WMD, which activates their BioWatch system). It will involve all 9 counties – over a week; will impact the two largest counties (traffic). Will test crisis and risk communications; how the communicate with various populations. They are proud of website.

**Tony McLaurin (North Central HCC):** Working toward their deliverables. March 14 is their next meeting.

**Randy Ming (CHAMP; Region 3):** They started their web-based newsletter. They have a general meeting every 4<sup>th</sup> Wed (monthly). They have training coming up. All good.

**Lynn Drawdy (Central Florida HCC; Region 5):** They held their first election in December and they have five new board members. They have various committees based not on counties but specialization/kind of group. They have a lot of exercises going on. They just finished the Bioshield exercise. They are doing an active shooter and chemical exercise. They are also doing some table tops (using some FEMA tools). They just got the ASPR (Captain Link) assessment report. They got great suggestions that will help them update their strategic plan. Captain Paul Link is doing this as a pilot project (no other project officers are doing this). Projects: ICAR (kicks off in two weeks). An area command (regional resource management) project is being piloted. Will unveil that soon. Dave Freeman mentioned they inventoried the resources (using IRMS). IRMS helps you keep up with shelf-life issues and such. Dr. Peter Papas (Trauma) proposed a committee related to region 5 trauma pilot project. He has all the trauma hospitals on-board et al and is about to propose it to DOH and other stakeholders.

**Carol Jeffers (Suncoast HCC; Region 6):** They mentioned the El Nino tornados and other hazards that occur during an El

Nino.

**Bob Kosiba (Hartland HCC; Region 6):** Last week they had their HCC meeting and discussed their deliverables and their COOP issues. Also discussed IRMS – they started with rural counties firsts; they hired an ops guy who is inputting the info into the system. May 2016, they will do a full scale exercise around a music festival in Okeechobee. [Christie Luce mentioned that they should work with Ben St. John on their objectives]. Also, his chair will need to step down because of his responsibilities at the hospital (but he will stay with the board, just not chair). At the last meeting, they had the most attendance ever. One project was approved, one project was denied. Will stick with the planning council as their 501c3. He also mentioned that Region 6 may have a solution to their regionalization issue – they talked with Leigh Wilsey about what she is doing in Region 3 and sounds plausible in Region 6.

**Kathleen Marr (CHEPC):** Looking to providing radios to all hospitals (that connect to EOCs). Will do a table top exercise this year (related to pediatric) and they may turn it into a full-scale exercise for 2017.

John Wilgis comment: He said this is the first time all coalitions from Region 7 attended (and Region 6 coalitions too). All coalitions were represented for the first time. Apparently, this location is easy for Region 7 to travel to.

**Ashlee Lee (HERC HCC; Region 7):** Captain Paul Link will arrive next Friday. They look forward to his input. RDSTF changes: their co-chair is no longer with them. Next co-chair meeting is Feb 22. Looking to do an Ebola table top.

**Kate Flores (Broward County HCC; Region 7):** They are working through their ASPR deliverables. They are putting on an advanced PIO course. They recently did a fire rescue course. Also meeting with Captain Paul Link next week. Working with ICAR (to do an EMS and Hospital assessment). Airport is doing an active shooter exercise (from midnight to 4 am to test the night shift) and so they are looking to see if their hospitals can participate. [Leigh Wilsey from Region 3 mentioned that they did a similar exercise, so she can put her in touch with her contact that knows more about this.] Their county is going through some radio upgrades (lots of headaches). They are trying to reestablish their website and make it more user friendly.

**Edwardo Leon (Miami Dade HCC; Region 7):** Still working on ASPR deliverables. Feb 6 they have an active shooter exercise (courthouse and the ball park; will be all day event; hospitals will participate). They had a full healthcare coalition meeting yesterday.

**Cyna Wright (Keys Health HCC; Region 7):** They are still plugging away at infrastructure. They are getting their folks into SERVFL and Everbridge. They held a two day training course and lots of partners attended (including the Navy). Every hospital, longer term facility and dialysis folks participated in an exercise. The conversations that came out of the exercise were fascinating, including a discussion among the facilities and the utilities about some gaps they found. Mass casualty exercise (in the middle keys; this area has larger airport). They are working on their strategic plan – anyone who has one, please throw her way. We have PPE training available for our folks. FPHRAT can be used as part of our HVA. Looking for ways to look for money, so they are looking at COOP [Kim Bowman is BPR COOP contact].

**Tom Knox (Florida Association of Community Health Centers):** More members are coming on board; and a lot of them have not focused on EM. He is trying to get folks to focus on EM. Most folks do not have full-time EM people; lots of turn over. Special need shelters; Everbridge; trying to get folks involved. Members of his organization provide care for more than 2 million people. Will be interesting to see how the CMS rule will influence folks. He has people that cross regions (and he recommends they attend healthcare coalition meetings). Educating members and other community partners that his centers are part of the continuum of care.

**April Hinkle (Florida Healthcare Association):** Please put me on your email distribution lists. If you do not have long term folks on your boards or work groups, let me know and I can get you some names.

Lynn Drawdy comment: Said she wants a point of contact and map. Maybe the HCCTF can put a name on our website where you click an area and you get a name and contact info?

Bruce Gottschalk comment: **Reminded** everyone that they have a SMRT teams. Please reach out to them if you need them during exercises.

ACTION ITEMS	PERSON RESPONSIBLE	DEADLINE
Create a small workgroup to share results of all the ASPR site visits (possibly this summer).	John Wilgis/Jeanine Posey	Update at next monthly meeting/call
Provide more clarity about the Ebola tabletop exercise a HCCTF meeting that will meet requirements of the contract.	Christie Luce/Aaron Otis	Update at next monthly meeting/call.
An overview of the forthcoming rule (CMS, Joint Commission).	John Wilgis	Update at next monthly meeting/call.
Create funding methodology for 2016-17 grant year for HCCs.	Christie Luce/Co-Chairs	Update on Next monthly meeting/call

Create an ad hoc workgroup on funding methodology (which may also look at what other states have done).	John Wilgis/Jeanine Posey	Update on Next monthly meeting/call
Determine if BPR should fund a HCCTF/HCC booth at Governor's Hurricane Conference.	Christie Luce/Jeanine Posey	My next monthly meeting/call

<b>CONCLUSIONS</b>	
<b>OBSERVERS</b>	None
<b>RESOURCE PERSONS</b>	Jeanine Posey and John Wilgis
<b>SPECIAL NOTES</b>	The co-leads would like to thank everyone for their participation in the HCCTF meeting.