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Executive Summary

Section 401.24, Florida Statutes (F.S.), requires the Florida Department of Health to develop and revise every five years a comprehensive state plan for basic and advanced life support services. At a minimum, the plan must include emergency medical systems planning, requirements for the operation, coordination and ongoing development of emergency medical services, and the definition of areas of responsibility for regulating and planning the ongoing and developing delivery service requirements.

In May of 2016, the Bureau of Emergency Medical Oversight (BEMO), Emergency Medical Services (EMS) Section conducted a planning summit in coordination with the EMS Advisory Council (EMSAC) and EMS stakeholders to develop the Emergency Medical Services State Plan, 2016-2021. This plan is designed to be a framework to strengthen Florida’s EMS system to achieve one vision: a unified EMS system that provides evidence-based prehospital care to the people of Florida and serves as the recognized leader in EMS response nationwide. It is a living document that will be evaluated and updated regularly to address new challenges posed by the changing environment of public health in Florida.

In creating the EMS state plan, the bureau reviewed the State Health Improvement Plan, the Department of Health Strategic Plan, and the EMS Advisory Council Strategic Plan in an effort to align strategic priorities, goals and objectives. This alignment will provide Florida EMS with a road map to future statewide collaborative efforts within the continuum of care and become a catalyst for more involvement in Florida’s public health initiatives.

Mission, Vision and Values

Mission – Why do we exist?
To protect, promote and improve the health of all people in Florida through integrated state, county and community efforts.

Vision – What do we want to achieve?
To be the Healthiest State in the Nation.

Values – What do we use to achieve our mission and vision?
Innovation: We search for creative solutions and manage resources wisely.
Collaboration: We use teamwork to achieve common goals and solve problems.
Accountability: We perform with integrity and respect.
Responsiveness: We achieve our mission by serving our customers and engaging our partners.
Excellence: We promote quality outcomes through learning and continuous performance improvement.
**Strategy Map**

### Strategic Priority Areas

<table>
<thead>
<tr>
<th>Strategic Priority Areas</th>
<th>Strategies</th>
<th>Objectives</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>EMS Industry Safety</strong></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
| **Goal 1.0** - Ensure a commitment to the health and safety of the EMS industry and the citizens and visitors of Florida | - Improve wellness, fitness and safety among EMS providers  
- Improve safety of pediatric transport in EMS permitted vehicles  
- Reduce EMS errors |  
- By July 1, 2018, increase by 5% the availability of employee wellness programs that address nutrition, weight management, and smoking cessation counseling services in local EMS agencies  
- Decrease the number of vehicle collisions involving ambulances by 25% from 107 per three year rolling average to 80 by December 2019  
- By December 2018, complete an analysis of patients under the age of four years that are transported in an EMS permitted vehicle in a child restraint device  
- By December 31, 2018, implement an anonymous statewide EMS medical error data collection tool and process |
| **Clinical and Operational Performance** |  
- Promote quality patient care and outcomes  
- Promote the accessibility and use of Emergency Medical Services Tracking and Reporting System (EMSTARS) data to drive performance improvement initiatives |  
- Increase the number of emergency runs submitted to EMSTARS from 75% to 85% by June 2019  
- Increase the number of automated data linkages between EMSTARS and other relevant databases from 1 to 4 by December 2019  
- Increase the percent of non-traumatic cardiac arrest patients who receive bystander Cardiopulmonary Resuscitation (CPR) from 16% to 20% by December 2018  
- Increase the percentage of non-traumatic cardiac arrest patients who develop a Return of Spontaneous Circulation (ROSC) both prehospital and upon arrival to Emergency Department (ED) from 16.32% to 20.34% by December 2018  
- Increase the percentage of ST Elevation Myocardial Infarction (STEMI) alert events in which the on-scene time is less than or equal to 15 minutes from 61% to 90% by December 2018  
- Increase the percentage of STEMI alert patients that were transported to a Level I or Level II Cardiovascular Hospital from 68% to 90% by December 2018  
- Increase the percent of stroke alert events in which the on-scene time is less than or equal to 15 minutes from 67% to 90% by December 2018  
- Increase the percentage of stroke alert patients that were initially transported to a primary or comprehensive stroke center from 69% to 90% by December 2018  
- Increase the percentage of trauma alert events in which the total on-scene time is less than or equal to 10 minutes from 40% to 90% by December 2018  
- Increase the percentage of trauma alert patients that were initially transported to a trauma center from 57% to 75% by December 2018 |
| **EMS System Infrastructure and Finance** |  
- Improve financial stability and sustainability of Florida EMS systems  
- Increase the pool of qualified applicants for EMS positions with emphasis on veterans and diversity  
- Improve the evolution of interoperable communications between counties  
- Increase funding for Florida’s EMS System |  
- Increase the number of qualified applications approved for health care licensure of documented military spouses and honorably discharged veterans from 0 (2016) to 50 by December 2016  
- Increase the diversity of Emergency Medical Technicians (EMT) and paramedics in the workforce by 10% (or census data) to be reflective of the state’s population (race and gender)  
- By June 1, 2017, complete an analysis that determines the counties that have 800 MHz or 700 MHz trunked radio systems aligned with Florida’s Project 25 ID Numbering Plan  
- Increase the percentage of EMS providers that subscribe to FirstNet/FloridaNet from 0% to 30% by July 2021. *FirstNet is currently in the Request for Proposal (RFP) phase and not fully implemented  
- By December 2019, increase the percentage of State level revenue for the improvement and expansion of emergency medical services by 25% |
| **Readiness for Emerging Health Threats** |  
- Increase Florida’s National Health Security Preparedness Index (NHSPI)  
- Increase financial support for EMS readiness |  
- By April 1, 2017, complete an analysis of EMTs and paramedics that report they possess the knowledge and training to care for highly infectious disease patients  
- By April 1, 2017, complete an analysis of EMTs and paramedics that report they are properly equipped and supplied with materials to appropriately care for highly infectious disease patients  
- By April 1, 2017, complete an analysis of EMTs and paramedics that report they possess the knowledge and training to manage an active shooter event  
- By April 1, 2017, complete an analysis of the percentage of EMTs and paramedics that report they are properly equipped and supplied with materials to appropriately manage an active shooter event  
- By December 31, 2017, establish the number of EMS agencies participating in annual Chemical, Biological, Radiological, Nuclear and Explosives (CBRNE) exercises  
- By April 1, 2017, establish the number of EMS agencies participating in health care coalitions  
- By October 2016, complete an analysis of EMS providers to determine if they have adopted plans for and trained on the plans to manage an active shooter event  
- By October 2016, complete an analysis of EMS providers to determine the number of agencies that report that they are properly equipped and supplied to appropriately manage an active shooter event  
- By January 2017, distribute best practice guidelines on EMS management of active shooter events to all EMS providers |

Version 1.0
**Strategic Priority Areas**

**Community Redevelopment and Partnerships**

**Goal 5.0** - Integrate EMS with health planning and assessment processes to maximize community partnerships and expertise in accomplishing its goals

**Strategies**

- Provide injury prevention programs to the public
- Promote the increase of EMS agencies developing community paramedic programs (all objectives)
- Improve community health (all objectives)

**Objectives**

- Increase the number of EMS agencies conducting fall prevention programs from 5 to 25 by December 2018
- Increase the number of EMS agencies conducting opioid use and naloxone awareness programs from 0 to 50 by December 2018
- Increase the number of EMS agencies conducting safety programs sponsored or recommended by the Florida Department of Transportation (FDOT) from 0 to 50 by December 2018
- Increase the number of EMS agencies conducting drowning prevention programs from 0 to 40 by December 2018
- Increase the number of EMS agencies conducting programs to reduce infant mortality from 1 to 25 by December 2018
- Increase the number of EMS agencies offering cardiovascular health and wellness programs pursuant to section 401.272, F.S., from 5 to 25 by December 2018
- Increase the number of EMS agencies providing HIV health and wellness programs pursuant to section 401.272, F.S., from 0 to 25 by December 2018
- Reduce the number of pediatric low acuity ED visits from 28.60% to 20% by December 2018
- Reduce the number of adult low acuity ED visits from 14.15% to 10% by December 2018
- Increase the number of EMS agencies with protocols that actively refer children and adults for early intervention and treatment of mental health disorders from 0 to 25 by December 2018
- Increase the number of EMS agencies offering immunization programs pursuant to section 401.272, F.S., from 5 to 25 by December 2018
- Increase the number of EMS agencies conducting programs to reduce infant mortality from 1 to 25 by December 2018

**Regulatory Efficiency**

**Goal 6.0** - Establish a regulatory structure that supports the EMS system’s strategic priorities

**Strategies**

- Promote the ethical and professional practice of prehospital medicine in Florida

**Objectives**

- Increase the number of EMS provider agencies utilizing a performance-based inspection process from 0 to 180 by July 2017
Strategic Priorities

Strategic Priority 1: EMS Industry Health and Safety

Goal 1.0: Ensure a commitment to the health and safety of the EMS industry and the citizens and visitors of Florida

<table>
<thead>
<tr>
<th>Strategy</th>
<th>Objective</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.1 Improve wellness, fitness and safety among EMS providers</td>
<td>A By July 1, 2018, increase by 5% the availability of employee wellness programs that address nutrition, weight management and smoking cessation counseling services in local EMS agencies</td>
</tr>
<tr>
<td></td>
<td>B Decrease the number of vehicle collisions involving ambulances by 25% from 107 per three year rolling average to 80 by December 2019</td>
</tr>
<tr>
<td>1.2 Improve safety of pediatric transport in EMS permitted vehicles</td>
<td>A By December 2018, complete an analysis of patients under the age of four years that are transported in an EMS permitted vehicle in a child restraint device</td>
</tr>
<tr>
<td>1.3 Reduce EMS medical errors</td>
<td>A By December 31, 2018, implement an anonymous statewide EMS medical error data collection tool and process</td>
</tr>
</tbody>
</table>

Strategic Priority 2: Clinical and Operational Performance

Goal 2.0: Use health information technology to improve the efficiency, effectiveness and quality of patient care coordination and health care outcomes

<table>
<thead>
<tr>
<th>Strategy</th>
<th>Objective</th>
</tr>
</thead>
<tbody>
<tr>
<td>2.1 Increase the accessibility and use of EMSTARS data to drive performance improvement initiatives</td>
<td>A Increase the number of emergency runs submitted to EMSTARS by 10% from 75% to 85% by June 2019</td>
</tr>
<tr>
<td></td>
<td>B Increase the number of automated data linkages between EMSTARS and other relevant databases from 1 to 4 by December 2019</td>
</tr>
<tr>
<td>2.2 Improve patient care quality and outcomes</td>
<td>A Increase the percent of non-traumatic cardiac arrest patients who receive bystander CPR from 16% to 20% by December 2018</td>
</tr>
<tr>
<td></td>
<td>B Increase the percentage of non-traumatic cardiac arrest patients who develop a ROSC, both prehospital and upon arrival to ED, from 16.32% to 20.34% by December 2018</td>
</tr>
<tr>
<td></td>
<td>C Increase the percentage of STEMI alert events in which the on-scene time is less than or equal to 15 minutes from 61% to 90% by December 2018</td>
</tr>
<tr>
<td></td>
<td>D Increase the percentage of STEMI alert patients that were transported to a Level I or Level II Cardiovascular Hospital from 68% to 90% by December 2018</td>
</tr>
<tr>
<td></td>
<td>E Increase the percent of stroke alert events in which the on-scene time is less than or equal to 15 minutes from 67% to 90% by December 2018</td>
</tr>
</tbody>
</table>
Increase the percentage of stroke alert patients that were initially transported to a primary or comprehensive stroke center from 69% to 90% by December 2018

Increase the percentage of trauma alert events in which the total on-scene time is less than or equal to 10 minutes from 40% to 90% by December 2018

Increase the percentage of trauma alert patients that were initially transported to a trauma center from 57% to 75% by December 2018

### Strategic Priority 3: EMS System Infrastructure and Finance

**Goal 3.1:** Attract, recruit and retain a prepared, diverse and sustainable EMS workforce in all geographic areas of Florida

**Goal 3.2:** Establish a financially sustainable infrastructure, which includes processes and effective use of technology and communication supporting all EMS systems functions

<table>
<thead>
<tr>
<th>Strategy</th>
<th>Objective</th>
</tr>
</thead>
</table>
| 3.1 Increase the pool of qualified applicants for EMS positions with emphasis on veterans and diversity | A Increase the number of qualified applications approved for health care licensure of documented military spouses and honorably discharged veterans from 0 (2016) to 50 by December 2016  
B Increase the racial diversity of EMTs and paramedics in the workforce by 10% (or census data) to be reflective of the state’s population  
C Increase the gender diversity of EMTs and paramedics in the workforce by 10% (or census data) to be reflective of the state’s population |
| 3.1.2 Improve the evolution of interoperable communications between counties | A By June 1, 2017, complete an analysis that determines the counties that have 800 MHz or 700 MHz trunked radio systems aligned with Florida’s Project 25 ID Numbering Plan  
B Increase the percentage of EMS providers that subscribe to FirstNet/FloridaNet from 0% to 30% by July 2021. “FirstNet is currently in the RFP phase and not fully implemented” |
| 3.2 Increase funding for Florida’s EMS System | A By December 2019, increase the percentage of state level revenue for the improvement and expansion of emergency medical services by 25% |

### Strategic Priority 4: Readiness for Emerging Health Threats

**Goal 4.0:** Demonstrate EMS readiness for emerging health threats and natural or manmade disasters

<table>
<thead>
<tr>
<th>Strategy</th>
<th>Objective</th>
</tr>
</thead>
</table>
| 4.1 Increase Florida’s National Health Security Preparedness Index (NHSPI) | A By April 1, 2017, complete an analysis of EMTs and paramedics that report they possess the knowledge and training to care for highly infectious disease patients  
B By April 1, 2017, complete an analysis of EMTs and paramedics that report they are properly equipped and |
supplied with materials to appropriately care for highly infectious disease patients

C By April 1, 2017, complete an analysis of EMTs and paramedics that report they possess the knowledge and training to manage an active shooter event

D By April 1, 2017, complete an analysis of the percentage of EMTs and paramedics that report they are properly equipped and supplied with materials to appropriately manage an active shooter event

E By December 31, 2017, establish the number of EMS agencies participating in annual CBRNE exercises

F By December 2017, establish the number of EMS agencies participating in health care coalitions

G By October 2016, complete an analysis of EMS providers to determine if they have adopted plans for and trained on the plans to manage an active shooter event

H By October 2016, compete an analysis of EMS providers to determine the number of agencies that report that they are properly equipped and supplied to appropriately manage an active shooter event

I By January 2017, distribute best practice guidelines on EMS management of active shooter events to all EMS providers

**Strategic Priority 5: Community Redevelopment and Partnerships**

**Goal 5.0:** Integrate EMS with health planning and assessment processes to maximize community partnerships and expertise in accomplishing its goals

<table>
<thead>
<tr>
<th>Strategy</th>
<th>Objective</th>
</tr>
</thead>
<tbody>
<tr>
<td>5.1 Reduce Injury</td>
<td>A Increase the number of EMS agencies conducting fall prevention programs from 5 to 25 by December 2018</td>
</tr>
<tr>
<td></td>
<td>B Increase the number of EMS agencies conducting opioid use and naloxone awareness programs from 0 to 50 by December 2018</td>
</tr>
<tr>
<td></td>
<td>C Increase the number of EMS agencies conducting safety programs sponsored or recommended by the FDOT from 0 to 50 by December 2018</td>
</tr>
<tr>
<td></td>
<td>D Increase the number of EMS agencies conducting drowning prevention programs from 0 to 40 by December 2018</td>
</tr>
<tr>
<td></td>
<td>E Increase the number of EMS agencies conducting programs to reduce infant mortality from 1 to 25 by December 2018</td>
</tr>
<tr>
<td>Strategic Priority 6: Regulatory Efficiency</td>
<td></td>
</tr>
<tr>
<td>---------------------------------------------</td>
<td></td>
</tr>
<tr>
<td><strong>Goal 6:</strong> Establish a regulatory structure that supports the EMS system’s strategic priorities</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Strategy</th>
<th>Objective</th>
</tr>
</thead>
<tbody>
<tr>
<td>6.1 Establish and promote a quality based EMS inspection process</td>
<td>Increase the number of EMS provider agencies utilizing a performance-based inspection process from 0 to 180 by July 2017</td>
</tr>
</tbody>
</table>
Appendix A: Florida EMS State Planning Summit Participants

**Florida EMS Advisory Council**
- Julie Bacon
- EMS Advisory Council
- All Children’s Hospital
- Cory Richter
  - EMS Advisory Council Strategic
  - Visions Subcommittee
  - Indian River County Fire Rescue
- Malcom Kemp
  - EMS Advisory Council
  - Leon County EMS
- Tracy Yacobellis
  - EMS Advisory Council
  - Florida Department of Education
- Ann Brown
  - EMS Advisory Council
  - Florida Gateway College
- Darrell Donatto
  - EMS Advisory Council
  - Florida Fire Chiefs’ Association (FFCA)
- Isabel Rodriguez
  - EMS Advisory Council
  - American Medical Response
- Michael Lozano
  - EMS Advisory Council
  - Hillsborough County Fire Rescue
- Jane Bedford
  - EMS Advisory Council
  - Nature Coast EMS
- Doris Ballard-Ferguson
  - EMS Advisory Council
- Danny Griffin
  - EMS Advisory Council
  - Florida Association of EMS Educators

**EMS Constituency**
- Patricia Byers
  - Florida Committee on Trauma
  - University of Miami Miller School of Medicine
- Debbie Vass
  - Florida Association of EMS Quality Managers
  - Sunstar EMS
- Angel Nater
  - Florida Association of EMS Educators
  - Seminole State College
- Hezedean Smith
  - Orlando Fire Department
- Michael Hall
  - Nature Coast EMS
  - Florida Ambulance Association
- John Peterson
  - Sunstar EMS
- Melissa Keahey
  - Emergency Medicine Learning & Resource Center
  - Florida Association of EMS Medical Directors
- Patrick Husic
  - Florida Neonatal and Pediatric Transport Association
- Michael Patterson
  - Florida Association of Rural EMS
  - Florida Association of County EMS
  - Putnam County Fire & EMS

**Florida Department of Health Staff**
- Steve McCoy
  - EMS Administrator
  - Bureau of Emergency Medical Oversight
- Rickey Stone
  - Program Administrator
  - Bureau of Emergency Medical Oversight
- Bobby Bailey
  - Lead Exercise Coordinator
  - Bureau of Preparedness & Response
- Melia Jenkins
  - EMS Planning Manager
  - Bureau of Emergency Medical Oversight
- Kimberly Moore
  - Health Services Manager
  - Bureau of Emergency Medical Oversight
- Joshua Sturms
  - Data Section Administrator
  - Bureau of Emergency Medical Oversight
- Bethany Lowe
  - Administrator
  - Bureau of Emergency Medical Oversight
- Brenda Clotfelter
  - EMSTARS Project Manager
  - Bureau of Emergency Medical Oversight
- Juan Esparza
  - Business Analyst
  - Bureau of Emergency Medical Oversight
Appendix B: Planning Summary

A multidisciplinary group of EMS stakeholders met several times over the past two years to complete this plan. This plan began in October of 2013 as a multifaceted strategic plan with numerous goals and objectives that were difficult to measure and improve upon. No action was taken on the plan until it was revisited in January of 2016. It was agreed upon by the Department and the EMS Advisory Council to revise the current strategic plan using relevant goals and measurable objectives that aligned with other public health initiatives. This resulted in a collaborative product between the Florida EMS Advisory Council, the Florida Department of Health, and EMS stakeholders.

The following is the EMS State Plan Schedule of Meetings and Events:

<table>
<thead>
<tr>
<th>MEETING DATE</th>
<th>MEETING TOPIC</th>
</tr>
</thead>
<tbody>
<tr>
<td>July 2014</td>
<td>Draft EMS Advisory Council Strategic Plan was finalized by the council</td>
</tr>
<tr>
<td>January 2016</td>
<td>Revision concept was presented to the EMS Advisory Council and approved</td>
</tr>
<tr>
<td>March 3, 2016</td>
<td>Initial State Plan Coordinator Meeting</td>
</tr>
<tr>
<td>April 15, 2016</td>
<td>EMS State Plan Toolkit and Environment Scan completed</td>
</tr>
<tr>
<td>April 15, 2016</td>
<td>Review and environmental scan comment period began</td>
</tr>
<tr>
<td>May 2, 2016</td>
<td>State Plan Coordinator Meeting</td>
</tr>
<tr>
<td>May 4, 2016 - May 5, 2016</td>
<td>EMS State Planning Summit</td>
</tr>
<tr>
<td>June 1, 2016</td>
<td>Environmental scan closed and final drafting period began</td>
</tr>
<tr>
<td>June 6, 2016</td>
<td>First draft delivered to the EMS Advisory Council for review</td>
</tr>
<tr>
<td>June 6, 2016</td>
<td>Comment period began</td>
</tr>
<tr>
<td>July 14, 2016</td>
<td>EMS Advisory Council vote for approval</td>
</tr>
<tr>
<td>Sept 22, 2016</td>
<td>DOH approval</td>
</tr>
<tr>
<td>Sept 22, 2016</td>
<td>Publish final document</td>
</tr>
<tr>
<td>Oct 18, 2016</td>
<td>Training session on EMS State Plan Reporting Tools and Action Plans</td>
</tr>
</tbody>
</table>

The first step in revising the current strategic plan was to use data from previous strategic planning efforts, as well as environmental scan results and other data sources, to develop measurable goals. Next, the Department created the EMS State Plan Toolkit. The toolkit includes a strategy map, which illustrates the alignment of the revised EMS State Plan goals, strategies, and objectives with other national and state public health initiatives such as, Healthy People 2020, the Florida State Health Improvement Plan, and the Agency’s Strategic Plan. Lastly, strategic planning coordinators worked with constituent groups and other EMS stakeholders during the State Planning Summit to write and revise strategies and objectives for each goal. The revised document was sent to the EMS Advisory Council and Department leadership for comment and approval.
Appendix C: Monitoring Summary

The EMS State Plan is a component of a larger performance management system. A primary focus of this EMS State Plan is to integrate into other state and national strategic planning efforts. Many of the goals, strategies, and objectives within this plan will integrate into the Department’s overall performance management system, thereby promoting an EMS industry culture highlighting accountability and performance excellence.

The EMS Strategic Visions Team (EMS Advisory Council’s Strategic Visions Subcommittee and the Department) will be responsible for monitoring and reporting progress on the goals and objectives of the EMS State Plan. The Strategic Visions Team meets quarterly during EMS Advisory Council and constituent group meetings to discuss recommendations about tools and methods that integrate performance management into sustainable industry practice. Annually, an EMS state plan progress report, assessing progress toward reaching goals, objectives, and achievements for the year, will be developed and presented to Department executive leadership and the EMS Advisory Council. The EMS State Plan will be reviewed and revised by July each year based on an assessment of availability of resources, data and progress.
The EMS Strategic Visions Team includes priority area owners, goal team liaisons, objective leads, and Department employees. The graph below outlines the roles of the specific individuals, their role in the state plan, and their constituent group or subcommittee.

**Strategic Priority Area Owner**

**As of May 2016**

EMSAC - Dr. Charles Moreland
Data Committee - Chief Darrel Donatto
PIER Committee - David Summers
Education Committee - Danny Griffin
Legislative Committee - Alan Skavroneck
Medical Care Committee - Dr. Joe Nelson
Disaster Committee - Dr. Mike Lozano
Access to Care Committee - Jane Bedford

**Goal Team Liaison Roles:**

*Ensure that the plan is an agenda item at meetings*
*Participate in meetings by teleconference or in person as determined by workgroup*
*Report changes in objective lead liaisons to Strategic Visions Committee*
*Respond to inquiries from state plan coordinator and members of the Strategic Visions Committee*

**Goal Team Liaisons - As of May 2016**

BEMO Data Section - Joshua Sturms
BPR - Terry Schenk
Community Surge Team - Terry Schenk
Communication Committee - Margaret Hanrick and Carlton Wells
Dispatch Work Group - Wendy Parkinson
Department of Management Services (DMS) - Carlton Wells
EMS Medical Directors - Dr. Joe Nelson
EMSAC - Julie Bacon
Executive Committee - Dr. Charles Moreland
FAMA - Berri Conte
FENA - Ann Brown
FFCA, EMS Section - Chief Dan Harshburger
FL Assoc of EMS Providers - Dave Dyal
FL Ambulance Assoc - Alan Skavroneck
Quality Managers - Debbie Vass
US Lifeguard Association (USLA) - Joe McManus

**Objective Lead Roles:**

*Develop, execute, and revise action plans that meet objectives*
*Participate in meetings by teleconference or in person as determined by workgroup*
*Report status at least quarterly*
*Report changes in objective lead liaisons to Goal Team Liaisons*
*Respond to inquiries from state plan coordinator and members of the Strategic Visions Committee*

**Objective Leads - As of May 2016**

As determined by the Strategic Priority Owner

**DOH SVC Coordinators**

**As of May 2016**

Data - Joshua Sturms
Legislative - Steve McCoy
Communications - Wendy Parkinson
Access to Care – Rickey Stone
Disaster – Ina Leinas
Education – Rickey Stone
EMS for Children – Bonnie Anderson
Medical Care – Joshua Sturms
PIER – Kimberly Moore

**DOH Coordinator Roles:**

*Coordinates requests and feedback between Goal Teams and Objective Leads*
*Organizes meetings, mailings, surveys*
*Posts updates to web and/or BEMOcomm*
*Provides technical support and/or facilitates technical support from BEMO or other sources*
*Facilitate integration between the various system plans (trauma, injury prevention, preparedness, etc.) and national initiatives*
*Facilitate communication between the EMSAC subcommittees, EMS constituency groups, and other stakeholders involved in the strategic planning process to foster integration between the groups*
*Provide resources such as information from the National Association of State EMS Officials, EMS Agenda for the Future, best practices, and strategic planning tips*
### Appendix D: Alignment

<table>
<thead>
<tr>
<th>Objective</th>
<th>Healthy 2020</th>
<th>SHIP</th>
<th>Agency Plan</th>
<th>Subcommittee Assigned To</th>
<th>Source</th>
</tr>
</thead>
<tbody>
<tr>
<td>By July 1, 2018, increase by 5% the availability of employee wellness programs that address nutrition, weight management and smoking cessation counseling services in local EMS agencies</td>
<td>CD2.2</td>
<td>2.1.2</td>
<td>3.1.4</td>
<td>Access to Care</td>
<td>Workman’s Comp</td>
</tr>
<tr>
<td>Decrease the number of vehicle collisions involving ambulances by 25% from 107 per three year rolling average to 80 by December 2019</td>
<td>OSH-1 OSH-2</td>
<td>HP4.1</td>
<td>2.1.4</td>
<td>Access to Care</td>
<td>FDOT Crash Database</td>
</tr>
<tr>
<td>By December 2018, complete an analysis of patients under the age of four years that are transported in an EMS permitted vehicle in a child restraint device</td>
<td>IVP-16</td>
<td>HP4.1.3</td>
<td>2.1.4</td>
<td>EMSC</td>
<td>EMSTARS 3.0</td>
</tr>
<tr>
<td>By December 31, 2018, implement an anonymous statewide EMS medical error data collection tool and process</td>
<td>MPS-3</td>
<td>HP1.4</td>
<td></td>
<td>Medical Care</td>
<td>N/A</td>
</tr>
<tr>
<td>Increase the number of emergency runs submitted to EMSTARS by 10% from 75% to 85% by June 2019</td>
<td>PHI-7 PREP-19</td>
<td>HP1.4 HP4.2</td>
<td>3.1.3</td>
<td>Data</td>
<td>EMSTARS</td>
</tr>
<tr>
<td>Increase the number of automated data linkages between EMSTARS and other relevant databases from 1 to 4 by December 2019</td>
<td>PHI-7 PREP-19</td>
<td>HP1.3 HP4.2 HI1.1</td>
<td>3.1.3</td>
<td>Data</td>
<td>EMSTARS</td>
</tr>
<tr>
<td>Increase the percent of non-traumatic cardiac arrest patients who receive bystander CPR from 16% to 20% by December 2018</td>
<td>HDS-18 PREP-15</td>
<td>2.1.2</td>
<td></td>
<td>Medical Care</td>
<td>EMSTARS</td>
</tr>
<tr>
<td>Increase the percentage of non-traumatic cardiac arrest patients who develop a ROSC, both prehospital and upon arrival to ED, from 16.32% to 20.34% by December 2018</td>
<td>HDS-2 PREP-15</td>
<td>2.1.2</td>
<td></td>
<td>Medical Care</td>
<td>EMSTARS</td>
</tr>
<tr>
<td>Increase the percentage of STEMI alert events in which the on-scene time is less than or equal to 15 minutes from 61% to 90% by December 2018</td>
<td>HDS-19</td>
<td>2.1.2</td>
<td></td>
<td>Medical Care</td>
<td>EMSTARS</td>
</tr>
<tr>
<td>Increase the percentage of STEMI alert patients that were transported to a Level I or Level II Cardiovascular Hospital from 68% to 90% by December 2018</td>
<td>HDS-19</td>
<td>2.1.2</td>
<td></td>
<td>Medical Care</td>
<td>EMSTARS</td>
</tr>
<tr>
<td>Increase the percent of stroke alert events in which the on-scene time is less than or equal to 15 minutes from 67% to 90% by December 2018</td>
<td>HDS-19</td>
<td>2.1.2</td>
<td></td>
<td>Medical Care</td>
<td>EMSTARS</td>
</tr>
<tr>
<td>Objective</td>
<td>Healthy 2020</td>
<td>SHIP</td>
<td>Agency Plan</td>
<td>Subcommittee Assigned To</td>
<td>Source</td>
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</tr>
<tr>
<td>Increase the percentage of stroke alert patients that were initially transported to a primary or comprehensive stroke center from 69% to 90% by December 2018</td>
<td>HDS-19</td>
<td>2.1.2</td>
<td>Medical Care</td>
<td>EMSTARS</td>
<td></td>
</tr>
<tr>
<td>Increase the percentage of trauma alert events in which the total on-scene time is less than or equal to 10 minutes from 40% to 90% by December 2018</td>
<td>IVP-1</td>
<td>HP4.3</td>
<td>2.1.4</td>
<td>Medical Care</td>
<td>EMSTARS</td>
</tr>
<tr>
<td>Increase the percentage of trauma alert patients that were initially transported to a trauma center from 57% to 75% by December 2018</td>
<td>IVP-1</td>
<td>HP4.3</td>
<td>2.1.4</td>
<td>Medical Care</td>
<td>EMSTARS</td>
</tr>
<tr>
<td>Increase the number of qualified applications approved for health care licensure of documented military spouses and honorably discharged veterans from 0 (2016) to 50 by December 2016</td>
<td>HI3</td>
<td>5.1.2</td>
<td>Education</td>
<td>Licensing and Enforcement Information Database System (LEIDS)</td>
<td></td>
</tr>
<tr>
<td>Increase the racial diversity of EMTs and paramedics in the workforce by 10% (or census data) to be reflective of the state’s population</td>
<td>HI3</td>
<td>Education</td>
<td>LEIDS/Census</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Increase the gender diversity of EMTs and paramedics in the workforce by 10% (or census data) to be reflective of the state’s population</td>
<td>HI3</td>
<td>Education</td>
<td>LEIDS/Census</td>
<td></td>
<td></td>
</tr>
<tr>
<td>By June 1, 2017, complete an analysis that determines the counties that have 800 MHz or 700 MHz trunked radio systems aligned with Florida’s Project 25 ID Numbering Plan</td>
<td>PREP-2</td>
<td>3.1.3</td>
<td>Communications</td>
<td>DMS</td>
<td></td>
</tr>
<tr>
<td>Increase the percentage of EMS providers that subscribe to FirstNet/FloridaNet from 0% to 30% by July 2021. *FirstNet is currently in the RFP phase and not fully implemented</td>
<td>PREP-2</td>
<td>3.1.3</td>
<td>Communications</td>
<td>DMS</td>
<td></td>
</tr>
<tr>
<td>By December 2019, increase the percentage of state level revenue for the improvement and expansion of emergency medical services by 25%</td>
<td>HI2</td>
<td>4.1.3</td>
<td>Access to Care</td>
<td>Florida Department of Health/BEMO</td>
<td></td>
</tr>
<tr>
<td>By April 1, 2017, complete an analysis of EMTs and paramedics that report they possess the knowledge and training to care for highly infectious disease patients</td>
<td>HP3.2</td>
<td>HP3.6</td>
<td>Disaster</td>
<td>License Renewal Survey</td>
<td></td>
</tr>
<tr>
<td>By April 1, 2017, complete an analysis of EMTs and paramedics that report they are properly equipped and supplied with materials to appropriately care for highly infectious disease patients</td>
<td>HP3.2</td>
<td>HP3.6</td>
<td>Disaster</td>
<td>License Renewal Survey</td>
<td></td>
</tr>
<tr>
<td>By April 1, 2017, complete an analysis of EMTs and paramedics that report they possess the knowledge and training to manage an active shooter event</td>
<td>HP3.2</td>
<td>HP3.6</td>
<td>Disaster</td>
<td>License Renewal Survey</td>
<td></td>
</tr>
<tr>
<td>Objective</td>
<td>Healthy 2020</td>
<td>SHIP</td>
<td>Agency Plan</td>
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</tr>
<tr>
<td>By April 1, 2017, complete an analysis of the percentage of EMTs and paramedics that report they are properly equipped and supplied with materials to appropriately manage an active shooter event</td>
<td></td>
<td>HP3.2 HP3.6</td>
<td>Disaster</td>
<td>Disaster</td>
<td>License Renewal Survey</td>
</tr>
<tr>
<td>By December 31, 2017, establish the number of EMS agencies participating in annual CBRNE exercises</td>
<td></td>
<td>HP3.2 HP3.5</td>
<td>3.1.3</td>
<td>Disaster</td>
<td>Agency License Renewal Application</td>
</tr>
<tr>
<td>By December 2017, establish the number of EMS agencies participating in health care coalitions</td>
<td>PREP-18</td>
<td></td>
<td>Disaster</td>
<td>Disaster</td>
<td>Agency License Renewal Application</td>
</tr>
<tr>
<td>By October 2016, complete an analysis of EMS providers to determine if they have adopted plans for and trained on the plans to manage an active shooter event</td>
<td></td>
<td>HP3.2 HP3.6</td>
<td>Disaster</td>
<td>Disaster</td>
<td>Annual EMS System Survey</td>
</tr>
<tr>
<td>By October 2016, compete an analysis of EMS providers to determine the number of agencies that report that they are properly equipped and supplied to appropriately manage an active shooter event</td>
<td></td>
<td>HP3.2 HP3.6</td>
<td>Disaster</td>
<td>Disaster</td>
<td>Annual EMS System Survey</td>
</tr>
<tr>
<td>By January 2017, distribute best practice guidelines on EMS management of active shooter events to all EMS providers</td>
<td></td>
<td>HP3.2 HP3.6</td>
<td>Disaster</td>
<td>Disaster</td>
<td>Annual EMS System Survey</td>
</tr>
<tr>
<td>Increase the number of EMS agencies conducting fall prevention programs from 5 to 25 by December 2018</td>
<td>IVP-23</td>
<td>HP4.1</td>
<td>2.1.4</td>
<td>PIER</td>
<td>Agency License Renewal Application</td>
</tr>
<tr>
<td>Increase the number of EMS agencies conducting opioid use and naloxone awareness programs from 0 to 50 by December 2018</td>
<td>MPS-5</td>
<td></td>
<td>2.1.4</td>
<td>PIER</td>
<td>Agency License Renewal Application</td>
</tr>
<tr>
<td>Increase the number of EMS agencies conducting safety programs sponsored or recommended by the FDOT from 0 to 50 by December 2018</td>
<td>IVP-13 IVP-14 IVP-15</td>
<td></td>
<td>2.1.4</td>
<td>PIER</td>
<td>Agency License Renewal Application</td>
</tr>
<tr>
<td>Increase the number of EMS agencies conducting drowning prevention programs from 0 to 40 by December 2018</td>
<td>IVP-25</td>
<td>HP4.1.2</td>
<td>2.1.4</td>
<td>PIER</td>
<td>Agency License Renewal Application</td>
</tr>
<tr>
<td>Increase the number of EMS agencies conducting programs to reduce infant mortality from 1 to 25 by December 2018</td>
<td>IVP-24.2</td>
<td>AC5</td>
<td>1.1.1</td>
<td>EMSC</td>
<td>Agency License Renewal Application</td>
</tr>
<tr>
<td>Increase the number of EMS agencies offering cardiovascular health and wellness programs pursuant to section 401.272, F.S., from 5 to 25 by December 2018</td>
<td>HDS-2</td>
<td></td>
<td>2.1.2</td>
<td>Access to Care</td>
<td>Agency License Renewal Application</td>
</tr>
<tr>
<td>Increase the number of EMS agencies providing HIV health and wellness programs pursuant to section 401.272, F.S., from 0 to 25 by December 2018</td>
<td>HIV-2 HIV-3</td>
<td>HP1.3</td>
<td>2.1.5</td>
<td>Access to Care</td>
<td>Agency License Renewal Application</td>
</tr>
<tr>
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<tr>
<td>Reduce the number of pediatric low acuity ED visits from 28.60% to 20% by December 2018</td>
<td>AHS-9</td>
<td></td>
<td></td>
<td>Access to Care</td>
<td>Agency for Health Care Administration (AHCA) ED Report</td>
</tr>
<tr>
<td>Reduce the number of adult low acuity ED visits from 14.15% to 10% by December 2018</td>
<td>AHS-9</td>
<td></td>
<td></td>
<td>Access to Care</td>
<td>AHCA ED Report</td>
</tr>
<tr>
<td>Increase the number of EMS agencies with protocols that actively refer children and adults for early intervention and treatment of mental health disorders from 0 to 25 by December 2018</td>
<td>MHMD-6 MHMD-9</td>
<td></td>
<td></td>
<td>Access to Care</td>
<td>Agency License Renewal Application</td>
</tr>
<tr>
<td>Increase the number of EMS agencies offering immunization programs pursuant to section 401.272, F.S., from 5 to 25 by December 2018</td>
<td>IID-1 HP1.1</td>
<td>3.1.1</td>
<td></td>
<td>Access to Care</td>
<td>Agency License Renewal Application</td>
</tr>
<tr>
<td>Increase the number of EMS provider agencies utilizing a performance-based inspection process from 0 to 180 by July 2017</td>
<td>PHI-16 CR1.3</td>
<td></td>
<td></td>
<td>Data</td>
<td>Department of Health (DOH) LEIDS</td>
</tr>
</tbody>
</table>
Appendix E: Environmental Scan Resources

1. Emergency Medical Services Advisory Council July 2014 – June 2019 DRAFT Strategic Plan
2. Florida Department of Health Agency Strategic Plan 2016 - 2018
3. Florida Injury Surveillance Data System
4. Healthy People 2020 Topics and Objectives
5. CDC Performance Measure Specifications and Implementation Guidance
6. Agency for Health Care Administration (AHCA) Emergency Department Utilization Reports
7. Emergency Medical Services Tracking and Reporting System
8. National EMS Information System (NEMSIS)
9. Florida Community Health Assessment Resource Tool Set (CHARTS)
10. Florida Department of Transportation (FDOT) Crash Database
12. Florida Veterans Application Licensure Online Response System (VALOR)
13. United States Census Bureau Florida QuickFacts
14. Licensing and Enforcement Information Database System (LEIDS)
15. Florida Department of Health HIV Data Center
17. Florida Department of Health Infant Mortality Documents and Data
18. Drugs Identified in Deceased Persons by Florida Medical Examiners
20. U.S. Fire Administration, Fire/Emergency Medical Services Department Operational Considerations and Guide for Active Shooter and Mass Casualty Incidents
21. State Working Group, Interoperable Communications Committee, Guide of Interoperability Components
22. FloridaNet.gov Florida’s Public Safety Broadband Network
23. EMS Workforce for the 21st Century: A National Assessment
24. National Emergency Medical Services Workforce Data Definitions