4-7-23 Region 5 EMResource Steering Committee

**Participants:**

Miles Butler, Orlando Health

John Mulhall, Orange County Emergency Management

Jason Alicea, City of Orlando

Christopher Cottril, City of Orlando

Scott Egan, Orange County Fire Rescue

Karen Kozack, Asst. Public Safety Director

Kimberly Stephens, Lake EM Dispatch

Lawrence Marshall, AdventHealth

Andre Wise, B.S., EMT-P, AdventHealth

Smith, Melissa E. (EMS Liaison), Orlando Health

Michelle Rud, HCA

Julie Sitnik, Orange Comms Center

Christopher Dobson, Orange Comms Center

Lynne Drawdy, CFDMC

Matt Meyers, CFDMC

Eric Alberts, Orlando Health

**Welcome and Funding Update**: Lynne Drawdy welcomed the group and thanked everyone for their leadership in this area. She advised that Florida Hospital Association has agreed to fund the Juvare Pilot for an additional two years, through April 2025. Lynne stated that we have withdrawn the request for UASI funding for 2024 and will resubmit the project for funding beginning in 2025.

**Draft Guidelines:**

* Facility Identification within EMResource: Matt Meyers presented the draft guidelines that allow facilities with separate licenses to be listed separately in EMResource. The group approved the draft. Andre asked if Matt could set up Celebration pediatrics as a separate ED and Matt will work with Andre on that. This will be posted to the website and a link sent out to EMResource users.
* “Black” Definition. Matt presented a draft definition. Larry Marshall asked if black means closed to all, including foot traffic, and Matt stated that it does. Kimberly asked if black means that the ER is closed, and Matt stated that it does. Orlando Health raised concerns over conflicting guidance on this issue; he stated that according to the Orange County EMS Medical Director, they have been instructed that they are not allowed to go black. Lynne stated that her understanding from Dr. Zuver is that black means that the ER is closed and not just diverting ambulances. The group discussed that some hospitals have an internal black code, some are reluctant to go on black status. Michelle stated that there is very strict criteria for a hospital to go on black status and this must be reported to AHCA. She stated that in the ten years she has been at HCA they have only been on black status twice, once for a bomb threat and once due to no operating rooms. Chris stated that there are times when the hospitals should go on black status but are reluctant to (e.g. no water or power). All agreed that we need clarity on this. Matt will convene a group including Dr. Zuver, Eric Alberts, Miles Butler and Michelle Rud to clarify this guideline.

**Hospital Working Group**: Matt advised that this group includes Melissa Smith, Larry Marshall and Michelle Rud. They have been meeting and are working on role-specific guidelines. Once developed, they will create quick video training sessions on these.

**Dispatch Guidelines:** Matt advised that April McCleary has the lead on these, including what should be included in BOLOs and other alerts, and making sure that we can identify who sends the alerts.

**Suggestions for Additional Guidelines**: Melissa asked that a guideline be added to include eliminating old alerts. Matt stated that this can be set up automatically but with different settings by different users, this can be a problem. He will draft this for the group’s review. A workgroup to set up system parameters will be convened, and Kimberly and Larry volunteered to be on that workgroup. A workgroup will be convened for best practices for EMS usage. Larry volunteered to workgroup. Matt suggested that we also have a law enforcement workgroup.

**Next Steps**: Matt asked if there are other groups that we should engage, such as dialysis, or nursing homes. Lynne stated that in the FHA pilot nursing homes were the next step and asked the group if that would be the logical next step. Michelle said that engaging nursing homes would help hospitals with discharge planning. John asked what this would cost, and Matt explained that there is no additional cost. John stated that he sees value in exploring this option as during the hurricane, Orange County devoted a huge amount of time in tracking the more than 250 facilities within the county. He stated that he is concerned over their willingness to use the system. Lynne advised that she will be making a presentation on the Coalition at the next nursing home association meeting and can ask if they are interested. Scott suggested that we layer adding nursing homes so that it does not overwhelm the field crews. Matt stated that they can set up views, so they only see what they need to see. Andre asked if behavioral health hospitals are using the system. Matt stated that they have access but are not active. Andre stated that we need to get them to participate.

**Note:** the next meeting will be moved to May 12 (May 5th is the regional full scale medical surge exercise after action meeting)