CFDMC 2023-2024 Traffic Light Report as of 10-10-23 (see attached Task/Project Report for additional details)

Legend-**Blue=Completed; Green=On Target; Yellow =Action Needed; Red=In Jeopardy/Board Action Needed, Orange=High Priority**

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| Issue/Contract Task / Project / Deliverable | Due | Status |
| **High Priority Issue: Family Reunification; hospitals need immediate support in managing family/friends (see also FAC project/ FRC exercise)** | **6/30/24** | Lead: Drawdy/EMs  Presented at regional EM meeting in September; will hold TTX in each county. Lynne will contact each county EM to schedule |
| **High Priority Issue: EMS Engagement (need EMS input and engagement)** | **6/30/24** | Lead: RTAB Clinical Leadership Committee (working on scheduling symposium) |
| **High Priority Issue: Evacuation Equipment (evacuation equipment is costly and requires storage which hospitals struggle with; identified cache strategy)** | **7/31/24** | Lead: Drawdy  Purchased cache in metro area by 6/30/23; deployment process posted to website. Will purchase cache in south end of region by 12/31/23 and in north end of region by 7/31/24 |
| **High Priority Issue: Finding warehouse space for RMAT** | **6/30/23** | Lead: Nick Pachota. Nick is viewing properties and will provide a recommendation for Board. Osceola and Lake EM are helping us search. |
| **High Priority Issue: Patient Disaster Transfer Processes (need regional process to identify beds for patients – identified as statewide gap during Hurricane Ian)** | **6/30/24** | Lead: The HCCs, FCOT DEM Committee and FHA have agreed to partner in developing a statewide process and exercise. Will receive presentation on state-purchased Pulsara on 10/17/23. |
| **High Priority Issue: Status of MCI/ACS Caches** | **9/30/23** | Lead: Matt Meyers  Assessment is currently underway. Will convene workgroup to determine strategy when assessment is complete. |
| **High Priority: Engage community leaders** | **6/30/24** | Lead: Board.  During May 2022 strategic planning session, the Board identified engaging community leaders as a sustainability weakness. A strategic objective was established to address this: By December 2023, increase number of county and city leaders who are Coalition members coalition by 50%. Need to identify who we are missing, why it is important that we engage them, and what we can offer them |
| Submit Monthly Expenditures Documentation | Monthly | Submitted July, August & September 2023  October due 11/19/23 |
| Task #1: Subscribe to ASPR Readiness Bulletin | October 15, 2022 | Completed for contract |
| Task #2: Data Security Compliance | Quarterly | In Quarterly Report 10/15/23 – next due 1/15/24 |
| Task #3: Attend HCCTF Meetings | Quarterly | In Quarterly Report 10/15/23 – next due 1/15/24 |
| Task #4: Budget Template | July 15,2023 | Completed for 23-24 |
| Task #5: Annual Work Plan | July 15, 2023 | Completed for 23-24 |
| Task #6: Governance Document | July 15, 2023 | Completed for 23-24 |
| Task #7: CAT Self-Assessment | Quarterly | Completed 8/15/23 -next due 12/15/23 |
| Task #8: HPP Compliance | October 15 | Completed 10/15/23 |
| Task #9: Royal 4 | Quarterly | Completed 10/15/23 – next due 12/15/23 |
| Task #25: Quarterly Report | Quarterly | Completed 10/15/23 – next due 12/15/23 |
| Quarterly Financial Report | Quarterly | Note: no longer due except upon request; we continue to produce |
| Task #10: HVA | January 15, 2023 | Due 1/15/24 (out for member input) |
| Task #12: NIMS | January 15, 2023 | Due 1/15/24 |
| Task #13: Sustainability Report | January 15, 2023 | Due 1/15/24 |
| Task #11: Preparedness Plan | March 15, 2023 | Due 3/15/24 |
| Task #14: Radiation Surge Annex | March 15, 2023 | Completed for contract |
| Task #16: Member List Template | April 15, 2023 | Due 4/15/24 |
| Task #17: HCC Response Plan | April 15, 2023 | Due 4/15/24 |
| Task #18: Equipment Management Protocol | April 15. 2023 | Due 4/15/24 |
| Task #19: Training Plan | June 15, 2023 | Due 6/30/24 |
| Task #23: Radiation Exercise | June 15, 2023 | **Completed for contract** |
| Task #15: Chemical Surge Annex | March 15, 2024 | **Due 3/15/24** |
| Task #20: MRSE | May 31, 2024 | **Due 6/15/24** |
| Task #21: Crisis Standards of Care (CSoC) Exercise | June 15, 2024 | **Due 6/15/24** |
| Task #22: Pediatric Surge Exercise | June 15, 2024 | **Completed for contract** |
| Task #24: Chemical Exercise | June 15, 2024 | **Due 6/15/24** |
| Note: Other coalition projects are included in the project report | | |

CFDMC Project Report

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| Contract Task / Coalition Project | Due Date | Lead / Back-up / Partners | Activities / Status |
| Task #1 Ensure the HCC Readiness and Response Coordinator is subscribed to ASPR's Health Care Readiness Bulletin at https://cloud.connect.hhs.gov/healthcarereadinessbulletin throughout the contract term. Document the name of the HCC Readiness and Response Coordinator in the Quarterly Progress Report | October 15, 2022 | Drawdy (Meyers, Cook) | Completed |
| Task #2 Comply with the terms of the Data Security and Confidentiality provisions (Attachment II) at all times throughout the contract term. Document compliance in the Quarterly Progress Report. | Quarterly | Drawdy (Meyers, Cook) | Completed |
| Task #3 Attend HCCTF meetings and calls as directed by the Department. Document the date of each meeting or call and the name of each of Provider’s staff in attendance in the Quarterly Progress Report. | Quarterly | Drawdy (Meyers, Cook) | Attended 7/18/23, next meeting is 10/17/23 |
| Task #4 Upload the completed HCC Budget Template as an Excel file in the CAT by July 15 of each contract year. Remove any previous versions of the budget from the CAT as applicable. Submit a screenshot of the uploaded HCC Budget Template to the Contract Manager via email and to the HCC CRVS by July 15 of each contract year.  Submit May 1st to contract manager | July 15  Annually | Drawdy (Meyers, Cook, Board) | Completed 7/10/23 |
| Task #5 Complete or update, and submit the HCC Work Plan as follows:  a. Ensure the HCC Work Plan is based on the following:  (1) The HCC Region's current HVA; and  (2) The HCC’s current resource analysis, to include the following: medical equipment and supplies, real-time information sharing, communication systems, training, exercises, lessons learned, and health care personnel necessary to respond to an Emergency.  b. Include the following in the HCC Work Plan:  (1) A description of the planned activities or projects for addressing the Capabilities of the HPP. Ensure there is at least one activity or project for each Capability, for a total minimum of four activities or projects;  (2) The intended result of each activity or project;  (3) The personnel who will complete the activities or projects as applicable;  (4) The partners who will complete the activities or projects as applicable; and  (5) The timeline for completion for each activity or project during that contract year.  c. Submit the HCC Work Plan to Core HCC Member Organizations for approval. Include the approval date of Core HCC Member Organizations in the HCC Work Plan.  d. Save the HCC Work Plan using naming convention in a PDF file. Submit the HCC Work Plan by July 15 of each contract year via email to the Contract Manager for review and approval. Upload the HCC Work Plan to the HCC CRVS and the CAT by July 15 of each contract year. Remove previous versions of the HCC Work Plan from the CAT as applicable. | July 15  Annually | Drawdy (Meyers, Cook, Board) | Approved by Board 4/25/23; Completed 7/10/23 |
| Task #6: Maintain, update, and submit HCC governance information throughout the contract term as follows:  a. Ensure the HCC governance information includes the following:  (1) An organizational structure capable of supporting HCC activities.  (2) HCC Member guidelines for participation and engagement in HCC meetings and activities.  (3) Policies and procedures focused on supporting acute health care service delivery through communication and coordination.  (4) HCC integration with existing state, local, and member-specific incident management structures and roles.  b. Compile the HCC governance information into a single PDF file and title the file using naming convention. Submit the HCC governance information via email to the Contract Manager and upload the file in the HCC CRVS and in the CAT by July 15 of each contract year.  c. Update the governance information as necessary. Document any updates to the governance information in the Quarterly Progress Report | July 15  Annually | Drawdy (Meyers, Cook, Board) | Approved by Board 4/25/23; Completed 7/10/23 |
| Task #7 Each quarter update the Capability 1, Capability 2, Capability 3 and Capability 4 forms in the CAT and run the following reports: Assessment Details, Progress Report, Capability Planning Report, Capability Gaps and Technical Assistance Report, and PM Report. Compile the reports into a PDF file and title the file re naming convention. Submit the file to the Contract Manager via email and upload it in the HCC CRVS by August 15, December 15, March 15, and June 15 of each contract year. | August 15  December 15  March 15  June 15 | Drawdy (Meyers, Cook, Board) | Completed 8/15/23  Next due 12/15/23 |
| Task #8 Maintain HPP compliance throughout the contract term. Complete the HCC HPP Compliance Report Template available on CRVS. Save with naming convention in a PDF file. Submit the completed HCC HPP Compliance Report Template via email to the Contract Manager and upload it into the HCC CRVS by October 15 of each contract | October 15  Annually | Drawdy (Meyers, Cook, Board) | Completed 10/6/23 |
| Task #9 Ensure the Royal 4 Systems is updated throughout the contract term as necessary. Run an Inventory Movement report to confirm that the Royal 4 Systems is up to date. Submit the report in a PDF file via email to the Contract Manager and upload it in the HCC CRVS by October 15, January 15, April 15, and June 15 of each contract year. Document the date of each update to the Royal 4 Systems in the Quarterly Progress Report. | Quarterly | Meyers (Drawdy, Cook) | Completed 10/6/23 – next report 1/15/24 |
| Task #10 Conduct a HVA and maintain, update, and submit the HVA Report each contract year by January 15 as follows:  a. Conduct a HVA of the HCC Region’s characteristics (such as risks for natural or man-made Disasters, geography, and critical infrastructure assessment component that addresses population characteristics (including demographics)) and the individuals who might require additional help in an Emergency (such as children; pregnant women; seniors; and individuals with Access Needs and Functional Needs, including people with disabilities and others with unique needs (available from the Florida Access and Functional Needs Profile in FLhealthcharts.gov)). Conduct a HVA as follows:  (1) Coordinate with state and local emergency management organization assessments (e.g., THIRA) and any public health hazard assessments (e.g., JRA) in conducting the HVA  (2) Ensure HCC Members participate in conducting the HVA.  (3) Use a variety of HVA tools in conducting the HVA.  (4) Ensure health care facilities, EMS, and other health care organizations provide input while conducting the HVA.  b. Update the HVA Report based on the HVA. Ensure health care facilities, EMS, and other health care organizations provide input into the update of the HVA Report based on their facility’s or organization’s HVAs. Include the following in the HVA Report:  (1) A summary describing the process to update the HVA Report to verify that the HCC coordinated with state and local emergency management organization assessments and any public health hazard assessments.  (2) A list of HCC Members that participated in conducting the HVA.  (3) A list of the HVA tools that were used in conducting the HVA  (4) An assessment component of the HCC Region’s characteristics.  (5) An assessment component that addresses population characteristics and considers those individuals who might require additional help in an Emergency.  (6) The dates and descriptions of the meetings and conference calls that took place to update the HVA.  (7) A description of how the HVA Report will be distributed to the HCC Members and local health and emergency management officials and organizations.  c. Title the HVA Report using naming convention and save it as a PDF file. Submit the HVA Report via email to the Contract Manager and upload it in the HCC CRVS and CAT by January 15 of each contract year.  d. Remove previous versions of the HVA Report from the CAT as applicable.  e. Distribute the HVA Report to HCC Members and local health and emergency management officials and organization in accordance with the report. Document the date of distribution, the method of distribution, and the name of each HCC Member and local health and emergency management official and organization the report is distributed to in the Quarterly Progress Report  f. Summarize in the Quarterly Progress Report how health care facilities, EMS, and other health care organizations provided input into the update of the HVA Report based on their facility’s or organization’s HVAs. | January 15  Annually | Drawdy (Meyers, Cook, Members, Board) | Gathering county and hospital HVAs/ PHRATS  Conducted input during September coalition meeting  Sent survey to all members |
| #11 Update, submit, and distribute the HCC Preparedness Plan as follows:  a. Update the HCC Preparedness Plan as follows:  (1) Update the HCC Preparedness Plan by March 15 of each contract year.  (2) Ensure HCC Members are given an opportunity to provide input into the update of the HCC Preparedness Plan.  (3) Update the HCC Preparedness Plan following major incidents or large-scale exercises.  (4) Ensure the HCC Preparedness plan is signed and dated by an HCC representative and at least one representative from each type of the Core HCC Member Organization’s Acute Care Hospitals, public health agency, emergency management organization, and EMS.  b. Save the HCC Preparedness Plan in accordance with naming convention in a PDF file. Submit the HCC Preparedness Plan via email to the Contract Manager by March 15 of each contract year for the Department to review and approve. Upload the HCC Preparedness Plan in the HCC CRVS and CAT by March 15 of each contract year.  c. Remove any previous versions of the HCC Preparedness Plan from the CAT as applicable.  d. Distribute the HCC Preparedness Plan to HCC Members by March 15 of each contract year. Document the date and method the HCC Preparedness Plan is distributed in the Quarterly Progress Report. | March 15  Annually | Drawdy (Meyers, Cook, Workgroups, Board) | Planning will begin in December based on HVA |
| Coalition Project: Update Preparedness annexes that are not contract tasks, including  Strategic Plan  COOP  (other annexes are included in contract tasks) | June 30 Annually | Drawdy (Meyers, Cook, Workgroups, Board) | Updates to begin in ear;u 2024 |
| 12. Promote a NIMS training course, provide assistance to an HCC Member(s) to incorporate NIMS components, ensure HCC leadership receives NIMS training, and complete and submit the HCC NIMS Report Template available at Contract Guidance and Templates as follows:  a) Promote at least one NIMS training course, which can be found at [https://www.fema.gov/emergency-managers/nims/implementation-training](https://gcc02.safelinks.protection.outlook.com/?url=https%3A%2F%2Fwww.fema.gov%2Femergency-managers%2Fnims%2Fimplementation-training&data=05%7C01%7CHillary.Copp%40flhealth.gov%7Cdbb55ba4141a48b0299608daa23186d4%7C28cd8f803c444b2781a0cd2b03a31b8d%7C0%7C0%7C638000630847803996%7CUnknown%7CTWFpbGZsb3d8eyJWIjoiMC4wLjAwMDAiLCJQIjoiV2luMzIiLCJBTiI6Ik1haWwiLCJXVCI6Mn0%3D%7C3000%7C%7C%7C&sdata=PuIrZAJ%2F7hd8CWBHLA3AVIQHea0kIBusumF707gOAk0%3D&reserved=0), to HCC Members each contract year. Document the NIMS training course that was promoted, the date it was promoted, and the method of promotion in the HCC NIMS Report Template.  b) Assist at least one HCC Member incorporate NIMS components into their emergency operations plans each contract year. Document the HCC Member assisted, the date assistance was provided, and the NIMS components that were incorporated into the HCC Member’s emergency operations plan in the HCC NIMS Report Template.  c) Ensure HCC leadership has completed NIMS training. Document the following information in the HCC NIMS Report Template:   * Name of NIMS training * Name of HCC leadership member * Date training was completed   d) Save the completed HCC NIMS Report as "Contract#\_Task#\_Submission Date (MMDDYYYY)" in a PDF file. Submit the completed HCC NIMS Report via email to the Contract Manager and upload it in the CRVS by January 15 of each contract year. | January 15 Annually | Drawdy (Cook, Meyers, members) | * 7/25/23 HICS Training-completed * Three IMT courses have been scheduled * CEMP classes include NIMS assistance * NIMS courses on website – will send out reminder to all members in December and promote at the conference |
| #13 Complete the HCC Sustainability Report Template available on CRVS. Save the completed HCC Sustainability Report Template using naming convention in a PDF file. Submit the completed HCC Sustainability Report Template via email to the Contract Manager and upload it in the HCC CRVS by January 15 of each contract year | January 15 Annually | Drawdy (Cook, Meyers, Peach) | Sustainability assessment with Captain Link held 1/25/23 (awaiting report); see strategic objective  Maintain in-kind report (Cook)  Work with Peach on for profit model |
| #14 Develop and submit the HCC Radiation Surge Annex | March 15, 2023 | Meyers (Drawdy, Cook, Radiation Workgroup/ Board) | Completed for contract |
| Task #15: Chemical Annex  Develop and submit an HCC Chemical Surge Annex as follows:  a. Develop the HCC Chemical Surge Annex as follows:  (1) Collaborate with hospitals, community-based healthcare facilities, public health departments (particularly with local and state infection prevention teams), emergency medical services (EMS), emergency management agencies, and other community organizations to develop the HCC Chemical Surge Annex. Document the name of the organizations collaborated with in the Quarterly Progress Report.  (2) Use the headings and subheadings of the HCC Chemical Surge Annex template available at https://floridahealth.sharepoint.com/sites/External/FLHCC/HCC%20Resources/Forms/AllItems.aspx?viewpath=%2Fsites%2FExternal%2FFLHCC%2FHCC%20Resources%2FForms%2FAllItems%2Easpx&id=%2Fsites%2FExternal%2FFLHCC%2FHCC%20Resources%2FContract%20Guidance%20and%20Templates&viewid=fa8856e3%2D552b%2D482f%2D8283%2D350265f02ae8.  (3) Ensure the HCC Chemical Surge Annex complements the HCC's Response Plan.  (4) Ensure the HCC Chemical Surge Annex aims to improve capacity and capabilities to manage exposed or potentially exposed patients during a chemical emergency.  (5) Ensure the HCC Chemical Surge Annex prepares the community to manage exposed or potentially exposed patients during a chemical emergency.  b. Include the following in the HCC Chemical Surge Annex:   * Indicators and triggers of a chemical emergency. * Alerting and notifications of a chemical emergency. * Initial coordination mechanism and information gathering to determine impact and specialty needs. * Documentation of available regional resources that can support the specialty response and key resource gaps that may require external support (including inpatient and outpatient resources). * A description of access to subject matter experts at the regional level. * A description of prioritization method(s) for specialty patient transfers (e.g., which patients are most suited for transfer to a specialty facility). * Relevant baseline or just-in-time training to support specialty care. * An evaluation and exercise plan for the specialty function.   c. Save the HCC Chemical Surge Annex as "Contract#\_Task#\_Submission Date (MMDDYYYY)" in a PDF file. Submit the HCC Chemical Surge Annex via email to the Contract Manager and upload it in the CRVS and the CAT by March 15, 2024.  d. Remove any previous version of the HCC Chemical Surge Annex from the CAT as applicable. | March 15, 2024 | Drawdy (Meyers, Cook, Workgroup, Members, Board) | Drafting annex |
| Task #16 Identify all HCC Members within the HCC Region and complete and submit the HCC Members List Template by April 15 of each contract year as follows:  a. Identify HCC Members as follows:  (1) Identify all HCC Members within the HCC Region.  (2)Identify at least one HCC Member from an Acute Care Hospital.  (3)Identify at least one HCC Member from EMS (including inter-facility and other non-EMS patient transport systems).  (4)Identify at least one HCC Member from an emergency management organization.  (5)Identify at least one HCC Member from a public health agency.  (6)Identify any Additional Health Care Coalition Members.  b. Complete the HCC Members List Template available on CRVS.  c. Save the completed HCC Members List Template using naming convention in an Excel file. Submit the completed HCC Members List Template via email to the Contract Manager and upload it in the HCC CRVS by April 15 of each contract year | April 15  Annually | Cook (Drawdy, Meyers) | Maintained monthly; next CAT update due October 2023 |
| #17 Update, submit, and distribute an HCC Response Plan as follows:  a. Update the HCC Response Plan as follows:  (1)Update the HCC Response Plan by April 15 of each contract year.  (2)Ensure HCC’s Member’s organizations are given an opportunity to provide input into the update of the HCC Response Plan.  (3)Update the HCC Response Plan after large-scale exercises and real-world events (including, but not limited to Emergencies and Disaster).  (4)Ensure the HCC Response plan is signed and dated by an HCC representative and at least one representative from each type of the Core HCC Member Organization’s Acute Care Hospitals, public health agency, emergency management organization, and EMS.  (5)Collaborate with the Department to integrate the following crisis care elements into the HCC Response Plan:  (a)Integration with state-level efforts.  (b)Management of crisis conditions through regional coordination, including resource sharing and patient distribution.  (c)Management of information and policy decisions with the assistance of the HCC partners during a protracted event.  (d)Management of resource requests and scarce resource allocation decisions when the demand cannot currently be met.  (e)Support EMS agency planning for indicators, triggers, and response strategies during crisis conditions.  (f)Support hospital planning for indicators, triggers, and response strategies during crisis conditions.  (g)Transition to contingency care by requesting resources or moving patients to other facilities.  (h)Integration of crisis standards of care conditions into exercises.  b. Save the HCC Response Plan using naming convention in a PDF file. Submit the HCC Response Plan via email to the Contract Manager by April 15 of each contract year for the Department to review and approve. Upload the file into HCC CRVS and the CAT by April 15 of each contract year.  c. Remove previous versions of the HCC Response Plan from the CAT as applicable.  d. Distribute the HCC Response Plan to HCC Members by April 15 of each contract year. Document the date and method the HCC Response Plan is distributed in the Quarterly Progress Report | April 15  Annually | Drawdy (Meyers, Cook, Workgroups, Board) | Planning will begin in January |
| Coalition Project – Annual updates to Response Annexes, including:   * Infectious Disease (EID Collaborative) * Disaster Behavioral Health (W.G. Mason and FCRT) * Alternate Care Site (RMAT) * Burn (RTAB) * Family Assistance Center (FAC Workgroup) * Trauma Coordination (Pappas, RTAB Preparedness Committee) * Pediatric Sure (Pediatric Surge Workgroup) * Mass Fatalities (Blanton, Medical Examiners) * Crisis Standards of Care (CSoC Workgroup) * Continuity of Healthcare Service Delivery (moved from Preparedness Plan) * Supply Chain Mitigation Strategy (moved from Preparedness Plan) * Radiation Annex (Radiation Workgroup) | June 30  Annually | Drawdy (Meyers, Cook, Workgroups, Board) | Annual updates will begin in spring 2024 |
| Task #18 Update and submit a protocol for equipment, supplies, and pharmaceuticals as follows:  a. Update a protocol for equipment, supplies, and pharmaceutical and include the following in the protocol:  (1) Strategies for acquisition, storage, rotation with day-to-day supplies, and use.  (2) Policies relating to the activation and deployment of the HCC and HCC Members’ stockpile.  (3) Policies relating to the disposal of expired materials.  b. Save the protocol using naming convention in a PDF file. Submit the protocol via email to the Contract Manager and upload it in the HCC CRVS and CAT by April 15 of each contract year.  c. Remove previous versions of the protocol from the CAT as applicable. | April 15  Annually | Meyers (Drawdy, Cook, Hospital Committee, Board) | Review will begin in January 2024 |
| Task #19 Create and submit the HCC Training Plan and conduct a minimum of one training as follows:  a. Create and submit the HCC Training Plan as follows:  (1) Create the HCC Training Plan and include the following in the HCC Training Plan:  (a) The training(s) that will be provided;  (b) The risk, resource gap, work plan priority, or corrective action from prior exercises and incidents that the training will address;  (c) The gap or need identified by HCC Members which the training is based; and  (d) The training type.  (2) Save the HCC Training Plan using naming convention in a PDF file. Submit the HCC Training Plan via email to the Contract Manager and upload it in the HCC CRVS and CAT by June 15, 2023.  b. Conduct a minimum of one training in accordance with the HCC Training Plan between July 1, 2023 to June 30, 2024. Document the title, date, number of people in attendance, and location of the training in the Quarterly Progress Report | June 15, 2023  June 30, 2024 | Drawdy (Cook, Meyers, members, workgroups, training providers) | Will participate in statewide IPPW in January |
| Coalition Project: Provide trainings | Ongoing | Drawdy (Meyers, Cook) | Scheduling:   * HICS (7/25/23)- completed * Advanced Hazmat Life Support (8/23) - completed * 2 New & 2 Refresher COOP – all scheduled and one completed * 4 CEMP – all scheduled and one completed * L-952 – PIO (Lake County, December 4-8) * L-973 – Finance Chief (Lake County, February 20-22) * L-984/Strike Team Leader (St. Lucie, October 10-12) * Several trainings scheduled at conference, including CHEP, HICS 2.0, BH, COOP, CEMP) |
| Not included in contract but CAT requires scope of work each May. | May 2024 | Drawdy (Meyers, Cook, Members, Board) | Completed in March 2023 |
| Task #20: Hold a MRSE between July 1, 2023 to May 31, 2024  Regional Medical Surge Exercise in April will serve as the MRSE | June 15, 2024 | Drawdy (Meyers, Cook, planning team, hospitals, Board) | Not due until 2023-2024 but included in April FSE (submitted in CAT).  Will need to complete again in 2024 |
| Task #21: Crisis Standards of Care (CSoC) Exercise  The Department’s Crisis Standards of Care Concept of Operations Plan provided by the Department was incorporated in the exercise as directed by the Department  The exercise focused on policy and scarce resource coordination including resource management allocation  The exercise focused on policy and scarce resource coordination including communications  The exercise focused on policy and scarce resource coordination including identification of alternate sources or strategies to address a deficiency in space, staff, or supplies (or a combination of these factors)  The exercise focused on policy and scarce resource coordination including resource allocation decision making, as necessary at the HCC and recipient levels for competing resource demands  The areas for improvement are documented on the HCC AAR/IP template  At least one corrective action for each area for improvement is documented on the HCC AAR/IP template  The primary responsible organization, organization’s point of contact, and start date for each corrective action are listed on the HCC AAR/IP template  At least one representative from each type of Core HCC Member Organization participated in the CSC exercise  The CSC exercise items in the CAT Exercise and Improvement Plan form are complete and accurate  A screenshot of the completed CSC exercise items in the CAT was emailed to the Contract Manager  The latest version of the AAR/IP template was used  If a task number is listed once the file is open, it is correct  The naming convention of "Contract#\_Task#\_SubmissionDate(MMDDYYYY)" for file name was used for the AAR/IP  The file format is a single PDF  The file was emailed to the Contract Manager  The file was uploaded in CRVS  The file was uploaded into the CAT  The date of the CSC exercise was documented for Task #21 on the quarterly progress report | June 15, 2024 | Drawdy (Meyers, Cook, CSoC workgroup, members, Board) | Seeking planning team members; will convene in October-November |
| Task #22: Pediatric Surge Exercise  Conduct a pediatric surge exercise to validate the pediatric surge care annex that is part of the HCC Preparedness Response Plan. | June 15, 2024 | Drawdy (Meyers Cook, Corfield, Ritola, Pediatric workgroup, members, Board) | Completed 2/24/23; AAR published |
| Task #23: Conduct a radiation surge exercise to validate the HCC radiation emergency care annex that is part of the HCC Preparedness Response Plan | June 15, 2023 | Drawdy (Meyers Cook, Radiation workgroup, members, Board) | Completed May 17; AAR published |
| Task #24: Chemical Exercise  Conduct a chemical surge exercise to validate the HCC chemical emergency care annex that is part of the HCC Preparedness Response Plan as follows:  a. Conduct the chemical surge exercise by completing a standardized TTX or discussion exercise in a format that meets HSEEP Standards.  b. Ensure at least one representative from each type of Core HCC Member Organization participates in the chemical surge exercise.  c. Complete the HCC AAR/IP Template for the chemical surge exercise. Save the completed HCC AAR/IP Template as "Contract#\_Task#\_Submission Date (MMDDYYYY)” in a PDF file. Email the completed HCC AAR/IP Template to the Contract Manager and upload it in the CRVS and the CAT by June 15, 2024.  d. Complete the chemical emergency exercise items in the CAT Exercise Tool. Submit a screenshot of the completed chemical emergency exercise items to the Contract Manager via email by June 15, 2024.  e. Document the date of the chemical surge exercise in the Quarterly Progress Report. | June 15, 2024 | Drawdy (Meyers, Cook, workgroup, members, Board) | Discussed partnering with FDOH Bureau of Laboratories, HCCTF and LEPC  Seeking planning team members |
| Coalition Project: Operation Protect & Secure community based drill (regional active shooter drill) | September Annually | Drawdy (Cook, Meyers, Planning Team, Members) | Completed September 20 |
| Coalition Project: Conference Tabletop | December Annually | Drawdy (Cook, Meyers, Planning Team, Members) | A Glass of Mutual Aid |
| Coalition Project: Great Tornado Drill (regional community based shelter in place) | January Annually | Drawdy (Cook, Meyers, Planning Team, Members) | To be scheduled in January |
| Coalition Project: Operation Generate Confidence (regional community-based generator drill to prepare for hurricane season) | May Annually | Drawdy (Cook, Meyers, Planning Team, Members) | To be scheduled in May |
| Task #25 Complete and submit the Quarterly Progress Report as follows:  a. Complete the Quarterly Progress Report available in the CRVS.  b. Include the information as specified in the Tasks above in the Quarterly Progress Report.  c. Include the progress for each Task in the Quarterly Progress Report.  d. Save the Quarterly Progress Report using naming convention in a PDF file.  e. Submit the Quarterly Progress Report within 15 calendar days after the end of each quarter via email to the Contract Manager and upload it in the HCC CRVS | Quarterly | Drawdy (Cook, Meyers) | Completed 10/15/23  Next due 1/15/24 |
| Task #26: Complete at least one HCC regional HVA project in either the third or fourth quarter of the first fiscal year such as a training, exercise, or provision of resources. |  |  | Completed (evacuation equipment cache purchased for metro Orlando area; deployment policy developed). Cache for south end of region included in 23-24 budget and one for north end of region in following year |
| Monthly Expenses: Provide documentation for all payments made by Provider as a direct result of services provided or goods purchased through the funding of this contract and submit to Contract Manager and HCC SharePoint within 15 business days following the end of each month. Such documentation includes timesheets, canceled checks (if available), bank statements, receipts, invoices paid, or other documentation that supports proof of payment. | 15 business days following the quarter | Drawdy (Ori, Cook, Meyers) | Completed all three for first quarter. |
| Quarterly Financial Report: Each contract year, Provider must submit a Quarterly Financial Report in the quarter specified by the Contract Manager. Each Quarterly Financial Report must state, by line item, all contract fund expenditures made by Provider to complete the deliverables under this contract. All Quarterly Financial Reports must be submitted to the Contract Manager within 30 calendar days following the quarter the report is due. For the fourth quarter of each contract year, submit the Annual Financial Report in accordance with section I.C.6.c. of the Department’s Standard Contract.  Respond to state audit requests | 30 days following the quarter | Drawdy (Cook, Meyers) | No longer required quarterly but must be available on request.  We complete quarterly  Responding now to state programmatic audit request |
| Single federal audit: organizations receiving more than $750,000 annually are required to undergo a single federal audit by 9/30 annually. | 9/30/23 | Drawdy (Ori, Board) | Passed 2023 audit with no findings.  Next audit May 2024 |
| Coalition Project: Communicate with members | Quarterly | Drawdy, Meyers, Cook, Board | Sent out alerts, training and exercise opportunities (Drawdy)  Keep website updated (Meyers)  Quarterly member meetings (All)  Quarterly communication drills (Drawdy & Cook) |
| Coalition Project: Bimonthly Executive Committee & Board Meetings | Monthly | Drawdy (Meyers, Cook, Executive Committee, Board | September Executive Committee  October Board |
| Coalition Project: Recruitment | Ongoing | Drawdy & Social Media Committee | Attend county/regional/state meetings to present on coalition  Post on social media |
| Coalition Project: EMResource | Monthly | Meyers (Drawdy, Cook, Hospitals, EM, EMS, FHA) | FHA has extended pilot through April 2025  EMResource Steering Committee is establishing best practice guidelines and training videos  Ranked high as UASI project (expect to receive funding) |
| Coalition Project: Hospital Minimum Readiness | June 30 Annually | Drawdy (Meyers, Cook, Hospitals, Board) | Maintain hospitals at minimum readiness standards (by hospital size  Monthly hospital calls |
| Coalition Project: RMAT | June 30 Annually | Drawdy (Pachota, Meyers, Cook, Team Members, Board) | Recruit, credential, onboard members, community-based training and exercises, maintain team equipment, secure warehouse  Beginning new credentialing process and will update MRPs  Seeking warehouse space |
| Coalition Project: FAC Team | June 30 Annually | Drawdy (Meyers, Cook, Team Members, Board) | Recruit, credential, train and exercise team  Following FRC/FAC tabletops:   * Credentialing/badging FAC team members * Training team members   Will hold discussion about incorporating this team into RMAT. |
| Coalition Project: Regional Trauma Advisory Board (Executive Committee, Clinical Leadership Committee, Preparedness Committee (RTCC plan), System Support Committee | June 30 Annually | Drawdy (Meyers, Cook, RTAB Members) | Committees meeting bimonthly  Focus on increasing EMS engagement |
| Coalition Project: Achieve Strategic Objectives  Ensure Sustainability:   * By June 2023, participate in ASPR sustainability assessment - completed * By December 2023, develop and implement a Coalition sustainability plan – in progress * By January 2023, develop a Board succession plan - completed   Increase Member Diversity & Engagement:   * By December 2022, implement a sustainable social marketing campaign - completed * By December 2023, increase number of county and city leaders who are Coalition members by 50% - in progress   Address Climate Change Impacts:   * By June 2023, complete an assessment of regional healthcare systems and city/county environmental sustainability/resiliency strategies - completed * By June 2024, publish guidance on climate change and healthcare mitigation strategies - completed   Build & Sustain Capabilities:   * By December 2023, develop a plan to standardize plans, equipment, training, and exercising in at least one additional capability – completed (evacuation) * By June 2024, develop, implement and evaluate a campaign focused on increasing retention of the healthcare workforce – in progress | June 30, 2023 | Drawdy (Meyers, Cook, Board) | Report progress at bimonthly board meetings  Updates from April Board Retreat posted  Per Dr. Sole at UCF, state funding has been provided to increase # of nursing slots, UCF added 100 this year. Will schedule her to speak at March meeting  [Mary.Sole@ucf.edu](mailto:Mary.Sole@ucf.edu) [katiek@ucf.edu](mailto:katiek@ucf.edu) [Sharon.Martin@ucf.edu](mailto:Sharon.Martin@ucf.edu) |
| Coalition Project: Pediatric TTX AAR/IP   * Identify pediatric resources & update plan * Hold FRC/FAC in each county (see project above) * Identify patient tracking mechanism * Integrate pediatric surge in 2025 FSE | As Identified in AAR/IP | Drawdy (Meyers, Cook & Pediatric Workgroup) | Met with RMAT Commander and Pediatric Clinical Champion, will build pediatric resposne into RMAT. Also researching pediatric response training. |
| Coalition Project: Radiation TTX AAR/IP   * Review county plans (including Community Reception Centers, resource needs and gaps) * RDDs should be inventoried, calibrated and replaced as needed * Pre-scripted messages developed * FRC/FAC (see project above) * Radiation teams | As Identified in AAR/IP | Drawdy (Meyers, Cook, CHDs, Radiation Workgroup) | Securing county plans |
| Coalition Project: 2023 Regional Medical Surge AAR/IP   * Hospitals and EM will identify the data points they need and at what intervals and these will be included in WebEOC and EMResource (Meyers) * Research and test best practices in maintaining decontamination teams at hospitals (Alberts) * Patient tracking/family reunification (see project above – Drawdy) * Identify staffing and support models for FSEDs – Hospital Committee * Engage with One Blood; conduct time study during drill to identify blood needs and if local capacity can handle – Hospital Committee * Develop best practice guidelines and training on EMResource (including adding lockdowns on hospital status board) – EMResource Steering Committee * Develop a regional radio communications plan (Drawdy, UASI Comms Workgroup) * Compare hospital mass fatality plans across the region. Work with hospitals and the medical examiners to expand the regional plan to address hospitals (can someone be assigned to assist hospitals with fatality management). Tabletop the revised plan (Drawdy) * Provide training to hospitals and FSEDs on burn center criteria. Provide basic burn care training to hospitals and FSEDs (Warden Burn Center)q | As Identified in AAR/IP | Drawdy (Meyers, Alberts, Hospital Committee, ME, UASI, Warden Burn Center) | Asked hospitals; no issues. Lynne will ask EM  Putting together FSED workgroup |