

## 4-15-2021 CFDMC Board Meeting and Retreat Minutes

**Call to Order:** Eric Albert called the meeting to order at 10:02 am. Eric welcomed and thanked all. Chief Chris Kammel was introduced. Eric reminded the Board that the calendar invitation includes all the documents that will be discussed today.

**Board Members Participating:** Eric Alberts, Sheri Blanton, Lynne Drawdy, Dave Freeman, Dr. Vincent Hsu (Proxy to Eric Alberts), Georganna Kirk, Aaron Kissler, Reginald Kornegay, Dr. Peter Pappas, Kenneth Peach, Christina Proulx, Susan Saleeb, Wayne Smith, Todd Stalbaum (Proxy to Eric Alberts), Chief Chris Stabile and Lynda W.G. Mason

15 of 20 voting Board members were present for a quorum.

**Others Participating:** Beverly Cook, Chief Chris Kammel, Matt Meyers

**Approval of February 2021 Board Minutes:** Dr. Pappas moved to approve the February minutes as submitted; the motion was seconded by Ken Peach. There was no further discussion or opposition and the motion carried.

**Approval of Treasurer's Reports (January, February & March 2021):** Lynda W. G. Mason reported there has been an ongoing issue with the state not providing reimbursement for the IMT on a timely basis, but she was pleased to report that most back payments have been received. Lynne advised that there is one invoice from January that was paid but electronic deposit did not go through; we are working to resolve that now. Lynda advised that she has reviewed and approved the Treasurer's Reports. Dave Freeman moved to approve the reports as submitted; Sheri Blanton seconded the motion. There was no further discussion or opposition and the motion carried.

**Executive Committee Update:** Eric Alberts provided an update on the March 15 Executive Committee meeting. Highlights included updates on the incident management team, the warehouse, preparation for the March meeting and the April Board retreat, discussion regarding the UASI ambu-bus project, and presentation of a revised FY 20-21 budget and discussion of Board replacement and impact on the Executive Committee, both of which will be discussed later in today's agenda.

### Old Business:

**Traffic Light Update:** Lynne Drawdy highlighted updates to the traffic light report, including:

- Completed all Quarter 3 deliverables, including the quarterly report and the financial report. The March membership meeting received a 100% rating for both overall satisfaction and engagement. We received 83% top box scores in likeliness to attend future meetings and 78% top box in likely to refer to others, and we received suggestions for future topics. We completed the multi-year training and exercise plan; next year this will be integrated with emergency management.
- ASPR has waived the Coalition Surge Test exercise for this year.
- We are awaiting additional information on the Corvena communications pilot. Juvare has purchased Corvena; they also own WebEOC and EMResource and Corvena may be re-branded.
- The Regional Trauma Advisory Board worked with the Trauma Preparedness Committee to draft a regional trauma coordination plan which will be sent out for stakeholder review and comment. Next steps are a functional exercise and then integrating this into the annual full-scale MCI exercise.
- Lynne announced that the website vendor lost a software license that impacted our website. She recognized Matt Meyers for updating the entire website.

Eric Alberts thanked Lynne, Matt and Beverly for their efforts in the above. Lynne stated that much of the credit goes to the members on the workgroups managing these projects.

**Board Engagement:** Eric Alberts reviewed the 2021 Board Engagement document. He stated this is a very active Board. Eric said he knows everyone is busy with response to COVID but stressed the importance of the Board's leadership in coalition activities. He asked the Board to reach out to Lynne if they need any support.

**Approval of Infectious Disease Annex:** The draft was sent out prior to the meeting. Lynne reminded the Board that this is a new federal requirement (not in our contract). Our coalition led a statewide workgroup to develop the plan template. The plan was developed by combining the high consequence infectious disease (previously Ebola) plan and the pandemic plan. The plan has been approved by Dr. Hsu and the Emerging Infectious Disease Collaborative. A draft was due to ASPR on April 1 and the final plan must be posted by June 1. Ken Peach stated that the plan seems to focus on influenza as opposed to general infectious diseases. Lynne will work with the Collaborative to clarify. Ken Peach moved to approve the plan with the added clarification and Reggie Kornegay seconded the motion. There was no further discussion and the motion carried.

**National Preparedness Conference:** Lynne advised that the national conference will be held in Orlando this year, from November 30 - December 2. The Coalition typically submits an abstract for a presentation. Last year, we submitted an abstract on the use of our regional medical assistance team as an incident management team; the abstract was accepted but the conference was cancelled due to the pandemic. Lynne advised that she had a call with the conference planning team; because we are the host coalition, they want to highlight what is going on in our area. She asked for approval to submit several abstracts, including our regional medical assistance team, the EID Collaborative and the infectious disease plan, the regional trauma advisory board's trauma coordination plan, and the use healthcare drills as a means of engaging members. Lynne stated that she is also submitting an abstract on behalf of the entire state on the Florida Healthcare Task Force. Dave Freeman moved to approve submission of these abstracts and Lynda W. G. Mason seconded the motion. There was no further discussion and no opposition, and the motion carried. Lynne will let the Board know when conference registration opens. Susan said as a new member she would love to attend. Lynne indicated we have budget for Board members and others to participate in the conference so that we can learn what others are doing.

#### **New Business:**

**Miami-Dade Healthcare Symposium:** Matt Meyers attended the virtual Miami-Dade Healthcare Symposium and he said they used a new event platform that we may wish to consider for future events. He stated that a lot of the content was good but there were some that were redundant. Speakers included Dr. Patricia Cantwell, Holtz Children's Hospital, JHS, UM Miller School of Medicine (Pediatric Disaster Planning); Dr. Louis Pizano, Professor of Surgery and Anesthesiology, Division of Burns, University of Miami Miller School of Medicine, Jackson Health System (Burn Care and Disaster Planning); Kim Smoak, Agency for Health Care Administration (AHCA) re Advanced Surveys and Visits, Mock Survey, and Basics of Surveys and Visits), and Corina Sole Brito, Rachel Kaul, and Dr. Victor Welzant from ASPR TRACIE (Promoting Healthcare Provider Performance and Well-being in the Age of COVID-19). The conference included a group session where they talked about managing disasters. He noticed they did a lot of AHCA breakouts that were very group specific and stated that we might want to avoid doing these as they were not relevant to others.

**Recognition of Chief Chris Stabile:** Eric advised that Chief Chris Stabile has retired from his position at Martin EMS and so will be vacating his Board seat. Eric stated that Chris joined the Board in August 2018 and has served as Board Vice-Chair for 2020 and 2021. Eric stated that Chris has been an extremely engaged Board member, rarely missing a Board, Executive Committee or Member meeting. In 2019, he served on the planning team for the regional mass casualty exercise, helping to engage EMS in that exercise. He also served on the communications workgroup. Chris has been a stellar champion for EMS on the Board, and we cannot thank him enough for his commitment to the Coalition. He will be missed. Chris said it has been a pleasure to serve as a member, Board member and Executive Committee member and this has given him a different perspective on the regional healthcare continuum. Chris stated he plans to remain as a member of the coalition. He wished everyone the best. A photo of the plaque honoring Chris was displayed and will be shipped to his home.

## **Appointment of Chief Chris Kammel: Eric Alberts & Board**

Eric Alberts presented the nomination of Chief Chris Kammel to serve the remainder of Chris Stabile's term on the Board, representing EMS and Martin County. Eric reminded the Board that Chief Kammel's bio was previously distributed. Chris Stabile stated that he has worked with Chief Kammel for many years; he is innovative and engaged and Chris highly recommends his appointment. Reggie Kornegay moved to appoint Chief Kammel for the remainder of Chris Stabile's term; and Christina Proulx seconded the motion. There was no further discussion or opposition and the motion carried. Chief Kammel thanked Chief Stabile for his mentorship. He said that he is excited for this opportunity and looks forward to learning more about the Coalition and being a contributing Board member.

**Impact on Executive Committee:** Lynne Drawdy reminded the Board that the Board succession plan includes appointment of a vice chair for a two-year term, participating in Executive Committee, to prepare them to take over as Board Chair. She advised that the Board roles are at a strategic level and require a lesser time commitment than the Executive Committee, which has operational responsibilities. We have struggled in the past to fill the vice chair role. She recommended that the Board elect a new vice chair now and extend Eric Alberts as chair for an additional year to allow the new vice chair time to learn and take over as chair beginning January 2023. Eric agreed to serve an additional year if needed. Lynda W. G. Mason agreed that the role of the Executive Committee does require a larger time commitment. Lynda said she is proud of what Eric has done. Eric asked if the Board was agreeable to this solution and all agreed. Eric said it is a huge honor to be in this role and thanked everyone for their support. Eric said he is fully committed to help the new vice chair in their role. Eric asked if there were any volunteers. Dr. Pappas suggested that the Coalition provide information on the duties and time commitment for the vice chair and then ask for volunteers. Lynne indicated we don't have to have an appointment today but recommended that we appoint someone at the June meeting. Lynda moved to appoint a new vice chair at the June meeting, who will take over as chair in January 2023. Dave Freeman seconded the motion. Lynne will send out information on the duties and time commitment for the vice chair and ask for volunteers.

**Annual Review/Update of Bylaws and Governance Policies:** Lynne advised that the bylaws and governance policies (Version 17) were sent out in advance and Eric stated all proposed changes are highlighted in red. The group reviewed the proposed changes. The most significant change is to formalize the policy that Board seats are representative of discipline/geography and if a Board member has a change in position that impacts their representation, they must vacate the Board seat. She reported that the other changes are mostly clean-up based on changes in the federal language regarding membership groups. Eric asked if there were any questions or concerns and there were none. Dr. Pappas moved to accept the revisions as presented and Ken Peach seconded the motion. There was no further discussion and no opposition, and the motion carried.

**Approval of 20-21 Budget Revision:** Eric mentioned there were several documents shared regarding this year and next year's budget. Lynne reviewed the 20-21 proposed budget revision (one document is just the category figures and the other is narrative to support the revision). She reminded the Board that we must expend the budget allocation by June 30th in order to receive the funds from the state. She tracks expenditures by category and project and the state tracks by category only. She stated that any changes to the approved budget approved require Board and state approval. Due to the pandemic, some events such as exercises and trainings, have been postponed and funding remains in these projects. She highlighted proposed changes. A small amount has been added to the fringe (payroll taxes) category as there was a small shortfall in that category. An additional \$20,000 to cover mental health training identified as a high priority due to the pandemic was added to the training category. All other unspent funding was moved to the medical surge equipment category. She stated that there is a constant shortfall in this category due to new hospitals coming online and replacing expiring equipment. She advised that this is not equipment that hospitals use every day, but specific response cache equipment, such as decontamination equipment. Dave asked if the hospitals are willing to

accept this equipment. Lynne stated that the equipment is part of a minimum readiness list that was approved by the region's hospitals and funding comes from ASPR as part of hospital preparedness program. There is also an equipment management policy which governs equipment purchased by the coalition and when hospital equipment is delivered, the receivers must sign a statement agreeing to abide by that policy. With the movement of funds to the medical surge equipment category, we will still have an approximate \$110,000 shortfall in expiring equipment that we will need to carry over to next fiscal year's project. Eric stated that this equipment is critical for hospitals to be prepared. Dave Freeman moved to accept the budget revisions as presented, and Lynda W. G. Mason seconded the motion. There was no further discussion or opposition and the motion carried.

**Review and Approval of FY 21-22 Work Plan and Budget:** Lynne reminded the Board they developed a five-year work plan in 2017. This is year five of that plan. She reminded the Board that the state accepted the initial five-year work plan and budget but moved close to \$175,000 from years 1-4 to year 5; we will receive those funds this year. There are minor tweaks to the workplan based on what has already been accomplished and what we plan to finalize in the coming year. There are minor changes to the budget, such as shifting some traditionally unused funding such as project travel to other categories. Eric asked if funding for the federal audit is included; Lynne said it is included in the end of the year annual report project, which includes audit and tax preparation. We will begin the 2020 federal audit in May.

Lynne advised that the most significant change to the new budget is the addition of a \$500 per month/\$6,000 annual stipend for the Regional Trauma Advisory Board Executive Director position. Eric asked the Regional Trauma Advisory Board Executive Director to step off the call while the Board discussed this issue. Questions included: Do other coalitions do this? Lynne stated that some do but there is no consistency. Does this create a precedence for others? Lynne presented the rationale to support this addition and said the federal FOA (funding opportunity announcement) allows for payment to clinical champions. She stated that the region was asked by the state to pilot development of a regional trauma advisory board in 2015 and the current RTAB Executive Director has championed this project from the beginning, committing numerous hours to this project. Although we did not create a formal trauma agency, we have a robust trauma advisory board and four committees that are producing real value for the trauma system. Lynne reported that there is a precedence for this as we currently pay a \$400 a month stipend to the regional medical assistance team's administrative officer. Eric asked if Lynne felt this was a needed expense, and Lynne stated that she did. Eric asked if funding was available on an ongoing basis for this, and Lynne stated that it is. Eric suggested that this expense be reviewed annually. Dave moved to approve the budget item with Eric's addition, and Wayne Smith seconded the motion. Ken Peach asked if this will be paid through a contract. Lynne reported that the accountant advised for tax purposes this must be paid as though an employee. She advised that we will develop a position description with deliverables for the position. Eric stated that this gives accountability for the funding. There was no further discussion and no opposition, and the motion carried.

Dave moved to approve both the budget and annual workplan, and Sheri seconded the motion. There was no additional discussion and the motion carried.

Eric stated he had one more issue regarding the budget and asked the Coalition staff to step off the call so that the Board could discuss pay issues. He presented a request for a pay incentive plan for Coalition employees. This would be a long-term plan and coaching-based so that we can retain valued staff. The Board agreed on the following next steps:

- Conduct salary assessment with other coalitions to identify what they do for initial and subsequent year pay increases.
- Ken Peach will provide documents he uses for performance-based reviews and we will adapt these for our coalition.
- Once all of this is complete, an incentive plan will be submitted to the Executive Committee for approval.

- Once the Executive Committee approves the plan it will be shared with the Board.

Ken Peach moved to approve the actions as outlined above and Lynda W.G. Mason seconded the motion. There was no further discussion and no opposition, and the motion carried.

**Annual Review and Update of CFDMC Strategic Plan:** Lynne referred to the Strategic Plan update which was previously distributed and reported that we are closing out year two of a three-year Strategic Plan. She reviewed the current status of each objective:

**Sustainability:** We continue to look for grant opportunities and other leveraging other funding streams. This year, we received a \$480,000 grant from FHA, and we received funding for an ambu-bus through UASI.

**Succession Plan:** At least two of three coalition positions have been crossed trained on every deliverable and for most deliverables all three coalition staff have been trained. The final piece of the succession plan is to create shared files on OneDrive which will be accomplished by June 30.

**Board Engagement:** Targets have been established and this is tracked through the Board engagement updates.

**Increasing Diversity:** Lynne advised that Beverly has classified our membership data base according to the new federal guidelines. We have two targets. One is to increase nursing home and ALF membership. The second is to engage EMS. She advised that Matt has drafted a marketing strategy and Beverly has a marketing background and will assist with finalizing the draft for presentation to the Board at the June meeting.

**Building and Sustaining Capabilities:** Lynne advised that this is an area where we are considered a leader. We share everything we do with other coalitions as well as open our training to others. We have not yet had any luck in connecting with Team Rubicon but will focus on this when our team commander returns from deployment. We complete annual assessments of our progress in building capabilities (this will be reviewed later in the meeting). We are the only coalition in Florida to have a balanced scorecard (this will be reviewed at during the August meeting).

**Increase Engagement.** A member benefits and expectation document has been sent out to all members. A survey was sent to all members with opportunities to engage in coalition workgroups. Both of these are provided to new members during orientation. Engaging local governmental leaders has been a struggle. Lynne will develop an elevator speech for the Board and the Board agree to target at least two local government leaders during the coming year. Lynne will draft a National Preparedness Month proclamation to get governmental leaders engaged. Lynne asked Ken Peach for suggestions. Ken stated that he has a risk reduction tool he will share. The regional planning councils have local government on their boards, and we might want to think about connecting with them to reach these members.

A new Strategic Plan will be developed during the annual retreat in April 2022, including a SWOT, a 360 review, and identifying strategic priorities. The plan will be drafted for member input in May. ASPR recognized our first Strategic Plan as a best practice.

**Capabilities Assessment:** Lynne reminded the Board that the funding that comes from ASPR and is based on the four (4) hospital preparedness program capabilities. All are addressed in original five-year workplan and are embedded in our contract. We do a self-assessment and once a year bring this to the Board to validate. We are entering the final year of a five-year workplan and should be well along in achieving these. The Board reviewed the status of each objective in the spreadsheet. The remaining gaps were reclassified to high priority.

**Review of FOA and Discussion on Future Strategies:** Lynne advised that the state will put out an Invitation to Negotiate (ITN) in the next few months for a new contract to begin July 1, 2022. This will be based on the revised ASPR Funding Opportunity Announcement FOA which came out two years ago. Some big changes are the national stockpile moving to ASPR, an emphasis on response annexes and how coalitions support response. Our primary response duties are to provide situational awareness and coordination of resources. Other highlights from the FOA include an increased emphasis on ensuring clinicians are engaged in planning, engaging local governmental leaders and building out annexes to the response plan in specific areas such as burn, chemical and radiological events. She stated that we have clinical champions and have a strategic objective to engage governmental leaders. The federal funding partner has provided guidance on the annexes, and we will work collaboratively with other coalitions in developing these. She asked for the Board's thoughts on future direction over the next five years and what should be our focus in terms of building our response capabilities. Eric stated that we need to continue a focus on preparing hospitals as the frontline in mass casualty events, and we need to continue to prepare for the events that are unfolding across the nation and the world. He stated that we also saw some preparedness gaps during the pandemic and other events, such as long-term care. Ken Peach stated that the number of elderly going into long-term care has decreased due to COVID and we may need to expand our focus on home care. He stated that we also need to address the unique needs of those 85+. Dave agreed. Susan Saleeb also agreed and stated that CVS pharmacies are moving more to home-deliveries. We need to continue to focus on including other healthcare organizations and facilities into these efforts. Board members can assist with this. We need to look at cyber threats, mass casualties and how they impact all healthcare organizations. We also need to engage with the EMS community for planning, training and exercising. Lynne thanked the Board for this input and asked that they send any other thoughts on future direction. Once the ITN is received, Lynne will have a call with the Executive Committee and prepare a draft response for Board approval. She is not expecting any serious competitor challenge in response to the ITN.

**Other Board Issues/Announcements:** Dr. Pappas thanked Eric for a great meeting. Eric thanked the Coalition staff for their preparation. The Board congratulated Chris Stabile on his retirement. Lynne thanked Eric for agreeing to stay on as Board Chair for an additional year.

The meeting adjourned at 12:48 pm.

**Next Meeting:** Eric advised that the next Board call is scheduled for June 15 at 4 p.m.