CFDMC 2024-2025 Traffic Light Report as of 2-14-25 (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)** | **6/30/25** | Lead: DrawdyContinue to promote Pulsara implementation.FRC Toolkit offered in six installations during July/August; submitted to ASPR-TRACIEOffered FRC tabletops to counties 10-3-24Requested county/hospital FRC/FAC plansMet with FAC Team Leaders re recruitment |
| **High Priority Issue: EMS Engagement (need EMS input and engagement)** | **TBD** | Lead: RTAB Clinical Leadership Committee (Dr. Zuver has lead on scheduling symposium); provided list of EMS Medical Directors to Todd Husty who will call each |
| **High Priority Issue: Evacuation Equipment (evacuation equipment is costly and requires storage which hospitals struggle with; identified cache strategy)** | **12/31/24** | Lead: DrawdyFinal evacuation cache placed at AH Daytona. This closes this HVA gap. |
| **High Priority Issue: Patient Disaster Transfer Processes (need regional process to identify beds for patients – identified as statewide gap during Hurricane Ian)** | **6/30/25** | Lead: Lynne Drawdy & Trauma Preparedness CommitteeTrauma Preparedness Committee will work with FCOT and other healthcare coalitions to draft a statewide process (this is now an ASPR priority); plan to begin in May following MCI |
| **High Priority: Engage community leaders** | **12/31/24** | Lead: BoardSent survey to Board members to identify officials; will develop engagement plan (MOUs with Cities/Counties, PPT for Board to present, etc.) |
| **High Priority: Use of EMResource** | **6/30/25** | Need to ensure that EMS is utilizing EMResource appropriately to alert hospitals across the region. Identify gaps in usage across the region and training plan. |
| Submit Monthly Expenditures Documentation | Monthly (15TH work day) | Submitted monthly |
| Task #1 – Royal 4 | Quarterly | Submitted quarterly |
| Task #2 – Data Security & Confidentiality | Quarterly | Submitted quarterly |
| Task #3 – Healthcare Coalition Task Force | Quarterly | Submitted quarterly |
| Task #4 – Budget | July 15th | Completed for current contract |
| Task #5 – Governance | July 15th | Completed for current contract |
| Task #6 – HCC Boundaries | January 15th | Completed for current contract |
| Task #7 – HVA | January 15th | Completed for current contract |
| Task #8 – Readiness Assessment | January 15th | Completed for current contract |
| Task #9 – Supply Chain Integrity Assessment | January 15th | Completed for current contract |
| Task #10 – Cyber Security Assessment | June 15th | Working with other coalitions to develop assessment tool |
| Task #11 – Extended Downtime Healthcare Delivery Impact Assessment | June 15th | Awaiting ASPR guidance |
| Task #12 – Provide input into State Strategic Plan | Quarterly | PAC meeting scheduled 3/5/25 |
| Task #13 – HCC Readiness Plan | March 15th | In progress |
| Task #14 - Training and Exercise Plan | March 15th | In progress |
| Task #15 – HCC Response Plan  | June 15th |  |
| Task #16 – HCC COOP | June 15th |  |
| Task #17 – MRSE | May 31st | In Progress |
| Task #18 – Position Descriptions | April 15th | Completed |
| Task #19 – Quarterly Report | Quarterly | In Progress |

Note: Coalition projects are also included below

CFDMC Project Report

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| --- | --- | --- | --- |
| Contract Task / Coalition Project  | Due Date | Lead / Back-up / Partners | Activities / Status |
| Task #1 – Royal 4: Ensure the Royal 4 System is updated throughout the contract term as follows:a) Enter all tangible preparedness and response itemspurchased with contract funds into the Royal 4 systemwithin 30 calendar days of the item invoice date.b) Run an Inventory Movement Report to confirm that theRoyal 4 System is up to date, ensuring that the start dateof the report is the first day in the quarter for which thereport is submitted and that the end date of the report isthe last day in the quarter for which the report is submitted.c) Save the Royal 4 System Inventory Movement Report as a single PDF file and title the file as"Contract#\_Task#\_Submission Date (MMDDYYYY)”.d) Submit the Royal 4 System Inventory Movement Reportfile via email to the Contract Manager by October 15,January 15, April 15, and June 15 of each contract year.e) Upload the Royal 4 System Inventory Movement Reportfile in the CRVS by October 15, January 15, April 15, andJune 15 of each contract year.f) Document the date of each update to the Royal 4 Systems in the Quarterly Progress Report. | Quarterly | Meyers (Drawdy, Cook) | Completed second quarterNew process to ensure input within 30 days of invoice |
| Task #2 – Data Security & Confidentiality: Always comply with the terms of the Data Security and Confidentiality provisions (Attachment II) throughout the contract term. Document compliance by providing a statement orattestation certifying this requirement is met in the Quarterly Progress Report. | Quarterly | Drawdy (Meyers, Cook) | Completed second quarter |
| 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) | Hosted January 2025 meeting |
| Task #4 - Budget: Upload the completed HCC Budget using the latest template as an Excel file in ASPR’s designated tracking system by July 15.Remove any previous versions of the budget from ASPR’sdesignated tracking system as applicable. Submit a screenshot of the uploaded HCC Budget Template to the Contract Manager via email and in the CRVS by July 15. | 7/15/25 | Drawdy (Meyers, Cook) | Completed for this contract year |
| Task #5 – Governance: Maintain, update, and submit HCC governance information throughout the contract term as follows:a) Ensure the HCC governance information includes thefollowing:(1) An organizational structure capable of supportingHCC activities.(2) HCC Member guidelines for participation andengagement in HCC meetings and activities.(3) Policies and procedures focused on supportingacute health care service delivery throughcommunication and coordination.(4) HCC integration with existing state, local, andmember-specific incident management structuresand roles.b) Compile the HCC governance information into a singlePDF file and title the file as "Contract#\_Task#\_SubmissionDate (MMDDYYYY)”.c) Submit the HCC governance information via email to theContract Manager and upload the file in the CRVS and inASPR’s designated tracking system by July 15.d) Update the HCC governance information as necessary.Document any updates to the governance information inthe Quarterly Progress Report. | July 15th | Drawdy (Board) | Completed for this contract year. |
| Task #6 – Boundaries: Provide information about the HCCs county boundaries within the HCC Jurisdiction as follows:a) Create an HCC Jurisdiction map that includes countyboundaries in a single PDF file.b) Title the HCC Jurisdiction map file as“Contract#\_Task#\_Submission Date (MMDDYYYY)”.c) Submit the HCC Jurisdiction map in the CRVS and ASPR’sdesignated tracking system by January 15 of each contractyear.d) Update the jurisdictional information as needed during the contract year to reflect any jurisdictional boundary changes that occur. Document any such changes in the Quarterly Progress Report. | January 15th | Drawdy | Completed for this contract year |
| Task #7 – HVA: Conduct or update a HVA and maintain, update, and submit the HVA Report by January 15 as follows:a) Conduct or update a HVA of the HCC Jurisdiction’scharacteristics (such as risks for natural or man-madeDisasters, geography, and critical infrastructureassessment component that addresses populationcharacteristics (including demographics)) and theindividuals who might require additional help in anEmergency (such as children; pregnant women; seniors;and individuals with Access Needs and Functional Needs,including people with disabilities and others with uniqueneeds (available from the Florida Access and FunctionalNeeds Profile in FLhealthcharts.gov)). Conduct or update aHVA as follows:(1) Coordinate with state and local emergencymanagement 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 theHVA.(3) Use a variety of HVA tools in conducting the HVA.(4) Ensure health care facilities, EMS, and other healthcare organizations provide input while conductingthe 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 theHVA Report to verify that the HCC coordinated withstate and local emergency management organization assessments and any public health hazard assessments.(2) A list of HCC Members that participated inconducting the HVA.(3) A list of the HVA tools that were used in conductingthe HVA.(4) An assessment component of the HCCJurisdiction’s characteristics.(5) An assessment component that addressespopulation characteristics and considers thoseindividuals who might require additional help in anEmergency.(6) The dates and descriptions of the meetings andconference calls that took place to update the HVA.(7) A description of how the HVA Report will bedistributed to the HCC Members and local healthand emergency management officials andorganizations.c) Title the HVA Report as "Contract#\_Task#\_SubmissionDate (MMDDYYYY)" and save it as a PDF file.d) Submit the HVA Report via email to the Contract Managerand upload it in the CRVS and ASPR’s designated trackingsystem by January 15.e) Remove previous versions of the HVA Report from ASPR’sdesignated tracking system as applicable.f) Distribute the HVA Report to HCC Members and localhealth and emergency management officials andorganization in accordance with the report.g) Document the date and method of distribution in the HVA Report in the Quarterly Progress Report.h) Summarize in the Quarterly Progress Report how healthcare facilities, EMS, and other health care organizationsprovided input into the update of the HVA Report based on their facility’s or organization’s HVAs. | January 15th |  | Completed second quarter |
| Task #8 – Readiness Assessment: Complete, submit, and distribute a readiness assessment asfollows:a) Complete a readiness assessment detailing the HCC’scapacity and capability to carry out NOFO activities,conduct health care preparedness and responseoperations, and address health care readiness gaps, usingthe readiness assessment materials provided by ASPR.b) Save the readiness assessment as"Contract#\_Task#\_Submission Date (MMDDYYYY)" in asingle PDF file.c) Submit the readiness assessment via email to the Contract Manager by January 15.d) Upload the readiness assessment in the CRVS andASPR’s designated tracking system by January 15.e) Remove any previous versions of the readinessassessment from ASPR’s designated tracking system asapplicable.f) Distribute the readiness assessment to HCC Members byJanuary 15.g) Document the date and method the readiness assessment was distributed in the Quarterly Progress Report. | January 15th | Drawdy (Meyers, Cook) | Completed second quarter |
| Task #9 – Supply Chain Integrity Assessment: Conduct or update a supply chain integrity assessment as follows:a) Collaborate with public entities and private partners toconduct or update the assessment.b) Include the following sections in the assessment:(1) Table of Contents(2) Resource Needs(3) Vulnerabilities(4) Current Access and Infrastructure(5) Impact on Communities(6) Mitigation Strategiesc) Save the supply chain integrity assessment as"Contract#\_Task#\_Submission Date (MMDDYYYY)" in asingle PDF file.d) Submit the supply chain integrity assessment via email to the Contract Manager by January 15.e) Upload the supply chain integrity assessment in the CRVS and ASPR’s designated tracking system by January 15.f) Remove any previous versions of the supply chain integrity assessment from ASPR’s designated tracking system as applicable.g) Distribute the supply chain integrity assessment to HCCMembers by January 15.h) Document the date and method the supply chain integrity assessment was distributed in the Quarterly Progress Report. | January 15th | Drawdy (Supply Chain Integrity Workgroup) | Completed second quarter |
| Task #10 – Cybersecurity Assessment: Conduct, submit, and distribute a cybersecurity assessment asfollows:a) Conduct an assessment of cybersecurity practices andidentify, at a high level, the practices and/or systems thatthe HCC has in place that correspond to the Healthcareand Public Health (HPH) Sector-Specific CybersecurityPerformance Goals (CPGs) available athttps://hphcyber.hhs.gov/performance-goals.html tostrengthen cyber preparedness and resiliency.b) Include the following in the cybersecurity assessment:(1) Table of Contents(2) Description of the impact of a potential cyberincident on Communities Most Impacted byDisasters.(3) Identification of mitigation strategies.(4) Based on the ten essential HPH Sector SpecificCPGs at https://hphcyber.hhs.gov/performancegoals.html, include where the HCC may have gapsand identify mitigation strategies that will addressthese priority areas for cyber preparedness andresiliency.c) Save the cybersecurity assessment as"Contract#\_Task#\_Submission Date (MMDDYYYY)" in asingle PDF file.d) Submit the cybersecurity assessment email to the Contract Manager by June 15.e) Upload the cybersecurity assessment in the CRVS andASPR’s designated tracking system by June 15.f) Remove any previous versions of the cybersecurityassessment from ASPR’s designated tracking system asapplicable.g) Distribute the cybersecurity assessment to HCC Members by June 15.h) Document the date and method the cybersecurityassessment was distributed in the Quarterly ProgressReport. | June 15th | Drawdy  | Working with HCCTF to determine assessment tool |
| Task #11 – Extended Downtime Healthcare Delivery Impact Assessment: Conduct an extended downtime health care delivery impact assessment as follows:a) By June 15, collaborate with stakeholders to conduct anextended downtime health care delivery impactassessment:(1) Clinical and operational functions that may beimpacted by an extended downtime event affectingcoalition- or jurisdiction-wide systems.(2) Impact of a potential downtime event onCommunities Most Impacted by Disasters.(3) Existing mitigation strategies to address potentialimpacts, including how the HCC currentlyintegrates with the ESF-8 lead agency coordinatinghealth care response incident management toaddress extended downtime events.(4) Coalition-level resources available to supportresponse to an extended downtime event, includingthe ability of health care partners to support patientcare in critical medical service areas in the event ofan extended downtime event affecting the HCC orits members.(5) The escalation of downtime event risks and/orrealized events to the state level.b) Save the extended downtime health care delivery impact assessment as "Contract#\_Task#\_Submission Date(MMDDYYYY)" in a single PDF file.c) Submit the extended downtime health care delivery impact assessment via email to the Contract Manager by June 15.d) Upload the extended downtime health care delivery impact assessment in the CRVS and ASPR’s designated tracking system by June 15.e) Remove any previous versions of the extended downtime health care delivery impact assessment from ASPR’s designated tracking system as applicable.f) Distribute the extended downtime health care deliveryimpact assessment to HCC Members by June 15.g) Document the date and method the extended downtime health care delivery impact assessment was distributed in the Quarterly Progress Report. | June 15 | Drawdy | Awaiting ASPR guidance |
| Task #12 – Input into State Strategic Plan: Provide input into the state-level strategic plan as follows:a) Participate in the Preparedness Advisory Committee (PAC) meetings and activities as directed by the Department.b) Document the date of each meeting or activity and thename of each of Provider’s staff who participated in theQuarterly Progress Report. | Quarterly | Drawdy | PAC scheduled 3/5/25 |
| Task #13 – HCC Readiness Plan (previously Preparedness Plan): Update, submit, and distribute an HCC Readiness Plan as follows:a) Update the HCC Readiness Plan by March 15.b) Include the following in the HCC Readiness Plan:(1) Table of Contents(2) Description of top five strategic priorities of theHCC(s).(3) Description of how the HCC will implementactivities, including the HCC’s method for:(a) Developing the required materials identifiedin the NOFO, including approach, timelines,and expected milestones.(b) Addressing gaps identified throughassessments.(c) Engaging community partners.(d) Facilitating continuous improvement fromthe previous contract year.(4) Description of how the HCC will develop as anorganization, including how the HCC will:(a) Manage and improve administrative andfinancial functions.(b) Communicate the benefits of HCC activitiesto health care readiness partners, community partners, and other key audiences (e.g., engaging leader“champions”).c) Save the HCC Readiness Plan as"Contract#\_Task#\_Submission Date (MMDDYYYY)" in asingle PDF file.d) Submit the HCC Readiness Plan via email to the ContractManager by March 15.e) Upload the HCC Readiness Plan in the CRVS and ASPR’sdesignated tracking system by March 15.f) Remove any previous versions of the HCC Readiness Planfrom ASPR’s designated tracking system as applicable.g) Distribute the HCC Readiness Plan to HCC Members byMarch 15.h) Document the date and method the HCC Readiness Planwas distributed in the Quarterly Progress Report. | March 15th | Drawdy (Meyers, Cook) | In progress (will be provided to Board and members by 3/15/25) |
| Task #14 - Training and Exercise Plan: Update, submit, and distribute a training and exercise plan asfollows:a) Update the training and exercise plan by March 15 andensure the updated training and exercise plan includes thefollowing:(1) Table of Contents.(2) Description of how the HCC will engage thehealthcare workforce in trainings and exercises.(3) Description of how the HCC will select whichtrainings and exercises to conduct.(4) Description of any existing partnerships orresources the HCC can use to support training andexercises.(5) Calendar or timeline of planned trainings andexercises through June 30, 2029.(6) Intended audiences and outcomes for the trainingand exercises.(7) A description of how the HCC will assist memberswith NIMS implementation throughout the period ofperformance.(8) A description of how the HCC will complete thefollowing NIMS activities:(a) Ensure that HCC leadership receives NIMStraining based on evaluation of existingNIMS education levels and needs.(b) Promote NIMS implementation among HCCmembers, including training and exercises,to facilitate operational coordination withpublic safety and emergency managementorganizations during an emergency usingan incident command structure.(c) Assist HCC members with incorporatingNIMS components into their emergencyoperations plans.b) Save the training and exercise plan as"Contract#\_Task#Submission Date (MMDDYYYY)" in aPDF file.c) Submit the training and exercise plan via email to theContract Manager by March 15.d) Upload the training and exercise plan in the CRVS andASPR’s designated tracking system by March 15.e) Remove any previous versions of the training and exercise plan from ASPR’s designated tracking system asapplicable.f) Distribute the training and exercise plan to HCC Members by March 15.g) Document the date and method the training and exercise plan was distributed in the Quarterly Progress Report. | March 15th | Drawdy (Meyers, Cook) | Part of the readiness plan; completed state, regional and county IPPWs |
| Task #15 - HCC Response Plan: Update, submit, and distribute an HCC Response Plan as follows:a) Update the HCC Response Plan to include the followingsections:(1) Table of Contents(2) Information Sharing Plan(3) Resource Management Plan(4) Medical Surge Support Planb) Save the HCC Response Plan as"Contract#\_Task#\_Submission Date (MMDDYYYY)" in aPDF file.c) Submit the HCC Response Plan via email to the ContractManager by June 15.d) Upload the file in the CRVS and ASPR’s designatedtracking system by June 15.e) Remove previous versions of the HCC Response Planfrom ASPR’s designated tracking system as applicable.f) Distribute the HCC Response Plan to HCC Members byJune 15.g) Document the date and method the HCC Response Plan is distributed in the Quarterly Progress Report. | June 15 | Drawdy (Meyers, Cook) |  |
| Task #16 – COOP:a) Develop or update a COOP to include the followingsections:(1) Table of Contents(2 Activation(3) Coordination Role(4) Leadership Continuity(5) Continuity Determinations(6) Supplemental Resources(7) Critical Infrastructure Disruption Mitigation(8) Essential Recordsb) Save the COOP as "Contract#\_Task#\_Submission Date(MMDDYYYY)" in a single PDF file.c) Submit the COOP file via email to the Contract Manager by June 15.d) Upload the COOP file in the CRVS and ASPR’sdesignated tracking system by June 15.e) Remove previous versions of the COOP from ASPR’sdesignated tracking system as applicable.f) Distribute the COOP to HCC Members by June 15.g) Document the date and method the COOP was distributed in the Quarterly Progress Report. | June 15th | Meyers (Drawdy, Cook) | Updating with warehouse move; new accountant |
| Task #17 – MRSE: Hold a MRSE by May 31, to assess the HCC's capacity to support a large-scale, community-wide medical surge incident and complete and submit the ASPR MRSE Exercise Planning and Evaluation Tool as follows:a) Hold a MRSE in accordance with the MRSE EvaluationPlan, MRSE Situation Manual, and MRSE Planning andEvaluation Tool available at SharePoint.b) Invite the BPR Training and Exercise Section, via email tothe BPR Training and Exercise Section Administrator, toparticipate in the MRSE, a minimum of 30 calendar daysprior to the exercise.c) Ensure each of the items on the MRSE Recipient ReviewGuide at SharePoint are met.d) Save the completed ASPR MRSE Exercise Planning andEvaluation Tool as "Contract#\_Task#\_Submission Date(MMDDYYYY)" in an Excel file.e) Submit the completed ASPR MRSE Exercise Planning andEvaluation Tool via email to the Contract Manager andupload it in the CRVS and ASPR’s designated trackingsystem within 90 calendar days following the exercise orno later than June 15, whichever occurs first.f) Document the date of the planned or completed MRSE in each quarter’s Quarterly Progress Report.g) Document the date of the BPR Training and ExerciseSection invitation to participate in the MRSE in theQuarterly Progress Report.h) Document the name of the BPR Training and ExerciseSection representative who participated in the MRSE in theQuarterly Progress Report. | May 31st | Drawdy & FSE Planning Team | In progress; FSE to be held April 10, 2025 |
| Task #18 – Position Descriptions: Create and submit job descriptions as follows:a) For each individual who receives HPP funds as part or allof their salary/benefits, complete a job description.b) Save the job description(s) as"Contract#\_Task#\_Submission Date (MMDDYYYY)" in asingle PDF file.c) Submit the job description(s) file via email to the Contract Manager by April 15.d) Upload the job description(s) file in the CRVS by April 15. | April 15th | Drawdy | In governance document; will be submitted in third quarter |
| Task #19 – Quarterly Report: Complete and submit the Quarterly Progress Report as follows:a) Complete the Quarterly Progress Report available on SharePoint.b) Include the information as specified in the Tasks above in the Quarterly Progress Report.c) Include the progress for each Task in the QuarterlyProgress Report.d) Save the Quarterly Progress Report as"Contract#\_Task#\_Submission Date (MMDDYYYY)" in aPDF file.e) Submit the Quarterly Progress Report within 15 calendardays after the end of each quarter via email to the Contract Manager and upload it in the CRVS. | Quarterly | Drawdy (Meyers, Cook) | Completed second quarter |
| Coalition Project: Update Preparedness annexes that are not contract tasks, includingStrategic PlanCOOP(other annexes are included in contract tasks) | Ongoing | Drawdy (Meyers, Cook, Workgroups, Board) | Posted and available for comment all year; workgroups update as needed. |
| 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 (Medical Examiners)
* Crisis Standards of Care (CSoC Workgroup)
* Continuity of Healthcare Service Delivery
 | Ongoing | Drawdy (Meyers, Cook, Workgroups, Board) | Posted and available for comment all year; workgroups update as needed. |
| Coalition Project – Quarterly Community Based Drills* September – Operation Protect & Secure (active shooter)
* December – A Glass of Mutual Aids (mutual aid confirmations)
* February – Great Tornado Drill (shelter in place)
* May – Operation Generate Confidence (generator drill)
 | Quarterly | Drawdy / Cook county Ems | Completed February 4th Great Tornado Drill with more than 200 registered |
| Coalition Project – other exercises |  |  | * FRC tabletops (see high priority issue – sent reminder to counties)
* 15 till 50 – Holmes – completed 2/5/25
* FIDTN – February 27th at AH
* April FSE (see MRSE)
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| 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 Florida 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) | Submitted January |
| Single federal audit: organizations receiving more than $750,000 annually are required to undergo a single federal audit by 9/30 annually. | 9/30/25 | Drawdy (Ori, Board) | Passed 2023 audit with no findings. Next audit May 2025Passed state audit for July-December 2024 with no findings |
| IRS 990 | November 30 annually | Drawdy (Ori) | Submitted 2023 990 |
| Coalition Project: Communicate with members* Sent out alerts, training and exercise opportunities (Drawdy)
* Keep website updated (Meyers)
* Quarterly member meetings (all)
* Quarterly communication drills (Drawdy & Cook)
 | Quarterly | Drawdy, Meyers, Cook, Board | Second quarter drill completed |
| Coalition Project: EMResourceEMResource Steering Committee is establishing best practice guidelines and training videosRanked high as UASI project (expect to receive funding to sustain) | Monthly | Meyers (Drawdy, Cook, Hospitals, EM, EMS, FHA) | OngoingUASI funding begins May 1st |
| Coalition Project: Hospital Minimum ReadinessMaintain hospitals at minimum readiness standards (by hospital sizeMonthly hospital calls | June 30 Annually | Drawdy (Meyers, Cook, Hospitals, Board) | Ongoing |
| Coalition Project: FAC Team | Annual | Drawdy (Meyers, Cook, Team Members, Board) | Developed plan to recruit and revitalize team, will kick off at March Coalition meeting |
| Coalition Project: Regional Trauma Advisory Board (Executive Committee, Clinical Leadership Committee, Preparedness Committee (RTCC plan), System Support Committee | Annual | Drawdy (Meyers, Cook, RTAB Members) | Committees meeting bimonthlyExecutive Committee focus on increasing EMS engagementSystem Support will lead STB projectPreparedness will lead Pulsara implementation, patient movement/MCI coordination plan |
| Coalition Project: FSEDIdentify/share best practices | June 2025 | Drawdy/Meyers/Planning Team | Best Practices document shared with hospitalsWill vet during April exercise |
| Coalition Project: Ambu-busSubmitted/received SHSGP projectSecure bus donationSecuring EMS agency | December 2024 | Drawdy/Meyers | Completed 2/13/25. Placed at City of Ocoee |
| Coalition Project: Achieve Strategic ObjectivesEnsure Sustainability:* By June 2023, participate in ASPR sustainability assessment - completed
* By June 2025, 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 June 2025, increase number of county and city leaders who are Coalition members by 50% - in progress
* By 6/30/25, increase EM/EMS engagement with Coalition – in progress

Address Climate Change Impacts – Completed* 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 and EMResource) - completed
* By June 2025, develop, implement and evaluate a campaign focused on increasing retention of the healthcare workforce – in progress
* By 6/30/25, assess, identify, and plan for gaps in new ASPR capabilities – in progress
 | June 30, 2025 | Drawdy (Meyers, Cook, Board) | OngoingSee sustainability draft for discussion at February Board meeting |
| Coalition Project: 2024 Regional Medical Surge AAR/IP:* Decon training (identified CDP training)
* Pulsara/Patient Tracking/FRC (see FRC, Trauma Preparedness)
* FSED Best Practices (see FSED workgroup)
* Cyber TTX held
* HICS training (included focus on long-term response/recovery)
* Trauma/Burn training – in progress
 | As Identified in AAR/IP |  |  |
| Coalition Project: Chemical Surge AAR/IP:* Educate stakeholders (sent out plan/AAR)
* Update plan (see Task #14, including actions related to training resources, patient tracking, prioritization, community reception centers. Communication)
* CHEMPACK Presentation (at September 2024 coalition meeting)
 | As Identified in AAR/IP |  |  |
| Coalition Project: Crisis Standards of CARE AAR/IP:* Vendor reliance (supply chain mitigation)
* Improve communications (EMResource, WebEOC)
* Advocate for federal/state guidance
* Non power communications drill (see above)
* Engage leaders (see high priority issue)
 | As Identified in AAR/IP |  |  |