

Emerald Coast Health Care Coalition

Serving Escambia, Santa Rosa, Okaloosa, Walton, Holmes,
Washington, Jackson, Calhoun, and Liberty counties.



Strategic Plan

Drafted by the Strategic Vision Sub-committee

March 2016

Last Update: August 2016

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Emerald Coast Health Care Coalition (ECHCC) Strategic Plan

Introduction

Purpose of Healthcare Coalitions

A Healthcare Coalition (HCC) is a collaborative network of healthcare organizations and their respective public and private sector response partners. Together, they serve as a multi-agency coordination group to assist Emergency Management, through ESF8, with preparedness, response and recovery activities related to health and medical disaster operations.

Healthcare Coalitions help improve medical surge capacity and capability, further enhancing a community's health system preparedness for disasters and public health emergencies.

A Healthcare Coalition also augments local operational readiness to meet the health and medical challenges posed by a catastrophic incident or event. This is achieved by engaging and empowering all parts of the healthcare community, and by strengthening the existing relationships to understand and meet the actual health and medical needs of the whole community.

Federal Funding

Funding for Healthcare Coalition development and sustainment is provided by the U.S. Department of Health and Human Services, Office of the Assistant Secretary for Preparedness and Response (ASPR), Healthcare Preparedness Program (HPP) Cooperative Agreement and/or the Centers for Disease Control and Prevention (CDC) Public Health Emergency Preparedness (PHEP) Cooperative Agreement (Agency Funding Opportunity Number CDC-RFA-TP12-1201; Catalog of Federal Domestic Assistance Numbers 93.889 – National Bioterrorism Hospital Preparedness Program; and, 93.069- Public Health Emergency Preparedness).

Specific ASPR HPP and CDC PHEP funding opportunity announcement information is available at: <http://www.phe.gov/preparedness/Pages/default.aspx>.

Current funding through 2017 is focused on the development and sustainment of Healthcare Coalitions through:

- Improving infrastructure - helping community-based healthcare providers prepare for disasters with a public health impact.
- Capability-based planning -funding supports the National Health Security Strategy and follows a capabilities-based approach, building upon the strong preparedness foundation already in place at the local level. ASPR has identified the following eight capabilities as the basis for HCC preparedness:

- Healthcare System Preparedness
 - Healthcare System Recovery
 - Emergency Operations Coordination
 - Fatality Management
 - Information Sharing
 - Medical Surge
 - Responder Safety and Health
 - Volunteer Management
- Community Risk Assessment - A central component of implementing a capability-based approach to preparedness and response includes jurisdictional risk assessments that identify potential hazards, vulnerabilities, and risks within the community that relate to the public health, medical, and mental/behavioral systems inclusive of at-risk individuals.
 - Leveraging resources – Healthcare Coalition partners enhance a community's response capability through shared planning, organizing/equipping, training, exercise and evaluation activities related to disaster operations.
 - Staged approach – Healthcare Coalitions function at the community level based on existing partnerships in place and their relationship to their regional domestic security structure. In the end, Healthcare Coalitions should be able to effectively and efficiently demonstrate multiagency coordination during response through exercises and real-life incidents.

Healthcare Coalition Objectives

Healthcare Coalition objectives are aimed at:

- Building a better community-based, disaster healthcare system;
- Strengthening the local healthcare system by fully integrating disaster preparedness into the daily delivery of care;
- Capitalizing on the links between private healthcare providers and public agencies and groups; and,
- Using an evidence informed approach to improving health and medical preparedness and response.

These objectives can be achieved by planning and organizing local healthcare provider involvement in emergency preparedness activities.

This strategic plan is the vehicle through which the ECHCC establishes its priorities, goals, strategies and objectives. All objectives have specific, measurable, attainable, realistic and timely (SMART) objectives. A critical important purpose of the strategic plan is as a guide for making decisions and allocating resources to pursue identified priorities, goals, strategies and objectives.

The strategic plan is monitored through a performance management model that allows tracking of each SMART objective and provides the Board of Directors guidance to determine if modifications to strategies and objectives are necessary. Each SMART objective is assigned to a chair of a subcommittee. The subcommittee chairs will report quarterly at the Board of Directors meeting. Please reference the attached **ECHCC Strategic Performance Management** excel spreadsheet.



It is important to recognize that if SMART objectives are not being attained, the performance management system will reveal a need for quality improvement. This decision will be made in by the Board of Directors in concert with the subcommittee chairs. A full list of the Board of Directors and the subcommittee chairs are listed below. The quality improvement process will follow the Model for Health Improvement: Act, Plan, Do, Check.

Board of Directors

Name	Title Organization	Board Title	Initial Board Term	Essential Partnership Group Represented	County(ies) Represented
Tracey Vause	Chief Okaloosa EMS	Chair		EMS	Okaloosa
Aaron Brown	Air Methods			Specialty	Escambia
Doc Clinchy	Emergency Medical Resources	Co-Chair		Specialty	Santa Rosa
Katie McDeavitt	PHP Chief, DOH-Okaloosa	Secretary		Public Health	Okaloosa
Dr. John Lanza	Director DOH-Escambia			Public Health	Escambia
Randy McDaniel	Chief Okaloosa Emergency Management			Emergency Management	Okaloosa
Sharon Wilcoxsen	Emerald Coast Surgery Center			Urgent care centers	Okaloosa
Kevin Burton	Emergency Manager FWB Hospital			Hospital	
David Chimel	Planning Manager, DOH-Escambia			Public health	Escambia
Doug Kent	Administrator, DOH-Bay			Public Health	Bay
Brett Hanson					
*					

*** Suggestions for new board members:**
Don Rich, Bay County DOH
Barry Ratcliffe or Diana for Faith Based Organizations

ECHCC Subcommittees

Subcommittee	Chair Name	Co-chair	County(ies) Represented
Strategic Planning	Katie McDeavitt		Okaloosa
Training and Exercise	Doc Clinchy	Stephanie Hogberg	Okaloosa
Communications/ Public Affairs and Communication	Randy McDaniel		Okaloosa
Budgeting and Auditing	Doug Kent	Ann Hill	Bay County
Membership/Nominating	Katie McDeavitt		Okaloosa
Logistics Committee	Ann Hill	Shayne Stewart	Okaloosa
ECHCC Management	Ann Hill	Gary Kruschke	Okaloosa/Walton

**Pending approval

Local Strategic Planning Process

The ECHCC Strategic Vision Sub-committee was developed in August of 2015. Kevin Burton, the Fort Walton Beach Medical Center Emergency Manager offered to Chair the committee. Alongside the following members:

- Katie McDeavitt, DOH – Okaloosa Public Health Section Chief
- Ann Hill, ECHCC Office Manager
- Randy McDaniel, Okaloosa County Emergency Management
- Doug Kent, DOH – Bay Administrator
- David Chimel, DOH – Escambia Planning Manager
- Doc Clinchy, DMAT Public Information Officer

The following table outlines our strategy development and implementation process:

Strategic Plan Process (3 year cycles)	Timeframe
1. Set Direction based on local and state directives	Aug 2015
2. Refine, validate or develop local strategic objectives, indicators, goal targets	October 2015
3. Develop action plans for selected local strategic objectives	Sept 2015 – March 2016
4. Finalize and Execute	Aug 2016
Annual and Monitoring Process	Timeframe
1. Review SWOT/environmental scan	October 2016
2. Update local strategic objectives, indicators, goal targets	Quarterly
3. Implement	Aug 2016
4. Quarterly Board of Directors indicators review (monthly at subcommittee level)	Quarterly

The Strategic Planning Committee will meet annually based on the recommendations of the Board of Directors and update the strategic priorities for the year based on the grant cycles, as defined above.

Key Strategic Plan Priorities

In any given cycle of the strategic plan, there are key local strategic priorities that are highlighted and take the priority of the agency's resources. For this strategic plan cycle (2016-2019) ECHCC has TWO strategic priority areas:

1. Establish Strategic Program Management and Administration
2. Sustain a public health and healthcare planning system that includes an integrated network of operational, tactical and contingency plans, planning tools and resources.

Goals and Objectives

<u>STRATEGIC PRIORITY AREAS</u>	<u>GOALS</u>	<u>STRATEGIES</u>
1. Establish Strategic Program Management and Administration.	1.1 Implement and monitor a systematic framework to achieve fulfillment of public health and healthcare preparedness capabilities.	1.1.1 Meet state tasks/deliverables 1.1.2 Establish and maintain membership requirements 1.1.3 Chair sub-committees
	1.2 Implement a program to sustain ECHCC operations in to the future.	1.2.1 Identify financial sustainability 1.2.2 Build a strong leadership core for sustainability
2. Sustain a public health and healthcare planning system that includes an integrated network of operational, tactical and contingency plans, planning tools and resources. .	2.1 Implement public health and healthcare planning system is supported with standardized expectations, planning tools, guidance and technical assistance.	2.1.1 Provide training opportunities for the region 2.1.2 Provide exercise opportunities for the region 2.1.3 Increase ECHCC, Healthcare emergency management, and preparedness awareness in the region
	2.2 Operational, tactical and contingency plans are aligned with state and county comprehensive emergency management plans and integrated across the public health and healthcare system.	2.2.1 Identify regional gaps in contingency plans 2.2.2 Reduce resource gaps in the region 2.2.3 Increase regional mutual aid agreements

Objectives

Priority 1: Establish Strategic Program Management and Administration

Goal 1.1: Implement and monitor a systematic framework to achieve fulfillment of public health and healthcare preparedness capabilities.

Strategy	Objective
1.1.1 Meet state tasks/deliverables	<ul style="list-style-type: none"> • The ECHCC Management will maintain the state contract and all deliverables will be completed as directed and will report to the Strategic Planning Committee • The Strategic Planning Committee will track and report status indicators from committees quarterly.
1.1.2 Establish and maintain membership requirements	<ul style="list-style-type: none"> • The Membership Committee will identify and increase stakeholdership through surveys and recruitment of identified stakeholders by at least 5 organizations each quarter. • The Communication Committee will test emergency and blue sky communication semi-annually. • The Membership Committee will actively recruit to ensure all required essential partner memberships (as per Task Force Requirements) are represented and will be reported quarterly. • The Membership Committee shall maintain membership tiers and encourage participation in the tiers.
1.1.3 Chair sub-committees	<ul style="list-style-type: none"> • The Strategic Planning Committee will ensure that all sub-committees are assigned chairs and co-chairs. • The ECHCC Management will review deliverables and assign any applicable tasks to the subcommittees quarterly.

Priority 1: Establish Strategic Program Management and Administration

Goal 1.2.: Implement a program to sustain ECHCC operations in to the future

Strategy	Objective
1.2.1 Identify financial sustainability	<ul style="list-style-type: none">• The ECHCC Management will secure merger with FloridaOne and abide by any terms and conditions by July 1, 2017.• The Budget Audit Committee will create a draft action plan to identify additional sources of revenue to aid the coalition.
1.2.2 Build a strong leadership core for sustainability	<ul style="list-style-type: none">• The Training and Exercise Committee will host at least two leadership training for chairs and directors annually by July 1st.• The Membership Committee will develop and update succession planning through assigning co-chairs or alternates annually by July 1st and update quarterly.

Priority 2: Sustain a public health and healthcare planning system that includes an integrated network of operational, tactical and contingency plans, planning tools and resources.

Goal 2.1: The public health and healthcare planning system is supported with standardized expectations, planning tools, guidance and technical assistance.

Strategy	Objective
2.1.1 Provide training opportunities for the region	<ul style="list-style-type: none"> • The Training and Exercise Committee will survey the training needs of the coalition stakeholders annually by October 1st. • The Training and Exercise Committee will draft an annual training plan by October 1st. • The Training and Exercise Committee will offer at least one training for coalition stakeholders per quarter and reported annually.
2.1.2 Provide exercise opportunities for the region	<ul style="list-style-type: none"> • The Training and Exercise Committee will survey the exercise needs of the coalition stakeholders annually by October 1st. • The Training and Exercise Committee will draft an annual exercise plan annually by October 1st. • The Training and Exercise Committee will offer at least two exercises for coalition stakeholders per quarter and reported annually.
2.1.3 Increase ECHCC, Healthcare emergency management, and preparedness awareness in the region	<ul style="list-style-type: none"> • The Public Affairs and Communication Committee will develop a ECHCC coalition newsletter by October 1, 2016. • The Public Affairs and Communication Committee will distribute the newsletter quarterly to coalition stakeholders. • The Public Affairs and Communication Committee will attend at least one community event per quarter to promote the ECHCC. • The Public Affairs and Communication Committee will draft proposal to participate in regional conferences such as District I EMS Conference, EMR Symposium, and other events. • A representative from the Public Affairs and Communication Committee will attend the quarterly meetings of the EMS District I meetings. • A representative from ECHCC Management will attend the quarterly FDEM meetings.

	<ul style="list-style-type: none">• A representative from the Public Affairs and Communication Committee from each county will attend their respective county's EM meeting.
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Priority 2: Sustain a public health and healthcare planning system that includes an integrated network of operational, tactical and contingency plans, planning tolls and resources.

Goal 2.2: Operational, tactical and contingency plans are aligned with state and county comprehensive emergency management plans and integrated across the public health and healthcare system.

<u>Strategy</u>	<u>Objective</u>
2.2.1 Identify regional gaps in contingency plans	<ul style="list-style-type: none"> • The ECHCC Management will coordinate gap analysis for the coalition annually by July 1st. • The ECHCC Management will review gap analysis and survey stakeholders and prepare recommendations to each of the committees annually by July 1st. • The ECHCC Management will conduct a SWOT analysis will coalition stakeholders annually by July 1st.
2.2.2 Reduce resource gaps in the region	<ul style="list-style-type: none"> • The Logistics Committee will begin and update a resource allocation inventory for the coalition and any stakeholders and report status quarterly. • The Logistics Committee will provide the Budget and Auditing committee a recommendation on any resources gaps and make recommendations for spending/regional purchases and update quarterly. • The Budget and Auditing committee will take the Logistics Committee recommendations and research opportunities to fill gaps and report status quarterly.
2.2.3 Encourage champion mutual aid agreements among organizations	<ul style="list-style-type: none"> • The Logistics Committee will survey all coalition stakeholders on their existing MOAs by October 1st and track then annually by July 1st • The Logistics Committee will provide an overview of the mutual aid agreements and explain the benefit at least one General meeting annually by July 1st.

Plan review

The Strategic Planning Committee will meet annually based on the recommendations of the Board of Directors and update the Strategic Plan for the following grant year. Any out of rotation updates may be made by the Strategic Planning Committee and approved by the Board of Directors as necessary.

ECHCC Strategic Priorities Performance Management										
Objective	Indicator	Committee	Current Status	Target	Baseline	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter	Annual
Priority 1: Establish Strategic Program Management Administration										
Goal 1.1: Implement and monitor a systematic framework to achieve fulfillment of public health and healthcare preparedness capabilities.										
Strategy 1.1.1: Meet state tasks/deliverables										
The ECHCC Management will maintain the state contract and all deliverables will be completed by June 30, 2016.		Management		100.00%	100.00%					
The Strategic Planning Committee to track and report status indicators from committees quarterly.		Strategic Planning Committee								
1.1.2: Establish and maintain membership requirements										
The Membership Committee will identify and increase stakeholder through surveys and recruitment of identified stakeholders by at least 5 organizations each quarter.		Membership		20.00	0.00					

ECHCC Strategic Priorities Performance Management

Objective	Indicator	Committee	Current Status	Target	Baseline	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter	Annual
The Communication committee will test emergency and blue sky communication semi-annually		Public Affairs/Communications		2.00	0.00					
The membership committee will actively recruit to ensure all required essential partner membership as per Task Force Requirements are represented and will be reported quarterly.		Membership		4.00	0.00					
The Membership Committee shall maintain membership tiers and encourage participation in Membership Tiers.										
1.1.3 Chair sub-committees										
The membership committee will ensure that all		Membership		4.00	0.00					

ECHCC Strategic Priorities Performance Management

Objective	Indicator	Committee	Current Status	Target	Baseline	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter	Annual
sub-committees are assigned chairs and co-chairs and will be reported quarterly.										
The ECHCC Management will review quarterly the deliverables and assign any applicable tasks to the subcommittees quarterly.		ECHCC Management		4.00	0.00					
Goal 1.2: Implement a program to sustain ECHCC operations in to the future										
Strategy 1.2.1: Identify financial sustainability										
The ECHCC Management will secure merger with FloridaOne and abide by any terms and conditions by June 30, 2016.		Strategic Planning		1.00	0.00					
The Budget Audit Committee to create draft action plan to identify additional sources of revenue to aid the coalition.		Management		1.00	0.00					

ECHCC Strategic Priorities Performance Management

Objective	Indicator	Committee	Current Status	Target	Baseline	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter	Annual
1.2.2 Build a strong leadership core for sustainability										
The training and exercise committee will host at least two leadership training for chairs and directors annually by July 1.		Train/Ex		2.00	0.00					
The membership committee will develop and update succession planning through assigning co-chairs or alternates by July 1.		Membership/Nominating		4.00	0.00					
Priority 2: Sustain a public health and healthcare planning system that includes an integrated network of operation, tactical and contingency plans, planning tools and resources.										
Goal 2.1: Implement public health and healthcare planning system is supported with standardized expectations, planning tools, guidance and technical assistance.										
Strategy 2.1.1: Provide training opportunities for the region										
The training and exercise committee will survey the training needs of the coalition		Train/Ex		1.00	0.00					

ECHCC Strategic Priorities Performance Management

Objective	Indicator	Committee	Current Status	Target	Baseline	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter	Annual
stakeholders annually by July 1.										
The training and exercise committee will draft an annual training plan by July 1.		Train/Ex		1.00	0.00					
The training and exercise committee will offer at least one training for coalition stakeholders per quarter.		Train/Ex		4.00	0.00					
Strategy 2.1.2: Provide exercise opportunities for the region										
The training and exercise committee will survey the exercise needs of the coalition stakeholders annually by July 1.		Train/Ex		1.00	0.00					
The training and exercise committee will draft an annual exercise plan by July 1.		Train/Ex		1.00	0.00					

ECHCC Strategic Priorities Performance Management

Objective	Indicator	Committee	Current Status	Target	Baseline	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter	Annual
The training and exercise committee will offer at least two exercises for coalition stakeholders per quarter and reported annually.		Train/Ex		2.00	0.00					
Strategy 2.1.3: Increase ECHCC, healthcare emergency management, and preparedness awareness in the region										
The Public Affairs Committee will develop a ECHCC coalition newsletter by October 1.		Public Affairs/Communications		1.00	0.00					
The Public Affairs Committee will distribute the newsletter quarterly to coalition stakeholders by October 1.		Public Affairs/Communications		4.00	0.00					
The Public Affairs Committee will attend at least one community event per quarter to promote the ECHCC.		Public Affairs/Communications		4.00	0.00					

ECHCC Strategic Priorities Performance Management

Objective	Indicator	Committee	Current Status	Target	Baseline	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter	Annual
The Public Affairs and Communication Committee will draft proposal to participate in regional conferences such as District I EMS Conference, EMR Symposium, and other events.		Public Affairs/Communications		4.00	0.00					
A representative from the Public Affairs and Communication Committee will attend the quarterly meetings of the District I meetings.		Public Affairs/Communications		4.00	0.00					
A representative from ECHCC Management will attend the quarterly FDEM meetings.		ECHCC Management		4.00	0.00					
A representative from the Public Affairs and Communication Committee each		Public Affairs/Communications		4.00	0.00					

ECHCC Strategic Priorities Performance Management										
Objective	Indicator	Committee	Current Status	Target	Baseline	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter	Annual
county to attend their respective county's EM meeting.										
Goal 2.2: Operational, tactical and contingency plans are aligned with state and county comprehensive emergency management plans and integrated across the public health and healthcare system.										
Strategy 2.2.1: Identify regional gaps in contingency plans										
The ECHCC Management will coordinate gap analysis for the coalition annually by October 1.		ECHCC Management		1.00	0.00					
The ECHCC Management will review gap analysis and survey stakeholders and prepare recommendations to each of the committees annually.		ECHCC Management		1.00	0.00					
The ECHCC Management will conduct a SWOT analysis will coalition stakeholders		ECHCC Management		1.00	0.00					

ECHCC Strategic Priorities Performance Management

Objective	Indicator	Committee	Current Status	Target	Baseline	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter	Annual
annually by October 1.										
Strategy 2.2.2: Reduce resource gaps in the region										
The Logistics Committee will begin and update a resource allocation inventory for the coalition and any stakeholders and report status quarterly.		Logistics		4.00	0.00					
The Logistics Committee will provide the Budget and Auditing committee a recommendation on any resources gaps and make recommendations for spending/regional purchases and update quarterly.		Logistics		4.00	0.00					
The Budget and Auditing committee will take the Logistics Committee		Budget and Auditing		4.00	0.00					

ECHCC Strategic Priorities Performance Management

Objective	Indicator	Committee	Current Status	Target	Baseline	1st Quarter	2nd Quarter	3rd Quarter	4th Quarter	Annual
recommendations and research opportunities to fill gaps and report status quarterly.										
Strategy 2.2.3: Increase regional mutual aid agreements										
The Logistics Committee will survey all coalition stakeholders on their existing MOAs and track them annually by July 1.		Logistics		1.00	0.00					
The Logistics Committee will provide an overview of the mutual aid agreements and explain the benefit at least one General meeting annually.		Logistics		1.00	0.00					