



Tampa Bay Health & Medical Preparedness Coalition

Hereafter known as “Tampa Bay HMPC”

Charter, By-Laws, and Governance Structure

Effective Date: Oct 23, 2015

Article 1 – Background

- A. In the months following the terrorist attacks of Sep 11th, 2001, Florida formed seven Regional Domestic Security Task Forces (RDSTF) based around existing Florida Department of Law Enforcement (FDLE) regions. The West Central Florida or “Tampa Bay” region was designated the fourth of seven regions and was named the Tampa Bay Regional Domestic Security Task Force or RDSTF-4.
- B. Counties included in the RDSTF-4 Health & Medical include Citrus, Sumter, Hernando, Pasco, Pinellas, Hillsborough, Polk, and Hardee County. Manatee County is also included in the Coalition boundary at their request. Population rates for each county is determined by the most recent Census data.
- C. Chapter 943.0312 F.S. establishes the RDSTF within each FDLE region. The Co-Chairs of each RDSTF are the Special Agent in Charge of each FDLE regional office and a Sheriff or Police Chief from within the RDSTF territory. In RDSTF-4 the law enforcement Co-Chair is the Hillsborough County Sheriff. This statute also provides specific authority to the RDSTF Co-Chairs to appoint discipline specific leadership including the RDSTF-4 Health & Medical Chair and Co-Chair.
- D. Since 2002, Florida has provided over \$100,000,000 in preparedness funding to hospitals preparing them for medical surge events. Funding was used for disaster preparedness related training, exercises, supplies, and equipment. The Health Care Coalition approach works to include ALL health & medical system partners in the preparedness process while sustaining gains developed within hospitals. There’s also a connection in this new process to FEMA’s Whole Community Concept. The Whole Community Concept works to engage all parts of a community in disaster planning and preparation so the entire community becomes more resistant to the impacts of future disasters and can recover quicker after the disaster occurs. Health Care Coalitions are intended as a vehicle to maintain current hospital preparedness levels while enhancing disaster preparedness and resiliency in other portions of the entire health & medical system.
- E. The Tampa Bay HMPC is **NOT** designed nor intended to be a disaster response organization. Disaster response activities are presently managed through existing Emergency Support Function–8 (ESF-8) Health & Medical structures as defined in county-based Comprehensive Emergency Management Plans (CEMP). It’s also recognized that Tampa Bay HMPC activities will serve to enhance and expand regional and county-level ESF-8 Health & Medical response capacity and capability.

Article 2 – Vision & Mission

- A. Vision - To further develop and promote the health & medical system disaster preparedness and recovery capability of the area included in the Regional Domestic Security Task Force 4 (RDSTF-4), Florida. This vision includes (but is not limited to) **active involvement** from the following health & medical system partners based within the Tampa Bay HMPC boundaries:
 - Public Health agencies
 - Emergency Management / Public Safety agencies
 - Hospitals (acute and rehabilitation facilities)

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- Emergency Medical System (EMS) agencies (public and private including Fire Department based)
- Federally Qualified Health Centers (FQHCs) and Community Health Centers
- Nursing Homes, Assisted Living Facilities, and Group Homes
- Home healthcare industry (includes home healthcare agencies, nurse registries, hospice agencies, and durable medical equipment providers)
- Dialysis centers and ambulatory surgical agencies
- Blood banks, stand-alone medical laboratories, and poison control agencies
- Medical Examiners and funeral homes
- Mental health / behavioral health providers
- Healthcare associations and professional medical associations
- Pharmacies and pharmacy associations
- Primary care providers and walk-in clinics
- Higher education agencies directly involved in healthcare profession education
- Medical Reserve Corps (MRC) units
- Volunteer organizations with a health & medical mission (Red Cross or similar)
- Community organizations with a health & medical mission
- Faith-based or non-profit organizations
- Private organizations with a health & medical system role
- Community organizations serving health & medical needs of vulnerable populations

B. Mission - To coordinate and improve the delivery of healthcare services during and after large scale emergent events or disasters by:

- Engaging all sectors of the health & medical system,
- Promoting effective communication between local, regional, and state entities,
- Ensuring disaster readiness through the coordination of training and exercises, and
- Promoting disaster preparedness through standardized practices and integration with all partners.

Article 3 – Coalition Boundary

Tampa Bay HMPC includes all health & medical system partners (as described in Article 2, paragraph A) in the following counties:

- Citrus
- Sumter
- Hernando
- Hillsborough
- Manatee
- Pasco
- Polk
- Hardee
- Pinellas

Article 4 – Membership

A. Executive Board:

- 1) Includes appointed RDSTF-4 Health & Medical Chair and Co-Chair. These individuals will serve as the Executive Board Chair and Vice-Chair until;
 - Replaced by the RDSTF-4 Co-Chairs (See Article 1, paragraph C),
 - Their leadership is no longer needed

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- Membership on the Executive Board is no longer appropriate
- 2) The Executive Board will also include additional members appointed by the Tampa Bay HMPC Chair or Vice-Chair representing the disciplines listed in Article 4, paragraph A.7 (below). County-specific Standing Committee leaders will serve on the Executive Board for a period defined by their respective Standing Committee.
- 3) Regional Executive Board members will serve for a period of two years. Any Executive Board member can request removal at any time.
- 4) Executive Board members who miss two consecutive face-to-face meetings or conference calls without prior approval from the Tampa Bay HMPC Chair / Vice-Chair will be considered for replacement. See Article 4, paragraph F.
- 5) If a county-specific Standing Committee fails to elect or appoint an Executive Board representative by December 15th of every calendar year, the Tampa Bay HMPC Chair or Vice-Chair can appoint a representative.
- 6) Tampa Bay HMPC Chair / Vice-Chair will appoint representatives to fill the following roles for a period of two years. All Executive Board appointments are performed in consultation with other Executive Board members and the Planning Advisory Group.

- Regional EMS Representative for the Florida Fire Chief's Association.
- One District President from the Long Term Care community (includes nursing homes, assisted living facilities, and group homes).
- A person to represent the Veterinary community.
- A hospital representative.
- One representative from a local health department within the RDSTF-4 region, preferably from a senior leadership position.
- One person representing community-based out-patient care services (includes private practice physicians, dialysis, ambulatory surgical centers, and all other out-patient care agencies).
- One person representing the home healthcare industry.
- One person representing the Behavioral Health community.
- One person representing the Emergency Management community. Preferably, this person will be the RDSTF-4 Emergency Management Chair / Co-Chair or the Florida Emergency Preparedness Association (FEPA) Region 4 Governor.

B. Planning Advisory Group – Includes Public Health Preparedness planning staff from all Tampa Bay HMPC counties. This group is critical to provide the Executive Board with a global perspective on any number of health & medical planning issues. Planning Advisory Group is primarily responsible for developing a regional gap analysis of health & medical disaster preparedness, response, or recovery capabilities along with regional funding project prioritization recommendations. This gap analysis and prioritization will serve as a major component of any funding approval process.

C. Members will include representatives from all organizations as defined in Article 2, paragraph A. Conditions of membership include:

- Agree with the Vision & Missions

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- Demonstrate willingness to assist and support other Tampa Bay HMPC members during any response or recovery activity
 - Appoint a representative to attend meetings
 - Health & medical system sectors are encouraged to appoint one member to represent their interests
- D. Membership Application Procedure – Organizations meeting the criteria defined in Article 2, paragraph A may request membership by email, formal letter, or by attending meetings.
- E. Responsibilities of Membership:
- The leadership of each member organization must be committed to send knowledgeable and authoritative representatives to Tampa Bay HMPC meetings.
 - All Executive Board members, Planning Advisory Group, and members must have access to the resources of their organization to serve the needs of disaster victims.
 - Executive Board members that do not participate in two consecutive meetings will be replaced by the Tampa Bay HMPC Leadership.
 - Executive Board members can appoint a proxy to serve in their absence if needed. Sending a proxy representative to Coalition meetings will count as if the appointed member were present. Missing two consecutive meetings will result in the Tampa Bay HMPC Chair / Vice-Chair requesting a new Executive Board member from the appropriate Standing Committee or recruiting a new regional representative for the applicable discipline.
- F. Termination of Membership - An organization's membership may be terminated by:
- Voluntary – Submission of an email or letter of separation to Tampa Bay HMPC Chair / Vice-Chair.
 - Non-Voluntary – Consistent failure of the Coalition member (including Executive Board members) to meet the conditions and responsibilities of membership. Membership may be terminated at any time for any reason by a majority vote of the Tampa Bay HMPC Executive Board

Article 5 – Meetings

- A. Tampa Bay HMPC meetings shall be guided by Roberts Rules of Order except as otherwise provided for in these by-laws. All Tampa Bay HMPC meetings will operate in the sunshine according to Florida law. All meetings are open to the public.
- B. Meeting Frequency:
- i. Meetings of the membership as a whole will be held at least quarterly on a schedule set by Tampa Bay HMPC Chair / Vice-Chair
 - ii. Quarterly meetings can be accomplished via conference calls
 - iii. Face-to-Face meetings are held in conjunction with RDSTF-4 General Session meetings unless;
 - a. Tampa Bay HMPC Chair / Vice-Chair deems additional face-to-face meetings are needed
 - b. Planning Advisory Group recommends scheduling an Executive Board meeting

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- c. A majority of Executive Board members request a formal meeting
- iv. E-mail notice shall be sent to all members prior to any meeting

C. Voting:

- i. Each Executive Board member is entitled to one vote.
- ii. Tampa Bay HMPC Chair / Vice-Chair will abstain from all votes unless there is a tie and will have 1 vote to break the tie.
- iii. A quorum of Executive Board members must be present for a vote to be taken
- iv. All voting shall pass by simple majority vote.
- v. The Executive Board can ask for a visual or voice vote of the membership or audience on any issue. This option is intended to allow non-voting members to express their support or resistance to any initiative under consideration.
- vi. All votes (formal or consensus reached) will be recorded in the meeting minutes to include how the Executive Board voted.

Article 6 – Coalition Officers

A. Tampa Bay HMPC Chair / Vice-Chair – Responsible to execute initiatives approved by the Executive Board to include approving financial expenditures. Chair and Vice-Chair members include the appointed RDSTF-4 Health & Medical Chair and Co-Chair. See Article 1, paragraph C for details on how the Tampa Bay HMPC Chair and Vice-Chair are appointed.

B. Fiduciary Agent – Responsible for the following:

- Prepare and distribute meeting agendas as directed by Tampa Bay HMPC Chair / Vice-Chair
- Support or assist with meeting venue arrangements
- Record, prepare, and distribute meeting minutes to all members
- Monitor and track all expenditures and funding allocations
- Arrange for purchases or expenditures as directed by Tampa Bay HMPC Chair / Vice-Chair and approved by Tampa Bay HMPC Executive Board

Article 7 – Financial Management & Administrative Support

A. Tampa Bay HMPC Chair / Vice-Chair are responsible to select and negotiate financial terms for a non-FDOH agency to serve as the Fiduciary Agent and administrative support for the Tampa Bay HMPC. Formal arrangements made with the outside financial agent will follow FDOH contracting processes. A separate and formal contract will be negotiated with the financial agent and will include additional specifics and deliverables beyond the expectations included in these by-laws. Tampa Bay HMPC Chair / Vice-Chair will still provide input into the formal selection of a Fiduciary Agent but the formal contracting process will be performed by the FDOH Bureau of Preparedness & Response.

Article 8 – Amendments to Charter, By-Laws, and Governance Structure

A. Proposed amendment changes must be moved and seconded at a face-to-face business meeting.

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- B. Votes to approve amendments will be by Executive Board members at the following meeting at least 14 days after the original proposal. This ensures all members have an opportunity to read and comment on proposed changes.
- C. Amendments may be approved and implemented by a simple majority vote.
- D. These by-laws will be reviewed annually by the Tampa Bay HMPC Chair / Vice-Chair and the Planning Advisory Group to incorporate any changes in federal or state guidance covering Health Care Coalition activities.

END OF TEXT

Record of changes:

- Oct 31, 2013 - Chief Keith Chapman proposed changes to Article 2, Vision & Mission that would allow items purchased with these funds to be used on a daily basis. He's tasked with preparing draft language for consideration at the next Executive Board meeting. Entered changes into DRAFT text on 11/22/2013. See Red Text in Article 2 above.
- Nov 21, 2013 - Add details on funding project review process and timelines. May require a new Article, could also require re-numbering other Articles. Entered changes into DRAFT text on 11/25/2013. See Red Text in Articles 8, 9, and 10 above. Also renumbered Article 11.
- Nov 22, 2013 – Added to Article 9, para A details about a separate and formal contract that will have additional deliverables
- Nov 25, 2013 – added details as needed to support proper page breaks to keep each Article together in a more readable fashion
- Feb 17, 2014 – conference call with Kay Croy and Christie Luce produced requested changes to R4-HMC by-laws. Changes represent clarification of Standing Committee structure and membership, addition of Emergency Management & behavioral health to Executive Board, and change “coalition leadership” to “chair and co-chair” where ever these terms were used.
- April 22, 2014 – sent By-laws Version 3 to Executive Board for review and approval. Version 3 includes following:
 - Changes “Leadership” to “Chair / Vice-Chair”
 - Further defines role, structure, and membership of Standing Committees
 - Adds Emergency Management and Behavioral Health representatives to Executive Board
 - Further define funding project review and approval process
- April 24, 2014 – obtained 13 approval votes from Executive Board members. Only two Board members did not vote. Communication with one of them revealed she had not voted because she hasn't had time to read the By-law revisions yet.
- July 7, 2014 – Provided version 4 of By-laws to Executive Board for review and vote. This change represents the addition of Manatee County to our coalition boundary. Also changed the county population estimates from the 2010 Census data to the 2013 Census estimates.
- Oct 30, 2014 – Began version 5 revisions. Changed Pinellas & Manatee Standing Committee names to their current versions. Replaced “leadership” with “Chair / Vice-Chair” as appropriate. Deleted references to R4-HMC Chair being the contract manager over the fiduciary agent contract. Added provisions allowing Chair / Vice-Chair to use up to \$5000 annually to cover routine coalition operating costs. By-laws changes approved 12/22/2014.
- July 23, 2015 – Began version 6 revisions. Changes included:
 - Remove references to “R4-HMC” and replace with “Tampa Bay HMPC”
 - Remove unnecessary references to submitting our project funding lists to FDOH, this step is not needed.

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- Revise project submission process to include resubmitting projects each year and further clarifying the prioritization process used by the Planning Advisory Group.
 - Include further clarification of allowable and non-allowable projects.
- August 26, 2015 thru October 22, 2015 – Executive Board directed to remove procedural details from the By-Laws. An Ad-Hoc Committee was formed to help with this process. Efforts to remove those details revolve around a desire to have a more permanent set of By-Laws and policy & procedure documents that can be changed easily. Changes passed via a majority vote from Executive Board members.