November 15, 2017

AGENDA

I. Call to Order
   • Validation of voting members present [accept designees, if required]
   • Introductions
   • *Approval of minutes from 10/18/17 meeting

II. Financial
   • *Budget report
   • Expenditure Requests
     o Marketing Firm
   • Management and Administration

III. Business
   • *Approval of General Membership Requests – via forms
   • *At-Large Member of the Region 3 HCC Alliance
   • *Expansion of Coalition Board
   • *Stop the Bleed Program
   • Training and Exercise Planning (TEP) Recommendations

V. Other Topics
   • Board Members Reports
   • State Task Force Update
   • Upcoming Events
     o CMS Tabletop Exercise – 11/14 (Duval) & 12/5 (Clay)

Next Meeting Date: December 20, 2017 (reschedule?)
A quorum is fifty percent (50%) of the total voting membership (Executive Board).

October 20, 2017
The Executive Board of the Northeast Florida Healthcare Coalition met on Wednesday, October 18, 2017, following a general membership meeting of the NEFLHCC and First Coast Disaster Council in which an After Action of Hurricane Irma was held. The meeting started late and was called to order at 1:45 p.m. The meeting was held in the Bryan Auditorium, St. Vincent’s Southside location, 4201 Belfort Road, Jacksonville, Florida.

CALL TO ORDER
The meeting was called to order by Chair Rich Ward with a validation of a quorum, with the following Board members present:

Clay County – Leigh Wilsey
Duval County – Richard Ward
Nassau County— Michael Godwin
St. Johns County – Tim Connor
Hospitals – Rich Ward, Chair
Baker County – Joshua Allen (alternate)
Public Health – Robert Snyder (alternate)
EMS – Tim Devin (alternate)

Absent:
Flagler County - Mary Lachendro
Emergency Management – Jeff Alexander, Vice Chair

For others in attendance, please see attached sign in sheet.

Introductions
The Chair called for introductions.

Approval of Minutes
The minutes from the August 16, 2017 meeting were made available online and provided at the start of the meeting.

The Chair called for a motion for approval of the August 16, 2017 meeting minutes. Mike Godwin moved approval; Tim Connor seconded. Motion carried.

FINANCIAL
Budget Report
Treasurer Mike Godwin presented the finance report through the month of September 2017, which marks the end of the quarter under the renewal contract with FDOH. This quarter’s funding ($59,484) was not split into the program categories (Admin, Operations, Deliverables,
Projects). Very little was spent, as most of staff time spent on the creation of the Region 3 HCC Alliance and associated work. The Council signed the 5 year contract for the Alliance funding (which is for North Central, Northeast and the CHAMP Coalitions) in early October. Negotiations on subcontracting are ongoing.

There was discussion on what to do with the remaining funds, estimated to be $50,940.02. The Treasurer indicated that in previous years, this money was rolled into the Projects funding. The Board asked a few questions regarding upcoming projects and if money should be allocated to any Coalition funded items, as was done as a result from Hurricane Matthew. One of those projects was the Annual Training Summit that was held in August. All Board Members expressed an interested in bolstering the Summit, possibly making it 2 days. Ms. Payne indicated that there is money in the 2017-18 budget for the Summit (est. $8,000), it is not as much as was spent on the August event. There was brief discussion as to whether money is needed to additional coordination on the Alliance and administrative work throughout the year. Ms. Payne explained that the 15% Fiduciary fee (est. $85,000) should be adequate for the year.

The Board decided to allocate $10,000 of funding towards the Training Summit and roll the remaining $40,000 into the project category.

Leigh Wilsey presented a motion to allocate $10,000 of the first quarter’s funding for the Healthcare Partners Training Summit and $40,000 to be allocated for the Project fund. Tim Connor seconded. Motion carried.

The second line item details the Project funding. This funding is broken down on the second attachment. It includes the 6 Coalition funded projects from the 2016-17 Fiscal Year (nearly all closed out except for UF Health), as well as the Hurricane Matthew Projects (Marketing Firm and UNF Training Summit on 8/23) and the roll over money from the 2016-17 Fiscal Year. With the additional $40,000 from the first quarter, there is nearly $100,000 in funding for projects this fiscal year.

Leigh Wilsey moved for acceptance of the September 2017 budget report, Mike Godwin seconded. Motion carried.

Expenditure Requests
Ms. Payne provided information on the marketing firm, Bayshore Marketing Group, is under contract through October 2017 and their contract will be ending at the end of the month. They have been very successful in their outreach for the Coalition. Ms. Payne asked the Board for their thoughts on retaining the marketing firm for additional work. There is money allocated and a contract deliverable for outreach activities. This would be a way to meet that deliverable. The Board gave Ms. Payne approval to move forward in working with Bayshore Marketing Group on future work. Ms. Payne will bring an update to the Board at the November meeting.

Ms. Payne referenced a summary in the agenda packet regarding the upcoming National Healthcare Coalition Conference to be held in San Diego, California from November 28 through November 30. Ms. Payne will be sitting on a panel presentation during the conference representing the NEFLHCC.
Ms. Payne asked the Board if they wanted to pay for other NEFLHCC members to attend. It would be an estimated $2,000 per person to attend. If interested, please let Ms. Payne know by Friday, October 27. A priority would be given to sending Board Members, followed by general members.

After discussion, **Mike Godwin moved for approval to send up to three members of NEFLHCC to the National Conference. Leigh Wilsey seconded. Motion carried.**

**Management and Administration Update**

Ms. Payne provided an update on the formation of the Region 3 Healthcare Coalition Alliance (the Alliance) and the recent change in the way the Coalitions will manage the funding for each of the three Coalitions. The Council will maintain the funding and will work with each Coalition on spending at the discretion of the Coalition Boards. A Memorandum of Agreement was provided the officers of the NEFLHCC Board which defines the relationship and roles and responsibilities for the Coalition and the Council. The Board gave Ms. Payne approval to move forward with the officers of the Board for signature.

Ms. Payne also let the Board know that the Directors and Officers Insurance was recently renewed.

Ms. Payne encouraged all the submit projects, as the application period is open. As it stands, there have been no projects received. The NEFLHCC will have almost $100,000 to fund projects with this fiscal year.

**BUSINESS**

**Approval of General Membership Requests**

As required by the bylaws, the Board must approve all membership requests. Since the last meeting, 29 facilities/organizations have requested membership. The list of facilities is provided in the meeting packet. A report from Bayshore Marketing Group is provided.

*A motion was made by Tim Connor and seconded by Leigh Wilsey to approve the membership list as presented. Motion carried.*

**At Large Member of the Region 3 HCC Alliance**

There was discussion on who on the NEFLHCC Board would be interested in serving as the At Large Member of the HCC Alliance. The Chair and Vice Chair are also members. There was no current interest. This item will be tabled until the November meeting.

**Review of 2017-18 Project Application**

Ms. Payne provided an overview of the updated project application. It has been streamlined from last year. The project period will be left open; in order to be able to solicit projects year round and establish a list of projects that can be funded as money is available. It was suggested to create a PDF Form, to allow users to easily complete. This will be posted to the Coalition website on September 1. The Board would have to further discuss when to review project applications. This will be placed on future meeting agenda.
2017-18 Contract Deliverables
Ms. Payne provided a handout that summarizes the deliverables found in the state contract for 2017-18. They are broken into two distinct sections – Administrative and Substantial. Administrative tasks are very similar to previous years and including budgeting, report requirements, communications checks, etc. Substantial projects include a Risk Assessment, Hazard Vulnerability Analysis, Strategic Plan, Preparedness Plan, Annual Exercise and Active Shooter Initiative.

Eric Anderson, of NEFRC, will be coordinating the training and exercise tasks for the Coalition. He provided a brief overview of the Med Surge Tool exercise, which is tentatively planned for March 2018. He passed around a sign-up sheet for those interested in being on the Planning Team. This exercise will be coordinated for the entire 18 counties of HCC Region 3. Additionally, Mr. Anderson addressed the Active Shooter Initiatives planned, which include a needs assessment and training for Year 1. It is a three year initiative. Another sign-up sheet was passed around for those interesting in sitting on that working group. More details to come as we hope to hold a meeting of the working group before the end of December.

Summary of 8/23 Training Summit
A brief summary of the evaluations and feedback forms from the 8/23 Training Summit was included in the agenda packet. Ms. Payne provided a brief overview of the positive comments she has received since the Summit. Board members agreed that it was a valuable event and look forward to the next Summit.

OTHER TOPICS

Board Member Reports
EMS Board Member Tim Devin brought up the possibility of expanding the Board to include a seat for additional non-hospital healthcare facilities. It has been the intent of the NEFLHCC and is indicated in the bylaws for the provision to expand. It seems that healthcare facilities are increasingly engaged in the Coalition and would provide valuable input. The Board and members discussed the idea favorably. Jeff Markulik, a local facility administrator and Region IV Vice President of FHCA indicated that there was a FHCA District meeting to be held on 10/19 and he would bring up the issue. Ms. Payne would follow up with Mr. Markulik after the 10/19 meeting. Further discussion on this issue will take place at the November Board meeting.

A motion was made by Tim Devin and seconded by Leigh Wilsey to explore the option of expanding the Board and determine what steps are needed to proceed. Motion carried.

State Task Force Update
There is no Task Force face to face meeting scheduled at this time. The monthly conference call will be held on Thursday, October 26 at 2pm.

With no additional business, the meeting adjourned at 2:50.
# Meeting Sign-In Sheet – Northeast Florida Healthcare Coalition

**NEFLHCC Board Meeting**  
Meeting Date: October 18, 2017  
St. Vincent's Southside, 4201 Belfort Road, Jacksonville  
1:30 PM

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<thead>
<tr>
<th>Name</th>
<th>Agency</th>
<th>E-Mail</th>
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</thead>
<tbody>
<tr>
<td>Rich Ward</td>
<td>FDOH</td>
<td>On file</td>
</tr>
<tr>
<td>Debbie Young RN</td>
<td>A Care Connection HME Health</td>
<td><a href="mailto:dyoung@acareconnection.com">dyoung@acareconnection.com</a></td>
</tr>
<tr>
<td>Judy MacDonald RN</td>
<td>Allegiant Home Care</td>
<td><a href="mailto:jmacdonald@allegiant-homecare.org">jmacdonald@allegiant-homecare.org</a></td>
</tr>
<tr>
<td>Caitlin Choate</td>
<td>FDOTT - Clay</td>
<td><a href="mailto:caitlin.choate@flhealth.gov">caitlin.choate@flhealth.gov</a></td>
</tr>
<tr>
<td>Leigh Wilsey</td>
<td>DOT - Clay</td>
<td><a href="mailto:leighwilsey@flhealth.gov">leighwilsey@flhealth.gov</a></td>
</tr>
<tr>
<td>Sandi Conner</td>
<td>FDOTT</td>
<td><a href="mailto:sandi.conner@flhealth.gov">sandi.conner@flhealth.gov</a></td>
</tr>
<tr>
<td>Josh Allen</td>
<td>FDOTT</td>
<td><a href="mailto:Joshua.Allen@flhealth.gov">Joshua.Allen@flhealth.gov</a></td>
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<tr>
<td>Miller, Jason S.</td>
<td>FDOH - Nassau</td>
<td><a href="mailto:Jason.Miller@flhealth.gov">Jason.Miller@flhealth.gov</a></td>
</tr>
<tr>
<td>Gordon, Mark</td>
<td>FDOH - Nassau</td>
<td><a href="mailto:M.Gordon@flhealth.gov">M.Gordon@flhealth.gov</a></td>
</tr>
<tr>
<td>Tim Connor</td>
<td>SJF EM</td>
<td><a href="mailto:tconnore@sjcfi.us">tconnore@sjcfi.us</a></td>
</tr>
<tr>
<td>Eric Anderson</td>
<td>NEFRC</td>
<td><a href="mailto:eanderson@nefrc.org">eanderson@nefrc.org</a></td>
</tr>
<tr>
<td>Tyler Nolan</td>
<td>NEFRC</td>
<td><a href="mailto:twnc@nefrc.org">twnc@nefrc.org</a></td>
</tr>
<tr>
<td>Dave Chapman</td>
<td>St. Vincent's</td>
<td>On file</td>
</tr>
<tr>
<td>John Coffey</td>
<td>St. Vincent's Riverside</td>
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</tr>
<tr>
<td>Richard Ward</td>
<td>FDOTT - Duval</td>
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</tr>
<tr>
<td>Rachel Auguste</td>
<td>FDOTT - Duval</td>
<td><a href="mailto:rachel.auguste@flhealth.gov">rachel.auguste@flhealth.gov</a></td>
</tr>
<tr>
<td>Halte Mitchell</td>
<td>FDOTT - Duval</td>
<td><a href="mailto:halte.mitchell@flhealth.gov">halte.mitchell@flhealth.gov</a></td>
</tr>
<tr>
<td>E. Ngo-Seidel</td>
<td>FDOTT - Nassau</td>
<td><a href="mailto:Eugena.ngo-seidel@flhealth.gov">Eugena.ngo-seidel@flhealth.gov</a></td>
</tr>
<tr>
<td>Ken Bowersock</td>
<td>Governors Creek - Clay</td>
<td><a href="mailto:kenneth.e.bowersock@consolathc.com">kenneth.e.bowersock@consolathc.com</a></td>
</tr>
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<td>-------------------</td>
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</tr>
<tr>
<td>Tim Moore</td>
<td>Taylor Residences</td>
<td><a href="mailto:jmoore@taylor-residences.org">jmoore@taylor-residences.org</a></td>
</tr>
<tr>
<td>Duane Green</td>
<td>Kindred Hospital</td>
<td><a href="mailto:Duane.Green@kindred.com">Duane.Green@kindred.com</a></td>
</tr>
<tr>
<td>Jeff Markovic</td>
<td>Edgewood Nursing Ctr</td>
<td><a href="mailto:jmarkovic@stluth-health.com">jmarkovic@stluth-health.com</a></td>
</tr>
<tr>
<td>Carlos &amp; Ana Morales</td>
<td>Plymouth Home for Adults</td>
<td><a href="mailto:pha3225@bellsouth.net">pha3225@bellsouth.net</a>.</td>
</tr>
<tr>
<td>Kevin Kotsis</td>
<td>St. Vincents</td>
<td><a href="mailto:kevin.kotsis@ascension.org">kevin.kotsis@ascension.org</a></td>
</tr>
<tr>
<td>Tim Devin</td>
<td>OPMC</td>
<td><a href="mailto:timothy.devinc@ncarehealthcare.com">timothy.devinc@ncarehealthcare.com</a></td>
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Northeast Florida Health Care Coalition
Financial Report
As of October 2017

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<th>NEFHCC 17/18</th>
<th>Budget 2017</th>
<th>October 2017</th>
<th>Project To Date</th>
<th>% of Budget Spent</th>
<th>Funds Available</th>
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<td><strong>Revenues</strong></td>
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<td>$5,557.13</td>
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<td>2%</td>
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<td>State Contract</td>
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<td>$5,557.13</td>
<td>$5,557.13</td>
<td>2%</td>
<td>$263,270.87</td>
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<tr>
<td><strong>Expenses</strong></td>
<td>$268,828.00</td>
<td>$5,557.13</td>
<td>$5,557.13</td>
<td>2%</td>
<td>$263,270.87</td>
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<td>Meeting Expenses</td>
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<td>Stop the Bleed</td>
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<th>PROJECTS</th>
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<th>% of Budget Spent</th>
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<td><strong>Revenues</strong></td>
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<td><strong>Expenses</strong></td>
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<tr>
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<td>$97,179.69</td>
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*Includes $10,000 for Annual Training Summit
Marketing Firm Proposal for Region 3 HCCs
Marketing Strategy by Bayshore Marketing Group
Bayshore Marketing Group will represent the three Coalitions in Region 3 as the Agency of Record and as main contact for all marketing initiatives. It is our goal to use available resources in the most conservative way to reach the most targeted individuals and organizations for Coalition Membership and advocacy.

**Goals:**
- Identify potential members and contact information of key persons
- Increase the visibility of the coalition and its mission
- Educate members of services provided by the coalition and benefits to membership

**How we will Achieve Your Goals:**

1. Planning & Branding
2. Research
3. Contact
4. Completion
Planning & Branding: Brand awareness will create a long-term position in the marketplace. Brand awareness is a measure of how well your brand is known within its target markets. You can increase brand awareness by being in front of your target market. We recommend the following:

- Design an informative tri-fold brochure that will explain: Who, what, where, and why to join
- We would design your tri-fold marketing piece for print, Press Releases, Social Media, and website use (as an additional contract item)
- We will have your tri-fold professionally printed (printing costs additional depending on quantity of tri-folds needed)
- Monthly E-Newsletters
- Monthly printable Newsletters
Research (max of 10 hours weekly):

Acquire and/or develop a list of all organizations affected by new ruling

- Name of organization
- Address
- Phone
- E-mail and Website (for links)

We would assign a team Research Team to complete this task in order to obtain current key contact information via phone and survey information. Key contacts could consist of:

- Administration and Decision Makers
- Board Members
- Emergency Management Teams
- Risk Management Teams
- Compliance Managers
- Safety Managers
Contact:

Bayshore Marketing Group will contact as many potential coalition members as contracted hours allow during contract duration. Bayshore Marketing Group will deliver the member database with current and updated information collected during that time. Our staff will also make initial contact calls and acquire information necessary for further follow up and membership promotion.

We would assign a Sales Team/Appointment Setting Team to:

- Training
- Make initial introduction calls
- E-Mail or mail our marketing materials (direct mail costs will be additional and billed monthly upon individual jobs quoted)
- Follow up to make sure information has been received
$1,000/one-time fee- Create and design marketing tri-fold

$5,000/month (3 month contract)

Contract commencing December 1, 2017 and concluding February 28, 2017

- Set up CMS system
- Research organizations
- Create database
- Research decision makers*
- Calls and/or E-Mails to decision makers*
- Manage and maintain member database and notes in database*
- Follow up with decision makers
- Monthly E-Newsletter to collaborate with Coalition Members
- Monthly progress reports & Board of Directors report
- Year end case study (like NEFLHCC’s) showing what was accomplished

*Combined maximum of 10 hours weekly
Additional and Ongoing Options

The following services can be provided for additional pre-negotiated fees:

- Graphic design work
  - Graphic design work for print
  - Graphic design work for the website
  - Graphic design work for social media
- Printing of marketing materials
- Membership Awareness
  - Billboards
  - Radio PSA’s
- Event Marketing: Bayshore Marketing Group has extensive history in selling out events both big and small. For marketing an event such as the upcoming workshop we suggest:
  - Creating a Facebook event
  - Running a Facebook Ad Campaign targeted towards those whom the workshop would be beneficial for
  - Listing the event on multiple event websites as well as news channel event calendars
  - Retargeting Campaigns
  - Google AdWords campaign
  - Billboards
Qualifications

Bayshore Marketing Group currently works with Tampa Bay HMPC and Northeast Florida Healthcare Coalition. Since working with them as their agency of record we have:

- Developed strategies to increase membership
- Developed their brand with marketing collateral and direct mail pieces
- Provided ongoing consultation and advice as it relates to the ever changing healthcare preparedness rules
- Presented multiple options to increase membership and brand awareness
- Designed a monthly newsletter shell and scheduled monthly newsletter distributions
- Provide ongoing creative and innovative ideas to reach potential members

Bayshore Marketing Group has over 25 years of experience representing top tier businesses/medical and dental practices throughout the State of Florida and the Nation. We have managed everything from branding, website development and optimization, PPC (pay per click) advertising, social media management, print advertising, TV, cable and billboard placement for our clients. Our specialty is putting systems in place to ensure your message is delivered to your targeted audience. We’re highly experienced with social media too! Currently, our team manages over 30 social media profiles and post over 500 updates each month combined for our clients.
New Members for Approval
<table>
<thead>
<tr>
<th>First Name</th>
<th>Last Name</th>
<th>Title</th>
<th>Facility Name</th>
<th>Facility Type</th>
<th>County</th>
<th>Number of beds</th>
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</thead>
<tbody>
<tr>
<td>Michele</td>
<td>Knox</td>
<td>Director of Quality &amp; Risk Management</td>
<td>HCA/ Ambulatory Surgery Division; N. Fl/ S. Atlantic Div</td>
<td>AmSurg Facility</td>
<td>Clay</td>
<td>N/A</td>
</tr>
<tr>
<td>Debbie</td>
<td>Young, BSN, RN</td>
<td>CEO, Administrator</td>
<td>A Care Connection Home Health</td>
<td>Home Healthcare</td>
<td>Duval</td>
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<tr>
<td>Shanon</td>
<td>Cross</td>
<td>Maintenance, Safety, Security Director</td>
<td>Jacksonville Nursing and Rehabilitation Center</td>
<td>Long Term Care/Skilled Nursing</td>
<td>Duval</td>
<td>163</td>
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<tr>
<td>Joel</td>
<td>Underwood</td>
<td>Maintenance Dir.</td>
<td>Life Care Center at Wells Crossing</td>
<td>Long Term Care/Skilled Nursing</td>
<td>Clay</td>
<td>120</td>
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<tr>
<td>Jason</td>
<td>Davis</td>
<td>Administrator</td>
<td>Moultrie Creek</td>
<td>Long Term Care/Skilled Nursing</td>
<td>Saint Johns</td>
<td>120</td>
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<tr>
<td>Beverly</td>
<td>Ohara</td>
<td>Clinical Manager</td>
<td>Fresenius Kidney Care Jacksonville</td>
<td>Dialysis Center</td>
<td>Duval</td>
<td>23</td>
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</tbody>
</table>
The 'Stop the Bleed' campaign was initiated by a federal interagency workgroup convened by the National Security Council, the White House. The purpose of the campaign is to build national resilience by better preparing the public to save lives by taking simple steps to stop life-threatening bleeding following everyday emergencies and man-made and natural disasters. Advances made by military medicine and research in hemorrhage control during the wars have been adapted to benefit the homeland to the benefit of the general public. ‘Stop the Bleed’ is a registered service mark of the Department of Defense. Use of the equipment and the training does not guarantee that all bleeding will be stopped or that all lives will be saved.

1. APPLY PRESSURE WITH HANDS

2. APPLY DRESSING AND PRESS

3. APPLY TOURNIQUET

CALL 911
### Kit for Public Use

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<th>Description</th>
<th>Qty per Bag</th>
<th>Sold As:</th>
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<td>Tourniquet SOF-T</td>
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### Kit for Use by Medical Professional

<table>
<thead>
<tr>
<th>Description</th>
<th>U.O.M</th>
<th>Price</th>
</tr>
</thead>
<tbody>
<tr>
<td>Gloves, Nitrile</td>
<td>?</td>
<td>100/BX</td>
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<tr>
<td>Tourniquet SOF-T</td>
<td>1</td>
<td>EA</td>
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<tr>
<td>Sponge, Cotton, 4”x4”, 12 Ply, 5/PK</td>
<td>5 Packs</td>
<td>10/BX</td>
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<tr>
<td>QuikClot Combat Gauze LE, (3 IN x 4 yards)</td>
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<td>EA</td>
</tr>
<tr>
<td>QuikClot EMS 4X4 Dressing</td>
<td>1</td>
<td>3/PK</td>
</tr>
<tr>
<td>HyFin Chest Seal 2/PK</td>
<td>1</td>
<td>EA</td>
</tr>
<tr>
<td>ARS Chest Decompression Needle</td>
<td>1</td>
<td>EA</td>
</tr>
<tr>
<td>Shears, EMS style <em>(Please Specify Color)</em></td>
<td>1</td>
<td>EA</td>
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</tbody>
</table>
Overview

**Mass Casualty Incidents (MCIs):**
3-fold increase in number of active shooting events since 2008
50% occur at businesses and 33% in schools
50+ domestic terrorist attacks since the Oklahoma City Bombing in 1995
294 mass shootings in 2015 alone, more than one per day, is unfathomable.
45 shootings at schools and over 142 such incidents during which a firearm is discharged in a school building or on a school campus since the Sandy Hook Massacre.

**Hemorrhage Control Saves Lives:**
35% of pre-hospital deaths due to hemorrhaging
40% of deaths in the first 24 hours after a traumatic event is due to hemorrhaging
20 minutes to hours for medical professionals to arrive on scene or for patients to be delivered to medical facilities
Using these concepts, the military has substantially decreased battlefield deaths.
• The focus of this program is on:
  - The immediate response to bleeding
  - Recognize life-threatening bleeding
  - Appropriate ways to stop the bleeding

• The help given by an immediate responder can often make the difference between life and death, even before professional rescuers arrive.

With the right training, YOU can help save lives!
Personal bleeding control kits
Wall-mounted bleeding control kits

BLEEDINGCONTROL.ORG