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| **Progress Quarter (Check One)** | | **Contact Information** |
| Quarter 1 covers July 1, 2020 – September 30, 2020 due October 15, 2020  Work plan for designated Medium Counties | | County: |
| Quarter 2 covers October 1, 2020 – December 31, 2020 due January 15, 2021 | | Contact Person: |
| Quarter 3 covers January 1, 2021 – March 31, 2021 due April 15, 2021 | | Contact Email: |
| Quarter 4 covers April 1, 2021 – June 30, 2021 due July 15, 2021 | | Contact Phone:  Date Sent: |
| **Description of Tasks** | | **Deliverables** |
| **1** | A local health department (LHD) representative will attend, in person, via conference call or webinar, Healthcare Coalition (HCC) meetings. Designees are permitted, provided they are a staff member or contractor of an LHD. In the event a designee is assigned, the designee is required to attend the HCC meeting in person or virtually.  Attendee for this quarter report:  HCC Region attended for this quarter report: | 1 date:  2 date:  3 date:  4 date:  5 date:  6 date: |
| **2** | LHD representative will participate in a local ESF 8 or LEPC planning meetings at leastonce per year to work with health and medical partners in order to strengthen community preparedness and response activities. The local ESF or LEPC acts as an advisory committee of governmental and nongovernmental partners to the LHD to integrate preparedness efforts across jurisdictions and to leverage funding streams.  Due by **June 30, 2021** | ESF-8  / LEPC  Date attended:  Attendee names and meeting notes attached |
| **3** | The LHD may send staff to regional PHEP meetings, preparedness-related conferences, trainings or exercises to increase knowledge, skills and abilities to develop and maintain plans, conduct training and exercises and respond to public health threats and emergencies using a whole-community approach to preparedness management. (Examples include but are not limited to: 2021 Preparedness Summit, Four Corners Emergency Management, Kansas Public Health Association.)  Conferences and out of state training events need to be pre-approved by KDHE. See guidance documents for instructions on pre-approval. Summary will include course name and date.  Due by **June 30, 2021** | For in-state events:  Date:  Name:  Number of staff attended:  Name of attendees:      For out-of-state events: Each person must submit a 1-page summary no later than 15 days after the conference |
| **4** | LHD administrators will ensure designated staff complete the following training:   * FEMA IS-100: An Introduction to the Incident Command System (ICS) * FEMA IS-200: Basic ICS * FEMA IS-700: An Introduction to the National Incident Management System (NIMS) * TEEX Medical Countermeasures Awareness for Public Health Emergencies course, AWR314 * FEMA IS-29: Public Information Officer Awareness (Optional)   Due by **September 30, 2020** | As administrator of the LHD, all employees in ICS positions have completed the outlined training.    Signature and date. |
| **5** | LHD will maintain health department personnel contact information in the Kansas Health Alert Network (KS-HAN) to ensure the ability of the LHD in receiving situational awareness information.   * LHD staff registered on KS-HAN will update their contact information annually, or sooner if need arises. Users are expected to update their own user profiles. * LHD will review registrant lists to add and remove appropriate members from their organization to ensure they have access. LHD will email [KDHE.KSHANAdmin@ks.gov](mailto:KDHE.KSHANAdmin@ks.gov) to request changes to KS-HAN.   Due by **September 30, 2020** | Date of KS-HAN update: |
| **6** | LHD staff registered on KS-HAN will respond to KS-HAN drills to ensure and demonstrate the ability to receive and respond to situational awareness updates and common operating picture information, and to ensure that communications equipment is appropriately receiving health alerts and situational information.  Note any issues this quarter: **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** | Quarter 1 date:  Quarter 2 date:  Quarter 3 date:  Quarter 4 date: |
| **7** | LHD will ensure that a minimum of two health department surge staff or volunteers are registered users of the Inventory Management Tracking System (IMATS) by working with the KDHE Preparedness MCM/SNS Coordinator to receive access. These users must attend the training hosted on KS-TRAIN.   * LHD staff registered on IMATS will update their contact information annually, or when contact information changes. * LHDs will review registrant lists regularly and send an email to [KDHE.Preparedness@ks.gov](mailto:KDHE.Preparedness@ks.gov) to request addition or removal of members from their organization. * New IMATS users will complete the KS-TRAIN training (Module 6 under New LHD Administrator Training).   Due by **September 30, 2020** | Date of IMATS update:  Training class attended:  Attendee names: |
| **8** | LHD can purchase equipment and supplies to maintain PHEP readiness in their counties based on their county plans, risk assessment, and AAR/IPs.  Due by **June 30, 2021** | Date items purchased and entered CRMCS and screenshot sent to KDHE:  No purchase |
| **9** | LHD will use community preparedness to build partnerships and address risks within their community. LHDs will aim to engage community partners who might otherwise not be involved with preparedness efforts.  To accomplish this, Medium counties will complete the following:   * Participation in National Preparedness Month online social media campaign during **September 2020**, posting at least two different posts per week for the entire month on at least one social media platform on a variety of preparedness-related topics. Each post must be tagged with #KSPrepared   Due by **June 30, 2021** | KDHE will track social media participation using #KSPrepared. If this hashtag is used, no documentation is needed.  1. Social media platform used for posts during September 2020? \_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| **10** | LHD will ensure 24/7 epidemiological contact information is kept current and sent to KDHE Bureau of Epidemiology & Public Health Informatics at [KDHE.EpiHotline@ks.gov](mailto:KDHE.EpiHotline@ks.gov). This supports the public health system by having access to personnel trained to manage and monitor routine jurisdictional surveillance and epidemiological investigation systems and support surge requirements in response to threats.  Due by **September 30, 2020** | Date the contact information was reviewed/updated:    Signature |
| **11** | AAR/IP   1. The AAR/IP from COVID-19 BP1 response is required for acquisition of items identified in the county IP, to update the county plans for the next surge, and for TEPW and planning purposes for BP3. The interim AAR/IP for the COVID-19 response in BP1 must include a minimum of 4 PHEP capabilities.     Due by **September 30, 2020**   1. Participate in an annual exercise or real event at the local-level as defined below: Budget Period:BP2 (2020 - 2021):   Exercise #1 Tabletop Exercise or Real Event  Capabilities required for BP2:  4 - Public Information & Warning  8 - Medical Countermeasures Dispensing and Administration  13 - Public Health Surveillance  15 - Volunteer Management Due by **April 30, 2021**  Other Requirements:   * Plans/procedures for assisting at-risk populations specific to the jurisdiction must be documented or evidenced in all exercises. Exercises must also include at-risk and vulnerable populations. * Exercise activity will be aligned with the HSEEP principles and test/validate current plans and procedures. * Exercise AAR/IPs must be written using the KDHE approved AAR/IP Templateand only reflect PHEP capabilities, not the capabilities or requirements outlined by other agencies (i.e. CMS, Emergency Management, etc.).   Ensure that specific exercise role/responsibilities and improvement plan tasks are outlined for your individual health department. Each capability tested must outline at least one strength and one area for improvement.  Serving in an observer role does not meet the participation requirement.  AAR/IP due within **60 days of exercise completion** | AAR/IP sent:\_\_\_\_\_\_\_\_\_    Signature and date  *\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*  Date of Exercise or Real Event in BP2: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Date AAR/IP submitted: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  The AAR/IP is due within **60 days** from the date of the exercise or June 11, 2021 whichever comes first to the Regional Coordinator or Subject Matter Expert and to KDHE at [KDHE.Preparedness@ks.gov](mailto:KDHE.Preparedness@ks.gov).  The submitted AAR/IP must be approved by the KDHE Exercise Coordinator for credit to be awarded. |
| **12** | LHD will ensure that priority communication services are available in an emergency. This should include maintaining an always-on high-speed internet connection, email services, and a phone and or cell phone that is available to LHD preparedness personnel.  Due by **September 30, 2020** | As administrator of the LHD I attest, priority communication services are available 24/7.    Signature and date. |
| **13** | LHD will maintain a website where information can be posted and accessed by members of the public to promote awareness of LHD preparedness activities and actions the public can take to improve personal preparedness. The LHD may also make regular use of social media channels (for example, Facebook, Twitter and/or Instagram).  Due by **December 31, 2020** | Date of website review:  Facebook  Twitter  Instagram |
| **14** | Using KS-TRAIN, LHD will ensure appropriate staff members take or renew certification every two years for:   * Packaging and Shipping Division 6.2 Materials 2016 * KHEL: Preparing Clinical Specimens Related to Chemical or Biological Exposure Using Evidence Control Measures   Certificates will be pulled from KS-TRAIN  Due by **June 30, 2021** | Date courses completed:  Completed by: |
| **15** | **ANNUAL REPORTING**  LHD will ensure annual fit testing for PPE (or PAPR annual training) for LHD staff is completed in compliance with the revised *OSHA respiratory protection standard, 29 CFR 1910.134,* adopted April 8, 1998.  Due by **June 30, 2021** | Date testing completed: |
| 1. LHD will annually review and submit changes or updates to the Mass Dispensing SOG. If no updates are warranted, sign the workplan verifying no updates are required this budget period.   As administrator of the LHD I attest, the Mass Dispensing SOG has been sent.  Due by **December 31, 2020** | Date Updates sent:  Complete plan sent:    Signature and date. |
| 1. LHD will annually review and submit changes or updates to the Health Department COOP SOG. If no updates are   warranted, sign the workplan verifying no updates are required this budget period.  As administrator of the LHD I attest, the Heath Department COOP SOG has been sent.  Due by **December 31, 2020** | Date Updates sent:  Complete plan sent:    Signature and date. |
| 1. LHD will annually update Point of Dispensing (POD) location(s) any other relevant POD information into IMATS. If no updates are warranted, sign the workplan verifying no updates are required this budget period.   As administrator of the LHD I attest, the POD information in IMATS has been updated.  Due by **December 31, 2020** | Date IMATS Updated with POD information:    Signature and date. |
|  | 1. LHD will review and update county plans as needed according to the findings on the improvement plan from the April 2020 full-scale exercise (FSE) or real-world incident when approved by KDHE. LHD will ensure Improvement Plan (IP) items are completed by the due dates listed on the Improvement Plan.   Due by **June 30, 2021** | The LHD director/administrator will resubmit the IP signifying what Improvement Plan items have been completed. |
| **16** | New LHD administrators (employed 6 months or less or new to the administrator position) will take the *Preparedness – New LHD Administrator Training Plan, Modules 1-6* on KS-TRAIN for administration of the PHEP grant.  Due by **December 31, 2020** | Date of course: \_  Name of attendee:    Not applicable: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| **17** | LHD will have a staff member attend at least three webinars developed by KDHE Preparedness for the PHEP grant. Attendance is required for the *July 8 – Workplan* session. The LHD can choose the other two webinars from the KDHE Preparedness Webinar Wednesday listing to complete this activity. One KDHE Preparedness Webinar may be substituted with a webinar regarding COVID-19 response or preparedness to count for one of the 3 required.  Report training on quarterly work plan. | Date Name of attendee  1  2  3 |
| **18** | PHEP-purchased inventory items will be maintained in the Comprehensive Resource Management and Credentialing System (CRMCS). LHD will annually:   * Complete a review of the actual inventory, removing expired items and adding new items to the hard copy and CRMCS. * Note the responsible person for the cache and how the expired items were disposed of. * Send in screenshot of items entered with quarterly work plan.   Due by **May 31, 2021** | Date cache was reviewed in CRMCS:    Name of person responsible for cache:    Screenshot: \_\_Yes \_\_\_\_No entry required |
| **19** | LHD will develop or have in place surge strategies to ensure scalable staffing plans adapt to changing requirements based on incident size, scope and complexity.   * Develop agreements and or contacts with resources in the area who have the expertise to help with manpower (federal workers, labor pool agencies) * Maintain a scalable EOP or EOG for staffing needs to meet activation levels as triggers are met.   Due by **June 30, 2021** | Date strategy response including activation levels and triggers along with staffing matrix, was provided to KDHE for review: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| **20** | LHD administrators will ensure designated staff complete at least one additional in-state training addressing a gap/needed improvement based on the real-world incident when approved by KDHE, AAR/IP or jurisdictional risk assessment.  Due by **March 31, 2021** | Date IP plan sent:  Training Date: \_\_\_\_\_\_\_\_\_\_\_\_\_  Course name:  Attendees:  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

*The following represent administrative preparedness requirements which can be requested at any time during the project period. Please maintain all documents on-site throughout the project period (2019 - 2024):*

* *Document through job descriptions and employee time and attendance records that all staff members paid with preparedness funds are performing activities related to preparedness for the entire project period (2019 - 2024), or at least 5 years.*
* *Retain copies or transcripts of all certificates/proof of attendance for trainings completed during the entire project period, or at least 5 years.*
* *Have available signed shared resource agreements, MOU, MOA, and maintenance contracts for PHEP related items when asked.*
* *LHD will provide to KDHE Preparedness information pertaining to the performance measures, benchmark requirements and/or any other requested information as related to the current Hospital Preparedness Program-Public Health Emergency Preparedness Cooperative Agreement.*
* *Retain copies of expenditure reports, including invoices for each capital equipment purchase for a period of at least five years. Capital equipment includes purchases of $5,000 and above (per item purchased) and/or a lifespan of greater than a year.*
* *All counties who are part of a larger CRI must ensure their LHD and CRI work plans are complete by budget year-end.*