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| **Progress Quarter (Check One)** | | **Contact Information** |
| Quarter 1 covers July 1, 2021 – September 30, 2021 due October 15, 2021  Work plan for designated  Medium Counties | | County: |
| Quarter 2 covers October 1, 2021 – December 31, 2021 due January 15, 2022 | | Contact Person: |
| Quarter 3 covers January 1, 2022 – March 31, 2022 due April 15, 2022 | | Contact Email: |
| Quarter 4 covers April 1, 2022 – June 30, 2022 due July 15, 2022 | | Contact Phone:  Date Sent |
| **Description of Tasks** | | **Deliverables** |
| **1** | A local health department (LHD) representative will attend, in person, via conference call or webinar, the Quarterly scheduled Healthcare Coalition (HCC) meetings for their region. Designees/Proxies are permitted, provided they designated by the LHD Administrator and the letter is received prior to any meetings that will be missed. Letters received after a missed meeting will not be made retroactive. In the event a designee/proxy is assigned, the designee/proxy is required to attend the HCC meeting in person or virtually.  HCC REGION NAME:  KS-TRAIN ID NUMBER:  **Due Quarterly** | Date and Attendee Name:  1: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  2: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  3: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  4: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  5: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  6: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| **2** | The LHD may send staff to preparedness conferences, preparedness meetings, trainings or exercises to increase knowledge, skills and abilities to develop and maintain plans, conduct trainings 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: National Preparedness Summit, Four Corners Emergency Management, Kansas Public Health Association.)  Conferences and out of state training events must be pre-approved by the KDHE Preparedness Program. See guidance documents for instructions on pre-approval. Summary will include course name, attendee name and date attended from each attendee.  **Due within the quarter attended** | For in-state events:  Date:  Event 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.  Event Name:  Event Date(s):  Name of Attendee(s): |
| **3** | LHD will have a staff member attend at least three (3) webinars developed by the KDHE Preparedness Program for the PHEP grant.   * Attendance is **required for the July 14, 2021** Work Plan Guidance session. * The LHD can choose the other two (2) webinars from the KDHE Preparedness Webinar Wednesday listing to complete this activity.   **Due within the quarter attended** | **KS-TRAIN #** and **Name of attendee**   1. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ 2. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ 3. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| **4** | LHD representative will participate in a local ESF 8 or LEPC planning meeting at least once per year to work with health and medical partners in order to strengthen community preparedness and response activities. The local ESF-8 or LEPC acts as an advisory committee of governmental and non-governmental partners to the local health department to integrate preparedness efforts across jurisdictions and to leverage funding streams.  **Due once, within the quarter attended** | ESF-8  / LEPC  Date attended:  Attendee names and meeting notes attached. |
| **5** | LHD **Administrator** and **Health Officer** will maintain their contact information in the Kansas Health Alert Network (KS-HAN) to ensure the ability of the LHD in receiving situational awareness information.   * Contact information should be checked no less than annually by the user. Users are expected to update their own user profiles. * KDHE Preparedness Program will send LHD Administrator a KS-HAN registrant list, annually. LHD will provide a list of changes (add/remove registrants) to KS-HAN Administrator within the quarter the report was received. * LHD staff registered on KS-HAN will respond to one (1) KS-HAN drill 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.   **Due within the quarter received** | Quarter completed:  Quarter 1 \_\_\_\_\_  Quarter 2 \_\_\_\_\_  Quarter 3 \_\_\_\_\_  Quarter 4 \_\_\_\_\_  Date Drill Completed:  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| **6** | LHD Administrator 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 September 30, 2021** | Date the contact information was reviewed/updated: \_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Signature & Date |
| **7** | LHD Administrators 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 September 30, 2021** | As administrator of the LHD I attest, priority communication services are available 24/7.    Signature and date. |
| **8** | 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.  LHD will participate in the National Preparedness Month campaign in **September 2021** by posting:   * At least two (2) different posts on one (1) social media platform each week during the month of September 2021. * Using the hashtag #KSPrepared to signify participation.   **Due September 30, 2021** | KDHE will track social media participation using #KSPrepared. If this hashtag is used, no documentation is needed.  1. List the Social media platform(s) (i.e., Twitter, Instagram, Facebook, etc.) used for posts during September 2021:  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| **9** | 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 will also make regular use of social media channels (for example, Facebook, Twitter and/or Instagram).  **Due December 31, 2021** | Website review date:  Facebook review date:  Twitter review date:  Instagram review date:  Other: |
| **10** | New LHD administrators (employed Six (6) months or less, new to the administrator position or has not previously completed as a New Administrator in BP2) will take the *Preparedness -* *New LHD Administrator Training* on KS-TRAIN for administration of the PHEP grant. KS-TRAIN Training Plan # 4137.  **Due December 31, 2021** | Attendee Name:  Training Plan Completion Date:    Not applicable: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| **11** | LHD administrators will ensure designated\* staff complete the following online 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)   \*Designated staff is a staff member determined by the LHD Administrator.  **Due December 31, 2021** | As administrator of the LHD, all employees in ICS positions have completed the outlined training.    Signature and date |
| **12** | **IMATS**  *LHD will ensure that a minimum of two (2) health department staff or volunteers are registered and active users of the Inventory Management Tracking System (IMATS) and:*   1. *All users have completed the appropriate training according to their designated role in IMATS.* 2. *All users must login to IMATS a minimum of once every six (6) months to keep their account active and update their own user profiles.* 3. *KDHE Preparedness Program will send LHD Administrators the list of IMATS registrants twice annually.* LHD will provide a list of changes (add/remove registrants) back to the KDHE Preparedness Program within the quarter received. 4. *LHD will update Point of Dispensing (POD) location(s) and any other relevant POD information in IMATS, at least annually. If no updates are warranted, sign the work plan verifying POD info is up to date and no updates are required this budget period.*   **Due December 31, 2021 and June 30, 2022** | 1. Date of IMATS update:   New User Attendee Name(s):    Training class attended:   1. Date of IMATS update:   New User Attendee Name(s):    Training class attended:  As administrator of the LHD I attest, the POD information in IMATS is up to date as of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(date). |
| **13** | Using KS-TRAIN, LHD will ensure appropriate staff members take or renew certification every two (2) years for:   * Packing and Shipping Dangerous Goods: What the Laboratory Staff Must Know (**1092665).**   Certificates will be gathered from KS-TRAIN  **Due March 31, 2022** | Packing & Shipping:  Attendee Name & Date completed   1. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ 2. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ 3. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| **14** | Narrative: How has PHEP made a difference for your local health department or community?  Provide a written summary of how PHEP funds assisted/improved your county. Include success stories, activities or items purchased that you would not have been able to do without PHEP funding. Maximum length 1 page.  **Due March 31, 2022** | Send Summary (template provided) with work plan  Date Summary Remitted: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| **15** | 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 March 31, 2022** | Date testing/training completed:      Signature and date |
| **16** | LHD can purchase equipment and supplies to maintain PHEP readiness based on their county plans, risk assessments and AAR/IPs. These items must be included in the KDHE approved PHEP KGMS budget. LHD Administrator or designee will:   * Use CRMCS for deployable/non-consumable items. Track other items in any inventory tracking system(s). * Complete a review of the actual inventory, removing expired items and adding new items to CRMCS or another inventory tracking system. * Note the responsible person for the cache and how the expired items were disposed of.   **Due June 30, 2022** | Date items purchased and entered into CRMCS, IMATS, or another inventory tracking system: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  No purchase  Cache Manager Name:    ITEMS disposed and how: |
| **17** | Participate in annual exercise during Budget Period 3 (2021 - 2022) at the local-level as defined below:  COOP Tabletop Exercise  Capabilities required for BP3 exercise:  2, 5, 6, and 7  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 (1) strength and one (1) area for improvement.  Serving in an observer role does notmeet the participation requirement.  **AAR/IP due within 60 days of exercise completion or no later than June 30, 2022.** | Date of Exercise: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  AAR/IP sent to KDHE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_    Signature and date    The AAR/IP is due within 60 days from the date of the exercise or June 30, 2022 (whichever date comes first) to the Regional Coordinator or Subject Matter Expert (SME) **and** to KDHE at [KDHE.Preparedness@ks.gov](mailto:KDHE.Preparedness@ks.gov).  The submitted AAR/IP must be approved by the KDHE Preparedness Program Training and Exercise Coordinator for credit to be awarded. |
| **18** | LHD will review and update the Health Department COOP SOG and submit the complete plan to the KDHE Preparedness Program.  As administrator of the LHD I attest, the Heath Department COOP SOG has been sent.  **Due June 30, 2022** | Complete plan sent:    Signature and date. |
| **19** | To further build community preparedness, Medium and Large sized LHDs will participate in another month-long social media campaign conducted at a time and with the topic of the LHD’s choosing. LHD will assure this second campaign is separate from the September National Preparedness Month campaign and will include at least two (2) different posts per week for the entire calendar month on at least one (1) social media platform (i.e., Twitter, Instagram, Facebook, etc.). The campaign can be on one (1) topic or cover a variety of topics, but all posts should be tagged with #KSPrepared.  **Due June 30, 2022** | KDHE will track social media participation using #KSPrepared. If this hashtag is used, no documentation is needed.  Social Media platform(s) used for campaign posts:      Month of Campaign: |
| **20** | LHD administrators will ensure designated staff complete one (1) additional training to address gaps/needed improvements based on a BP2 exercise AAR/IP, real-world incident AAR/IP, or jurisdictional risk assessment for the LHD.  **Due June 30, 2022** | IP gap training 1:  Date:  Course name:  KS-Train ID:  Attendee Name(s): |

*The following represent administrative preparedness requirements that 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 directly related to preparedness.*
* *Retain copies or transcripts of all certificates and/or proof of attendance for trainings completed during the entire project period for at least five (5) years.*
* *Have available signed shared resource agreements,* *Memorandum of Agreement (MOA), Memorandum of Understanding (MOU) and any maintenance contracts relating to PHEP grant funds.*
* *LHD Administrators will provide to the KDHE Preparedness Program information pertaining to the performance measures, benchmark requirements and/or any other requested information as related to the current Hospital Preparedness Program (HPP) and/or the Public Health Emergency Preparedness (PHEP) Cooperative Agreement.*
* *Retain copies of expenditure reports, including but not limited to invoices for each capital equipment purchase, for a period of at least five (5) years. Capital equipment includes purchases of $5,000.00 and above and/or with a lifespan of greater than a year.*
* *LHD Administrators within a Cities Readiness Initiative (CRI) footprint will ensure work plans for the local health department are completed as well as the CRI work plan items.*

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| **BUDGET PERIOD 2 CARRY OVER ADDENDUM** | | | | |
| **County Plan Size** | **Activity Item Number** | **NEW**  **Activity Item Number** | **Description of Tasks** | **Deliverable** |
| MEDIUM | 11B | **B** | 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**  Make Note that the KDHE Preparedness Program suggested to base this AAR/IP on the COVID vaccinations as a Real-Life Event to prevent additional burden of creation of a new exercise and to align with the COVID-19 Response AAR/IP (11A of the work plan.).  **Postponed Due Date: September 30, 2021** | Date of Exercise:  AAR/IP sent:    Signature and date  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  The submitted AAR/IP must be approved by the KDHE Exercise Coordinator for credit to be awarded. |
| MEDIUM | 15D | **C** | 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**  **Postponed Due Date: June 30, 2022** | The LHD director/administrator will resubmit the IP signifying what Improvement Plan items have been completed.  Date Submitted: |
| MEDIUM | 19 | **E** | HD 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**  **Postponed Due Date: September 30, 2021** | Date strategy response, including activation levels and triggers along with staffing matrix, was provided to KDHE for review: |

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