

2023 - 2024 Public Health Emergency Preparedness Large Local Health Department Work Plan

Work Plan for Designated Large Counties		
Quarter 1	July 1, 2023 – September 30, 2023	Quarterly Reporting due in KGMS October 15, 2023
Quarter 2	October 1, 2023 – December 31, 2023	Quarterly Reporting due in KGMS January 15, 2024
Quarter 3	January 1, 2024 – March 31, 2024	Quarterly Reporting due in KGMS April 15, 2024
Quarter 4	April 1, 2024 – June 30, 2024	Quarterly Reporting due in KGMS July 15, 2024
Description of Tasks		
1	<p>A local health department (LHD) representative (or proxy) 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 are designated by the LHD Administrator and the Designee/Proxy letter is received by KDHE and the HCC RRC prior to any meetings that will be missed. Letters received after a missed meeting will not be made retroactive.</p> <p>KDHE prefers that designee/proxy letters be submitted at the beginning of the budget period to cover the entire grant year. However, additional designee/proxy letters can be submitted throughout the grant year but they must be submitted prior to the meeting date.</p> <p style="text-align: right;">Due Quarterly</p>	
2	<p>This workplan item is optional. However, if an LHD attends out-of-state conferences or trainings the pre-approval and summary report are required:</p> <p>The LHD, at its discretion, 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.)</p> <p>Out-of-state conferences and training events must be pre-approved by the KDHE Preparedness Program. See guidance documents for instructions on pre-approval and budget requirements. Each attendee must submit a summary report of the learned knowledge/skill and must include course name, attendee name and date attended.</p> <p style="text-align: right;">Due within the quarter attended</p>	

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3	<p>LHD will have a staff member attend at least three (3) webinars developed by the KDHE Preparedness Program for the PHEP grant.</p> <ul style="list-style-type: none"> Attendance is required for the July 2023 Work Plan Guidance session. The LHD can choose the other two (2) webinars from the SFY 2024 KDHE Preparedness Webinar listing (found on KS TRAIN) to complete this activity. <p style="text-align: center;">Due within the quarter attended</p>
4	<p>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 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.</p> <p style="text-align: center;">Due once, report within the quarter attended</p>
5	<p>LHD Administrator 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.</p> <ul style="list-style-type: none"> 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. <p style="text-align: center;">Update list from KS HAN Admin, Due within the quarter received</p>
6	<p>All 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.</p> <p style="text-align: center;">Drill information due in quarter conducted</p>

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7	<p>LHD Administrator will ensure 24/7 epidemiological contact information is kept current and sent to the KDHE Bureau of Epidemiology & Public Health Informatics through KDHE's Contact Management Community System (available at https://kansasct.force.com/cms/s/) at least quarterly. 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.</p> <p style="text-align: right;">Due Quarterly</p>
8	<p>LHD Administrators will work to 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 telephone and or cell phone that is available to LHD preparedness personnel.</p> <p style="text-align: right;">Due September 30, 2023</p>
9	<p>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.</p> <p>LHD will participate in the National Preparedness Month campaign in September 2023 by posting:</p> <ul style="list-style-type: none"> • At least two (2) different posts on one (1) social media platform and/or website each week during the month of September 2023. • Using the hashtag #KSPrepared to signify participation. <p style="text-align: right;">Due September 30, 2023</p>
10	<p>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).</p> <p style="text-align: right;">Due December 31, 2023</p>

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11	<p>New LHD administrators, (those employed Six (6) months or less, new to the administrator position, or has not previously completed as a New Administrator in BP4) will take the <i>Preparedness - New LHD Administrator Training, Modules 1 through 5</i>, on KS-TRAIN for administration of the PHEP grant. KS-TRAIN Training Plan # 4137.</p> <p style="text-align: right; color: red;">Due December 31, 2023</p>
12	<p>LHD administrators will ensure designated* staff complete the following online training:</p> <ul style="list-style-type: none"> • 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) <p>*Designated staff is a staff member determined by the LHD Administrator. *Training is only required once.</p> <p style="text-align: right; color: red;">Due December 31, 2023</p>

13	<p><u>IMATS</u> The 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:</p> <ul style="list-style-type: none"> • All new users have completed the appropriate training according to their designated role in IMATS. • All users <u>must</u> login to IMATS a minimum of once every six (6) months to keep their account active and update their own user profiles. • 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. • 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, attest in KGMS verifying POD info is up-to-date and no updates are required this budget period. <p style="text-align: center;">Due December 31, 2023 and June 30, 2024</p>
14	<p>Using KS-TRAIN, LHD will ensure appropriate staff members take or renew certification every two (2) years for:</p> <ul style="list-style-type: none"> • Packing and Shipping Dangerous Goods: What the Laboratory Staff Must Know (1092665). <p>KDHE will verify completion of the training in KS-TRAIN.</p> <p style="text-align: center;">Due June 30, 2024</p>
15	<p>Narrative: How has PHEP made a difference for your local health department or community?</p> <p>Provide a written summary of how PHEP funds received in BP5 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.</p> <p style="text-align: center;">Due March 31, 2024</p>

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16	<p>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.</p> <p style="text-align: right;">Due June 30, 2024</p>
17	<p>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:</p> <ul style="list-style-type: none"> • Use CRMCS for deployable/non-consumable items costing \$5,000 or more that have been purchased with PHEP grant funding within the last 5 years. 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. <p style="text-align: right;">Due June 30, 2024</p>
18	<p>LHD will review and update the following plan and submit the completed plan to the KDHE Preparedness Program:</p> <ul style="list-style-type: none"> • Emerging/Reemerging Infectious disease response plan or equivalent plan(s) (i.e. Pan Flu, Ebola, Community Disease Containment). • See guidance document for checklist. <p style="text-align: right;">Due June 30, 2024</p>
19	<p>Participate in an annual tabletop exercise or workshop during Budget Period 5 (2023-2024) at the local level as defined below: Emerging/Reemerging Infectious disease response plan or equivalent plan(s) (i.e. Pan Flu, Ebola, Community Disease Containment) – (Tabletop Exercise or Workshop)</p> <ul style="list-style-type: none"> • At a minimum 3 Capabilities will be exercised. KDHE recommends exercising Capabilities 11-Nonpharmaceutical Interventions, 12-Public Health Laboratory Testing, and 14-Responder Safety and Health. • KDHE recommends exercising the following local Plan: Emerging/Reemerging Infectious Disease Response plan or equivalent plan(s) (i.e. Pan Flu, Ebola, Community Disease Containment).

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	<p>Exercise options:</p> <ul style="list-style-type: none"> Hold a tabletop exercise or workshop to complete/update the required plan and assure it contains up-to-date information and discuss its strengths and weaknesses as well as identify any gaps in the plan. OR Hold a tabletop exercise or workshop to test a local plan of the local health departments choice. Alternative PHEP capabilities may be identified for the exercise with this option. If an LHD chooses to exercise an alternative local plan prior authorization from KDHE is required and at least 3 capabilities must be exercised. <p>Other Requirements:</p> <ul style="list-style-type: none"> Plans/procedures for assisting at-risk/vulnerable populations specific to the jurisdiction must be documented or evidenced in all exercises. This must be included in the narrative of the AAR/IP. Exercise activity will be aligned with the HSEEP principles and test/validate current local plans and procedures. Exercise AAR/IPs must be written using the KDHE approved AAR/IP Template and only reflect PHEP capabilities, not the capabilities or requirements outlined by other agencies (i.e. CMS, NPG, etc.). Ensure that specific exercise role(s)/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. <p>Serving in an observer role does not meet the participation requirement.</p> <p style="text-align: center;">Exercise to be held by April 30, 2024 AAR/IP due within 60 days of exercise completion or no later than June 30, 2024</p>
<p>MED & LG 20</p>	<p>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 and/or website (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.</p> <p style="text-align: center;">Due June 30, 2024</p>

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	<p>LHD administrators will ensure designated staff complete one (1) additional training to address gaps/needed improvements based on a BP4 exercise AAR/IP, real-world incident AAR/IP, or jurisdictional risk assessment for the LHD.</p> <p>KDHE will verify training attendance and completion in KS-TRAIN. If the training was not completed in KS-TRAIN, then the certificate of completion <u>must</u> be remitted to KDHE for verification.</p> <p style="text-align: right;">Due June 30, 2024</p>
LG 21	<p>LHD administrators will ensure designated staff complete a second additional training to address gaps/needed improvements based on a BP4 exercise AAR/IP, real-world incident AAR/IP, or jurisdictional risk assessment for the LHD.</p> <p>KDHE will verify training attendance and completion in KS-TRAIN. If the training was not completed in KS-TRAIN, then the certificate of completion <u>must</u> be remitted to KDHE for verification.</p> <p style="text-align: right;">Due June 30, 2024</p>
LG 22	<p>Exercise #2 – Tabletop, drill, or functional exercise to address gaps/needed improvements identified in a BP4 exercise or real-world incident.</p> <p>Other Requirements:</p> <ul style="list-style-type: none"> 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 {Preparedness Program approved AAR/IP Template and 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. <p>Serving in an observer role does not meet the participation requirement.</p> <p style="text-align: center;">Exercise to be held by April 30, 2024 AAR/IP due within 60 days of exercise completion or no later than June 30, 2024</p>

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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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