



	Progress Quarter
	Quarter 1July 1, 2023 – September 30, 2023Quarterly Reporting due in KGMS October 15, 2023Quarter 2October 1, 2023 – December 31, 2023Quarterly Reporting due in KGMS January 15, 2024Quarter 3January 1, 2024 – March 31, 2024Quarterly Reporting due in KGMS April 15, 2024Quarter 4April 1, 2024 – June 30, 2024Quarterly Reporting due in KGMS July 15, 2024
	Description of Tasks Activities must be completed by end of quarter and reported by above due dates
1	 Regional Coordinators or designated subject matter expert(s) for regions without a coordinator will convene, at a minimum, quarterly meetings of all the local health departments within the region, and maintain minutes and attendee lists using the KDHE Meeting Report template. Meetings must be set-up in KS-TRAIN at least 30-days prior to the scheduled date so the required registration requirement can be met. Meetings must include a virtual or conference call option. A draft of the meeting minutes must be provided to all members and KDHE within 10-business days. KDHE must be notified of the scheduled quarterly meetings as soon as they have been set-up in KS-Train. Preferably at the beginning of the budget period. KDHE must be notified of any changes to meeting dates and/or formats as they occur.
	Due Quarterly Regional Coordinators or designated subject matter expert(s) for regions without a coordinator will attend, in person or virtually, the Healthcare Coalition
2	 (HCC) meeting(s). Regional coordinators or designated subject matter expert(s) for regions without a coordinator whose region supports multiple HCCs must attend each HCC meeting within their region (in person or virtually) or send a designee. Designees are permitted if a designee/proxy letter is on file with KDHE and the HCC RRC prior to the meeting date that will be missed. Designee/Proxy Letters will not be made retroactive. The person attending the meeting will report out to the local health departments with a summary of the HCC meeting. 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.
	Due Quarterly





3	Regional Coordinators or designated subject matter expert(s) for regions without a coordinator will ensure each HCC Readiness and Response Coordinator (RRC) has up-to-date email addresses for each member of the PHEP region so that the RRC can include them in the email distribution list for the HCC meeting minutes. Remit the updated list in any quarter where there is a change and if there are no changes you may check the "NO" box indicating there were no updates to the list. Due Quarterly
4	[Dates TBD], Regional Coordinators or designated subject matter expert(s) for regions without a coordinator must attend three (3) Preparedness Regional Coordinator Meetings. One meeting is planned to take place in Salina and two (2) will take place virtually. The KDHE Preparedness Program will have further meetings with the coordinators as needed. If the regional coordinator cannot attend, he/she will work with KDHE to send a designee. (1 st , 3 rd , and 4 th quarter) Due Quarterly
5	Regional Coordinators, or designated subject matter expert(s) (SME) for regions without a coordinator, must (at a minimum) monitor the minutes of the regional Homeland Security Council meetings. Attendance is allowed but not required. The information from the meeting will be relayed, by the Regional Coordinator or SME, to the regional PHEP members for situational awareness. Emailing the minutes to the regional PHEP members will meet this requirement or the information can be shared at a regional PHEP meeting. If minutes are emailed KDHE Preparedness should be cc'd at <u>KDHE.preparedness@ks.gov</u> .
6	Regional Coordinators or designated subject matter expert(s) for regions without a coordinator, will maintain a 24/7 emergency contact list of each local health department in their region, to be shared with the LHD admins within that region. Due by September 30, 2023
7	Regional coordinators or designated subject matter expert(s) for regions without a coordinator will develop a summary report of their region's county health department needs and improvements from an exercise or real-world incident in BP4, when approved by KDHE. This summary report will include a plan to meet the gaps revealed in the AAR/IP from the exercise or real-world incident approved by KDHE. Due by September 30, 2023
8	(Date to be determined), Regional Coordinators or designated subject matter expert(s) for regions without a coordinator must attend the annual Integrated Preparedness Planning Workshop (IPPW) previously referred to as the Training and Exercise Planning Workshop (TEPW) to update the KDHE Multi-Year Training and Exercise Plan (MYTEP) for inclusion in the grant application for the upcoming budget period.

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	Due by December 31, 2023
9	Regional Coordinators or designated subject matter expert(s) for regions without a coordinator will:
	 Assist local health department staff in the development, review and updating of all local plans as needed, Provide technical assistance (TA) and training to local health department staff,
	 Provide suggestions and/or feedback to KDHE regarding local priorities, issues, etc.,
	 Provide a year-end, written summary of how PHEP funds assisted/improved your region. Include success stories, activities or items purchased that you would not have been able to do without PHEP funding. Maximum length 1 page.
	• Must complete (L0146) - Homeland Security Exercise and Evaluation Program (HSEEP) Training within the last 5 years.
	Ongoing Activity. Summary Due by June 30, 2024
10	Regional Coordinators or designated subject matter expert(s) for regions without a coordinator will participate in at least one (1) annual exercise (e.g., full- scale exercise) as a facilitator, player, or evaluator. Serving in an observer role does not meet the participation requirement.
	Due by June 30, 2024
11	Review the local health department's Infectious Disease Response Plan (or equivalent) updates (as related to Activity #18 of the local health department work plan) and ensure the plan includes the necessary components.
	Due by June 30, 2024
	PHEP Regions can purchase equipment and supplies to maintain PHEP readiness in their region based on their county plans, risk assessments and AAR/IPs. These items must be included in the KDHE approved PHEP regional budget. Regional coordinators will annually:
	 Use the Comprehensive Resource Management and Credentialing System (CRMCS) for deployable/non-consumable items. Track other items in any inventory tracking system(s).
12	• 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 by June 30, 2024





This workplan item is optional. However, if staff attend out-of-state conferences or trainings the pre-approval and summary report are required: Regions may send staff from their region to attend 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: National Preparedness Summit, Four Corners Emergency Management, Kansas Public Health Association.)

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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.

Due within the quarter attended

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.
- Regional Coordinators 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.
- Regional Coordinators within a Cities Readiness Initiative (CRI) footprint will ensure work plans for the local health departments are completed as well as the CRI work plan items.





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