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# BP 4 EDS GAP ANALYSIS REGION 5 HMCC

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2016 OCT - 3 A 8: 09

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## Introduction

The Office of Preparedness and Emergency Management has compiled data from the Strategic National Stockpile Emergency Dispensing Site (EDS) survey sent to all communities in the Commonwealth. This survey was designed and completed during Budget Period 4, July 1, 2015 – June 30, 2016 (BP4). Outlined in this report are the top five (5) gaps that were identified statewide, which are consistent with the top 5 gaps identified by communities in the Region 5 Health and Medical Coordinating Coalition (HMCC).

Participants in this gap analysis survey included members of each of the coalitions including planners, local public health departments, and public safety. It should be noted that several participants listed more than one role in the survey, and several surveys represented more than a single community.

## Background

The Medical Countermeasures Program staff within the Office of Preparedness and Emergency Management developed a set of questions in BP 4 to gather information about local EDS planning, and identify and prioritize challenges and areas of concern on the local and regional level. The questionnaire was disseminated via SurveyMonkey to all jurisdictions in HMCC regions 1, 2, 3, 4AB and 5. HMCC Region 4C (Boston) did not receive the survey because it participated in an Operational Readiness Review during BP4.

A total of 73 respondents representing 71 participating communities from Region 5 completed the questionnaire. Accounting for duplicate submissions this resulted in a 100% return rate. Information was collated and an aggregate score given to each of several categories identified below. This report reflects those scores and the subsequent gaps that were identified by responding communities in the Region 5 HMCC.

## Purpose

The purpose of this analysis was to determine and develop a ranking of gaps by local health related to Emergency Dispensing Sites for Region 5 HMCC communities and coalitions.

## Recommended Approach

The gap analysis results described in this document should guide local communities and the coalitions within the Region 5 HMCC in prioritizing which EDS Plan improvements to address during BP 5. This contract deliverable can be found within the Local Public Health work plans for Budget Period 5 (July 1, 2016 - June 30, 2017). While this is a community level deliverable, a



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coalition – or the region as a whole – may choose to address the same gap(s) and advance all plans simultaneously. The pie chart below identifies the 5 top gaps identified statewide. The matrix on the following page lists the top five gaps identified by the Region 5 surveys.

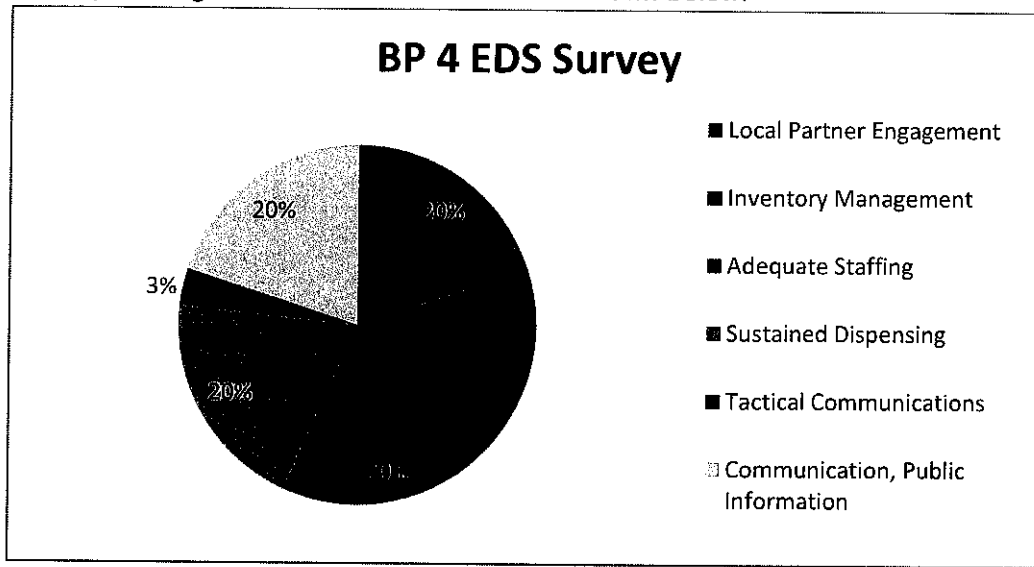
### Results

Each Region was asked to prioritize and rank the following areas:

- Local Partner Engagement
- Inventory Management
- Adequate Staffing/Volunteers
- Tactical Communication (e.g. Equipment)
- Communication (Public Information and Warning)
- Security at EDS
- Sustained dispensing (e.g. additional 50-day supply of prophylaxis in an anthrax scenario)
- Adverse Event Reporting
- Demobilization
- Closed PODs
- Other

All of the participating HMCC regions identified the same 4 top priorities as noted in the chart below. *Inventory Management* was selected as the fifth priority in 4 regions while *Tactical Communications* was selected by one region.

The top 5 categories identified state-wide are shown below:





## BP 4 EDS GAP ANALYSIS REGION 5 HMCC

### Region 5 Gaps

Gap	Description	Next Steps	Responsible Entity
1. Staffing/Volunteers	Respondents indicated they were very concerned about their community's ability to adequately staff their EDS. This item was ranked number one among respondents from this region.		
2. Local Partner Engagement	Respondents indicated a concern that they are challenged engaging local municipal partners in the planning process for EDS sites. This item was ranked number two among respondents from this region.		
3. Sustained Dispensing Operation	Respondents indicated they were concerned about follow-up methodologies for dispensing certain medications that require additional dosing regimens to the population. This item was ranked number three among respondents from this region.		
4. Communications/ Public Information and Warning	Respondents indicated a concern about communication platforms and public information and warning. The survey did not specify specific items of concern within this category. This item was ranked number four among respondents from this region.		
5. Inventory Management	Respondents indicated a concern related to inventory management. This item was ranked number five among the respondents from this region.		



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# BP 5 EDS IMPROVEMENT PLAN

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This form accompanies the Gap Analysis Report for each Health and Medical Coordinating Coalition (HMCC) region and for Regions 4A and 4B. Please use it to the list the action steps you will take in BP5 to address the identified gap(s) in your EDS planning, and the expected completion date for each action step. This form is due to your HMCC Sponsoring Organization no later than June 30, 2017.

- The MCM team has provided a summary of the data collected by the EDS Plan Assessment Tool completed in SurveyMonkey on behalf of 95% of local communities.
- Choose 1 – 3 gaps from the Report to address and develop an improvement Plan (IP) that includes action steps to improve your community's EDS Plan. You may work within your community or collaborate with other local jurisdictions in your region to and address a gap shared across multiple communities. Your IP should reflect changes that you will make to your local plan.
- The work identified in the IP must be completed in BP5.
- Local jurisdictions are encouraged to share products or written procedures with the OPEM MCM team. Once vetted, products or written procedures may be shared with others in their region and across regions.

Gap to Address	Related Section of EDS Plan	Action Steps	Completion Date	Person Responsible
Gap 1:		1.	1.	
		2.	2.	
		3.	3.	
Gap 2:		1.	1.	
		2.	2.	
		3.	3.	
Gap 3:		1.	1.	



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