

Bristol EP Coalition (Region 5B) PHEP Workplan for BP5

CITY CLERKS OFFICE
NEW BEDFORD, MA

2016 OCT 12 A 8:35

CITY CLERK

PHEP Region 5 Local Public Health Work plan and Deliverables BP5

The following information in this document will be used to create a workplan to carry out the required MPPDH deliverables as outlined in the BP5 FOA. For each deliverable a detailed description of planned activities, capabilities, objectives/goals, completion date, responsible entity and evaluation measure must be provided. In situations when the activity is not clearly linked to a capability "not applicable" may be chosen. Workplans should include SMART (Specific, Measurable, Achievable, Realistic, Time-Based) Objectives. The following link can be chosen to learn more about SMART Objectives <http://www.cdc.gov/healthyouth/evaluation/pdf/brief3b.pdf>. Workplans can be revised and updated as needed during the course of BP5.

To be eligible for funding Coalitions and Communities must ensure the following:

- Coalitions will participate in the concurrence process by reviewing and voting on the draft application provided by OPEM, in accordance with policies and procedures developed by OPEM and the LSAC.
- Coalitions will ensure that their requested expenditures are in keeping with the guidance provided in the Budget Period 5 Grants Management Manual.
- Communities will provide updates of the coalition-wide 24/7 contact list to the HMCC Sponsoring Organization on a quarterly basis.
- Exercises and drills that are planned by Communities and Coalitions and supported with PHEP funds must follow the HSEEP doctrine. Additionally, the appropriate exercise documentation must be submitted to OPEM. This includes submission of an Exercise Notification Form as well as AAR/IPs following completion of an exercise. Timely advance submission of the Exercise Notification Form is a condition for use of PHEP funds to support or conduct an exercise.
- *Failure of a coalition/community to comply with these requirements and/or with fiscal guidelines issued by MDPH may necessitate repayment of funds received by the entity and/or affect eligibility for future funds.*

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HPP/PHEP Public Health Emergency Preparedness Cooperative Agreement – Budget Period 5 (July 1, 2016 - June 30, 2017)
Community and Coalition Level Deliverables

Deliverables/ Scope of Service Local Community Deliverables	Planned Activities	Capability	Objective/ Goal	Date to be completed by	Responsible Entity	Evaluation Measure	Funding Amount Associated with this Activity
<p>Communities will complete three SNS operational drills from CDC required list. Choose three unique drills from: site activation, staff notification, facility set-up, and dispensing throughput (live or RealOpt). If PHEP funds are being used to support these drills an exercise notification must be completed in advance (not required for site activations and staff notification drills).</p>	<p>The 3 EDS drills will be conducted to test components of the local EDS plans. Staff notification and site activation drills will use the HHAN or manual calls will be made. Facility set-up drills will be conducted at a determined time based on each community's availability and resources. RealOpt Throughput analysis will be based on patient flow and staffing resources available in each community.</p>	<p>Capability #8 - Medical Countermeasure Dispensing</p>	<p>For the EDS staff call down EDS site activation drills, request response within 2 hours of issuing the alert. For the EDS facility set up drill, review the AAR from the previous year and address one or two "areas for improvement" included within the Corrective Action Plan</p>	<p>2 Drills due by December 31, 2016 3rd drill due by March 31, 2017</p>	<p>Local Public Health with the assistance of Planners</p>	<p>Use EDS staff call down drill results to update Call Down Roster in the EDS plan Use EDS site activation drill results to update Call Down Roster in the EDS plan After the EDS facility set up drill, update the EDS plan as necessary.</p>	<p>\$26,000.00 of 20% of planner's time</p>

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<p>Communities are required to participate in quarterly coalition-wide drills conducted by MDPH via the HHAN, WebEOC and/or other platforms to test information sharing, resource requests and notification capabilities. MDPH OPEM will provide response performance metrics to coalitions.</p>	<p>WebEOC training can be conducted at Coalition meetings to test off site communication equipment as well as to update WebEOC Site Identification Forms. Equipment, data app plan and cell phone plans purchased which enables 24/7 communication capacity. Assess response at Coalition meetings, gathering feedback from Coalition members</p>	<p>Capability #1 - Community Preparedness Capability #4- Emergency Public Health Warning Capability #6- Information Sharing.</p>	<p>To get 75% of Coalition members respond to the drill correctly</p>	<p>June 30, 2016</p>	<p>Local Public Health</p>	<p>Drill matrix will be reviewed and quantified.</p>	<p>\$13,000.00 or 10% of planner's time \$48,000.00 for cell phone and data app plans or 100% of communicator</p>
<p>Communities, in collaboration with their Public Health Regional Coordinator and MDPH SNS staff, will use the results of their ORR and gap analysis provided during BP4 to develop priorities for revising and updating their Emergency Dispensing Site plans.</p>	<p>Based on the gap analysis for BP4 (pending): A proposed work plan for each community will be developed at the beginning of the fiscal year, establishing priorities and goals based on each community's resources and priorities.</p>	<p>Capability #8 - Medical Countermeasure Dispensing</p>	<p>Each community establishes a work plan and works to meet their goals.</p>	<p>Work Plan: September 30, 2016 Attain goals as able: June 30, 2016</p>	<p>Local Public Health with the assistance of planners</p>	<p>Identified goals will be evaluated to determine if they were achieved.</p>	<p>\$26,000.00 or 20% of planner's time</p>

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Communities will demonstrate the ability to share basic epidemiological data with relevant healthcare organizations. This deliverable shall be accomplished through participation in Massachusetts Virtual Epidemiologic Network (MAVEN) or other means identified by LHD and specifically approved by MDPH.	All communities except for the Town of Berkeley are currently on MAVEN	Capability #13 - Public Health Surveillance and Epidemiological Investigation	Get the Town of Berkeley on MAVEN	June 2017	State Lab and RC	Want 100% of Region 5B communities enrolled and utilizing MAVEN	N/A
UASI communities will review their BP4 MCM ORR technical assistance report and work with their Public Health Regional Coordinator and SNS staff to develop priorities for revising and updating their Emergency Dispensing Site plans.	N/A No communities within the Bristol County EP Coalition are UASI communities	Capability #8 - Medical Countermeasure Dispensing					N/A

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<p>Coalitions will develop one coalition-level project that will help member communities make progress toward demonstrating one or more specific PHEP Capabilities.</p>	<p>Local public health will focus on developing closed PODs with local partners such as housing authorities, Councils on Aging, Nursing Homes, adult group homes and other entities who would be willing to disperse MCM to a section of the general population. Using existing guidance and building relationships with municipal and private partners, each municipality will work with their planner to develop appropriate closed POD goals for BP5 according to their resources and community profile and work toward those goals.</p>	<p>Capability #8 - Medical Countermeasure Dispensing</p>	<p>The final goal is to reduce the amount of people who will need to go to the public EDS, focusing on those with access and functional needs, and reduce the work load for the local public health departments in the event of a large scale public health dispensing campaign.</p>	<p>Develop a work plan by September 30, 2016, revising the plan as necessary as the year progresses. Final report to be completed by June 30, 2017.</p>	<p>Local public health with the assistance of their planner</p>	<p>Progress made in building relationships with local partners. Number of MOA/MOUs established through this process with LPH.</p>	<p>\$13,000.00 or 10% of planner's time</p>

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<p>Coalitions will support one regional project to address a previously identified gap or support progress towards one or more specific PHEP capabilities.</p>	<p>Coalitions will work together with shared resources such as trainings, forms, information and experiences to expand closed PODs throughout southeastern MA.</p>	<p>Capability #8 - Medical Countermeasure Dispensing</p>	<p>The final goal is to reduce the amount of people who will need to go to the public EDS, focusing on those with access and functional needs, and reduce the work load for the local public health departments in the event of a large scale public health dispensing campaign.</p>	<p>June 30, 2017</p>	<p>Under the direction and guidance of the Regional Coordinator, local public health with the assistance of their planner</p>	<p>Preparedness in developing closed POD plans \$13,000.00 or 10% of planner's time</p>
<p>Coalitions will document National Incident Management System (NIMS) training for local health officials by submitting a list of individuals trained in ICS (100, 200, 300) and NIMS (700, 800) in each member community.</p>	<p>Documentation is on-going at this time</p>	<p>Capability #1 - Community Preparedness</p>	<p>Maintain all NIMS and ICS training records for LPH staff</p>	<p>On-going</p>	<p>Local Public Health with assistance of planners</p>	<p>Update tracking chart as needed to reflect training \$6,500.00 or 5% of planner's time</p>
<p>Coalitions will maintain training records for NIMS compliance.</p>	<p>Region 5B will collaborate with HMCC Partners to participate in the development and testing of a Regional Coordination Plan.</p>	<p>Capability #1 - Community Preparedness</p>	<p></p>	<p>HMCC & OPEM</p>	<p></p>	<p>\$13,000.00 or 10% of planner's time</p>
<p>Coalitions will participate in the development and testing of the regional coordination plan.</p>	<p></p>	<p></p>	<p></p>	<p></p>	<p></p>	<p></p>

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Coalitions will work with their Public Health Regional Coordinator and HMCC sponsoring organization to complete coalition-level CPGs for the upcoming fiscal year (FFY 2017, first year of new cooperative agreement) as way to self-assess the progress and gaps in demonstrating PHEP capabilities.	Region 5B will meet with the RC to complete CPGs.	Capability #1 - Community Preparedness	Identify gaps, highlights, and successes using CDCs CPG forms	As set by CDC and MDPH	Regional Coordinator with the assistance of planners as needed	CDC final report of CPGs will inform future planning efforts	\$13,000.00 or 10% of planner's time
Coalitions will submit a copy of current Operating Principles to its HMCC sponsoring organization.	Region 5B will review and vote upon the OPs during the monthly coalition meetings. The Op will then be forwarded to the HMCC.	Capability #1 - Community Preparedness	Annual Region 5B EC and Coalition Members will review and vote on POPs	July 2016	Coalition EB/ Coalition Coordinator	Approval vote for Region 5B	N/A
Coalitions will participate in and support HMCC activities.	All HMCC activities will be shared with Region 5B in hopes that they participate. Planners will be expected to attend all Region 5B Coalition meetings, Executive Committee Meetings (when requested) and related EP meetings and trainings.	Capability #1 - Community Preparedness	Coalition Members and Planners will attend HMCC activities in hopes of advancing the HMCC goals and Objectives. Resources will be made available to all HMCC stakeholders	On-going through BPS	Region 5B Coalition Members and Planners	Attendance will be taken at all HMCC events and reviewed.	\$9,755.00 or 100% for training
Coalitions will support initial work on HMCC planning for resource sharing and coordination.	Region 5B Coalition Members and Planners will share any and all EP related resources with the HMCC staff.	Capability #1 - Community Preparedness Capability #6 - Informatn Sharing	Resources will be made available to all HMCC stakeholders	On-going through BPS	Stakeholders, planners and RC	Electronic access to compiled resource listing with updated information.	\$6,500.00 or 5% of planner's time

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Coalitions will ensure participation in the CDC-required full scale exercise.*

N/A

Choose a Capability

**All UASI communities are required to take part in this functional exercise. Three UASI communities will be required to arrange for actual dispensing as part of the drill.*

Please use the additional space to add your own workplan items for additional projects/priorities for your communities or coalition.

<p>Please use the additional space to add your own workplan items for additional projects/priorities for your communities or coalition.</p>	<p>The MRC Coordinator will support MRC activities within the Bristol-Norfolk Communities.</p>	<p>Capability #15 - Volunteer management</p>	<p>Recruitment, Training, MA Responds credentialing, quarterly reports, drills and deployment oversight.</p>	<p>June 30, 2017</p>	<p>Bristol Executive Committee</p>	<p>Oversight provided by Bristol -Norfolk MRC</p>	<p>\$39,000.00 or 100% of MRC Coordinators time</p>
<p>Region 5B will fund .63 FTE for a Bristol County Collaborative Volunteer Coordinator</p>							
		<p>Choose a Capability</p>					

