

Attachment A: PHEP Assessment Word Version

Improving the Content of the Public Health Preparedness Capabilities

You have been selected to complete this assessment because you are the Director of the Public Health Emergency Preparedness (PHEP) grant program in your public health jurisdiction.

Your feedback is important to us. The purpose of this study is to assess the effectiveness and usefulness of the Public Health Preparedness Capabilities: National Standards for State and Local Planning (the Capabilities). This assessment is **not** intended to assess your jurisdiction's competence or proficiency; rather it is designed to provide an opportunity to gather your comprehensive feedback on the Capabilities. In addition, it includes questions about the structural capacity and leadership characteristics of your health department.

Completing the questionnaire is voluntary and takes approximately 60 minutes. We greatly value your time and responses. The Centers for Disease Control and Prevention (CDC) will not publish or share any identifying information about individual respondents. All shared or published information will be reported in aggregate form. There are no known risks or direct benefits to you from participating or choosing not to participate, but your answers will help CDC improve future public health emergency planning and response.

To facilitate your ability to respond to this assessment, it is not necessary to complete it in one session. Clicking "Save and Exit" at the bottom of any page will save your progress and will open to the section where you left off when you are able to continue.

Pre-Populated Information:

Name:

Agency:

Title:

Email Address:

Phone Number:

Public reporting burden of this collection of information is estimated to average 60 minutes per response, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing information. An agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a currently valid Office of Management and Budget control number. Send comments regarding this burden estimate, or any other aspect of this information collection, including suggestions for reducing this burden to CDC/Agency for Toxic Substance and Disease Registry Information Collection Review Office, 1600 Clifton Road NE, MS D-74, Atlanta, Georgia 30333; Attention: PRA (0920-0879).

Section I: Effectiveness of the Public Health Preparedness Capabilities

The first set of questions relate to how you use the Capabilities and how complete and comprehensive you perceive them to be.

1. Please indicate whether your health department has a lead /co-lead role, support role, or no role in executing each Capability below.

Capabilities	Lead/Co-Lead Role	Support Role	No Role
1. Community Preparedness			
2. Community Recovery			
3. Emergency Operations Coordination			
4. Emergency Public Information and Warning			
5. Fatality Management			
6. Information Sharing			
7. Mass Care			
8. Medical Countermeasure Dispensing			
9. Medical Material Management and Distribution			
10. Medical Surge			
11. Non-Pharmaceutical Interventions			
12. Public Health Laboratory Testing			
13. Public Health Surveillance and Epidemiologic Investigation			
14. Responder Health and Safety			
15. Volunteer Management			

	2a. To what extent do you agree that each of the listed functions is a legitimate activity that rightfully belongs to the Capability with which is it associated?				2b. In your opinion, are there significant deficiencies with any of the existing functions (i.e., incomplete, insufficient, or otherwise inadequate) within the Capabilities?	
Functions	Disagree	Somewhat Agree	Agree	Strongly Agree	Yes	Describe Deficiencies and Potential Solution(s)
1. Community Preparedness						
Function1: Determine risks to the health of the jurisdiction						
Function2: Build community partnerships to support health preparedness						
Function3: Engage with community organizations to foster networks						
Function4: Coordinate training or guidance to ensure community engagement in preparedness efforts						
2. Community Recovery						
Function1: Identify and monitor public health, medical and mental/behavioral health system recovery needs						
Function2: Coordinate community public health, medical, and mental/behavioral health system recovery operations						
Function3: Implement corrective actions to mitigate damages from future incidents						
3. Emergency Operations and Coordination						
Function1: Conduct preliminary assessment to determine need for public activation						
Function2: Activate public health emergency operations						
Function3: Develop incident response strategy						
Function4: Manage and sustain the public health response						
Function5: Demobilize and evaluate public health emergency operations						
4. Emergency Public Information and Warning						
Function1: Activate the emergency public information system						
Function2: Determine the need for a joint public info system						
Function3: Establish and participate in info system operations						
Function4: Establish avenues for public interaction and info exchange						
Function5: Issue public info, alerts, warnings, and notifications						
5. Fatality Management						
Function1: Determine role for public health in fatality management						
Function2: Activate public health fatality management operations						
Function3: Assist in the collection and dissemination of antemortem data						
Function4: Participate in survivor mental/behavioral health services						
Function5: Participate in fatality processing and storage operations						

	3a. To what extent do you agree that each of the listed functions is a legitimate activity that rightfully belongs to the Capability with which is it associated?				3b. In your opinion, are there significant deficiencies with any of the existing functions (i.e., incomplete, insufficient, or otherwise inadequate) within the Capabilities?	
Functions	Disagree	Somewhat Agree	Agree	Strongly Agree	Yes	Describe Deficiencies and Potential Solution(s)
6. Information Sharing						
Function1: Identify stakeholders to be incorporated into info flow						
Function2: Identify and develop rules and data elements for sharing						
Function3: Exchange info to determine a common operating picture						
7. Mass Care						
Function1: Determine public health role in mass care operations						
Function2: Determine mass care needs of the impacted population						
Function3: Coordinate public health, medical, and mental/behavioral health services						
Function4: Monitor mass care population health						
8. Medical Countermeasure Dispensing						
Function1: Identify and initiate medical countermeasure dispensing strategies						
Function2: Receive medical countermeasures						
Function3: Activate dispensing modalities						
Function4: Dispense medical countermeasures to identified population						
Function5: Report adverse events						
9. Medical Material Management and Distribution						
Function1: Direct and activate medical materiel management and distribution						
Function2: Acquire medical materiel						
Function3: Maintain updated inventory management and reporting system						
Function4: Establish and maintain security						
Function5: Distribute medical materiel						
Function6: Recover medical materiel and demobilize distribution operations						
10. Medical Surge						
Function1: Access the nature and scope of the incident						
Function2: Support activation of medical surge						
Function3: Support jurisdictional medical surge operations						
Function4: Support demobilization of medical surge operations						

	4a. To what extent do you agree that each of the listed functions is a legitimate activity that rightfully belongs to the Capability with which is it associated?				4b. In your opinion, are there significant deficiencies with any of the existing functions (i.e., incomplete, insufficient, or otherwise inadequate) within the Capabilities?	
Functions	Disagree	Somewhat Agree	Agree	Strongly Agree	Yes	Describe Deficiencies and Potential Solution(s)
11. Non-Pharmaceutical Interventions						
Function1: Engage partners and identify factors that impact non-pharmaceutical interventions						
Function2: Determine non-pharmaceutical interventions						
Function3: Implement non-pharmaceutical interventions						
Function4: Monitor non-pharmaceutical interventions						
12. Public Health Laboratory Testing						
Function1: Manage laboratory activities						
Function2: Perform sample management						
Function3: Conduct testing and analysis for routine and surge capacity						
Function4: Support public health investigations						
Function5: Report results						
13. Public Health Surveillance and Epidemiologic Investigation						
Function1: Conduct public health surveillance and detection						
Function2: Conduct public health and epidemiological investigation						
Function3: Recommend, monitor, and analyze mitigation actions						
Function4: Improve public health and epidemiological investigation systems						
14. Responder Health and Safety						
Function1: Identify responder safety and health risks						
Function2: Identify safety and personal protective needs						
Function3: Coordinate with partners to facilitate risk-specific safety and health training						
Function4: Monitor responder safety and health actions						
15. Volunteer Management						
Function1: Coordinate volunteers						
Function2: Notify volunteers						
Function3: Organize, assemble, and dispatch volunteers						
Function4: Demobilize volunteers						

5. Are there any *additional* preparedness, response, or recovery activities that your health department performs that you feel should become new functions in any of the Capabilities?

Capability	Suggested additional activities/functions
1. Community Preparedness	FREE TEXT
2. Community Recovery	
3. Emergency Operations Coordination	
4. Emergency Public Information and Warning	
5. Fatality Management	
6. Information Sharing	
7. Mass Care	
8. Medical Countermeasure Dispensing	
9. Medical Material Management and Distribution	
10. Medical Surge	
11. Non-Pharmaceutical Interventions	
12. Public Health Laboratory Testing	
13. Public Health Surveillance and Epidemiology Investigation	
14. Responder Health and Safety	
15. Volunteer Management	

6. Are there additional Capabilities, functional areas or domains that you think should be included in the Capabilities document, which in theory are important for your health department to carry out effective public health preparedness and emergency response? (Check all that apply)

1. Mental / behavioral health
2. Environmental health
3. Administrative / legal authorities
4. Cross-border / global health security
5. Infection Control
6. Exercises, Evaluation, and Quality Improvement
7. Hazardous Waste Management
8. Sustainability/Resilience
9. Vector Control
10. Infrastructure & Utilities
11. Public Safety/Injury Prevention (post storm, safety in schools)
12. All Hazards Planning
13. Animal disease surveillance and investigation
14. Agriculture surveillance and food safety
15. Other, specify _____

7. Are there significant deficiencies or issues *in the Capabilities as a whole* that you would like to see addressed or modified? (If you have issues or concerns about a specific Capability, or specific functions within a Capability, please do not answer yes here, See #5) [Y/N, if yes, open text box asking to provide input/suggestions for improvement]

8. In your opinion, to what extent are each of the existing Capabilities important for effective public health emergency response overall?

Capabilities	Not Important At All	Not Very Important	Important	Extremely Important
1. Community Preparedness	1	2	3	4
2. Community Recovery	1	2	3	4
3. Emergency Operations Coordination	1	2	3	4
4. Emergency Public Information and Warning	1	2	3	4
5. Fatality Management	1	2	3	4
6. Information Sharing	1	2	3	4
7. Mass Care	1	2	3	4
8. Medical Countermeasure Dispensing	1	2	3	4
9. Medical Material Management and Distribution	1	2	3	4
10. Medical Surge	1	2	3	4
11. Non-Pharmaceutical Interventions	1	2	3	4
12. Public Health Laboratory Testing	1	2	3	4
13. Public Health Surveillance and Epidemiologic Investigation	1	2	3	4
14. Responder Health and Safety	1	2	3	4
15. Volunteer Management	1	2	3	4

Section II: Utility of the Public Health Preparedness Capabilities

The next section relates to the usefulness of the Capabilities.

9. Have you used the Capabilities to inform or guide any of the following activities? Check all that apply for each of the following activities in the Table below:

- a. Expand your PHEP Program (e.g. hire staff, add new scope to your program)
- b. Restructure your PHEP Program (e.g. combine PHEP and HPP programs)
- c. Add Services (without expanding) to your PHEP Program (e.g. routine responder health and safety monitoring per Emergency Responder Health Monitoring and Surveillance guidelines)
- d. Develop Trainings
- e. Develop Exercises
- f. Evaluate your program activities

Capabilities	Activities					
	a. Expand your PHEP Program	b. Restructure your PHEP Program	c. Add Services within existing PHEP Program	d. Develop Trainings	e. Develop Exercises	f. Evaluate your program activities
1. Community Preparedness						
2. Community Recovery						
3. Emergency Operations Coordination						
4. Emergency Public Information and Warning						
5. Fatality Management						
6. Information Sharing						
7. Mass Care						
8. Medical Countermeasure Dispensing						
9. Medical Material Management and Distribution						
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12. Public Health Laboratory Testing						
13. Public Health Surveillance and Epidemiologic Investigation						
14. Responder Health and Safety						
15. Volunteer Management						

Section III: Structure of PHEP Program

The last section asks about some of the structural capacity characteristics of your health department that may have an impact on your use of the Capabilities.

10. How many full-time equivalent (FTE) staff work in public health emergency preparedness in your agency? (Can include decimals, e.g., 4.5)

Number of FTEs: _____

11. How many full-time equivalent (FTE) staff are dedicated to evaluation of your public health emergency preparedness activities? (Can include decimals, e.g., 4.5)

Number of FTEs: _____ (SKIP TO Q16 IF "0")

11a. Are these evaluation staff within or outside of the PHEP program or both? NOTE: Consider contractors outside the PHEP program)

1. Within
2. Outside
3. Both within and outside

12. Do you rely on CDC materials and guidance (e.g., performance measures, TAR/MCM ORR, and other documents) for evaluation purposes or have you developed your own metrics or a combination of both?

1. Rely on the CDC metrics
2. Developed our own metrics
3. Use a combination of both
4. Have not conducted any evaluation yet (SKIP TO Q13)
5. Other, specify _____

12a. How frequently do you measure / evaluate progress?

1. Monthly
2. Quarterly
3. Semi-Annually
4. Annually
5. Other, specify _____

13. Do you regularly track progress on implementation of improvement plan / corrective action items?

1. Yes
2. No (SKIP TO Q15)

13a. How frequently?

1. Monthly
2. Quarterly
3. Semi-Annually
4. Annually
5. Other, specify _____

14. To what extent do you monitor sub-awardee (e.g., local health department, coalition, hospitals, other entities, etc.) activities to ensure objectives are being met?

1. Not at all
2. Somewhat
3. Closely
4. Very Closely
5. Other, specify _____

14a. To what extent do you assess sub-awardee *performance*?

1. Not at all
2. Somewhat
3. Closely
4. Very Closely
5. Other, specify _____

15. Does your PHEP program have any additional sources of revenue in addition to the PHEP Cooperative Agreement?

1. Yes
2. No (SKIP TO Q17)

15a. If YES, then what was the total approximate annual amount from these additional sources during the most recently completed fiscal year? (Note: OPEN for entry of \$ or provide ranges to select from)

16. Please describe the extent of your partnership with the following groups or agencies by indicating whether each group or agency is a partner or resource by checking yes or no. A partner is an agency or group with whom your PHEP program works regularly to carry out activities, while a resource is an agency or group whom you could rely on for information or assistance, but with whom you do not maintain a formal relationship related to regular PHEP activities.

Agency	Partner (y/n)	Resource (y/n)	Frequency of Contact (Select Monthly, Quarterly, Annually)
State Department of Agriculture			
State Public Health Laboratory			
Department of the Environment / State Environmental Protection Agency			
State Epidemiologist			
State or Jurisdictional Mental Health Agency			
Local Emergency Planning Committees			
Health Officer			
Medical Reserve Corps			
Media			
Local and state emergency management			
Healthcare providers association			
EMS			
Fire services			
Law enforcement			
American Red Cross			
Mental and Behavioral health organizations			
Social Services Organizations			
State Hospital Association or similar organization			
Faith-Based Organizations			
National Guard			
Academic institutions			
Private Businesses			
Schools			
Elected officials			
Other, specify:			

17. In your opinion, how effectively are you able to do the following in a public health emergency?

	Not Effectively At All	Somewhat Effectively	Effectively	Extremely Effectively
Expedited hiring				
Receive additional funds from the Federal government				
Obligate and spend down funds received				
Prepare financial records for audit (FFRs)				
Expedited purchasing				
Expedited contracting				
Expedited waivers and other legal/regulatory procedures				

18. How many total years of experience in public health preparedness do you, as the PHEP Director, have?

19. Approximately how many public health emergency responses have you, as the PHEP Director, led or served a key Incident Management System (IMS) role in?

Definitions: Public Health Emergency Response = an acute, sudden or large incident requiring partial/full DOC/EOC activation **OR** significant surge of personnel in key PH activities to address an (usually acute, sudden, or large) public health threat or risks to a population; Key role = command/general staff, ESF-8 or similar lead, etc.

None

1. 1-3
2. 4-6
3. 7-9
4. 10 or more

20. Please respond to the following items regarding the leadership culture of your agency with regard to public health preparedness and response:

	Strongly Disagree	Disagree	Agree	Strongly Agree
Our organization is effective at recruiting strong leaders				
Our organization provides ample opportunities for leadership development				
Our organization provides sufficient opportunities for leadership training				
Our leadership has a clear vision for the organization's future				
Our organization's vision is known to all employees				
Our organization has a mission statement				
Our employees are involved in achieving the vision and mission				
Potential new leaders are identified and groomed by existing leaders				
Leaders in our organization articulate their values				
Leaders in our organization live their values				
Leaders in our organization make themselves readily available to other employees				