Attachment B: PHEP Assessment Web Version

Form Approved OMB No. 0920-0879 Expiration Date 03/31/2018

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.

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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 Ciltion Road NE, MS D-74, Atlanta, Georgia 20333; Atlantion, PRA (0920-0934).

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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 primary/lead role, support/coordination role, or no role in executing each capability below. Lead/Co-Lead Role Support Role No Role	Section I: Effectiveness of the Public Health F	Preparedness Capa	bilities		
Lead/Co-Lead Role Support Role No Role 1. Community Preparedness		Capabilities and how co	mplete and compr	ehensive you	
Lead/Co-Lead Role Support Role No Role 1. Community Preparedness C. Community Recovery C. Community Recovery C. Emergency Operations Coordination C. Emergency Public Information and Warning C. Fatality Management C. Information Sharing C. Mass Care C. Medical Countermeasure Dispensing C. Medical Material Management and Distribution C. Medical Surge C. Medical Surge C. Medical Interventions C. Public Health Laboratory Testing C. Medical Surveillance and Epidemiologic Investigation C. Medical Surveillance and Epidemiologic Invest		as a primary/lead role	support/coordinati	on role or no role	
1. Community Preparedness O 2. Community Recovery O 3. Emergency Operations Coordination O 4. Emergency Public Information and Warning O 5. Fatality Management O 6. Information Sharing O 7. Mass Care O 8. Medical Countermeasure Dispensing O 9. Medical Material Management and Distribution O 10. Medical Surge O 11. Non-Pharmaceutical Interventions O 12. Public Health Laboratory Testing O 13. Public Health Surveillance and Epidemiologic Investigation O 14. Responder Health and Safety O		is a primary/read role,	supportreoorumati	on role, or no role	
1. Community Preparedness O 2. Community Recovery O 3. Emergency Operations Coordination O 4. Emergency Public Information and Warning O 5. Fatality Management O 6. Information Sharing O 7. Mass Care O 8. Medical Countermeasure Dispensing O 9. Medical Material Management and Distribution O 10. Medical Surge O 11. Non-Pharmaceutical Interventions O 12. Public Health Laboratory Testing O 13. Public Health Surveillance and Epidemiologic Investigation O 14. Responder Health and Safety O					
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		Lead/Co-Lead Role	Support Role	No Role	
3. Emergency Operations Coordination	1. Community Preparedness	0	0	0	
4. Emergency Public Information and Warning	2. Community Recovery	0	0	0	
5. Fatality Management O O 5. Information Sharing O O 7. Mass Care O O 8. Medical Countermeasure Dispensing O O 9. Medical Material Management and Distribution O O 10. Medical Surge O O 11. Non-Pharmaceutical Interventions O O 12. Public Health Laboratory Testing O O 13. Public Health Surveillance and Epidemiologic Investigation O O 14. Responder Health and Safety O O	Emergency Operations Coordination	0	0	0	
S. Information Sharing	4. Emergency Public Information and Warning	0	0	0	
7. Mass Care	5. Fatality Management	0	0	0	
8. Medical Countermeasure Dispensing O O O O O O O O O O O O O O O O O O O	S. Information Sharing	0	0	0	
9. Medical Material Management and Distribution O O O O O O O O O O O O O O O O O O O	7. Mass Care	0	0	0	
10. Medical Surge OOO 11. Non-Pharmaceutical Interventions OOO 12. Public Health Laboratory Testing OOO 13. Public Health Surveillance and Epidemiologic Investigation OOO 14. Responder Health and Safety OOO OOO OOO OOO OOO OOO OOO O	Medical Countermeasure Dispensing	0	0	0	
11. Non-Pharmaceutical Interventions 12. Public Health Laboratory Testing 13. Public Health Surveillance and Epidemiologic Investigation 14. Responder Health and Safety	Medical Material Management and Distribution	0	0	0	
12. Public Health Laboratory Testing 13. Public Health Surveillance and Epidemiologic Investigation 14. Responder Health and Safety	10. Medical Surge	0	0	0	
13. Public Health Surveillance and Epidemiologic Investigation 14. Responder Health and Safety	11. Non-Pharmaceutical Interventions	0	0	0	
14. Responder Health and Safety	12. Public Health Laboratory Testing	0	0	0	
	13. Public Health Surveillance and Epidemiologic Investigation	0	0	0	
15. Volunteer Management		0	0	0	
	14. Responder Health and Safety	0	0	0	
	14 Responder Health and Safety	0	0	0	

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Section I: Completeness of...
Q1 missing check
2a - 2b. To what extent do...

1. Community Preparedness					
the listed functions is a legitimate activity that significant rightfully belongs to the Capability with which is it associated?			1.2b. 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
Function 1: Determine risks to the health of the jurisdiction	0	0	0	0	0
Function 2: Build community partnerships to support health preparedness	0	0	0	0	0
Function 3: Engage with community organizations to foster networks	0	0	0	0	0
Function 4: Coordinate training or guidance to ensure community engagement in preparedness efforts	0	0	0	0	0

	the listed t	hat extent do functions is a elongs to the it assoc	legitimate a Capability w	2.2b. 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
Function 1: Identify and monitor public health, medical and mental/behavioral health system recovery needs	0	0	0	0	0
Function 2: Coordinate community public health, medical, and mental/behavioral health system recovery operations	0	0	0	0	0
Function 3: Implement corrective actions to mitigate damages from future incidents	0	0	0	0	0

3. Emergency Operations and Coordination 3.2a. To what extent do you agree that each of 3.2b. In your opinion, are there significant deficiencies with any of the existing functions (i.e., incomplete, insufficient, or otherwise inadequate) within the the listed functions is a legitimate activity that rightfully belongs to the Capability with which is it associated? Capabilities? **Functions** Disagree Somewhat Agree Strongly Yes Agree Agree Function 1: Conduct preliminary assessment to determine need for 0 0 0 0 0 public activation Function 2: Activate public health 0 0 0 emergency operations Function 3: Develop incident 0 0 0 0 response strategy Function 4: Manage and sustain the 0 0 0 0 public health response Function 5: Demobilize and evaluate public health emergency operations 0 0 0 0 0

	the listed	hat extent do functions is a elongs to the it assoc	legitimate a Capability v	4.2b. 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
Function 1: Activate the emergency public information system	0	0	0	0	0
Function 2: Determine the need for a joint public info system	0	0	0	0	0
Function 3: Establish and participate in info system operations	0	0	0	0	0
Function 4: Establish avenues for public interaction and info exchange	0	0	0	0	0
Function 5: Issue public info, alerts, warnings, and notifications	0	0	0	0	0

	the listed	hat extent do functions is a elongs to the it assoc	legitimate a Capability v	5.2b. In your opinion, are there significant deficiencies with any o the existing functions (i.e., incomplete, insufficient, or otherwise inadequate) within the Capabilities?	
Functions	Disagree	Somewhat Agree	Agree	Strongly Agree	Yes
Function 1: Determine role for public health in fatality management	0	0	0	0	0
Function 2: Activate public health fatality management operations	0	0	0	0	0
Function 3: Assist in the collection and dissemination of antemortem data	0	0	0	0	0
Function 4: Participate in survivor mental/behavioral health services	0	0	0	0	0
Function 5: Participate in fatality processing and storage operations	0	0	0	0	0

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Question index
Section I: Completeness of
Q1 missing check
2a - 2b. To what extent do
Q2 missing check
3a - 3b. To what extent do

6. Information Sharing 6.3b. In your opinion, are there significant deficiencies with any of the existing functions (i.e., 6.3a. 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 incomplete, insufficient, or otherwise inadequate) within the Capabilities? it associated? Functions Disagree Somewhat Agree Strongly Yes Agree Agree Function 1: Identify stakeholders to be 0 0 0 0 \circ incorporated into info flow Function 2: Identify and develop rules and data elements for sharing Function 3: Exchange info to 0 0 0 0 determine a common operating picture

7. Mass Care					
	the listed	hat extent do functions is a elongs to the it assoc	legitimate a Capability w	7.3b. 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
Function 1: Determine public health role in mass care operations	0	0	0	0	0
Function 2: Determine mass care needs of the impacted population	0	0	0	0	0
Function 3: Coordinate public health, medical, and mental/behavioral health services	0	0	0	0	0
Function 4: Monitor mass care population health	0	0	0	0	0

	the listed	hat extent do functions is a elongs to the it assoc	legitimate a Capability v	8.3b. 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
Function 1: Identify and initiate medical countermeasure dispensing strategies	0	0	0	0	0
Function 2: Receive medical countermeasures	0	0	0	0	0
Function 3: Activate dispensing modalities	0	0	0	0	0
Function 4: Dispense medical countermeasures to identified population	0	0	0	0	0
Function 5: Report adverse events	0	0	0	0	0

9. Medical Material Management and Distribution							
	the listed	hat extent do functions is a elongs to the it assoc	legitimate a Capability w	9.3b. 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	Yes			
Function 1: Direct and activate medical materiel management and distribution	0	0	0	0	0		
Function 2: Acquire medical materiel	0	0	0	0	0		
Function 3: Maintain updated inventory management and reporting system	0	0	0	0	0		
Function 4: Establish and maintain security	0	0	0	0	0		
Function 5: Distribute medical materiel	0	0	0	0	0		
Function 6: Recover medical materiel and demobilize distribution operations	0	0	0	0	0		

	the listed	what extent do functions is a elongs to the it assoc	legitimate a Capability w	ctivity that	10.3b. 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
Function 1: Access the nature and scope of the incident	0	0	0	0	0
Function 2: Support activation of medical surge	0	0	0	0	0
Function 3: Support jurisdictional medical surge operations	0	0	0	0	0
Function 4: Support demobilization of medical surge operations	0	0	0	0	0

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100%	Q1 missing check
11. Non-Pharmaceutical Interventions	2a - 2b. To what extent do Q2 missing check 3a - 3b. To what extent do
11.4a. 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? 11.4b. In your opinion, are there significant deficiencies with any of the existing functions (i.e., incomplete, insufficient, or otherwise inadequate) within the Capabilities?	Q3 missing check 4a - 4b. To what extent do

0

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Strongly

Agree

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Yes

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	the listed	12.4a. 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?		12.4b. 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
Function 1: Manage laboratory activities	0	0	0	0	0
Function 2: Perform sample management	0	0	0	0	0
Function 3: Conduct testing and analysis for routine and surge capacity	0	0	0	0	0
Function 4: Support public health investigations	0	0	0	0	0
Function 5: Report results	0	0	0	0	0

Disagree Somewhat Agree

0

Agree

0

0

0

Functions

Function 1: Engage partners and identify factors that impact non-pharmaceutical interventions

Function 2: Determine non-

pharmaceutical interventions Function 3: Implement non-

pharmaceutical interventions
Function 4: Monitor nonpharmaceutical interventions

	the listed t	what extent do functions is a elongs to the it assoc	legitimate a Capability v	13.4b. 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
Function 1: Conduct public health surveillance and detection	0	0	0	0	0
Function 2: Conduct public health and epidemiological investigation	0	0	0	0	0
Function 3: Recommend, monitor, and analyze mitigation actions	0	0	0	0	0
Function 4: Improve public health and epidemiological investigation systems	0	0	0	0	0

14. Responder Health and Safety 14.4a. 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? 14.4b. 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 Strongly Yes Agree Agree Agree Function 1: Identify responder safety 0 0 0 0 0 and health risks Function 2: Identify safety and 0 0 personal protective needs Function 3: Coordinate with partners to facilitate risk-specific safety and 0 0 0 0 0 health training Function 4: Monitor responder safety 0 0 0 0 0 and health actions

	rightfully belongs to the Capability with which is it associated?		15.4b. 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
Function 1: Coordinate volunteers	0	0	0	0	0
Function 2: Notify volunteers	0	0	0	0	0
Function 3: Organize, assemble, and dispatch volunteers	0	0	0	0	0
Function 4: Demobilize volunteers	0	0	0	0	0

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1009	response activities that your health department performs that you	Section I: Completeness Q1 missing check 2a - 2b. To what extent do Q2 missing check
eel should become new functions in any of		3a - 3b. To what extent do Q3 missing check
		4a - 4b. To what extent do Q4 missing check
. Community Preparedness		5. Are there any additions
. Community Recovery		
. Emergency Operations Coordination		
. Emergency Public Information and Warning		
. Fatality Management		
. Information Sharing		
. Mass Care		
. Medical Countermeasure Dispensing		
. Medical Material Management and Distribution		
Medical Surge		
Non-Pharmaceutical Interventions		
Public Health Laboratory Testing		
3. Public Health Surveillance and Epidemiologic Inve	stigation	
Responder Health and Safety		
5. Volunteer Management		



0% [Question index Section I: Completeness of Q1 missing check
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)	2a - 2b. To what extent do Q2 missing check 3a - 3b. To what extent do Q3 missing check 4a - 4b. To what extent do
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	Q4 missing check 5. Are there any additional 6. Are there additional cap
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CENTERS FOR DISEASE CONTROL AND PREVENTION	
7. Are there significant deficiencies or issues in the <i>Capabilities</i> 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) Yes No	Question index Section I: Completeness of Q1 missing check 2a - 2b. To what extent do Q2 missing check 3a - 3b. To what extent do Q3 missing check 4a - 4b. To what extent do Q4 missing check 5. Are there any additional 6. Are there additional cap 7. Are there significant defi
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					Section I: Completeness Q1 missing check 2a - 2b. To what extent of
. In your opinion, to what extent is each of the existi mergency response overall?	Q2 missing check 3a - 3b. To what extent of Q3 missing check				
	Not Important At All	Not Very Important	Important	Extremely Important	4a - 4b. To what extent of Q4 missing check
I. Community Preparedness	0		0		Are there any additionAre there additional ca
2. Community Recovery	0	0	0	0	Are there significant de 8. In your opinion, to what
. Emergency Operations Coordination	0	0	0	0	o. In your opinion, to wha
. Emergency Public Information and Warning	0	0	0	0	
i. Fatality Management	0	0	0	0	
i. Information Sharing	0	0	0	0	
. Mass Care	0	0	0	0	
. Medical Countermeasure Dispensing	0	0	0	0	
. Medical Material Management and Distribution	0	0	0	0	
0. Medical Surge	0	0	0	0	
Non-Pharmaceutical Interventions	0	0	0	0	
Public Health Laboratory Testing	0	0	0	0	
3. Public Health Surveillance and Epidemiologic Investigation	0	0	0	0	
Responder Health and Safety	0	0	0	0	
5. Volunteer Management	0	0	0	0	
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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)

 - 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 EHRMS guidelines)

 • d. Develop Trainings

 - e. Develop Exercises
 - f. Evaluate your program 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						
Emergency Public Information and Warning						
5. Fatality Management						
6. Information Sharing						
7. Mass Care						
8. Medical Countermeasure Dispensing						
Medical Material Management and Distribution						
10. Medical Surge						
11. Non-Pharmaceutical Interventions						
12. Public Health Laboratory Testing						
Public Health Surveillance and Epidemiologic Investigation						
14. Responder Health and Safety						
15. Volunteer Management						

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2a - 2b. To what extent do.
Q2 missing check
3a - 3b. To what extent do.
Q3 missing check
4a - 4b. To what extent do.
Q4 missing check
Are there any additional.
6. Are there additional cap.
Are there significant defi
8. In your opinion, to what.
Q8 missing check
Section II: Utility of the Pu.



0% [Question index Section I: Completeness of Q1 missing check
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.	2a - 2b. To what extent do Q2 missing check 3a - 3b. To what extent do Q3 missing check 4a - 4b. To what extent do Q4 missing check 5. Are there any additional 6. Are there additional cap
10. How many full-time equivalent (FTE) staff work in public health emergency preparedness in your agency? Number of FTEs:	7. Are there significant defi 8. In your opinion, to what Q8 missing check Section III: Utility of the Pu Section III: Structure of PH
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0% [Question index Section I: Completeness of Q1 missing check
11. How many full-time equivalent (FTE) staff are dedicated to evaluation of your public health emergency preparedness activities?	2a - 2b. To what extent do Q2 missing check 3a - 3b. To what extent do Q3 missing check
Number of FTEs:	4a - 4b. To what extent do Q4 missing check 5. Are there any additional 6. Are there additional cap 7. Are there significant defi 8. In your opinion, to what
11a. Are these evaluation staff inside or outside of the PHEP program or both?	Q8 missing check Section II: Utility of the Pu Section III: Structure of PH
1. Within2. Outside3. Both within and outside	11. How many full-time eq
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0% 100%	Question index Section I: Completeness of Q1 missing check
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?	2a - 2b. To what extent do Q2 missing check 3a - 3b. To what extent do Q3 missing check
1. Rely on the CDC metrics 2. Developed our own metrics 3. Use a combination of both 4. Have not conducted any evaluation yet 5. Other: 12a. How frequently do you measure / evaluate progress? 1. Monthly 2. Quarterly 3. Semi-Annually	4a - 4b. To what extent do Q4 missing check 5. Are there any additional 6. Are there additional cap 7. Are there significant defi 8. In your opinion, to what Q8 missing check Section II: Utility of the Pu Section III: Structure of PH 11. How many full-time eq 12. Do you rely on the CD 13. Do you regularly track 14. To what extent do you 15. Does your PHEP 16. Please describe the ex Q16 missing check 17. In your opinion, how ef Section IV 19. Approximately how ma 20. Please respond to the f
○ 4. Annually ○ 5. Other: Previous Next → Save and Exit	



0% 100%	Question index Section I: Completeness of Q1 missing check
13. Do you regularly track progress on implementation of improvement plan items?	2a - 2b. To what extent do Q2 missing check
	3a - 3b. To what extent do Q3 missing check
	4a - 4b. To what extent do
○ 2. No	Q4 missing check 5. Are there any additional
	Are there any additional Are there additional cap
	7. Are there significant defi
	8. In your opinion, to what Q8 missing check
13a. How frequently?	Section II: Utility of the Pu
Tod. How frequently:	Section III: Structure of PH
	11. How many full-time eq 12. Do you rely on the CD
O 1. Monthly	13. Do you regularly track
O 2. Quarterly	14. To what extent do you
○ 3. Semi-Annually	15. Does your PHEP
O 4. Annually	16. Please describe the ex Q16 missing check
O 5. Other:	17. In your opinion, how ef
C 5. Other.	Section IV
	19. Approximately how ma
	20. Please respond to the f
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0% (<u> </u>	Question index Section I: Completeness of Q1 missing check
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?	2a - 2b. To what extent do Q2 missing check 3a - 3b. To what extent do Q3 missing check
 ○ 1. Not at all ○ 2. Somewhat ○ 3. Well ○ 4. Very Well ○ 5. Other: 	4a - 4b . To what extent do Q4 missing check 5. Are there any additional 6. Are there additional cap 7. Are there significant defi R. In your opinion, to what Q8 missing check Section II: Utility of the Pu Section III: Structure of PH 11. How many full-time eq 12. Do you rely on the CD 13. Do you regularly track 14. To what extent do you
14a. To what extent do you evaluate sub-awardee performance? 1. Not at all 2. Somewhat 3. Well 4. Very Well 5. Other:	
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CENTERS FOR DISEASE CONTROL AND PREVENTION	
0% [Question index Section I: Completeness of Q1 missing check
15. Does your PHEP program have any additional sources of revenue in addition to the PHEP Cooperative Agreement?	2a - 2b. To what extent do Q2 missing check 3a - 3b. To what extent do Q3 missing check 4a - 4b. To what extent do Q4 missing check 5. Are there any additional
● 1. Yes ○ 2. No	6. Are there additional cap 7. Are there significant defi 8. In your opinion, to what 08 missing check Section II: Utility of the Pu Section III: Structure of PH 11. How many full-time eq
15a. If YES, then what was the total approximate annual amount from these additional sources during the most recently completed fiscal year?	12. Do you rely on the CD 13. Do you regularly track 14. To what extent do you 15. Does your PHEP
\$	16. Please describe the ex Q16 missing check 17. In your opinion, how ef Section IV 19. Approximately how ma 20. Please respond to the f
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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 <u>partner</u> is an agency or group with whom your PHEP program works regularly to carry out activities, while a <u>resource</u> 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.

	Partner or Resource		Frequency of Contact				
	Partner Resource N/A		Monthly Quarterly Annually			N/A	
State Department of Agriculture	0	0	0	0	0	0	0
State Public Health Laboratory	0	0	0	0	0	0	0
Department of the Environment / State Environmental Protection Agency	0	0	0	0	0	0	0
State Epidemiologist	0	0	0	0	0	0	0
State or Jurisdictional Mental Health Agency	0	0	0	0	0	0	0
Local Emergency Planning Committees	0	0	0	0	0	0	0
Health Officer	0	0	0	0	0	0	0
Medical Reserve Corps	0	0	0	0	0	0	0
Media	0	0	0	0	0	0	0
Local and state emergency management	0	0	0	0	0	0	0
Healthcare providers association	0	0	0	0	0	0	0
EMS	0	0	0	0	0	0	0
Fire services	0	0	0	0	0	0	0
Law enforcement	0	0	0	0	0	0	0
American Red Cross	0	0	0	0	0	0	0
Mental and Behavioral health organizations	0	0	0	0	0	0	0
Social Services Organizations	0	0	0	0	0	0	0
State Hospital Association or similar organization	0	0	0	0	0	0	0
Faith-Based Organizations	0	0	0	0	0	0	0
National Guard	0	0	0	0	0	0	0
Academic institutions	0	0	0	0	0	0	0
Private Businesses	0	0	0	0	0	0	0
Schools	0	0	0	0	0	0	0
Elected officials	0	0	0	0	0	0	0
Other (specify in the following question)	0	0	0	0	0	0	0

Q2 missing check
3a - 3b. To what extent do
Q3 missing check
4a - 4b. To what extent do
Q4 missing check
Are there any additional
6. Are there additional cap
Are there significant defi
8. In your opinion, to what
Q8 missing check
Section II: Utility of the Pu
Section III: Structure of PH
11. How many full-time eq
12. Do you rely on the CD
13. Do you regularly track
14. To what extent do you 15. Does your PHEP



17. In your opinion, how effectively are yo	0% 100%	wing in a public	: health emergen	cy?	Section I: Completeness 21 missing check 2a - 2b. To what extent Q2 missing check 3a - 3b. To what extent Q3 missing check 4a - 4b. To what extent Q4 missing check
	Not Effectively At All	Somewhat Effectively	Effectively	Extremely Effectively	Are there any addition Are there additional c Are there significant of
Expedited hiring	0	0	0	0	8. In your opinion, to wh
Receive additional funds from the Federal government	0	0	0	0	Q8 missing check Section II: Utility of the F Section III: Structure of I
Obligate and spend down funds received	0	0	0	0	11. How many full-time
Prepare financial records for audit (FFRs)	0	0	0	0	 Do you rely on the C Do you regularly trace
Expedited purchasing	0	0	0	0	14. To what extent do yo
Expedited contracting	0	0	0	0	 Does your PHEP Please describe the
Expedited waivers and other legal/regulatory procedures	0	0	0	0	Q16 missing check 17. In your opinion, how
	Previous No.	ext →			



0% 100%	Question index Section I: Effectiveness of Q1 missing check
18. How many total years of experience in public health preparedness do you, as the PHEP Director have?	2.1 - 2.5. To what extent d Q2.1-2.5 missing check 3.1 - 3.5 To what extent d Q3.1 - 3.5 missing check 4.1 - 4.5. To what extent d Q4.1 - 4.5 missing check
	5. Are there any additional 6. Are there additional cap 7. Are there significant def 8. In your opinion, to what Q8 missing check Section II: Utility of the Pu Section III: Structure of PH.
✓ Previous Next → Save and Exit	11. How many full-time eq 12. Do you rely on the CD 13. Do you regularly track 14. To what extent do you 15. Does your PHEP
	16. Please describe the ex Q16 missing check 17. In your opinion, how ef 18. How many total years



0%	Question index Section I: Effectiveness of Q1 missing check
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.	2.1 - 2.5. To what extent d Q2.1 - 2.5 missing check 3.1 - 3.5. To what extent d Q3.1 - 3.5 missing check 4.1 - 4.5. To what extent d Q4.1 - 4.5 missing check 5. Are there any additional 6. Are there additional cap 7. Are there significant defi 8. In your opinion, to what Q8 missing check
 ○ None ○ 1-3 ○ 4-6 ○ 7-9 ○ 10 or more 	Section II: Utility of the Pu Section III: Structure of PH 11. How many full-time eq 12. Do you rely on the CD 13. Do you regularly track 14. To what extent do you 15. Does your PHEP 16. Please describe the ex C016 missing check 17. In your opinion, how ef 18. How many total years 19. Approximately how ma
✓ Previous Next → Save and Exit	



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 live their values Leaders in our organization make themselves readily available to	20. Please respond to the following items regarding the leadership culture of your agency with regard to public health preparedness:							
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 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 nake themselves readily available to 6. Are there add 7. Are there sid 7. Are there add 7. Are there sid 8. In your opinion 8. In your opinion 8. In your opinion 8. In your opinion 9. Section III. Lity 11. In your opinion 9. Section III. Lity 12. Do your eye 14. To what exte 15. Does your Pi 14. To what exte 15. Does your Pi 15. Does your Pi 16. Are there sid 7. Are there sid 7. Are there sid 7. Are there sid 7. Are there sid 8. In your opinion 8. In your opinion 8. In your opinion 9. Section III. Lity 11. In your opinion 9. Section III. Lity 12. Do your eye 14. To what exte 15. Does your Pi 16. Are there sid 19. In your opinion		• ,	Disagree	Agree	Strongly Agree	Q4.1 - 4.5 missing ch		
8. In your opinion 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 make themselves readily available to	Our organization is effective at recruiting strong leaders	0	0	0	0	6. Are there addition:		
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		0	0	0	0	8. In your opinion, to		
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		0	0	0	0	Section II: Utility of the Section III: Structure		
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 eaders Leaders in our organization articulate their values Leaders in our organization live their values Leaders in our organization make themselves readily available to	Our leadership has a clear vision for the organization's future	0	0	0	0	12. Do you rely on th		
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 eaders Leaders in our organization articulate their values Leaders in our organization live their values Leaders in our organization make themselves readily available to	Our organization's vision is known to all employees	0	0	0	0	13. Do you regularly		
O16 missing che T7. In your opinit eaders Leaders in our organization live their values Leaders in our organization make themselves readily available to	Our organization has a mission statement	0	0	0	0	15. Does your PHEP		
Potential new leaders are identified and groomed by existing eaders Leaders in our organization articulate their values Leaders in our organization live their values Leaders in our organization make themselves readily available to	Our employees are involved in achieving the vision and mission	0	0	0	0	16. Please describe		
Leaders in our organization and under their values Leaders in our organization live their values Leaders in our organization make themselves readily available to		0	0	0	0	17. In your opinion, h 18. How many total y		
Leaders in our organization live their values OOOOOOOOOOOOOOOOOOOOOOOOOOOOOOOOOOOO	Leaders in our organization articulate their values	0	0	0	0	19. Approximately ho		
	Leaders in our organization live their values	0	0	0	0	20. Tiease respond		
other employees	Leaders in our organization make themselves readily available to other employees	0	0	0	0			

Save and Exit