Number	1
Part	A
Activity	Activity A: Develop a Concept of Operations.
Measure	Time, in minutes, it takes from an assessment hospital's notification to the health department of the need for an inter-facility transfer of a patient confirmed with Ebola or other special pathogen to the arrival of a staffed and equipped EMS/inter-facility transport unit, as evidenced by a no-notice exercise or real-world event. *Note: This measure does not apply for awardees/facilities addressing other special pathogens
Reporting Element	Assessment Hospital
Data Source	Coalition or Assessment Hospital Exercise or Real-World Event
Metrics	Start Time: Time the health department was notified by the assessment hospital, or time from the health department's decision, of the need for an interfacility transfer. Stop Time: Time of arrival of a staffed and equipped EMS/inter-facility transport unit.
Goal	Within 240 minutes or 4 hours
Definitions	Assessment Hospital: Pre-designated facilities that are prepared to receive and isolate a patient under investigation (PUI) for Ebola and care for the patient until an Ebola diagnosis can be confirmed or ruled out and until discharge or transfer is completed. EMS/Inter-facility transport unit: Entities identified in the awardee's CONOPS responsible for the transport and patient care during transport of an actively monitored or directly actively monitored (AM/DAM) patient to an Ebola assessment facility or to provide inter-facility transport (i.e., from a frontline facility to an Ebola assessment/treatment facility or from an Ebola assessment facility to an Ebola treatment facility). No-notice exercise: Unannounced exercise, including drills, functional, and full-scale exercises.
Number	2
Part	A
Activity	Activity B: Assure Readiness of Ebola Treatment Centers.
Measure	Proportion of rostered/covered staff that are trained in safely donning and doffing personal protective equipment (PPE).
Reporting Element	Ebola Treatment Center
Data Source	Ebola Treatment Center
Metrics	Numerator: Total number of rostered/covered staff that completed training. Denominator: Total number of rostered/covered staff.
Goal	100% of rostered/covered staff

	Rostered/covered Staff: Individuals that have been pre-identified to provide ongoing care and treatment to patients with confirmed Ebola or patient under investigation (PUI).
	Donning: The administration or act of putting on PPE.
Definitions	Doffing: The removal of used PPE; this is a high-risk process that requires a structured procedure, a trained observer, and a designated area for removal to ensure protection.
	Trained: Individuals who have completed Ebola/infection control and safety
	training to specifically include proper donning (putting on PPE) and doffing (taking off PPE) methods. (http://www.cdc.gov/vhf/ebola/hcp/ppe-training/)
	PPE: Devices or equipment designated to provide protection while providing care for a confirmed or suspected patient with Ebola.

Number	3
Part	A
Activity	Activity B: Assure Readiness of Ebola Treatment Centers.
Measure	Time it takes for all rostered/covered staff to receive just-in-time (JIT) training, upon notification of a patient with Ebola or other special pathogen at the regional Ebola and other special pathogen treatment center.
Reporting Element	Ebola Treatment Center
Data Source	Ebola Treatment Center Exercise or Real-World Event
Metrics	Start Time: Time of notification (in hours and minutes) of a patient confirmed with Ebola or other special pathogen at the regional Ebola and other special pathogen treatment center. Stop Time: Time all rostered/covered staff completed JIT training (in hours and minutes).
Goal	Within 72 hours *Note: Recommendation from facilities that have successfully treated Ebola is for JIT training to be completed within 24 hours.
Definitions	Notification: The ETC receives notification from the health department that the regional Ebola and other special pathogen treatment facility in their region received a confirmed patient. Rostered/covered Staff: Individuals that have been pre-identified to provide ongoing care and treatment to patients with confirmed Ebola or patient under investigation (PUI).

Just-In-Time (JIT) training: Training that is conducted as a refresher to prepare
Just-In-Time (JIT) training: Training that is conducted as a refresher to prepare for a patient with Ebola or other special pathogen, including donning and
doffing, facility-specific protocols and procedures, and care/treatment protocols.

Number	4
Part	Α
Activity	Activity B: Assure Readiness of Ebola Treatment Centers.
Measure	Time until an Ebola treatment center is ready to admit a patient with Ebola or other special pathogen as evidenced by an exercise or actual patient transfer.
Reporting Element	Ebola Treatment Center
Data Source	Ebola Treatment Center Exercise or Real-World Event
Metrics	Start Time: Time the ETC was notified (in hours and minutes) that a patient confirmed with Ebola or other special pathogen was admitted to the regional Ebola and other special pathogen treatment center in their region. Stop Time: Time ETC is ready to admit a patient with Ebola or other special pathogen (in hours and minutes).
Goal	Within 72 hours (upon notification of a patient confirmed with Ebola or other special pathogen at a regional Ebola and other special pathogen treatment centers) *Note: Recommendation from facilities that have successfully treated Ebola is for ETCs to be ready to admit a patient within 24 hours.
Definitions	Notification: The ETC receives notification from the health department that the regional Ebola and other special pathogen treatment center in their region received a confirmed patient.

Number	5
Part	A
Activity	Activity B: Assure Readiness of Ebola Treatment Centers.
Measure	Proportion of rostered/covered staff contacted by hospital within 4 hours of a patient confirmed with Ebola or other special pathogen admission to a regional Ebola and other special pathogen treatment center.
Reporting Element	Ebola Treatment Center
Data Source	Ebola Treatment Center Exercise or Real-World Event
Metrics	Numerator: Number of rostered/covered staff contacted within 4 hours of notification of a patient with confirmed Ebola at the regional Ebola and other special pathogens treatment center. Denominator: Total number of rostered/covered staff.
Goal	100% of rostered/covered staff

Rostered/covered Staff: Individuals that have been pre-identified to provide ongoing care and treatment to patients with confirmed Ebola or patient under investigation (PUI).
Confirmation: Laboratory-confirmed diagnostic evidence of Ebola virus or other special pathogen.
Contact: The hospital successfully contacted the staff members (and received a response) by phone, email, or automated alert system.

Number	6
Part	A
Activity	Activity B: Assure Readiness of Ebola Treatment Centers.
Measure	Proportion of rostered/covered staff contacted that indicated they are able to report to fulfill Ebola or other special pathogen-related staffing needs within 72 hours.
Reporting Element	Ebola Treatment Center
Data Source	Ebola Treatment Center Exercise or Real-World Event
Metrics	Numerator: Number of rostered/covered staff able to report within 72 hours to fulfill Ebola or other special pathogen-related staffing needs.
	Denominator: Total number of rostered/covered staff contacted.
Goal	100% of contacted rostered/covered staff
Definitions	Rostered/covered staff: Individuals that have been pre-identified to provide ongoing care and treatment to patients with confirmed Ebola or patient under investigation (PUI).
	Contact: The hospital successfully contacted the staff members (and received a response) by phone, email, or automated alert system.

Number	7
Part	A
Activity	Activity B: Assure Readiness of Ebola Treatment Centers.
Measure	Proportion of Ebola Treatment Centers (ETCs) that can access their PPE supply (i.e., know location and have sufficient quantity of unexpired supply) within 10 minutes of transfer notification or upon the patient's arrival (if no notification) of a patient suspected of Ebola or other special pathogen.
Reporting Element	Ebola Treatment Center
Data Source	Ebola Treatment Center Exercise or Real-World Event
Metrics	Numerator: Number of ETCs that can access their PPE supply within 10 minutes of transfer notification or upon the patient's arrival (if no notification) of patient suspected with Ebola or other special pathogen. Denominator: All ETCs in an awardee's jurisdiction.

Goal	100% of Ebola Treatment Centers
	Transfer Notification: The ETC receives notification from the health department, assessment hospital, or EMS of an incoming patient suspected of Ebola or other special pathogen.
Demindons	PPE Access: The ability to identify the location and have sufficient quantity of unexpired supply of PPE at the patient care location(s) (e.g., emergency department, intensive care unit, Ebola treatment unit).
	Sufficient: The extent to which the availability of PPE supplies meets the pre-ident

Number	8
Part	A
Activity	Activity B: Assure Readiness of Assessment Hospitals.
Measure (Ebola)	Time, in seconds, from active monitoring/direct active monitoring (AM/DAM) patient's arrival to placement in isolation at assessment hospital.
Measure (OSP)	This measure does not apply for assessment hospitals addressing other special pathogens
Reporting Element	Assessment Hospital
Data Source	Assessment Hospital Exercise or Coalition Exercise, or Real-World Event
Matrica	Start Time: Time in minutes and seconds of AM/DAM patient's arrival at assessment hospital.
Metrics	Stop Time: Time in minutes and seconds of AM/DAM patient's placement in isolation at assessment hospital.
Goal	Less than or equal to 60 seconds
Definitions	AM/DAM: Active monitoring means that the state or local public health authority assumes responsibility for establishing regular communication with potentially exposed individuals, including checking daily to assess for the presence of symptoms and fever, rather than relying solely on individuals to self-monitor and report symptoms if they develop. Direct active monitoring means the public health authority conducts active monitoring through direct observation. Isolation: Precautions that are taken in a health care facility to prevent the spread of an infectious agent from an infected or colonized patient to susceptible persons. Isolation practices can include placement in a private room or with a select roommate, the use of protective barriers such as masks, gowns and gloves, a special emphasis on handwashing (which is always very important), and special handling of contaminated articles.

Number	9
Part	A

Activity	Activity B: Assure Readiness of Assessment Hospitals.
Measure	Time, in minutes, it takes an assessment hospital to identify and isolate a patient suspected with Ebola or other special pathogen following emergency department triage, as evidenced by a real-world case or no-notice exercise.
Reporting Element	Assessment Hospital
Data Source	Assessment Hospital Exercise or Coalition Exercise, or Real-World Event
Metrics	Start Time: Time of the initiation of an emergency room triage in minutes and seconds.
	Stop Time: Time the patient is placed in isolation in minutes and seconds.
Goal	Less than or equal to 5 minutes
ΙΙ ΙΔΠΝΙΤΙΛΝΕ	No-notice exercise: Unannounced exercise, including drills, functional, and full- scale exercises.

Number	10
Part	A
Activity	Activity B: Assure Readiness of Assessment Hospitals.
Measure (Ebola)	Proportion of health care facility and emergency medical services (EMS) workers in PPE, of those make contact with an AM/DAM suspected Ebola patient under investigation (PUI) after health department notification to the assessment hospital and/or EMS Agency.
Measure (OSP)	Proportion of health care facility and emergency medical services (EMS) workers in PPE that a patient suspected of an other special pathogen makes contact with after health department notification to the assessment hospital or EMS agency.
Reporting Element	Assessment Hospital
Data Source	Assessment Hospital Exercise or Coalition Exercise, or Real-World Event
Metrics	Numerator: The number of health care facility and EMS workers in PPE while in contact with an AM/DAM Ebola patient (or patient suspected of an other special pathogen) after notification to an EMS agency or assessment hospital. Denominator: The total number of health care facility and EMS workers in contact with an AM/DAM Ebola patient, after notification to an EMS agency or assessment hospital.
	100% of health care facility and EMS workers
Goal	*Note that the goal is for no health care or EMS worker to be without PPE while in contact with an AM/DAM suspected Ebola patient after notification.
	AM/DAM: Active monitoring means that the state or local public health authority assumes responsibility for establishing regular communication with potentially exposed individuals, including checking daily to assess for the presence of symptoms and fever, rather than relying solely on individuals to self-monitor and report symptoms if they develop. Direct active monitoring means the public health authority conducts active monitoring through direct observation.

Dennitions	Notification: Communication of a PUI or suspected patient to an assessment hospital.
	Start time: The assessment hospital or EMS agency receives notification from the health department of an incoming patient suspected of Ebola or other special pathogen, or patient's arrival (if no notification).
	Stop time: When discharge or transfer is completed.

Number	11
Part	A
Activity	Activity B: Assure Readiness of Assessment Hospitals.
Measure (Ebola)	Number of health care facility and EMS workers in PPE that an AM/DAM suspected Ebola patient makes contact with after health department notification until isolation.
Measure (OSP)	This measure does not apply for assessment hospitals addressing other special pathogens
Reporting Element	Assessment Hospital
Data Source	Assessment Hospital Exercise or Coalition Exercise, or Real-World Event
Metrics	Number of health care facility and EMS workers in PPE that make contact with an AM/DAM suspected patient between the time of notification and isolation.
Goal	Less than or equal to 3
Definitions	AM/DAM patients: Active monitoring means that the state or local public health authority assumes responsibility for establishing regular communication with potentially exposed individuals, including checking daily to assess for the presence of symptoms and fever, rather than relying solely on individuals to self-monitor and report symptoms if they develop. Direct active monitoring means the public health authority conducts active monitoring through direct observation. Isolation: Precautions that are taken in a health care facility to prevent the spread of an infectious agent from an infected or colonized patient to susceptible persons. Isolation practices can include placement in a private room or with a select roommate, the use of protective barriers such as masks, gowns and gloves, a special emphasis on handwashing (which is always very important), and special handling of contaminated articles. Start time: The assessment hospital or EMS agency receives notification from the health department of an incoming patient suspected of Ebola or other special pathogen, or patient's arrival (if no notification). * Note: Health care facility and EMS involve all hospital or EMS personnel in the facility or transport unit in either clinical or non-clinical roles

Number	12
Part	A
Activity	Activity B: Assure Readiness of Assessment Hospitals.
	Proportion of emergency department staff trained at least annually in infection control and safety.
Reporting Element	Assessment Hospital

Data Source	Assessment Hospital
	Numerator: Number of emergency department staff trained at least annually in infection control and safety.
	Denominator: Total number of emergency department staff.
Goal	100% of emergency department staff
Definitions	Infection control and safety: Policies and procedures used to minimize the risk of spreading infections, especially in health care facilities (e.g. identification/isolation principles, clinical protocols for laboratory and patient care while in PPE, and bodily fluid clean-up/containment).

Number	13
Part	A
Activity	Activity B: Assure Readiness of Assessment Hospitals.
Measure	Proportion of intensive care unit staff trained at least annually in infection control and safety.
Reporting Element	Assessment Hospital
Data Source	Assessment Hospital
Metrics	Numerator: Number of intensive care unit staff trained at least annually in infection control and safety.
	Denominator: Total number of intensive care unit staff.
Goal	100% of intensive care unit staff
Definitions	Infection control and safety: Policies and procedures used to minimize the risk of spreading infections, especially in health care facilities (e.g. identification/isolation principles, clinical protocols for laboratory and patient care while in PPE, and bodily fluid clean-up/containment).

Number	14
Part	A
Activity	Activity B: Assure Readiness of Assessment Hospitals.
Measure	Proportion of assessment hospitals that can access their PPE supply (i.e., know location and have sufficient quantity of unexpired supply) within 10 minutes of transfer notification or arrival, if no notification, of a patient suspected with Ebola or other special pathogen.
Reporting Element	Assessment Hospital
Data Source	Assessment Hospital Exercise
Metrics	Numerator: Number of assessment hospitals that can access their PPE supply within 10 minutes of transfer notification or arrival, if no notification, of a patient suspected with Ebola or other special pathogen.
	Denominator: Number of assessment hospitals in the awardee's jurisdiction.
Goal	100% of Assessment Hospitals
Definitions	Assessment Hospital: Pre-designated facilities that are prepared to receive and isolate a PUI for EVD and care for the patient until an Ebola diagnosis can be confirmed or ruled out and until discharge or transfer is completed.
	Transfer Notification: The ETC receives notification from the health department, assessment hospital, or EMS of an incoming patient suspected of Ebola or other special pathogen.
	PPE Access: The ability to identify the location and have sufficient quantity of unexpired supply of PPE at the patient care location (e.g. emergency department, intensive care unit, Ebola treatment unit).
	Sufficient: The extent to which the availability of PPE supplies can meet the pre-ic

Number	15
Part	A
Activity	Activity C: Develop Capabilities of Health Care Coalitions to enable their members to care for Ebola patients.
Measure (Ebola)	Proportion of frontline facilities that receive information from their coalition on the quantity and location of personal protective equipment (PPE) supply within 8 hours of a patient under investigation's (PUI) arrival at a coalition member facility.
Measure (OSP)	Proportion of frontline facilities that receive information from their coalition on the quantity and location of personal protective equipment (PPE) supply within 8 hours of a suspected patient arrival at a coalition member facility.
Reporting Element	Frontline Facility
Data Source	Coalition Exercise

Metrics	Numerator: Number of frontline facilities that receive information about PPE quantities and locations of PPE from their coalition within 8 hours of a patient under investigation's (PUI) arrival at a coalition member's facility. Denominator: Total number of frontline facilities in the coalition.
Goal Definitions	100% of frontline facilities Frontline Facility: Frontline facilities are hospitals and other health care providers that are not designated Ebola assessment hospitals or Ebola treatment centers that have the possibility of a suspected Ebola or other special pathogen patient encounter if a patient were to access the health care system.

Number	16
Part	A
Activity	Activity C: Develop Capabilities of Health Care Coalitions to enable their members to care for Ebola patients.
Measure	Proportion of frontline facilities that have received coalition-funded training.
Reporting Element	Coalition
Data Source	Coalition
Metrics	Numerator: Total number of frontline facilities that received coalition-funded training.
	Denominator: Total number of frontline facilities in the coalition.
Goal	75% of frontline facilities received coalition-funded training
Definitions	Frontline Facility: Frontline facilities are hospitals and other health care providers that are not designated Ebola assessment hospitals or Ebola treatment centers that have the possibility of a suspected Ebola patient encounter if a patient were to access the health care system outside of the active monitoring/direct active monitoring program.

Number	17
Part	A
Activity	Activity C: Develop Capabilities of Health Care Coalitions to enable their members to care for Ebola patients.
Measure	Proportion of EMS agencies engaged in all phases of the Ebola and other special pathogen preparedness process, of those that are required to execute the awardee's CONOPs that are.
Reporting Element	Coalition
Data Source	Coalitions and awardee
Metrics	Numerator: Number of EMS agencies engaged in all phases of Ebola and other special pathogen preparedness process, of those required to execute the awardee's CONOPs.

	Denominator: Number of EMS agencies that are required to execute the awardee's CONOPs
Goal	100% of EMS agencies
Definitions	EMS agencies required to execute the awardee's CONOPS: EMS agencies that will provide 9-1-1 emergency medical services to suspect Ebola patients' homes or other locations; inter-facility EMS agencies that will transport suspect or confirmed patients with Ebola between frontline health care facilities, assessment hospitals, Ebola treatment centers, regional Ebola and other special pathogen treatment centers, and airports. All Phases of the Ebola and other special pathogen Preparedness Process: All Phases includes planning, training, exercising, and responding with other Ebola preparedness partners.

Number	18
Part	A
Activity	Activity C: Develop Capabilities of Health Care Coalitions to enable their members to care for Ebola and other special pathogen patients.
Measure	Proportion of coalitions within an awardee's jurisdiction that participate in the Health care-Associated Infection (HAI)/Infection Control advisory group
Reporting Element	Coalition
Data Source	Awardee
Metrics	Numerator: Number of coalitions participating in the HAI Advisory group. Denominator: Number of coalitions within an Awardees jurisdiction.
Goal	80% of coalitions participate in HAI Advisory Group
Definitions	HAI Advisory Group: An advisory committee charged with making recommendations on the prevention of health care-associated infections.

U.S. Department of Health and Human Services Hospital Preparedness Program (HPP) Ebola Part A End-of-Year Preparedness Measures Administrative Information

Awardee	Maryland
Point of Contact	
Address	
City/Town	
State/Province	
Zip/Postal Code	
Email Address	
Phone Number	
Total Amount Allocated	
Total Amount Disbursed	
Status of the Jurisdiction Facilities	Select

U.S. Department of Health and Human Services Hospital Preparedness Program (HPP) Ebola Part A End-of-Year Preparedness Measures Ebola Treatment Centers (ETCs)

Facility Name*	Address	City	State	Zip code	Amount Allocated	Amount Disbursed	Status (Choose from the Dropdown List)
Total Amount					\$0.00	\$0.00	
University of Maryland, Medical Center	22 S Greene St	Baltimore	Maryland	21201			Active ETC, exercising Ebola
Johns Hopkins Hospital	1800 Orleans Street	Baltimore	Maryland	21287			Active ETC, exercising OSP
							Select
							Select
							Select
							Select
							Select
							Select
							Select
							Select

*Note:If any assessment hospitals (AHs) from the previous year have switched to an ETC in the Year 3, you do not need to enter the information again in this worksheet. Please go to the Ebola Part A – AH(s) worksheet and change the status of the pre-populated facility, which will automatically appear in the Ebola Part A - ETC(s) worksheet.

U.S. Department of Health and Human Services Hospital Preparedness Program (HPP) Ebola Part A End-of-Year Preparedness Measures Assessment Hospitals (AHs)

Facility Name*	Address	City	State	Zip code	Amount Allocated	Amount Disbursed	Status (Choose from the Dropdown List)
Total Amount					\$0.00	\$0.00	
Anne Arundel Medical Center	5712 Warwick Pl	Chevy Chase	Maryland	20815			Active AH, exercising Ebola
Frederick Memorial Hospital	400 W 7th St	Frederick	Maryland	21701			Active AH, exercising OSP
Holy Cross Hospital	1500 Forest Glen Road	Silver Spring	Maryland	20910			Select
Peninsula Regional Medical Center	100 E Carroll St	Salisbury	Maryland	21801			Select
MedStar Southern Maryland Hospital Center	7503 Surratt's Road	Clinton	Maryland	20735			Select
							Select
							Select
							Select
							Select
							Select

*Note:If any Ebola Treatment Center (ETC) from the previous year has switched to an AH in the year 3, you do not need to enter the information again. Please go to Ebola Part A - ETC(s) worksheet and change the status of the pre-populated facility, which will automatically appear in the Ebola Part A - AH(s) worksheet.

Performance Measure Number	U.S. Department of Health and Human Services Hospital Preparedness Program (HPP) Ebola Part A End-of-Year Preparedness Measures Awardee/Healthcare Coalition (HCC) Performance Measures	Response						
	Activity A: Develop a Concept of Operations							
	Does the concept of operations include a signed agreement between your jurisdiction and the jurisdiction where the regional Ebola and other special pathogen treatment center is located allowing for the transfer of a patient with Ebola							
	Does the concept of operations include a plan for coordinating with other states within the region to identify airports that can accept air transport of Ebola patients							
	Does the concept of operations include a jurisdictional-level communications strategy for notifying health care partners							
	Does the concept of operations include a plan for the safe intra-state transport of potential or confirmed Ebola patients							
	Does the concept of operations include a plan for the safe inter-state transport of potential or confirmed Ebola patients to a regional Ebola and other special pathogen treatment center							
	If "NO", please specify the date you will meet these requirement (MM/DD/YYYY)							
	Does your concept of operations identify roles and responsibilities for the following: (choose all that apply)							
	If "Other", please specify							
	Activity B: Assure Readiness of Ebola Treatment Centers							
	Total Number of Ebola treatment centers (ETCs) (Denominator for PM7) Activity B: Assure Readiness of Assessment Hospitals	2						
	Total Number of Assessment hospitals (Als) (Denominator for PM14) Activity C: Develop Capabilities of Health Care Conflictions to enable their members to care for	1						
		Ebola patients						
	Total Number of frontline facilities in the coalition (<u>Denominator for PM15,PM15(OSP),PM16</u>)							
<u>15</u>	Number of frontline facilities that receive information from their coalition on the quantity and location of personal protective equipment (PPE) supply within 8 hours of a patient under investigation's (PUI) arrival at a coalition member facility (Goal:100% of frontline facilities)							
<u>15(OSP)</u>	Number of frontline facilities that receive information from their coalition on the quantity and location of personal protective equipment (PPE) supply within 8 hours of a suspected patient arrival at a coalition member facility (Goal:100% of frontline facilities)							
<u>16</u>	Number of frontline facilities that have received coalition-funded training (Goal:75% of frontline facilities received coalition-funded training)							
	Total Number of EMS agencies that are required to execute the awardee's CONOPs (<u>Denominator for PM17</u>)							
<u>17</u>	Number of EMS agencies engaged in all phases of Ebola and other special pathogen preparedness process, of those required to execute the awardee's CONOPs (Goal:100% of EMS agencies)							
	Total Number of coalitions within the jurisdiction (Denominator for PM18)	5						
<u>18</u>	Number of coalitions within an awardee's jurisdiction that participate in the Health care-Associated Infection (HAI)/Infection Control (Goal:80% of coalitions participate in HAI Advisory Group)							
	Comments/Additional information							

Performance Measure Number	U.S. Department of Health and Human Services Hospital Preparedness Program (HPP) Ebola Part A End-of-Year Preparedness Measures Ebola Treatment Centers Ebola Performance Measures								
	Activity A: Develop a Concept of Operations								
<u>1</u>	Time, in minutes , it takes from an assessment hospital's notification to the health department of the need for an interfacility transfer of a patient confirmed with Ebola or other special pathogen to the arrival of a staffed and equipped EMS/inter-facility transport unit, as evidenced by a no-notice exercise (Goal: Within 240 minutes or 4 hours)								
	Activity B: Assure Readiness of Ebola Treatment Centers								
	Total Number of rostered/covered staff (Denominator for PM2,PM5,PM6)								
<u>2</u>	Total Number of rostered/covered staff that are trained in safely donning and doffing personal protective equipment (PPE) (Goal: 100% of rostered/covered staff)								
<u>3</u>	Time, in hours, it takes for all rostered/covered staff to receive just-in-time (JIT) training, upon notification of a patient with Ebola or other special pathogen at the regional Ebola and other special pathogen treatment center (Goal: Within 72 hours)								
<u>4</u>	Time, in hours, until an Ebola treatment center is ready to admit a patient with Ebola or other special pathogen as evidenced by an exercise or actual patient transfer (Goal: Within 72 hours)								
<u>5</u>	Number of rostered/covered staff contacted by hospital within 4 hours of a patient confirmed with Ebola or other special pathogen admission to a regional Ebola and other special pathogen treatment center (<i>Goal</i> : 100% of rostered/covered staff)								
<u>6</u>	Number of rostered/covered staff contacted that indicated they are able to report to fulfill Ebola or other special pathogen-related staffing needs within 72 hours (Goal :100% of contacted rostered/covered staff)								
7	Are the Ebola treatment centers (ETCs) able to access their PPE supply (i.e., know location and have sufficient quantity of unexpired supply) within 10 minutes of transfer notification or upon the patient's arrival (if no notification) of a patient suspected of Ebola or other special pathogen? (Goal:100% of Ebola Treatment Centers)								

Comments/Additional information

	U.S. Department of Health and Human Services	Ebola Treatment Centers Other Special Pathogens Performance Measures								
Performance Measure Number	Hospital Preparedness Program (HPP) Ebola Part A End-of-Year Preparedness Measures Ebola Treatment Centers Other Special Pathogens Performance Measures	Johns Hopkins Hospital	ЕТС3	ETC4	ETC5	ETC6	ETC7	ETC8	ETC9	ETC10
	Activity B: Assure Readiness of Ebola Treatment Centers									
	Total Number of rostered/covered staff (Denominator for PM2,PM5,PM6)									
2	Total Number of rostered/covered staff that are trained in safely donning and doffing personal protective equipment (PPE) (Goal: 100% of rostered/covered staff)									
<u>3</u>	Time, in hours, it takes for all rostered/covered staff to receive just-in-time (JIT) training, upon notification of a patient with Ebola or other special pathogen at the regional Ebola and other special pathogen treatment center (God : Within 72 hours)									
4	Time, in hours, until an Ebola treatment center is ready to admit a patient with Ebola or other special pathogen as evidenced by an exercise or actual patient transfer (Goal: Within 72 hours)									
<u>5</u>	Number of nostered/covered staff contacted by hospital within 4 hours of a patient confirmed with Ebola or other special pathogen admission to a regional Ebola and other special pathogen treatment center (Goal: 100% of rostered/covered staff)									
<u>6</u>	Number of rostered/covered staff contacted that indicated they are able to report to fulfill Ebola or other special pathogen-related staffing needs within 72 hours (Goal :100% of contacted rostered/covered staff)									
	Comments/Additional information									

	U.S. Department of Health and Human Services				Assessment H	ospitals Ebola Perform	ance Measures			
Performance Measure Number		Anne Arundel Medical Center	АН3	AH4	AH5	AH6	АН7	AH8	AH9	AH10
	Activity A: Develop a Concept of Operations									
1	Time, in minutes, it takes from an assessment hospital's notification to the health department of the need for an inter-facility transfer of a patient confirmed with Ebola or other special pathogen to the arrival of a staffed and equipped EMS/inter-facility transport unit, as evidenced by a no-notice exercise or real-world event (Goal: Within 240 minutes or 4 hours)									
	Activity B: Assure Readiness of Assessment Hospitals									
8	Time, in seconds, from active monitoring/direct active monitoring (AM/DAM) patient's arrival to placement in isolation at assessment hospital (Goal: Less than or equal to 60 seconds)									
2	Time, in minutes, it takes an assessment hospital to identify and isolate a patient suspected with Ebola or other special pathogen following emergency department triage, as evidenced by a real-world case or no-notice exercise (Goal: Less than or equal to 5 minutes)									
	Total number of health care facility and EMS workers in contact with an AM/DAM Ebola patient, after notification to an EMS agency or assessment hospital (Denominator for PM10.PM10(OSP),PM11)									
10	Number of health care facility and emergency medical services (EMS) workers in PPE, of those make contact with an AM/DAM suspected Ebola patient under investigation (PUI) after health department notification to the assessment hospital and/or EMS Agency (Goal:100% of health care facility and EMS workers)									
11	Number of health care facility and EMS workers in PPE that an AM/DAM suspected Ebola patient makes contact with after health department notification until isolation (Goal: Less than or equal to 3)									
	Total Number of emergency department staff (Denominator for PM12)									
<u>12</u>	Number of emergency department staff trained at least annually in infection control and safety (Goal:100% of emergency department staff)									
	Total Number of intensive care unit staff (Denominator for PM13)									
<u>13</u>	Number of intensive care unit staff trained at least annually in infection control and safety (Goal :100% of intensive care unit staff)									
<u>14</u>	Are the assessemnt hospitals able to access their PPE supply (i.e., know location and have sufficient quantity of unexpired supply) within 10 minutes of transfer notification or arrival, if no notification, of a patient suspected with Ebola or other special pathogen? (Good:100% of Assessment Hospitals)									
	Comments/Additional information									

	U.S. Department of Health and Human Services			Assessment 1	Hospitals Other Special	Pathogens Peformance	Measures		
Performance Measure Number	Hospital Preparedness Program (HPP) Ebola Part A End-of-Year Preparedness Measures Assessment Hospitals Other Special Pathogens Performance Measures	Frederick Memorial Hospital	АН3	AH4	AH5	АН7	АН8	АН9	AH10
	Activity B: Assure Readiness of Assessment Hospitals								
9	Time, in minutes, it takes an assessment hospital to identify and isolate a patient suspected with Ebola or other special pathogen following emergency department triage, as evidenced by a real-world case or no-notice exercise (Goal: Less than or equal to 5 minutes)								
<u>10(OSP)</u>	Number of health care facility and emergency medical services (EMS) workers in PPE that a patient suspected of an other special pathogen makes contact with after health department notification to the assessment hospital or EMS agency (Gool:100% of health care facility and EMS workers)								
	Total Number of emergency department staff (Denominator for PM12)								
<u>12</u>	Number of emergency department staff trained at least annually in infection control and safety (Goal:100% of emergency department staff)								
	Total Number of intensive care unit staff (Denominator for PM13)								
<u>13</u>	Number of intensive care unit staff trained at least annually in infection control and safety (Goal :100% of intensive care unit staff)								
	Comments/Additional information								

U.S. Department of Health and Human Services Hospital Preparedness Program (HPP) Ebola Part A Preparedness Measures Impact	
Please rate your level of agreement with each of the following statements: 1 –Not prepared; 2 – Slightly prepared; 3 –Moderately prepared; 4 –Adequately prepared; 5 – Very prepared	Response
27a.My state/jurisdiction, including coalitions, frontline health facilities, and inter-facility transport providers, was prepared for an Ebola event in or before July 2014	
27b.My state/jurisdiction, including coalitions, frontline health facilities, and inter-facility transport providers, is prepared for an Ebola event after July 2014	
Please provide a written response in 250 words or less	
28a.Describe the impact of the Hospital Preparedness Program Ebola Preparedness and Response Activities funding on the overall preparedness of your state/jurisdiction for an Ebola or other special pathogen event. This may include capabilities developed as a result of funding or guidance from this program or other synergies you experienced. In addition, describe any impacts that translate to all-hazards preparedness.	
28b.Describe any remaining gaps in the overall preparedness of your state/jurisdiction for an Ebola or other special pathogen event. Note: Gaps are not limited to the existing capabilities.	