

Evaluation Criteria for Key Supporting Activities Linked to PHEP Funding

In preparation for the CDC review of the state pandemic influenza operating plans, the Influenza Coordination Unit has worked with subject matter experts from both CDC and the states to develop evaluation criteria for some of the key supporting activities from the various public health objectives, including:

- Ensure Public Health COOP During Each Phase of a Pandemic - A.2
- Ensure Surveillance and Laboratory Capability During Each Phase of a Pandemic - B.1
- Implement Community Mitigation Interventions - B.3
- Acquire & Distribute Medical Countermeasures - B.5
- Ensure Mass Vaccination Capability During Each Phase of a Pandemic - B.6
- Ensure Communication Capability During Each Phase of a Pandemic - B.9

The scores from these key activities will be used as part of the assessment in determining whether a particular jurisdiction's PHEP funding may be affected in FY09. The workgroups chose each of these supporting activities because they:

- 1) Are important for a pan flu OPLAN,
- 2) Could be easily scored by reviewers,
- 3) Are ones in which the states have either had some time or a previous opportunity to prepare.

Please note that ALL supporting activities identified in the March 11, 2008 guidance will be scored. However, only the scores for the activities identified in the tables below will affect FY2009 PHEP funding.

Appendix A.2: Ensure Public Health COOP During Each Phase of a Pandemic

Supporting Activity Related to Funding	Criteria
Does the plan include definitions and identification of essential services and functions needed to sustain agency mission and operations	<p>(Reviewers Note: The evaluation of this activity should be based on the presence or absence of essential function descriptions. In lieu of submitting sensitive/secure documents that define specific functions and related activities, a reference to those documents may be included in the submission to receive a score of 2 or 3.)</p> <p>0: Essential Services Not Identified or Defined 1: Essential Services Identified but not Defined 2: Essential Services Identified and some are defined (i.e. a description or reference of the necessary equipment, facilities and/or personnel needed to complete the mission in support of the overall essential function) 3: Essential Services Identified and all are defined (i.e. a description or reference of the necessary equipment, facilities and/or personnel needed to complete the mission in support of the overall essential function)</p>
<p>Is there a plan to sustain essential services and functions during a pandemic influenza outbreak include the following scenarios:</p> <ul style="list-style-type: none"> • Work force reduction up to 40% • Limited access to facilities (social distancing, staffing or security concerns) • Broad-based implementation of social distancing policies 	<p>(Reviewers Note: States may describe a plan for less than a 40% workforce reduction, with appropriate explanation.)</p> <p>0: No plan to sustain Essential Services 1: Plan exists to sustain Essential Services, but there is no reference to an exercise. 2: Plan exists to sustain Essential Services and there is an indication that the activity will be exercised 3: Plan exists to sustain Essential Services and has been exercised</p>
Does the plan identify positions, skills and personnel needed to continue essential services and functions?	<p>0: There is no plan or mention of identifying positions and skills need to continue essential services and functions. 1: There is a plan to identify positions and skills. 2: The plan identifies primary positions and skills to support the essential services and functions. 3: The plan either a) identifies positions and skills and indicates that personnel have been assigned OR b) describes a current, operational system that will be used to identify those positions and skills during an event.</p>
Does the plan identify adequate alternate worksites (e.g. home or other adequate alternate worksites that maintain social distancing measures), as appropriate, to assure capability to maintain essential services for the duration of a pandemic wave?	<p>0: No alternate worksites or other means of social distancing are identified or mentioned. 1: No specific alternate worksites or means of social distancing identified, but the general need to do so is addressed. 2: Alternate worksites and/or means of social distancing are addressed w/o a plan for activation. 3: Alternate worksites and/or means of social distancing are identified, along with a plan to activate and exercise.</p>

Appendix B.1 Ensure Surveillance and Laboratory Capability During Each Phase of a Pandemic

Supporting Activity Related to Funding	Criteria
<p>Does the plan include implementation steps for enhanced human surveillance to rapidly detect initial cases of pandemic influenza virus in humans early in a pandemic that include the following:</p> <ul style="list-style-type: none"> • Conducting year-round surveillance for seasonal influenza (e.g. virologic and outpatient visits) including electronic reporting • Methods for notification of healthcare providers of enhanced surveillance testing and reporting recommendations • Method for healthcare providers to contact the State health department to report cases that meet the criteria for pandemic influenza testing and obtain the appropriate testing 	<p>0: Not included 1: One of three bullet requirements addressed 2: Provides detail on any two of the three requirements OR mentions all three but does not provide detailed methods 3: Provides detail on all three bullet requirements</p>
<p>Does the plan include identification of influenza surveillance coordinator position(s)?</p>	<p>0: Not included 1: Only states that DOH will coordinate influenza surveillance 2: States that the coordinator position exists, does not identify where it fits in organizationally 3: Identifies where, organizationally, the influenza coordinator sits (either individual's name or assurance that position is filled by an individual)</p>
<p>Does the plan include a plan for investigation of early cases and clusters of pandemic influenza?</p>	<p>0: Not included 1: Mentions performance of investigation, lacks detail 2: Provides a plan and general framework on investigation methods but lacks detail on specifically who and how the state will investigate cases 3: Provides a description of who will perform early investigations and how they will do it (local investigation may be identified but there is detail on how state health will support investigations)</p>
<p>Does the plan include staff identified with contact information for information sharing between the animal and human health surveillance systems?</p>	<p>0: Not included 1: Includes a plan, does not identify staff 2: Includes plan, identifies staff, lacks detail on how information is shared 3: Plan includes staff designation and methods regarding information sharing (when positive x will contact y program at DOH)</p>
<p>Is there a plan to augment the capacity of public health and clinical laboratories to meet the needs of their jurisdiction during an influenza pandemic? Capacity includes but is not limited to:</p> <ul style="list-style-type: none"> • The ability to test for influenza viruses year-round • Performing PCR or IF Testing for rapid detection and subtyping of influenza viruses • Protocols for safe specimen collection and testing • How and to whom a potential case of novel influenza should be reported • Mechanism for submitting specimens to referral laboratories • Protocols for proper handling and shipment of specimens • Protocols for notifying and reporting any novel specimen findings 	<p>0: No plan in place 1: Plan for safe collection, testing, handling, shipping, and notification procedures, but no capability for testing 2: Plan for safe collection, testing, handling, shipping, and notification procedures, and capability for testing (PCR or IF) during normal influenza season only 3: Plan for safe collection, testing, handling, shipping, and notification procedures, and capability for influenza testing (PCR or IF) year-round</p>

Appendix B.3 Implement Community Mitigation Interventions

Supporting Activity Related to Funding	Criteria
<p>The state has collaborated with local health departments to develop plans for rapid remote identification of possible cases (e.g., hotlines, influenza triage centers), including processes to train volunteers/others who will staff the hotline and/or triage centers</p>	<p>0: No response or documentation in the plan of any activity in this area 1: State plan mentions that they plan to develop a method for rapid remote identification of new cases of influenza 2: State presents a draft plan for identification or surveillance for newly occurring possible cases of influenza; Examples may include active surveillance and passive reporting by private clinicians, methods for the public to report to the health department remotely (e.g., telephone, internet, etc.), and/or other innovative methods for rapid identification of new possible cases; 3: State presents a plan for acquiring information on newly occurring cases of possible influenza which has been developed and shared with community partners and is ready to be implemented when necessary. Infrastructure is in place and persons who need to operate the system are informed and ready to implement;</p>
<p>The State has provided initial guidance to local health departments to develop communications and education to the general public as to how to access hotlines, when and where to seek medical care, how to care for ill persons at home, how to protect family members if there is a sick person at home, and when to stay home. Provide examples of how these education materials will be distributed to the public.</p>	<p>0: No response or documentation in the plan of any activity in this area 1: State plan mentions that they plan to develop educational materials but have not yet done so 2: State has made substantial progress towards developing materials or assisting health departments in this activity, however, the activity is still in progress; Draft materials may still be in review or the state may only have reached some counties/jurisdictions but not all; 3: State provides documentation of well developed, cleared and ready to print/distribute educational materials that are in line with federally recommended messages. All of the state's local health departments are ready to print and distribute locally appropriate educational documents when necessary.</p>
<p>The State has developed processes to train and communicate with private and public sector health professionals during the early and later stages of a pandemic, on case definitions and methods for determining influenza diagnosis.</p>	<p>0: No response or documentation in the plan of any activity in this area 1: State plan mentions that it plans to develop a process or method for training and communicating during a pandemic but has done no substantial work towards this process. 2: State has a draft plan or has clearly defined mechanisms for training and information sharing with public and private providers of care, including the methods for how providers will rapidly access that training and information; Substantial work has been done with the draft but it is not complete. 3: State provides documentation of a complete plan that has been shared with the public and private sector; This may include Standard Operating Procedures (SOP's), policies, guidance documents, or similar documentation.</p>

Appendix B.3 Implement Community Mitigation Interventions (cont.)

Supporting Activity Related to Funding	Criteria
<p>The State has initiated plans for communications and education to the general public regarding recommendations for voluntary household quarantine for family members if there is a sick person at home, and how long to stay home. Provide citation that describes how these educational materials will be distributed to the public.</p>	<p>0: No response or documentation in the plan of any activity in this area 1: State plan mentions that they plan to develop educational materials for the general public but have not yet done so. 2: State has made substantial progress towards developing materials, however, the activity is still in progress; Draft materials may still be in review; 3: State provides documentation of well developed, cleared and ready to print/distribute educational materials that are in line with federally recommended messages. All of the state's local health departments are ready to print and distribute locally appropriate educational documents when necessary.</p>
<p>The state has worked with local health departments to create plans for follow-up (monitoring) of known or suspected households under voluntary quarantine in the community at the state/local level.</p>	<p>0: No response or documentation in the plan of any activity in this area 1: State plan mentions that they plan to work with local health departments to develop a follow-up monitoring plan, but have not yet done so. 2: State has made substantial progress in working with health departments in creating plans for follow-up monitoring, however, the activity is still in progress; Plans are still in draft or only some but not all counties/jurisdictions have an agreed upon plan. 3: State provides documentation of well developed, cleared and ready to use follow-up monitoring plans; All counties/jurisdictions in the state have developed plans and are ready to implement them when necessary.</p>
<p>The State has developed specific recommendations for community social distancing. Include the levels of social distancing that will be recommended based on the Pandemic Severity Index.</p>	<p>0: No response or documentation in the plan of any activity in this area 1: State plan mentions that they plan to develop specific recommendations for social distancing specific for their state, but have not yet done so. 2: State has made substantial progress in working with health departments in developing and sharing state specific social distancing recommendations, however, the activity is still in progress; Plans are still in draft, only certain parts of the social distancing recommendations are covered or only certain areas of the state are currently involved. 3: State provides documentation of well developed, cleared, complete and ready to implement social distancing recommendations. All counties/jurisdictions in the state have plans and are ready to implement them appropriately when necessary. These plans cover different pandemic severity scenarios and cover all of the basic components of community mitigation (e.g., isolation, quarantine, school dismissal, child care program closure, community distancing measures and PPE).</p>

Appendix B.5 Acquire & Distribute Medical Countermeasures

Supporting Activity Related to Funding	Criteria
A central warehouse [Receipt/Store/Stage (RSS) facility location has been selected for the receipt of antiviral drugs, personal protection equipment (N95 masks, etc.) and other ancillary medical supplies from SNS. (For recommended RSS specifications please refer to the Strategic National Stockpile's State Storage Requirements for Pandemic Influenza Antiviral Drug Response).	0: The project area has not identified a location. 1: The project area has identified at least one location 2: The project area has identified at least a primary and a backup location. 3: The project area has identified at least a primary and a backup location and has a contract or memoranda of agreement/understanding (MOA/MOU) for non-government-owned facilities, or other appropriate documentation in place for government-owned facilities to guarantee the availability of the location(s).
Plan for a primary and back-up inventory management system (IMS) is in place	0: The State does not have functional inventory management systems in place. 1: The State has one functional inventory management system in place. 2: The State has more than one functional inventory management system in place. 3: The State has more than one functional inventory management system in place and has identified personnel who are knowledgeable on the systems operations.
An allocation methodology and plan is in place.	0: The State has neither an allocation methodology nor a written distribution plan in place. 1: The State has an allocation methodology but does not have a written distribution plan. 2: The State has a distribution plan but does not have an allocation methodology documented. 3: The State has both an allocation methodology and has a distribution plan documented and in place.
A distribution plan is in place that includes: ** <ul style="list-style-type: none"> • Delivery locations and routes • Load planning • Communication plan with RSS/drivers/recipient locations • Delivery schedule/frequency 	0: The State does not have a distribution strategy in place 1: The State plan includes a general strategy for distributing materiel. 2: The State has at least 50% of the bulleted items listed in the supporting activity included in the plan for distributing materiel. 3: The State plan includes all the bulleted items listed in the supporting activity in the plan for distributing materiel. **Points of clarification for this supporting activity: Any method of transporting allocated materiel from the state receiving location to the recipient locations should be indicated in planning documentation. Scheduling, frequency, load planning, and routing planning is meant to allow flexibility in this allocation of materiel. These planning points may be as simple as one load delivery per location or it may be more complex to cover multiple deliveries over a period of time per location.
Security plans are in place for RSS. The plan should include but not be limited to: <ul style="list-style-type: none"> • Written site security and vulnerability assessment • Plans for interior and exterior security • Number of officers and designated posts • Need for physical barriers, lighting, etc... • Plans for access control • Plans for security communications • Plans for security breaches 	0 - No written security plans are in place for the RSS 1 - Less than 50% of the items listed have been addressed 2 - More than 50%, but less than 100% of the items listed have been addressed 3 - All of the items listed have been addressed locations
Plans are in place to administer antiviral drugs for treatment to priority groups when treatment of illness is indicated.	0: No written plan is in place 1: A written plan with a general concepts are in place 2: N/A 3: A detailed written plan exists with the approval of necessary parties

Appendix B.6 Ensure Mass Vaccination Capability During Each Phase of a Pandemic

Supporting Activity Related to Funding	Criteria
Is there a plan to ensure timely reporting of adverse events?	0: State does not provide in writing a statewide coordinated plan for a VAERS network 1: State provides in writing a plan for a statewide coordinated VAERS network 2: State provides documentation that a statewide coordinated VAERS network is in place 3: State provides documentation that a statewide coordinated VAERS network is in place and has been tested
Does the plan include designated recipient's ship-to sites for pre-pandemic and pandemic vaccine? Is there a plan for the following: Personnel and backups identified for receipt of vaccines, Detailed written Operating Procedures (SOPS) in place, Temperature Monitoring (audible/manual or both) management system in place, Inventory Accountability?	0: no plan provided to designate State ship-to-site(s) and/or to develop Standard Operating Procedures (SOP) 1: Plan provided to designate ship-to-site(s) and to develop SOPs that include at least 1 of the 3 listed components (Personnel/backups, Temperature Monitoring system or Inventory Accountability) 2: Plan states ship-to-site(s) designated and develops a detailed SOP that includes at least 2 of the 3 listed components 3: Plan states ship-to-site(s) designated and develops a detailed SOP that includes all 3 listed components and demonstrates that at least one component has been instituted
Does the plan determine how vaccine will be transported to vaccinating sites? <i>(Guidance Note: Immunization and stockpile programs need to examine where differences and similarities exist in both the timing and methods of vaccine and antiviral distribution and determine if efficiencies can be gained through consolidation or cooperation between programs.)</i>	0: no written plan/strategy for transport of vaccine from ship-to-sites->to local site->to vaccine administration sites provided 1: written general strategies for ship-to-sites-> to local site->to vaccine administration sites vaccine transport exist 2: written specific strategies detailing each component for ship-to-sites-> to local site->to vaccine administration sites vaccine transport exist, but MOUs or other type of formal agreement, if appropriate, with private/public transport agencies ARE NOT in place 3: written specific strategies detailing each component for ship-to-sites-> to local site->to vaccine administration sites vaccine transport exist and MOUs or other type of formal agreement, if appropriate, with private/public transport agencies ARE in place
Does the plan include a vaccine security plan that includes State-level Security coordinator identified, State security support agencies identified, vulnerability assessment, badging/credentialing system in place?	0: no written plan/strategy for State-level vaccine security (ship-to-sites, vaccine transport, etc) provided; 1: written general strategies for State-level vaccine security exist 2: written specific strategies for State-level vaccine security exist 3: written specific State-level strategies and MOUs or other type of formal agreement, if appropriate, with private security or public agencies (police/military) are in place and documentation of the security agencies' readiness/capability to respond exists
Does the plan include how data will be collected at the administration sites?	0: State does not provide in writing a plan on how doses administered data will be collected at and reported from vaccine administration sites 1: State provides a written plan on how doses administered data will be collected at and reported from vaccine administration sites 2: State provides a written plan and documents participation of vaccine administration sites in doses administered data collection pilot/exercise 3: State provides written plan and document sites participation in pilot/exercise, and all pilot/exercise sites report and meet timeliness criteria

Appendix B.9 Ensure Communication Capability During Each Phase of a Pandemic

Supporting Activity Related to Funding	Criteria
Does the plan ensure a process to ensure that communication networks (equipment/hardware) between Command and Control locations and support agencies will be tested and exercised at least quarterly?	0: The State plan does not address communication networks or a testing and exercising procedure 1: The State provides documentation that reflects communication networks are in place 2: The State plan includes a procedure for ensuring that communication networks are in place and have been tested within the preceding 12 months 3: The State provides supporting documentation that reflects communication networks are tested and exercised quarterly and has a corrective action plan to address identified discrepancies
Does the plan ensure access to information systems that have been or are being evaluated for PHIN compliance? *All States are expected to have or to be working towards information technology systems whose implementation meets the PHIN requirements, as per Pandemic Influenza Guidance Supplement to the 2006 Public Health Emergency Preparedness Cooperative Agreement Phase II.	0: No information system 1: Information system is not PHIN compliant 2: Information systems are being evaluated for PHIN compliance 3: Information systems are PHIN compliant
Does the plan include a process for communicating preparedness messages for the public?	0: No plan 1: Plan exists 2: Plan exists and staff identified 3: Plan exists and has been exercised; staff identified
Does the plan include a crisis communication and emergency risk plan (for public information and media, partner, and stakeholder relations) that addresses all phases of an influenza pandemic?	0: No plan 1: Plan exists and has been signed off on by approving authority 2: Plan exists, has been exercised, and has been signed off on by approving authority; 3: Plan exists, has been exercised, has been signed off on by approving authority, and staff has been trained
Does the plan ensure that rapidly-needed public health recommendations and information can be provided to the public, partners and stakeholders during a pandemic, specifically including: <ul style="list-style-type: none"> • Critical communion links to other intra-dept response officials • Identification of vehicles of information dissemination to public, stakeholders, partners (e.g., e-mail, fax, Health Alert Network messages, brochures, PSA's, press releases • A contact list of additional persons outside the State health department who can be available as subject matter experts on pandemic health issues if needed • Support materials for public health issues that are unique to an influenza pandemic such as issues of isolation, quarantine, social distancing, and public health law have been prepared • Use of hotlines and other community resources to respond to local questions from the public and professional groups 	0: No plan exists 1: Plan exists and supporting materials unique to pandemic influenza are available 2: Plan exists, supporting materials unique to pandemic influenza are available, and vehicles of information dissemination have been identified 3: Plan exists, supporting materials unique to pandemic influenza are available, vehicles of information dissemination have been identified, and one additional bullet requirement is addressed