

DATA REPORTING INSTRUCTIONS

The RAND Corporation has been working with the U.S. Department of Health and Human Services, Office of the Assistant Secretary for Preparedness and Response (HHS/ASPR) on a variety of projects dealing with public health emergency preparedness. As part of an effort to revise the system that the Centers for Disease Control and Prevention, Division of Strategic National Stockpile (CDC/DSNS) uses to measure state and local health department SNS readiness, RAND developed a set of drill-based metrics to test operational readiness.

This first set of drills focus on the following capabilities: call down, site activation, facility set up, pick-list generation, and dispensing. By design these drills were intended to be the least resource intensive as possible, small in scale, focused on testing fairly narrow and specific processes, and modular. The modular design allows the drills to be accomplished either alone or as a building block component in larger, more complex, and more resource intensive exercises. This allows the drills to be used to test important operational capabilities that are cross-cutting without imposing heavy burdens on state and local health departments.

Pilot testing of the RAND-developed drills are in the final phase and any anticipated changes to the worksheets based on those drills are expected to be minor. A working paper containing the manuals and data collection worksheets for those drills is enclosed. Additionally, we have enclosed the data collection worksheets in Microsoft Excel format for use in submitting drill results to DSNS.

Results from the cross-walk of the state and local technical assistance review (TAR) tools and the RAND-developed drills are enclosed. This crosswalk identifies those specific line items (elements) of the TAR tools in which credit may be given for conducting these RAND-developed drills.

The following documents are enclosed:

1. SNS-Related Public Health Emergency Preparedness Drills Fact Sheet (A brief description of each of the drills)
2. Cross-walk between the RAND drills and the State and Local Technical Assistance Review (TAR) tools
3. RAND Working Paper: Operational Assessments for SNS Readiness
4. Microsoft Excel data collection worksheets for each drill.

The capabilities covered by the 5 drills are call down, site activation, facility set up, pick-list generation, and dispensing. Each of the 5 drills comes with a manual and data collection worksheets. The data collection worksheets each have an instruction page while the manual provides an introduction and detailed guidance for each of the drills.

The data collection worksheet files are in Microsoft Excel format. These worksheets are intended to collect data and calculate performance metrics. Within the worksheet, the cells highlighted in yellow are intended for the user to put in the numbers, descriptive information, or other data to be captured during the drill. The cells highlighted in blue have preset formulas that will automatically calculate the performance metrics based on the entries in the yellow-highlighted cells.

Conducting these drills is directly related to the performance measures in the PHEP cooperative agreement for this performance year. Within each CRI MSA, there are two requirements:

1. Each planning jurisdiction should conduct at least 3 of these 5 drills during the performance year and submit the results no later than August 10, 2009.
2. For purposes of guiding funding decisions for 2009, each of the planning jurisdictions identified as the 25% most populous within each of the CRI MSAs should conduct at least one of the drills and submit the results no later than December 31, 2008 (with the remaining 2 drills conducted and submitted no later than August 10, 2009).

Each planning jurisdiction should complete the data collection worksheet for each of the drills chosen to conduct.

Planning jurisdictions may be defined as:

- a. Individual jurisdictions (such as a city or county health department)
- b. Cities/Counties grouped together (such as health districts in which multiple CRI MSA counties /cities using a singular plan or planning mechanism)

For example:

CRI MSA Anywhere USA has 7 counties all within the same state. Each of the 7 counties has its own health department and is recognized as individual health departments by the state. Each of these 7 counties should conduct 3 drills giving a total of 21 drills for the CRI MSA.

Elsewhere USA is a state with 12 health districts. Each of these health districts are composed of 2-5 counties and are covered by a singular plan. Three counties listed as belonging to CRI MSA Overthere are part of one of these health districts. In this situation only 3 drills need to be completed by CRI MSA Overthere (rather than 9 drills which would be 3 drills from each of the 3 counties).

The completed data collection worksheets should be forwarded to the Program Preparedness Branch general email address: **sns_ppb@cdc.gov**.

Please ensure the name of the jurisdiction is clearly indicated either in the file name or within the data collection worksheet.