

## Goals, Objectives, Activities for Year 1

### **Goals and Objectives of the program**

The program goal for this five-year project period is to develop and sustain an integrated public health and healthcare system including EMS to support ESF-8 Public Health and Medical Services response within a service area to prevent, prepare for, respond to, and recover from incidents that impact the health of the public including those with special needs. This goal will be met through the following:

1. Develop a system of traditional and non-traditional partners to build and sustain public health and healthcare capacities that support day-to-day operations and response efforts associated with ESF 8 and the health components of other ESFs.
2. Identify and collaboratively review discipline specific (public health, hospital, EMS) needs/risk assessments within the service area to identify and address risks affecting the system.
3. Identify public health and healthcare system resources/services and collaborate to ensure optimal utilization and acquisition of those resources/services to address needs affecting the system.
4. Develop and coordinate planning efforts of the service area partners to increase efficiency and effectiveness implementing day-to-day and emergency response efforts.
5. Evaluate and conduct training needed to implement system development activities eliminating redundancy in training efforts and sustaining existing training competencies.
6. Identify and coordinate exercise needs to effectively achieve program and entity exercise requirements.
7. Engage in quality and performance improvement activities to improve efficiency of the public health and healthcare system through data driven review of provided care, after action report reviews, development of improvement plans, and measuring progress of improvement implementation.

### **2.02 Description of Work and Services**

During the 5 year project period, the works and services of the service areas will occur under the requirements and guiding principles of the following:

- The Hospital Preparedness Program (HPP) and Public Health Emergency Preparedness (PHEP) Cooperative Agreements including the CRI/MSA program and the Preparedness Advisory Committee;
- Emergency Medical Services (EMS) system standards, NHTSA State of Iowa Reassessment of EMS (2015), national EMS system standards identified in the COMPASS initiative, State of Iowa regulatory requirements, and Emergency Medical Services Advisory Council;
- Trauma system performance improvement guidance, national practices identified by the American College of Surgeons (ACS)-Committee on Trauma, ACS Trauma System Consultation Report (2015), State of Iowa regulatory requirements, and Trauma System Advisory Council.

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### **RFP Scope of Work Requirements for Year 1:**

The following are work plan goals, objectives, and activities for year 1 of the RFP. All applicants must address, at a minimum, Goal 1 and 2 objectives and activities as defined by HPP & PHEP federal cooperative agreement. These requirements will be met during year 1. The applicant may identify and define additional activities in the application associated with goal 1 and 2 objectives. If an applicant wishes to include an additional goal, the applicant is responsible to identify the goal and submit associated objectives and activities within the application. Any additional goals, objectives, or activities submitted through the application will become contractual requirements for the applicant. Note: The goals, objectives and activities are presented in a format to support copying the required goals, objectives and activities to the lowagrants.gov application for this RFP. The objectives below are numbered to coincide with the application budget in lowagrants.gov.

**Goal 1 (Required):** Enhance public health and healthcare capabilities inclusive of EMS through service area system development to support ESF-8 Public Health and Medical Services preparedness and response.

- **Objective 1 (Required):** The service area will identify or hire a service area grant coordinator to manage service area activities identified within the RFP application and as defined further by service area members. See section 2.03 Staffing and Personnel Requirements for additional detail.
  - **Activity 1 (Required):** By December 30, 2017, identify or hire an FTE to coordinate activities and report to IDPH the individual(s) hired and staff contact information for official communication from IDPH. Communicate with IDPH by September 30, 2017, if significant challenges exist or are anticipated in ensuring an FTE is in place by December 30, 2017.
- **Objective 2 (Required):** Define and document the service area's organizational structure to ensure partners understand how the system will function, roles and responsibilities of entities within the service area, and how to propose/address system issues to be reviewed by service area membership.
  - **Activity 2 (Required):** By September 1, 2017, identify and engage traditional and non-traditional partners in the service area to develop and enhance the public health and healthcare system inclusive of EMS to effectively and efficiently manage public health/healthcare emergencies. By September 1, 2017, provide IDPH with a list of service area member organizations and leadership.
  - **Activity 3 (Required):** By September 30, 2017, establish and document service area fiscal processes, including approval of those processes by the service area membership organizations. Submit service area fiscal process documentation to IDPH by September 30, 2017.

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- **Activity 4 (Required):** By December 31, 2017, submit an administrative organizational model for demonstrating the service area's process for engaging in system development as an organized group to IDPH prior to full service area execution. The administrative organizational model shall explain the following:
  - Define and document the service area organization structure to ensure members understand how the service area will function,
  - Establish processes for communication with service area members and partners,
  - Identify roles and responsibilities of member organization, including a leadership structure, within the service area and identify how to propose/address service area issues.
  
- **Activity 5 (Required):** By June 30, 2018, initiate coordination with County Emergency Management Agency (EMA) to develop a healthcare coalition response plan based on the following ASPR HPP requirements<sup>1</sup>:
  - Individual HCC member organization and HCC contact information;
  - Locations that may be used for multiagency coordination;
  - Brief summary of each individual member's resources and responsibilities;
  - Integration with appropriate ESF-8 lead agencies;
  - Emergency activation thresholds and processes;
  - Alert and notification procedures;
  - Essential Elements of Information (EIs) agreed to be shared, including information format (e.g., bed reporting, resource requests and allocation, patient distribution and tracking procedures, processes for keeping track of unidentified [John Doe/Jane Doe] patients);
  - Communication and information technology (IT) platforms and redundancies for information sharing;
  - Support and mutual aid agreements;
  - Evacuation and relocation processes;
  - Policies and processes for the allocation of scarce resources and crisis standards of care, including steps to prevent crisis standards of care without compromising quality of care (e.g., conserve supplies, substitute for available resources, adapt practices, etc.);
  - Additional HCC roles and responsibilities as determined by state and/or local plans and agreements (e.g., staff sharing, alternate care site support, shelter support).

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1 Reference 2017-2022 Healthcare Preparedness and Response Capabilities/ASPR (Attachment #)

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- **Objective 3 (Required):** Establish process and procedures to ensure completion of contractual requirements.
  - **Activity 6 (Required):** Quarterly, complete and submit to IDPH the service area's work plan detailing progress made on completing the service areas goals, objectives, and activities for year 1 of the RFP. Template to be provided by IDPH.
  - **Activity 7 (Required):** By January 30, 2018, complete and submit a collaboratively developed baseline report of EMS system standards throughout the service area. Template to be provided by IDPH for completion.
  - **Activity 8 (Required):** By June 30, 2018, complete and submit the HPP and PHEP performance measures and other federal reporting requirements, such as Healthcare Coalition Development Assessment (HCCDA), demonstrating the baseline capabilities of the service area. Templates to be provided by IDPH for completion.
  - **Activity 9 (Required):** Maintain and retain evidence of National Incident Management System (NIMS) compliancy for HPP and PHEP funded member organizations of the service area as defined by IDPH. Templates to be provided by IDPH.
  - **Activity 10 (Required):** Service area member agencies will engage in regular testing of information technology and communication systems. At a minimum this will include:
    - Submission of quarterly bed capacity information,
    - Demonstration of capability to receive and respond to Health Alert Network alerts on a quarterly basis,
    - Demonstration of capability to respond to monthly communication tests (radio or other communication mechanisms), and
    - Ability to quarterly acquire and utilize emPOWER data.
  - **Activity 11 (Required Only for Service Areas with CRI/MSA Counties as identified in 1.05):** Each federally designated CRI/MSA county is responsible to:
    - Attend CRI/MSA meetings,
    - Submit documentation supporting compliance with point of dispensing standards,
    - Complete Medical Countermeasure Operational Readiness Review (MCMORR) tool or report on MCMORR action plans quarterly per CDC guidance,
    - Annually review and assess mass dispensing plans, and
    - Complete and document exercise and drill requirements as indicated by CDC and IDPH's guidance and timelines. Templates to be provided by IDPH.

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**Goal 2 (Required):** Identify risks in the public health/healthcare system and implement preparedness efforts to address those risks.

- **Objective 4 (Required):** Evaluate system risks to identify improvements to be implemented to decrease morbidity and mortality within the public health/healthcare system.
  - **Activity 12 (Required):** By October 30, 2017, coordinate with service area partners to review discipline/entity specific vulnerability risk assessments to identify gaps in preparedness activities and submit hazard rankings from combined Risk Assessment to IDPH.
  - **Activity 13 (Required):** By June 30, 2018, utilize emPOWER data, community health needs assessments, and other available data sources to assist service area partners in identifying special at-risk populations and develop strategies to fill gaps related to special at-risk populations.
- **Objective 5 (Required):** Assess and document public health and healthcare resources and services available within the system's service area to respond to day-to-day and large scale emergency.
  - **Activity 14 (Required):** By April 28, 2018, assess and document resources and services available within the service area. The service area membership will document processes for requesting existing resources/services during an incident, identify mechanisms to acquire new service area resources/services during an incident, and a process to return resources/services to pre-incident status as applicable after an incident. Service area partners will be educated on process for resource management. Report service area resources within the service area's EMResource page (provided by IDPH). By April 28, 2018, provide attendance roster for service area resource management training to IDPH.
- **Objective 6 (Required):** Establish and implement a service area training plan to advance system development and enhancement of ESF-8 capabilities.
  - **Activity 15 (Required):** By September 1, 2017 identify and submit to IDPH a service area training plan (IDPH will provide template) that will include:
    - A listing of anticipated public health, healthcare, emergency medical services and other associated health related preparedness and response trainings within the service area during year 1.
    - Strategies to coordinate education and training opportunities to reduce duplication of efforts and leverage local and service area funding.
  - **Activity 16 (Required):** By June 30, 2018 submit training report to IDPH to document completed training, partners that participated in training, funding stream that supported the training, and number of individuals trained. Template to be provided by IDPH.

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- **Objective 7 (Required):** Implement service area improvement processes that are identified as needs resulting from review of aggregate patient data and service area exercises.
  - **Activity 17 (Required):** By September 1, 2017, coordinate with service area partners to identify exercise requirements and priorities identified from previous exercises to be met through comprehensive service area exercises and submit a 5-year service area exercise plan. Template to be provided by IDPH.
  - **Activity 18 (Required):** Complete, at a minimum, a functional exercise engaging service area membership. Within 60 days post exercise, not later than June 30, 2018, submit an after action report improvement plan (template provided by IDPH) to IDPH. IDPH will provide exercise requirements following release of HPP&PHEP cooperative agreement.

**Goal 3 (optional)** System service areas may identify additional work plan goals, objectives, and activities in support of the RFP.

- **Objective 8-15 (Optional):** Applicants must provide SMART objectives (SMART=specific, measurable, achievable, relevant/realistic, and time-oriented) detailing how the identified goal will be met by the service area.

#### **RFP Scope of Work Requirements for Years 2-5:**

Works and services for funding applications in years 2-5 will focus on the sustainment and further maturity of work completed in year 1. Additional work in years 2-5 will continue to support priorities identified in the work plan goals and objectives and the guiding principles identified in 2.01 and this section of the RFP.