KANSAS DEPARTMENT OF HEALTH AND ENVIRONMENT NOTICE OF GRANT AWARD AMOUNT & SUMMARY OF PROGRAM OBJECTIVES

PROGRAM NAME:	Public Health Emergency Preparedness (#03)
LOCAL AGENCY NAME:	Sedgwick County Health Department
PROGRAM PERIOD:	July 1, 2024 - June 30, 2025
AMOUNT THIS PERIOD:	\$ 305,397

This document is incorporated by reference into Contract Attachment No. 3. Acceptance of the first payment constitutes Local Agency's agreement to the amount of the grant, the program objectives set out below, and the terms of Contract Attachment No. 3. In addition to the general program provisions and objectives set forth in Contract Attachment No. 3, Local Agency agrees to the following Fiscal Year/Local Agency-specific requirements:

1. Perform all tasks required in the Universal Work Plan for All Counties Progress Report. The Progress Report is to be submitted in the Kansas Grant Management System (KGMS).

Progress Report items are subject to change as new or clarifying information is received by KDHE from CDC.

2. The total grant amount for the duration of this program period shall not exceed \$ 305,397.



2024 - 2025 Public Health Emergency Preparedness Local Health Department Work Plan



	202	24-2025 Universal Work F	Plan for All Counties
	Quarter 1 July 1, 2024 – Septen Quarter 2 October 1, 2024 – De Quarter 3 January 1, 2025 – Ma Quarter 4 April 1, 2025 – June 3	cember 31, 2024 rch 31, 2025	Quarterly Reporting due in KGMS October 15, 2024 Quarterly Reporting due in KGMS January 15, 2025 Quarterly Reporting due in KGMS April 15, 2025 Quarterly Reporting due in KGMS July 15, 2025
		Description of T	asks
1	scheduled Healthcare Coalition (HCC) the LHD Administrator, and the Design (RRC) prior to any meeting(s) that will b recommended that letters be sent in at Refer to the Guidance Document for m	meetings for their region. E ee/Proxy letter is received be missed. Letters received the beginning of the grant ore information related to E egions in Kansas and obta	and, in-person, via conference call or webinar, the local quarterly Designees/Proxies are permitted, provided they are designated by by KDHE and the HCC Readiness and Response Coordinator d after a missed meeting will not be made retroactive. It is year to cover the entire year. Designee/Proxy Letters. Refer to <u>kdhe.ks.gov/761/Hospital-</u> ain the contact information of the HCC RRC.
2	meetings in person, via conference call	, or webinar. Note that a D <u>Department-Resources</u> to i information of the PHEP I	ate in the quarterly local regional public health preparedness esignee/Proxy Letter does not apply to this activity. view a map of the Public Health Emergency Preparedness Regional Coordinator of the region.





	The LHD, at its discretion, may send staff to preparedness conferences, preparedness meetings, trainings, or exercises to increase knowledge, skills, and abilities to develop and maintain plans, conduct trainings and exercises, and respond to public health threats and emergencies using a whole-community approach to preparedness management. (Examples include but are not limited to: National Preparedness Summit, Four Corners Emergency Management, Kansas Public Health Association, Governor's Public Health Conference.)
3	Out-of-state conferences and training events must be pre-approved by the KDHE Preparedness Program. See the Guidance Document for instructions on pre-approval and budget requirements. If billing for any portion of the attendance (to include salary) of a KDHE approved In-State or Out-Of-State event on the Financial Status Report (FSR) the event must be reported on the appropriate quarterly progress report. For Out-Of-State events, each attendee must upload in KGMS a summary report of the learned knowledge/skill and must include the course/event name, attendee first and last name and date(s) attended.
	The summary report is to be uploaded to the appropriate quarterly Progress Report Upload Tab in KGMS. A template for the summary can be located at <u>kdhe.ks.gov/759/Compliance-Document-Resources</u> and on the KGMS Public Health Emergency Preparedness (PHEP) Program home screen.
	Due within the quarter attended.
	LHD will have a staff member attend at least three (3) webinars developed by the KDHE Preparedness Program for the SFY2025 PHEP grant.
4	 Attendance is required for the July 2024 Work Plan Guidance session. The LHD can choose the other two (2) webinars from the approved SFY2025 KDHE Preparedness Webinar listing (found on KS-TRAIN) to complete this activity.
	Due within the quarter attended.
5	A LHD representative will participate in a local ESF 8 or LEPC planning meeting at least once per budget period to work with health and medical partners to strengthen community preparedness and response activities. The local ESF-8 or LEPC acts as an advisory committee of governmental and non-governmental partners to the local health department to integrate preparedness efforts across jurisdictions and to leverage funding streams.
	Due within the quarter attended.
All C	ounty Work Plan 2024 - 2025 PHEP Grant, NU90TP922049, funded CDC March 14, 2024





6	 The LHD Administrator/Director or their representative will maintain their contact information in the Kansas Health Alert Network (KS-HAN) to ensure the ability of the LHD in receiving situational awareness information. Contact information should be checked no less than annually by the user. Users are expected to update their own user profiles. The KDHE Preparedness Program will send LHD Administrator/Director a KS-HAN registrant list, annually. The LHD Administrator/Director will provide a list of changes (add and/or remove registrants) to the KS-HAN Administrator within the quarter the report is received.
7	LHD staff registered on KS-HAN will respond to one (1) KS-HAN drill per quarter to ensure and demonstrate the ability to receive and respond to situational awareness updates and common operating picture information, and to ensure that communications equipment is appropriately receiving health alerts and situational information. Drill response due Quarterly.
8	LHD Administrator/Director or their representative will ensure 24/7 epidemiological contact information is kept current and sent to the KDHE Bureau of Epidemiology and Public Health Informatics through KDHE's Contact Management Community System (KCOMS) (available at <u>kansasct.force.com/cms/s/</u>) quarterly. This supports the public health system by having access to personnel trained to manage and monitor routine jurisdictional surveillance and epidemiological investigation systems and support surge requirements in response to threats.
9	LHD Administrator/Director or their representative will work to ensure that priority communication services are available in an emergency. This should include maintaining an always-on high-speed internet connection, email services, and a telephone and/or cell phone that is available to the LHD preparedness personnel. Due September 30, 2024





10	 The LHD will use community preparedness to build partnerships and address risks within their community. LHDs will aim to engage community partners who might otherwise not be involved with preparedness efforts. LHD will participate in the National Preparedness Month campaign in September 2024 by posting: At least two (2) different posts on one (1) social media platform and/or website each week during the month of September 2024. Each social media post must highlight and focus specifically on National Preparedness Month. Use the hashtag #KSPrepared to signify participation and avoid having to remit supporting documentation. 	
11	LHD will maintain a website where information can be posted and accessed by members of the public to promote awareness of LHD preparedness activities and actions the public can take to improve personal preparedness. The LHD will also make regular use of social media channels (for example, Facebook, Twitter and/or Instagram). Social Media platforms reward consistent posting. This means your posts will be seen by more people if you are posting regularly. Posting on social media regularly also helps the public see you as a consistent source of information. Doing this during non-emergency times makes it more likely that they will look to you when there is an emergency. Due December 31, 2024	
12	New LHD administrator/director, (for those employed six (6) months or less, new to the administrator/director position, or have not previously completed as a New Administrator/Director in BP5) will take the <i>Preparedness - New LHD Administrator Training, Modules 1 through 5,</i> on KS-TRAIN for administration of the PHEP grant. KS-TRAIN Training Plan # 4137. Due December 31, 2024	





13	 LHD administrators/directors or their representative will ensure all PHEP funded staff* complete the following online training: FEMA IS-100: An Introduction to the Incident Command System (ICS) FEMA IS-120: An Introduction to Exercises FEMA IS-200: Basic ICS FEMA IS-700: An Introduction to the National Incident Management System (NIMS) The LHD Administrator/ Director may designate additional staff, who is not PHEP funded, to take the identified FEMA IS courses for situational awareness and, building of knowledge and skills directly related to preparedness to strengthen the health department's ability to respond to emergency incidents. *PHEP funded staff is a LHD staff member whose salary is fully funded or partially subsidized with funding from the PHEP Grant Award. Note: IS training is only required once. 	
14	 IMATS The LHD will ensure that a minimum of two (2) health department staff or volunteers are registered and active users of the Inventory Management Tracking System (IMATS) and: All new users have completed the appropriate training according to their designated role in IMATS. All users must login to IMATS a minimum of once every six (6) months to keep their account active and update their own user profiles. KDHE Preparedness Program will send LHD Administrators/Directors the list of IMATS registrants twice annually. LHD will provide a list of changes (add/remove registrants) back to the KDHE Preparedness Program IMATA Administrator within the quarter received. LHD will update Point of Dispensing (POD) location(s) and any other relevant POD information in IMATS, at least annually. If no updates are warranted, attest in KGMS verifying POD info is up-to-date and no updates are required this budget period. 	

PHEP Grant, NU90TP922049, funded CDC





15	Using KS-TRAIN, LHD will ensure appropriate staff members take or renew certification every two (2) years for:
	• Packing and Shipping Dangerous Goods: What the Laboratory Staff Must Know (1092665) .
15	KDHE will verify completion of the training in KS-TRAIN.
	Due June 30, 2025
16	LHD will ensure annual fit testing for PPE (or PAPR annual training) for LHD staff is completed in compliance with the revised OSHA respiratory protection standard, 29 CFR 1910.134, adopted April 8, 1998.
	Due June 30, 2025
17	 LHD can purchase equipment and supplies to maintain PHEP readiness based on their county plans, risk assessments and AAR/IPs. These items must be included in the KDHE approved PHEP KGMS budget. LHD Administrator or designee will: Use CRMCS for deployable/non-consumable items (items purchased with PHEP funds that cost \$5,000 or more are required to be in CRMCS). Track other items in any inventory tracking system(s). Complete a review of the actual inventory, removing expired items and adding new items to CRMCS or another inventory tracking system. Note the responsible person for the cache and how the expired items were disposed.
	Due June 30, 2025
	LHD will review and update the following plan and submit the completed plan to the KDHE Preparedness Program:
18	Create an inventory and needs assessment of current plans using KDHE template.
	Due December 31, 2024



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Participate in an annual exercise during Budget Period 1 (2024-2025) at the local Region Level as defined below:

Discussion Based Exercise (Seminar, Workshop, or Tabletop)

- At a minimum, exercise two (2) PHEP Capabilities.
- The subject of the exercise must be a threat identified as a high probability threat in a Jurisdictional Risk Assessment (JRA) for that region or a high probability threat identified in a State of Kansas JRA. An alternative regional risk assessment tool may be used if needed.
- The exercise must test or focus on individual county plans and must happen simultaneously as a region.

Other Requirements:

- Plans/procedures for assisting at-risk/vulnerable populations specific to the jurisdiction must be documented or evidenced in all exercises. This must be included in the narrative of the AAR/IP.
- Exercise activity will be aligned with the HSEEP principles and test/validate current local plans and procedures.
- Exercise AAR/IPs must be written using the KDHE approved AAR/IP Template and only reflect PHEP capabilities, not the capabilities or requirements outlined by other agencies (i.e., CMS, NPG, etc.).
- Ensure that specific exercise role(s)/responsibilities and improvement plan tasks are outlined for your individual health department.
- Each capability tested must outline at least one (1) strength and one (1) area for improvement.

Serving in an observer role does not meet the participation requirement.

Exercise to be held by April 30, 2025. AAR/IP due within 60 days of exercise completion or no later than June 30, 2025.



2024 - 2025 Public Health Emergency Preparedness Local Health Department Work Plan



The following represent administrative preparedness requirements that can be requested at any time during the project period. Please maintain all documents on-site throughout the project period (2024 - 2029):

- Document, through job descriptions and employee time and attendance records, that all staff members paid with Preparedness funds are performing activities directly related to preparedness.
- Retain copies, or transcripts, of all certificates and/or proof of attendance for trainings completed during the entire project period for at least five (5) years.
- Have available signed shared resource agreements, Memorandum of Agreement (MOA), Memorandum of Understanding (MOU), and any maintenance contracts relating to PHEP grant funds.
- LHD Administrators/Directors will provide to the KDHE Preparedness Program information pertaining to the performance measures, benchmark requirements and/or any other requested information as related to the current Hospital Preparedness Program (HPP) and/or the Public Health Emergency Preparedness (PHEP) Cooperative Agreement.
- Retain copies of expenditure reports, including but not limited to invoices for each capital equipment purchase, for a period of at least five (5) years. Capital equipment includes purchases of \$5,000.00 and above and/or with a lifespan of greater than a year.
- LHD Administrators within a Cities Readiness Initiative (CRI) footprint will ensure work plans for the local health department are completed as well as the CRI work plan items.

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