

NATIONAL ASSOCIATION OF COUNTY AND CITY HEALTH OFFICIALS

Project Public Health Ready

2022 Overview



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NACCHO Preparedness

NACCHO's Preparedness Portfolio

Projects within NACCHO's preparedness portfolio focus on:

- Building and Sustaining Resilient Communities
- Enhancing the Use of Medical Countermeasures and Non-Pharmaceutical Interventions
- Ensuring Situational Awareness to Support Decision-Making
- Enhancing Public Health, Healthcare, and Emergency Management Systems
- Strengthening Global Health Security
- Building All-Hazards Preparedness Planning through Project Public Health Ready
- Building Resilient, Healthy, and Prepared Communities through the Medical Reserve Corps (MRC)



NACCHO's Preparedness Portfolio

- Medical Reserve Corps
- Medical Countermeasures
- Nuclear/Radiological Preparedness
- Public Health Emergency Preparedness 2.0
- Project Public Health Ready
- WASH Related Outbreaks Support
- Workforce Development
- Rural Public Health Emergency Preparedness



NACCHO's Preparedness Workgroups

- Medical Reserve Corps (MRC)
- Medical Countermeasures (MCM)
- Nuclear/Radiological Preparedness
- Preparedness Planning, Outcomes, and Measures (PPOM)
- Preparedness Policy Advisory Group (PPAG)





Top 5 Five Things to Know

1. Cooperative Agreement - NACCHO and CDC

- Established in 2002
 - First Cycle 2003
- Funded through CDC Division of State and Local Readiness
- More than 500 jurisdiction in 29 States are or have been PPHR recognized



2. Competency-based Recognition Program

- CDC Public Health Emergency Preparedness Capabilities
- Public Health Accreditation Board Standards and Measures
- Operational Readiness Review
- Homeland Security Exercise and Evaluation Program



3. Preparedness Training for LHD Staff

- Creating and implementing an all-hazards preparedness plan
- Completing a training needs assessment
- Maintaining a workforce development plan
- Demonstrating readiness through an exercise/drill or through a real event

SIX DOMAINS OF PREPAREDNESS

The **Public Health Emergency Preparedness Program** works to advance six main areas of preparedness so state and local public health systems are better prepared for emergencies that impact the public's health.

**Community Resilience:**

Preparing for and recovering from emergencies

**Incident management:**

Coordinating an effective response

**Information Management:**

Making sure people have information to take action

**Countermeasures and Mitigation:**

Getting medicines and supplies where they are needed

**Surge Management:**

Expanding medical services to handle large events

**Biosurveillance:**

Investigating and identifying health threats

www.cdc.gov/cpr/readiness



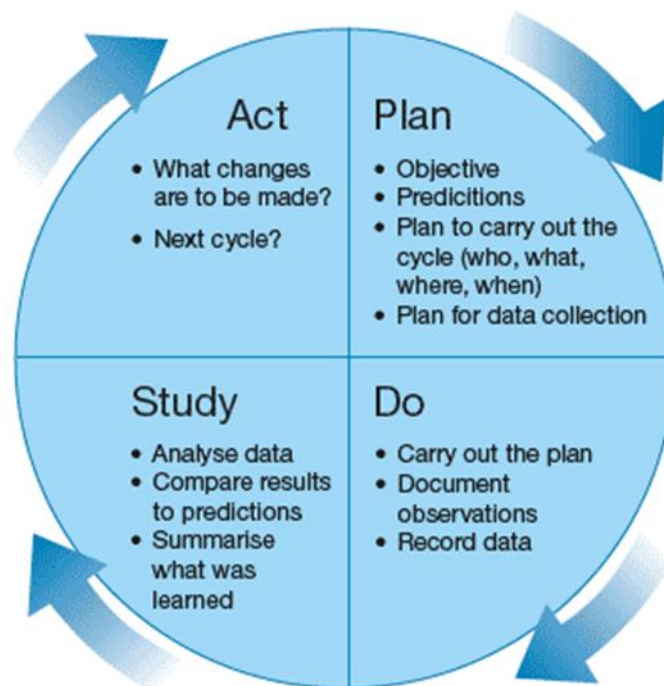
4. Builds Preparedness Capacity

- Serves as a public health preparedness framework to help agencies build out their EOP plans
- LHDs will have a functional all-hazards plan, improved preparedness capabilities, and stronger partnerships with local, state, and federal partners, all of which improves an agency's ability to respond to emergencies.



5. A Continuous Quality Improvement Model

- The process of applying for PPHR recognition prompts agencies to review of all the department's emergency preparedness and response plans, programs, and tools.
- In reviewing these documents, agencies can identify gaps, address any discrepancies, and incorporate the changes into their work.





Reciprocity

Public Health Accreditation Board and CDC's Operational Readiness Review (ORR) expansion process

Public Health Accreditation Board (PHAB)

- Local or tribal health departments that have been PPHR recognized or re-recognized within five years of submitting documentation for accreditation or reaccreditation using PHAB Version 2022 will not be assessed by PHAB site visitors on Standard 2.2 (emergency preparedness). Health departments will be required to upload evidence of PPHR recognition (e.g., notice of recognition letter).
- Local or tribal health departments that have been PHAB accredited or reaccredited within five years of submitting documentation for first-time recognition using PPHR First-time Applicant Criteria version 10.0 will be exempt from providing documentation related to Goal 1, Sub-Measure M (epidemiology) as part of PPHR documentation. Health departments will be required to attach or link evidence of PHAB accreditation (e.g., notice of accreditation letter). ***Note: This is not applicable to PPHR re-recognition criteria because Epidemiology/Surveillance is not assessed in re-recognition.**



CDC's Operational Readiness Review (ORR)

Local health departments that have successfully achieved Project Public Health Ready (PPHR) recognition (or re-recognition) status will qualify for exemption from the planning elements of the ORR process. Successful and active PPHR recognition will fulfill the local ORR planning requirements for the duration of the five-year recognition period.

[CDC-RFA-TP19-1901](#): Public Health Emergency Preparedness (PHEP) Cooperative Agreement (Page 23)



Application Types

First-Time Recognition and Re-Recognition Applications

First-Time Recognition Application

Eligibility: The governmental entity that has the primary statutory or legal responsibility for public health in a Tribe or at the local level is eligible to apply for PPHR recognition. To be eligible, such entities must operate in a manner consistent with applicable federal, Tribal, state, territorial, and local statutes.

- Local Health Departments
- Tribal Health Departments
- Regional Health Departments

- Version 10.0
- \$5,000 Application Fee
(2 installments of \$2,500)
- Intent to Apply Due: Oct 31
- Final Application Due: Aug 31
- Comprised of:
 - Executive Summary
 - Criteria Crosswalk (Criteria Elements)

Re-Recognition Application

Eligibility: Agencies who have been recognized in the last 5 years, prior to their existing recognition expiration.

- Version 5.0
- \$ 2, 500 Application Fee (2 installments of \$1,250)
- Intent to Apply: Oct 31
- Final Application Due: Aug 31
- **Comprised of:**
 - Executive Summary
 - Section A: Document Check List
 - Section B: Criteria Elements
 - Section C: Narrative Questions
 - Section D: Plan Revision Matrix

PPHR Fees

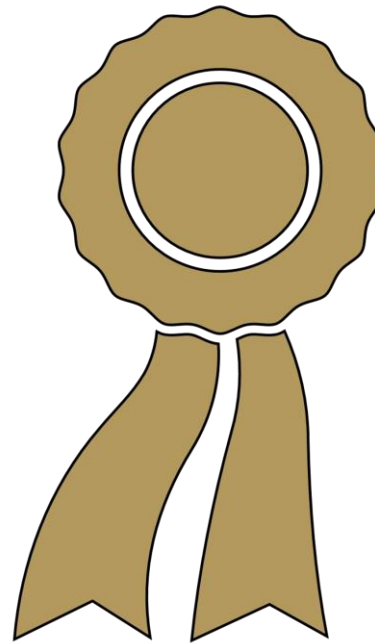
The fee supports a designated point of contact to provide technical assistance on the application process, beginning when the Intent to Apply Form is submitted and ending with the submission of an application, and the following services:

- Orientation and training for all national reviewers at the start of each review cycle;
- Travel and expenses for an in-person meeting for national reviewers to conduct application reviews;
- Associated IT costs, such as conference calls with national reviewers and software and server space used for application submission, review, and storage;
- A public recognition reception for PPHR-recognized agencies at the annual Preparedness Summit;
- Recognition materials, including plaques presented to recently PPHR-recognized agencies at the annual recognition reception;
- Annual updates that highlight unique funding opportunities, success stories, and information on the newest federal guidance and national initiatives that support PPHR re-recognition.

Maintaining Recognition Status

If your agency currently holds recognition, you are eligible to use the re-recognition criteria before your current recognition expires. For example, if your agency is PPHR recognized for the five-year period 2018-2023, you will have to start the re-recognition application process in 2022 to be recognized in 2023.

Note: Regardless of your recognition status, applicants are eligible to use the first-time application at any point of their recognition status.



PPHR Recognition Criteria

PPHR Goals and Measures

GOAL I

All-Hazards Preparedness
Planning

MEASURE I

Possession and
Maintenance of a Written
All-Hazards Response Plan

GOAL II

Workforce Capacity
Development

MEASURE 2

Conduct of Regular Training
Needs Assessments

MEASURE 3

Completion and
Maintenance of a Workforce
Development Plan and Staff
Competencies

GOAL III

Quality Improvement through
Exercises and Responses and a
Comprehensive Exercise Plan

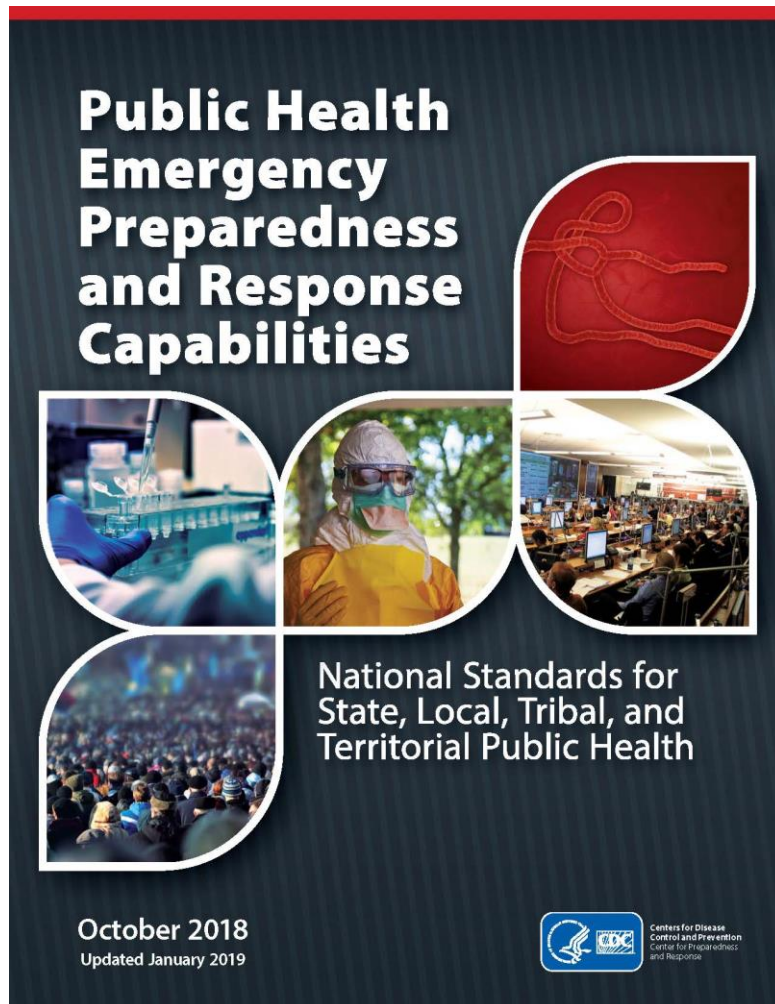
MEASURE 4

Learning and Improving
through Exercises or
Responses

MEASURE 5

Comprehensive Exercise
Plan

CDC Public Health Emergency Preparedness & Response Capabilities



1. Community Preparedness
2. Community Recovery
3. Emergency Operations Coordination
4. Emergency Public Information & Warning
5. Fatality Management
6. Information Sharing
7. Mass Care
8. Medical Countermeasures Dispensing & Adm.
9. Medical Materiel Management & Distribution
10. Medical Surge
11. Nonpharmaceutical Interventions
12. Public Health Laboratory Testing
13. Surveillance & Epidemiological Investigation
14. Responder Safety Health
15. Volunteer Management

Criteria Elements

Goals			Measures
Goal I: All-Hazards Preparedness Planning PPHR			
PPHR Measure #1: Possession and Maintenance of a Written All-Hazards Response Plan			
The agency has documented its planned response to public health emergencies. To prove it has met this measure, the agency must submit either a written copy of its all-hazards public health emergency response plan or the public health annex to its jurisdiction's emergency response plan. The plan should address the key elements of the sub-measures listed below.			
Sub-measures			Criteria Elements
A. Plan Organization	Hyperlink(s)	Comments	
a1. The table of contents correctly corresponds to the numbered pages of the plan.			
a2. The organization of the plan is consistent with the local/state emergency management agency's response plan and complies with the National Incident Management System (NIMS).			
B. Introductory Material	Hyperlink(s)	Comments	
b1. The plan provides an overview or introduction, including a description of the purpose of the plan.			
b2. The application describes how public health preparedness is approached in the jurisdiction, including a description of the planning process and planning team composition.			
b3. The application contains evidence of joint participation in disaster planning meetings and creation of an emergency operations plan (e.g., city-state-tribal collaboration or city-county collaboration).			
b4. The plan identifies all neighboring jurisdictions and, if applicable, tribal and international borders and military installations within the locality.			
b5. The plan identifies all healthcare stakeholders (coalitions, hospitals, EMS, clinics, and community health centers) within the locality.			
b6. The plan identifies the locations where copies of the plan are kept.			
b7. The plan describes how all staff are informed of the location of the plans.			
C. Plan Update Cycle	Hyperlink(s)	Comments	
c1. The plan bears a date demonstrating that the plan and its annexes have been reviewed or revised within one year of PPHR submission.			
c2. The plan describes the procedure the agency will use to update and revise its plan on a regular basis.			

Criteria Elements – Cross Cutting

Sub-Measures	
K	Emergency Public Information and Warning
L	Information Sharing
M	Epidemiology
N	Laboratory Data and Sample Testing
O	Medical Countermeasure Dispensing
P	Mass Care
Q	Mass Fatality Management
R	Environmental Health Response
S	Mental/Behavioral Health
T	Non-Pharmaceutical Interventions
U	Continuity of Operations Plan
V	Surge Capacity
W	Volunteer Management
X	Mutual Aid and External Resources
Y	Community Recovery

Criteria Elements – Cross Cutting

M. Epidemiology	Hyperlink(s)	Comments
m1. The evidence demonstrates a concept of operations for epidemiology by addressing the five items listed:		
m1i. Staff roles and responsibilities as related to ESF 8: Public Health and Medical Services .		
m1ii. Response actions that will take place.		
m1iii. When the response actions will take place.		
m1iv. Under whose authority the actions will take place.		
m1v. How response actions will be documented.		
m2. Surveillance		
m2i. The plan describes the protocol(s) for hazard-specific collection of health data for active surveillance and regular passive surveillance of the following: <ul style="list-style-type: none"> Communicable diseases (e.g., influenza and foodborne illness). Incidents involving chemical or radiological hazards. 		
m2ii. The plan describes the early incident detection system in place (i.e., the use and monitoring of regular surveillance data) for the following: <ul style="list-style-type: none"> Communicable diseases Chemical or radiological agents 		
m2iii. The application includes a list of providers and public health system partners that are surveillance sites reporting to the surveillance system.		

COVID-19 Supplemental Documentation

COVID-19 Response (required) – Executive Summary

Provide a brief narrative of the following:

- The agency's approach to the COVID-19 pandemic response
- The agency's working-relationship with the governmental partners (i.e., locals, state, federal, tribal) during the COVID-19 response
- The agency's successes and limitations during the COVID-19 response
- The agency's COVID-19 recovery plan or efforts in developing a COVID-19 recovery plan
- The agency's COVID-19 response lessons learned (e.g., workforce development, training, administrative preparedness, communications)
- Note: Re-recognition applicants can use these lessons learned for Section C. Narrative Questions

COVID-19 Supplement (Example)

First-time Application	Re-recognition Application
<p>Goal I, Measure 1, Sub-measure a2:</p> <p>The plan describes the expedited administrative processes used during a response to an event that differ from standard procedures for all of the following:</p> <ul style="list-style-type: none"> Accepting and allocating federal/state funds; Spending federal/state funds; Managing/hiring workforce; and Contracting/procuring or mutual aid.* <p>Hyperlinked guidance: Evidence for this element should describe how the applicant alters their day-to-day operations or processes for the bulleted items during an emergency response event, including the legal authority for such actions. For example, an applicant may cite and describe the process for calling an emergency meeting of any governing body needed to approve the acceptance, allotment, or spending of federal funds, as well as hiring or reassigning staff or temporary personnel and contractors. Applicants may also discuss waivers for executing contracts in a timely manner or additional personnel who may approve purchase requests in the event the regular purchasing manager is unavailable. Applicants may also cite information on purchasing cards, contracts, sole sources waivers, three bids, legal reviews, approved signatories (including facility usages), and mutual aid agreements for contracting/procuring.</p> <p>Applicants are recommended but not required to use COVID-19 response for this criterion.</p> <p>Example(s): the expediate hiring/contracting of contract tracers, handling of new federal emergency funding and/or establishing a policy for overtime or increased work hours for staff.</p>	<p>Goal I, Measure 1, Sub-measure a2:</p> <p>The plan describes the expedited administrative processes used during a response to an event that differ from standard procedures for all of the following:</p> <ul style="list-style-type: none"> Accepting and allocating federal/state funds; Spending federal/state funds; Managing/hiring workforce; and Contracting/procuring or mutual aid.* <p>Hyperlinked guidance: Evidence for this element should describe how the applicant alters their day-to-day operations or processes for the bulleted items during an emergency response event, including the legal authority for such actions. For example, an applicant may cite and describe the process for calling an emergency meeting of any governing body needed to approve the acceptance, allotment, or spending of federal funds, as well as hiring or reassigning staff or temporary personnel and contractors. Applicants may also discuss waivers for executing contracts in a timely manner or additional personnel who may approve purchase requests in the event the regular purchasing manager is unavailable. Applicants may also cite information on purchasing cards, contracts, sole sources waivers, three bids, legal reviews, approved signatories (including facility usages), and mutual aid agreements for contracting/procuring.</p> <p>Applicants are recommended but not required to use COVID-19 response for this criterion.</p> <p>Example(s): the expediate hiring/contracting of contract tracers, handling of new federal emergency funding and/or establishing a policy for overtime or increased work hours for staff.</p>
<p>Goal I, Measure 1, Sub-measure I5:</p> <p>The plan includes a template for health alert messages or the application includes at least one sample health alert message that may be shared.*</p> <p>Applicants are required to provide an actual health alert message from the COVID-19 response. A template will not be accepted to meet this measure.</p>	<p>Section C. Narrative Questions</p> <p>A total of eight (8) narrative examples are needed to fully respond to questions #1, #3, and #4. At least one (1) of those narrative examples is required to be COVID-19 related.</p>

COVID-19 Temporary Addendum

Project Public Health Ready (PPHR): 2023 Review Cycle
Temporary Addendum for Goals II and III

NOTE TO APPLICANTS: The following addendum to Goals II and III may only be applied to the 2023 Review Cycle. This addendum was created to provide temporary flexibility in meeting the associated measures and sub-measures given the challenges faced during the COVID-19 response. This addendum provides alternatives to the original measures and sub-measures; however, they are optional, and applicants may continue use the original measures and sub-measures.

COVID-19 Temporary Addendum (Example)

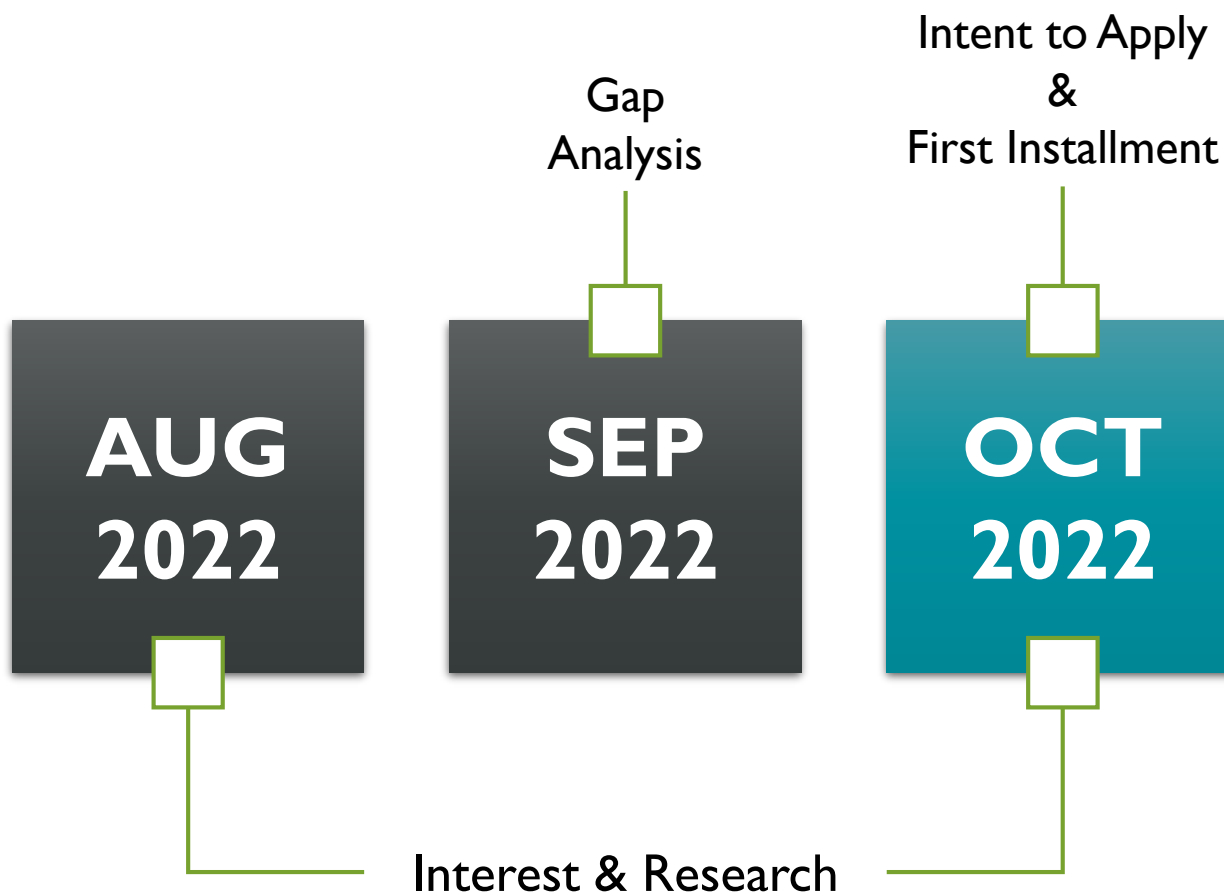
Original Measures	Alternate Measures	Notes
<p>PPHR Measure #4: Learning and Improving through Exercises or Responses</p> <p>The agency must provide documentation of its participation in at least one exercise or real incident response within the 24 months prior to the PPHR application submission date. Submit documentation of one of the following items:</p> <ul style="list-style-type: none"> Sub-measure A: Functional or full-scale exercise (the agency must scale functional exercises, including number of staff involved in the exercise, to fit the size of the department), <p>OR</p> <ul style="list-style-type: none"> Sub-measure B: An emergency incident for which the agency has activated its response plan. Appropriate events for PPHR submission are comprehensive and have a definitive start and end date or time. Long-term events such as pandemics, can be broken into meaningful sections that are time-bound, such as the first or second wave of a pandemic. All incidents used as documentation for PPHR must span more than one operational period and result in the development of an incident action plan (IAP). <p>Reminder: Based on the agency's activities, include documentation for an exercise <u>or</u> a response. Applicants do not need to submit both. Documentation (i.e., After-Action Report, Improvement Plan) must address the agency's improvements and the agency's plans.</p>	<p>PPHR Measure #4: Learning and Improving through Exercises or Responses</p> <p>The agency must provide documentation of its participation in at least one exercise or real incident response within the 60 months prior to the PPHR application submission date. Submit documentation of one of the following items:</p> <ul style="list-style-type: none"> Sub-measure A: Functional or full-scale exercise (the agency must scale functional exercises, including number of staff involved in the exercise, to fit the size of the department), <p>OR</p> <ul style="list-style-type: none"> Sub-measure B: An emergency incident for which the agency has activated its response plan. Appropriate events for PPHR submission are comprehensive and have a definitive start and end date or time. Long-term events such as pandemics, can be broken into meaningful sections that are time-bound, such as the first or second wave of a pandemic. All incidents used as documentation for PPHR must span more than one operational period and result in the development of an incident action plan (IAP). <p>Reminder: Based on the agency's activities, include documentation for an exercise <u>or</u> a response. Applicants do not need to submit both. Documentation (i.e., After-Action Report, Improvement Plan) must address the agency's improvements and the agency's plans.</p>	<p>Given the 2-year PPHR extension, the timeframe for documented exercises or responses eligible for recognition has also been extended.</p> <p>APPLIES TO FIRST-TIME AND RE-RECOGNITION APPLICANTS</p>



Cycle Timeline

2023 Cycle

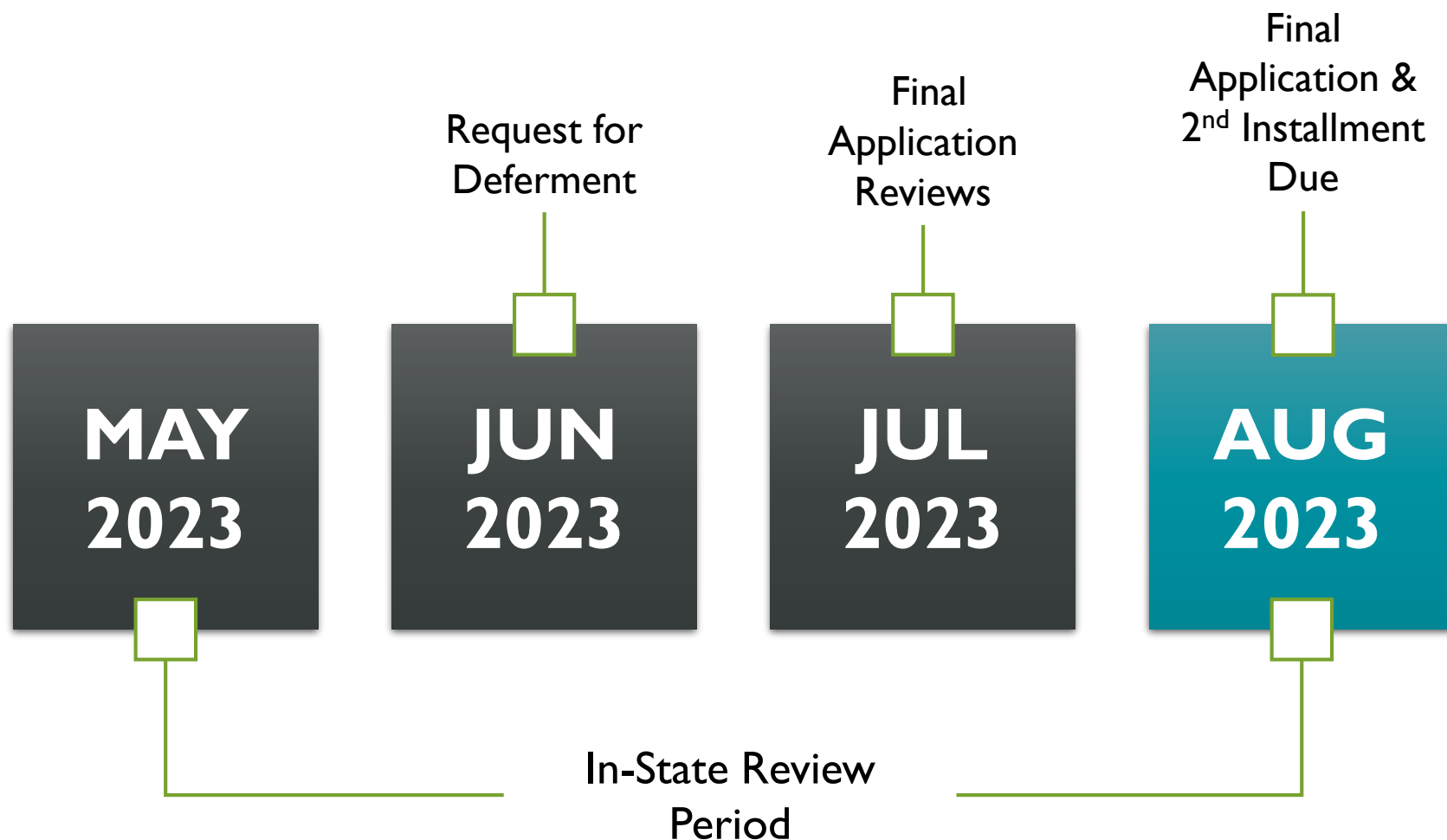
Timeline – Intent to Apply



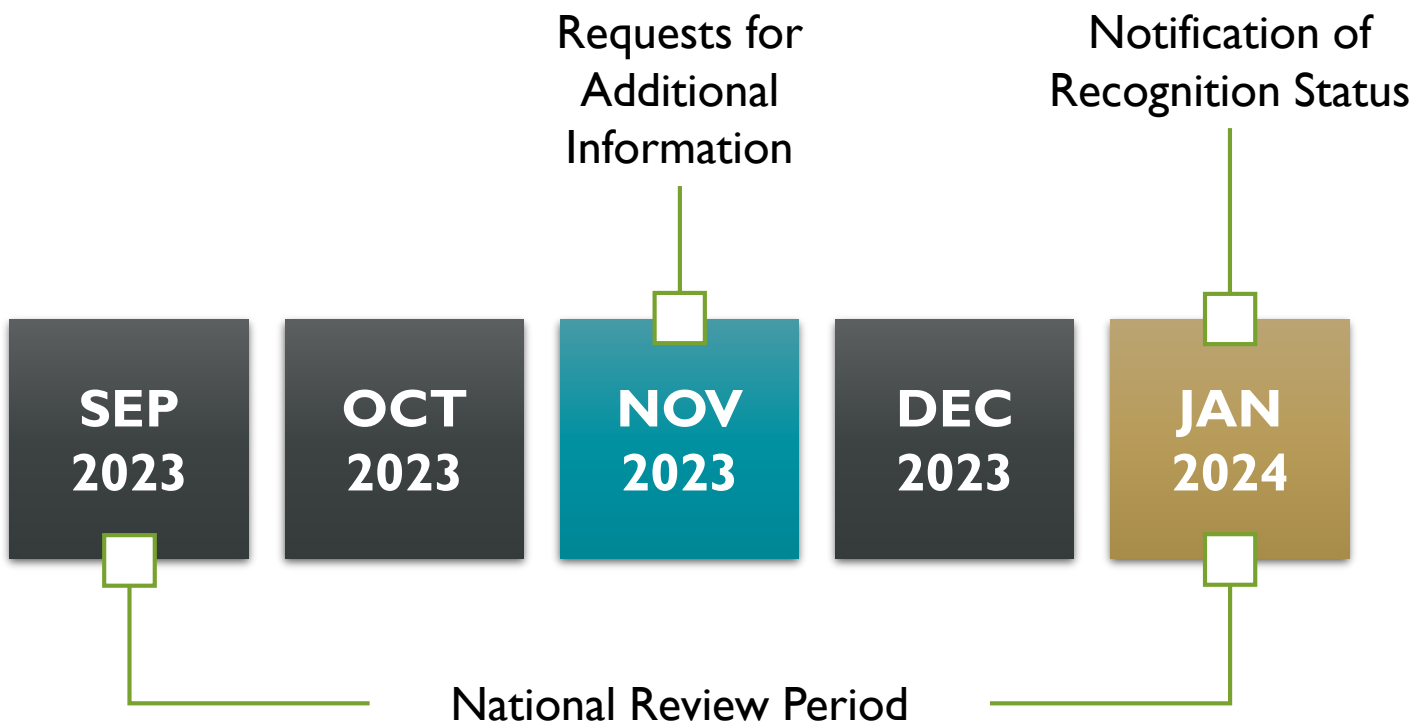
Timeline – Evidence Period



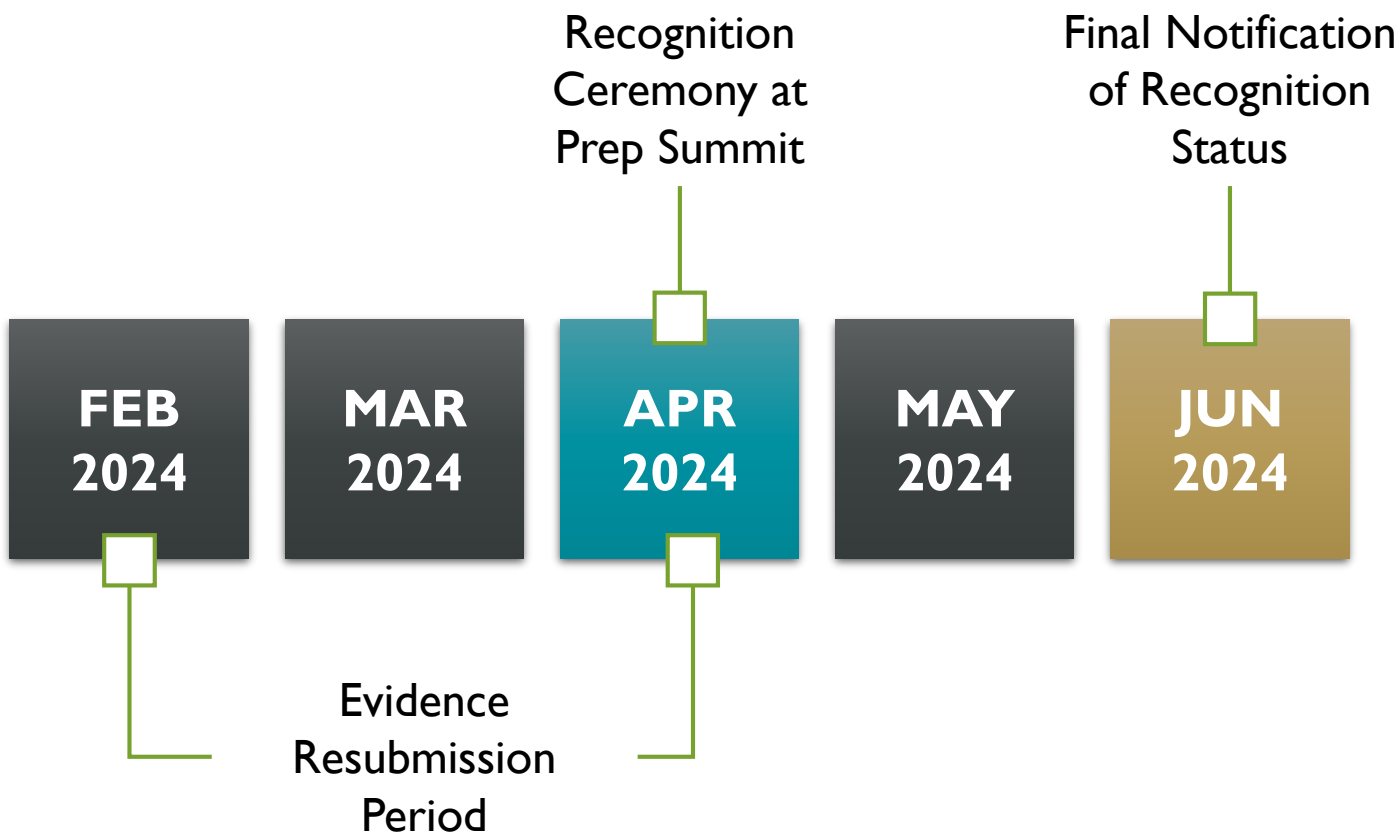
Timeline – In-State Review Period



Timeline – National Review Period



Timeline – Resubmission Period



PPHR – In Depth Break Out Session



Questions/Comments/Concerns?



<https://www.naccho.org/programs/public-health-preparedness/pphr>



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