

# Project Public Health Ready In-Depth

Goal: To provide an in-depth overview of the PPHR application process.

09/28/2022



# Project Public Health Ready

**Project Public Health Ready (PPHR)** is a collaborative activity between the National Association of County and City Health Officials (NACCHO) and the Centers for Disease Control and Prevention (CDC).

## Vision

Local health departments (LHDs) will be fully integrated into the response community and prepared to respond to any emergency.

## Mission

To protect the public's health and increase the public health infrastructure by building local health department preparedness capacity and capability. With assistance from state health departments, LHDs will use sustainable tools to plan, train, and exercise using a continuous improvement model.



# Why PPHR?

- Creates a useable product that enhances an LHD's ability to respond to emergencies
- Alignment with National and Federal standards
- Builds partnerships—state & federal; community response partners & non-traditional stakeholders
- Provides opportunities for staff education and team-building within and across LHD departments
- Continuous quality improvement
- Credibility and visibility

# PPHR Roles

**Applicants** - LHDs or regional agencies submitting plans and other documentation for peer review to achieve national recognition

**State Lead** – A coordinator at the state level that oversees application development for applicants within a state and acts as point of contact for NACCHO

**Reviewers** – Local subject matter experts selected by NACCHO to score applications against the criteria and provide feedback

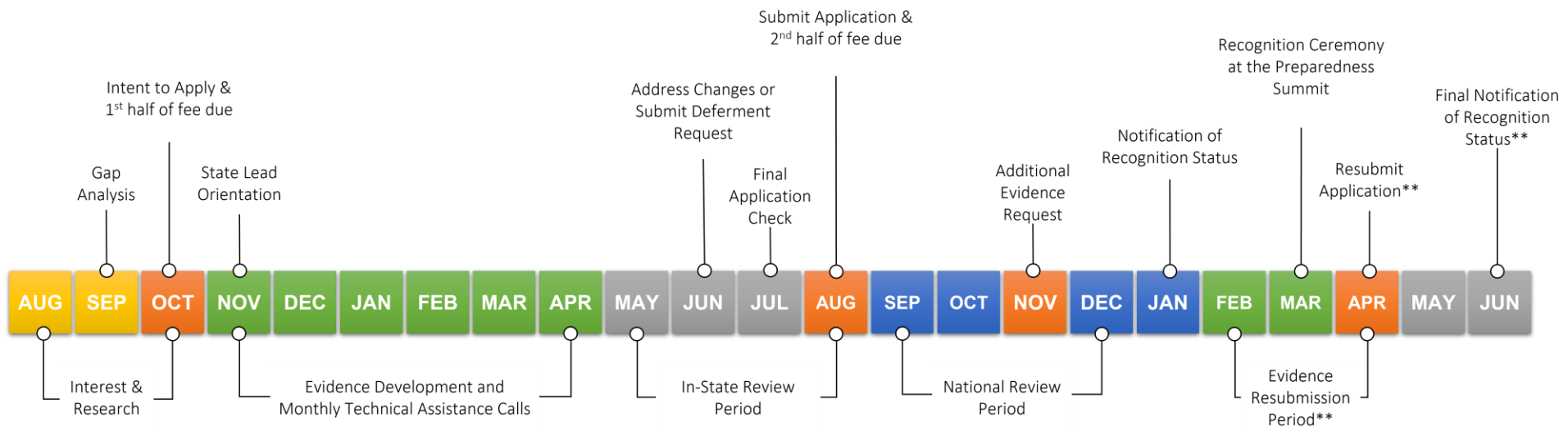
**NACCHO** – Provides technical assistance to applicants and reviewers and coordinates application review process

# PPHR Application Process Breakdown



# Project Public Health Ready Process

## Application Timeline



# Interest & Research (August-October)

- Start looking for plans and identify what's missing and/or needs to be updated
- Contact your state lead and notify them of your interest (first-time applicants)
- Coordinate with your state lead and NACCHO to make sure to submit your ITA for the appropriate cycle (re-recognition applicants)
- Intent to Apply and 1<sup>st</sup> Round of Payment due end of October
  - For **2023 cycle**: October 31<sup>st</sup>, 2022
  - For **2024 cycle**: October 31<sup>st</sup>, 2023

# Intent to Apply & First Round of Payment (end of October)

- Intent to Apply & Invoices will now be submitted through an online portal
- Payment
  - First-time: **\$5,000** (\$2,500 end of October & \$2,500 end of August)
  - Re-recognition: **\$2,500** (\$1,250 end of October & \$1,250 end of August)
- Payment method
  - Credit card payment strongly preferred
  - Checks



Please choose your PPHR Application type: \*

Re-recognition applicant

(select)

First time applicant

Re-recognition applicant

This Intent to Apply form is to notify NACCHO that you will be applying for the 2023 Project Public Health Ready (PPHR) recognition cycle. Please be sure to check the [PPHR webpage](#) for additional resources and the deadlines associated with this recognition cycle.

Please choose your PPHR Application type: \*

Re-recognition applicant

### Intent to Apply – Re-recognition Applicant \*

To better facilitate and coordinate the PPHR implementation and review process, applicants are required to complete and submit this Intent to Apply form to [PPHR@naccho.org](mailto:PPHR@naccho.org). To confirm participation in the 2023 Review Cycle, applicants are required to submit Part 1 of their application fee (\$1,250). Applicants may opt to pay their application fee (\$2,500) in full.

Application fees can be paid online via credit card at [MyNACCHO](#). Applicants may also pay via check. If paying by check, please mail this completed form with check made payable to NACCHO to: Project Public Health Ready, NACCHO Lockbox Processing, PO Box 79197, Baltimore, MD 21279-0197.

This Intent to Apply form and Part 1 payment are due by Friday, October 28, 2022.

#### PPHR Applicant Responsibilities

- Work with the state lead to develop a PPHR application using Version 5.0 of the PPHR Re-recognition Criteria.
- Submit technical assistance questions to NACCHO through the state lead as they arise throughout the development of the PPHR application.
- Participate in monthly teleconference calls with other applicants from the same state, if applicable.
- Participate in an in-state technical review of the PPHR application no less than three months before the application due date.
- Submit a complete application in a PPHR-approved format electronically to NACCHO by Thursday, August 31, 2023, 5:00pm Eastern Time.

By submitting this document, I confirm my agency's intent to apply for PPHR recognition in the 2023 review cycle and confirm that I understand the applicant responsibilities listed above. A non-refundable \$1,250 fee (Part 1) will be paid on behalf of the agency listed below with the submission of this form. I understand that Part 2 of the application fee (\$1,250) and a completed Application Signature form are required by August 31, 2023, for NACCHO to review my agency's application.

\*

☐ I understand that payment of this fee does not guarantee PPHR recognition.

Agency Name \*

Applicant Lead Name \*

Agency Director/Administrator \*

State Lead Name (If Applicable)

Save

Save and Next

## Project Public Health Ready (PPHR)

[Registration](#) → Invoices and Application Payments

Please follow these instructions to generate an invoice and remit payment.

Application fees can be paid online via credit card or by mail via check. If paying by check, please mail your generated invoice and check made payable to NACCHO to: **Project Public Health Ready, NACCHO Lockbox Processing, PO Box 79197, Baltimore, MD 21279-0197.**

**Please Note:** This [Invoice Generator](#) is a tool used to track submission and receipt of payment between NACCHO and the PPHR applicant. Invoices will be generated under the account logged into [MyNACCHO](#) – this may be an individual or LHD account. If multiple invoices are mistakenly generated, please email [PPHR@naccho.org](mailto:PPHR@naccho.org) to reconcile the error.


You will be navigated to MyNACCHO to complete payment.

### Application Invoice Number \*

Add your confirmation number to this field. For questions, email [PPHR@naccho.org](mailto:PPHR@naccho.org)


**Registration**

Applicant Information


**Project Public Health Ready.** 

Please select


**Project Public Health Ready.**


**Project Public Health Ready.** 


Required

fee type: Please select 


Please select


name: Part 1 - Application Fee for PPHR  
Part 2 - Application Fee for PPHR  
PPHR Application Fee - Part 1 & 2 Combined  
National Association of County and City Health 

organization: National Association of County and City Health 


address: Business: 1201 I ST NW 

Required

phone: (202)756-0160 

email: avigil@naccho.org 

Applying For:

org name: National Association of County and City Health 

city: Washington

state: DC

Product	Price	Member Type	Category
<input type="checkbox"/> Part 1 and 2 Combined - First-Time Application Fee for Project Public Health Ready	5,000.00	[Any]	
<input type="checkbox"/> Part 1 and 2 Combined - Re-Recognition Application Fee for Project Public Health Ready (must have a current recognition status)	2,500.00	[Any]	

0.00

recalculate

Depending on what you select here, this will populate accordingly

Make sure you press recalculate once you make your selection

Product	Price	Member Type	Category
<input type="checkbox"/> Part 1 and 2 Combined - First-Time Application Fee for Project Public Health Ready	5,000.00	[Any]	
<input checked="" type="checkbox"/> Part 1 and 2 Combined - Re-Recognition Application Fee for Project Public Health Ready (must have a current recognition status)	2,500.00	[Any]	

2,500.00

recalculate

Create Invoice Cancel

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## Thank You

Thank you for applying for Project Public Health Ready.

Please click the link below to print your invoice and remit payment via check to:

NACCHO, Project Public Health Ready  
NACCHO Lockbox Processing  
PO Box 79197  
Baltimore, MD 21279-0197

Print Invoice

Please click My Transactions to pay your PPHR Invoice by credit card.

My Transactions

Create Invoice Cancel



# Check Payment Process

## Thank You

Thank you for applying for Project Public Health Ready.

Please click the link below to print your invoice and remit payment via check to:

NACCHO, Project Public Health Ready  
NACCHO Lockbox Processing  
PO Box 79197  
Baltimore, MD 21279-0197

[Print Invoice](#)

Please click My Transactions to pay your PPHR Invoice by credit card.

[My Transactions](#)



Customer #: 605825

Ms. Ashley Vigil

## Invoice

Invoice #: 317463

Invoice Date: 09/20/2022

Description	Quantity	Price	Discount	Amount
Part 1 & 2 Combined - Application Fee for PPHR	1	\$2500.00	\$0.00	\$2500.00

Invoice Total	\$2,500.00
Taxes	\$0.00
Amount Paid	\$0.00
<b>PLEASE PAY</b>	<b>\$2,500.00</b>

PLEASE DETACH AND REMIT WITH YOUR PAYMENT

Customer #: 605825

Ms. Ashley Vigil

## Select Payment Method

Check Enclosed

Card Provider \_\_\_\_\_ Exp Date \_\_/\_\_/\_\_

Card # \_\_\_\_\_

Card Holder's Name \_\_\_\_\_

Card Holder's Signature \_\_\_\_\_

Remit Payment To:

**NACCHO**  
PO Box 79197  
Baltimore, MD 21279-0197

Total Due: \$2,500.00  
Amt remitted:

# Credit Card Payment Process

## Thank You

Thank you for applying for Project Public Health Ready.

Please click the link below to print your invoice and remit payment via check to:

NACCHO, Project Public Health Ready  
NACCHO Lockbox Processing  
PO Box 79197  
Baltimore, MD 21279-0197

[Print Invoice](#)

Please click My Transactions to pay your PPHR Invoice by credit card.

[My Transactions](#)

## All Invoices

Invoice	Date	Total	Paid	Balance Due	
317463	09/20/2022	\$2500.00	\$0.00	\$2500.00	<a href="#">pay</a> <a href="#">print</a>



## Review Invoice

Review the invoice details below and click **Add to Cart** when you are ready to remit payment.

**Invoice Detail**

Ms. Ashley Vigil

invoice code: 317463

proforma? Yes

transaction date: 9/20/2022

quantity	item	price	price	discount	shipping	net total	due:	unpaid balance
1.0000	Part 1 & 2 Combined	2,500.00	\$2,500.00	\$0.00	\$0.00	\$2,500.00		\$2,500.00

total: 2500.00

applied: 0.00

balance: 2500.00

[Add To Cart](#) [Cancel](#)

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# Payment Confirmation

**From:** info@naccho.org  
**Sent:** Thursday, September 15, 2022 5:16 PM  
**To:** [REDACTED]  
**Subject:** NACCHO Order Confirmation: Invoice 317224



This message is to confirm the receipt of your recent payment to NACCHO.

**Customer's Name:** [REDACTED]  
**Date:** 9/15/2022

**Invoice #:** 317224  
**Invoice Date:**

**Payment Method:** Check Processed By Lockbox  
**Payment Amount:** \$ 1250.00  
**Current Balance:** \$ 0.00

**Bill To:**  
-----



<u>Qty</u>	<u>Item</u>	<u>Sub- Total</u>	<u>Discount Paid</u>	<u>Balance</u>
1	Part 2 - Re-Recognition Application Fee for Project Public Health Ready (must have a current recognition status)	\$1250.00	\$0.00	\$1250.00 \$0.00

[Click here](#) to view a printer-friendly version of your invoice.



# Evidence Development & Monthly TA Calls (November-April)

- Applicants are responsible for putting together all application materials and submitting the application to state leads on time.
  - If at any point, you feel like you've fallen behind please connect with your state lead and NACCHO
- Monthly TA calls are coordinated and facilitated by the state lead with members of NACCHO staff present.
- TA calls are an opportunity to ask clarifying questions regarding any application criteria or process from NACCHO.
- Enable LHDs to learn and help each other through the process.

## In-State Review Period (May-August)

- State lead is responsible for coordinating an in-state review of completed applications.
- In-state review offers applicants an opportunity to address any issues such as broken hyperlinks, missing documentation, improve evidence, etc. before submitting final application to NACCHO.
- Best if reviews are completed by the **end of July** to give applicants enough time to make changes.



# Assemble and Submit Final Application & Final Round of Payment (August)

- You will use the same online portal and to submit your second round of payment by the **end of August**.
- Payment
  - First-time: **\$5,000** (\$2,500 end of October & \$2,500 end of August)
  - Re-recognition: **\$2,500** (\$1,250 end of October & \$1,250 end of August)
- Payment method
  - Credit card payment strongly preferred
  - Checks
- Final applications will be submitted to your state lead who will then submit it to NACCHO's SharePoint site.

# National Review Period & Additional Evidence Request (September-December)

- The National Review Period is conducted by teams of preparedness experts recruited nationwide
- Initial review occurs from **September to end of October**
- After the initial review, applicants have 72 hours to submit additional evidence requested by the national reviewers (**first week of November**)
- National reviewers review additional evidence through November and have a final review call in **December**

# Notification of Recognition Status (January) & Recognition Ceremony (March)

- NACCHO will send the recognition materials to the State Lead, including applicants' final review forms, letters containing the recognition status, and a sample press release for the agencies who have successfully achieved PPHR recognition. The state lead will forward the materials to the respective applicants (**first week of January**).
- Recognized agencies are honored at a PPHR recognition reception, held annually in conjunction with the Public Health Preparedness Summit in **March**.

# Evidence Resubmission Period (February-April) & Final Notification (June)

- Applicants not initially recognized may choose to go through a resubmission process. Applicants will notify their state lead and NACCHO if they wish to go through resubmission the **second week of January**.
- Applicants have between **February-April** to make the adjustments necessary.
- By the **end of April**, applicants must resubmit their application.
- NACCHO staff will inform review teams if an agency whose application they reviewed will be resubmitting. To ensure consistency between the initial review and the resubmission, the same review team will review the additional evidence for those areas previously scored partially met or not met (**May**).
- By **June**, applicants will receive a final notification of their recognition status.
- Successful applicants will be recognized at the following year's ceremony (**March of the next year**).

# PPHR Application Breakdown



# Goals, Measures, and Criteria Elements

<b>Goal I: All-Hazards Preparedness Planning PPHR</b>			<b>Goal:</b> The PPHR application is made up of 3 goals: all-hazards planning; workforce development; exercise or real event	
<b>PPHR Measure #1: Possession and Maintenance of a Written All-Hazards Response Plan</b>			<b>Measure:</b> Divides goals into areas of competency	
The agency has documented its planned response to public health emergencies. To prove it has met this measure, the agency must submit <i>either</i> a written copy of its all-hazards public health emergency response plan <i>or</i> the public health annex to its jurisdiction's emergency response plan. The plan should address the key elements of the sub-measures listed below.				
<b>A.</b>	<b>Plan Organization</b>		<b>Page Number(s)</b>	<b>Comments</b>
a1.	The table of contents correctly contains the following information:			
a2.	<a href="#">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).</a>			
<b>B.</b>	<b>Introductory Material</b>		<b>Page Number(s)</b>	<b>Comments</b>
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.			

# PPHR Goals and Measures

## Goal I: All-Hazards Preparedness Planning

- Measure 1: All-Hazards Emergency Operations Plan

## Goal II: Workforce Capacity Development

- Measure 2: Training Needs Assessment
- Measure 3: Workforce Development Plan

## Goal III: Demonstration of Readiness through Exercise or Real Event

- Measure 4: Exercise or Real Event Documentation
- Measure 5: Comprehensive Exercise Plan

# Goal I

Goal I of the PPHR criteria is **All-Hazards Preparedness Planning**.

This goal is comprised of measure 1 and requires applicants to provide evidence of possession and maintenance of a written all-hazards response plan.

Some of the topics included in Goal 1 Measure 1 are:

- Concept of Operations
- Vulnerable Populations
- Epidemiology & Lab Data and Sample Testing
- Mass Prophylaxis & Immunization
- Mass Fatality Management
- Disaster Behavioral Health
- Public Health Surge Capacity
- Continuity of Operations
- Mutual Aid & External Resources
- Environmental Health Response



# Goal II

Goal II of the PPHR criteria is **Workforce Capacity Development**. This goal is comprised of measure 2 and measure 3.

- Measure 2 requires applicants to provide evidence of **regular training needs assessment**.
- Measure 3 requires applicants to provide evidence of **completion and maintenance of a workforce development plan & staff competencies**
  - Workforce Development Plan
  - Just-in-Time Training

**b5. [The report identifies the total number and percentage of staff assessed and describes the audience and why they were selected.](#)**

Click on the blue hyperlinked guidance for each measure, additional information at the bottom of criteria

[Measure 2.B.b5:](#) If not all staff were assessed, provide justification for the sampling size decision, a timeline for when and which of the remaining staff members will be assessed, and what will be assessed.

# Goal III

Goal 3 of the PPHR criteria is **Quality Improvement through Exercises and Responses and a Comprehensive Exercise Plan**. This goal is comprised of measure 4 and measure 5.

- Measure 4 requires applicants to provide evidence of **learning through exercises or responses**.
  - Participation in Exercises (After Action Reports/Improvement Plans)
  - Participation in Real Events (Incident Action Plans and AAR/IP)
- Measure 5 requires applicants to provide evidence of a **comprehensive exercise plan**.
  - Future Exercise Planning

# Application Guidelines

**\*Starred Criteria Elements:** When a criteria element contains an asterisk, the evidence submitted by the applicant does not have to be located in the plan, as long as the plan references where to find that information.

<b>D. Concept of Operations</b>
d1. <a href="#">The plan contains evidence of a process for personnel and materiel management and tracking.</a>
d2. <a href="#">The plan describes the agency's process for assimilating and integrating into the Operations Center (i.e., departmental operations or emergency operations center).</a> *
<b>E. Functional Staff Roles</b>
e1. <a href="#">The plan describes how the agency incorporates staff into response activities during an emergency operation.</a>
e2. The plan includes evidence of procedures for protecting responders (pre-deployment, deployment, post-deployment) under the direction of the agency from probable safety and health risks, including the following: <ul style="list-style-type: none"><li>▪ Recommendations for personal protective equipment;</li><li>▪ Plan for mental/behavioral health services</li><li>▪ Documented process for <a href="#">medical readiness screening</a>; and</li><li>▪ Monitoring of responder exposure, injury, and intervention/treatment.</li></ul> *

# Application Guideline #1

If you are not the lead agency for the activities described in a particular criteria element, you must provide a description that includes the following:

- Identification of the lead agency;
- Description of the roles and responsibilities of the lead agency;
- Description of the support roles and responsibilities of the applicant;
- Description of how the applicant partners with the lead agency to plan for, and prepare to deliver, the emergency service addressed in the evidence element;
- Description of the applicant's coordination and communication process for supporting the work of the lead agency;
- Description of how the applicant will work with the lead agency during or following an emergency response;
- An example of how this collaboration has worked in the past, how it was exercised, or how it is addressed in your workforce development plan; and
- If applicable, description of the authority or documentation formalizing the relationship with the lead agency (e.g., mutual aid agreements, contracts, regulatory obligations).

**NOTE:** Application Guideline #1 must be used for each individual criteria element for which the applicant is not the lead.

# Application Guideline #2

If there is a criteria element or sub-measure that your agency has not yet addressed, or if documentation is not yet available, you must provide a description that includes the following:

- Explanation of why the specific item has not been addressed;
- Steps/milestones of a plan to address the item;
- Timeline for steps/milestones; and
- Listing of partners and description of their responsibilities to address the item.

**NOTE:** Successfully meeting the requirements of Application Guideline #2 will result in a score of “Partially Met.” Applicants cannot receive a score of “Met” using Application Guideline #2.

# PPHR Application Types

## 1. First-Time Recognition Application

## 2. Re-recognition Application

- For previously recognized applicants prior to their recognition expiring
- Different criteria version than first-time applicants
- Standard criteria and process for demonstrating continuous quality improvement over time

# First-Time Recognition Criteria (v 10.0)

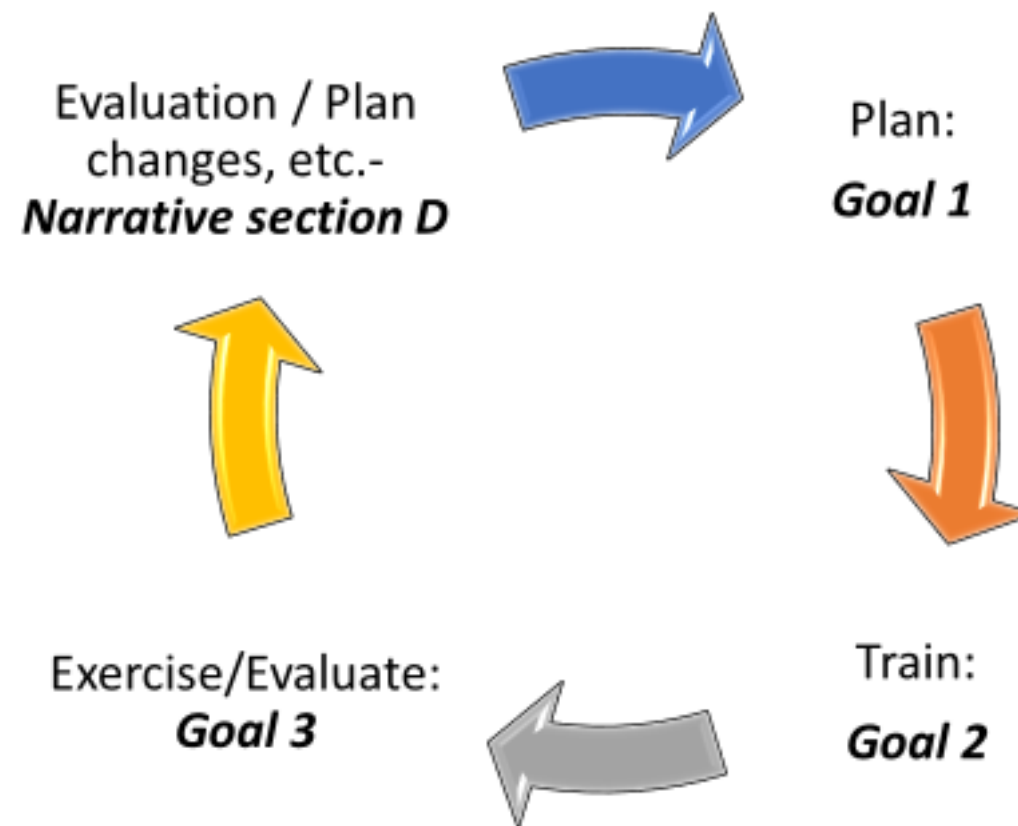
# Re-Recognition Criteria (v 5.0)

<b>Goal I: All-Hazards Preparedness Planning PPHR</b> <b>PPHR Measure #1: Possession and Maintenance of a Written All-Hazards Response Plan</b> 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.		
A. Plan Organization	Hyperlink(s)	Comments
a1. The table of contents correctly corresponds to the numbered pages of the plan.		
a2. <a href="#">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).</a>		
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. <a href="#">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).</a>		
b4. The plan identifies all neighboring jurisdictions and, if applicable, <u>tribal</u> 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.		

<b>Goal I: All-Hazards Preparedness Planning PPHR</b> <b>PPHR Measure #1: Possession and Maintenance of a Written All-Hazards Response Plan</b> 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.		
A. Legal and <u>Administrative Preparedness</u>	Hyperlink(s)	Comments
a1. <a href="#">The plan describes the process of declaring a public health emergency.</a>		
a2. <a href="#">The plan describes the expedited administrative processes used during a response to an event that differ from standard procedures for all of the following:</a> <ul style="list-style-type: none"> <li>Accepting and allocating federal/state funds;</li> <li>Spending federal/state funds;</li> <li>Managing/hiring workforce; and</li> <li>Contracting/procuring or mutual aid.*</li> </ul>		
a3. The plan describes liability protections for staff during response activities.		
B. Situations and Assumptions	Hyperlink(s)	Comments
b1. The plan includes a <a href="#">hazard analysis</a> of threats (e.g., chemical/nuclear facilities, floods, extreme weather events) and unique jurisdictional characteristics and vulnerabilities that may affect a public health response to an emergency event.*		
b2. The plan includes conclusions drawn from the <a href="#">hazard analysis</a> regarding threats faced by the jurisdiction and unique jurisdictional characteristics/vulnerabilities that may affect a public health response.		
b3. The plan describes how the agency is preparing for the vulnerabilities described in the results of the <a href="#">hazard analysis</a> .		

# How is it different?

- Emphasis on changes to plans since previous recognition
- 4 Sections + Executive Summary (new Section C & D)
- Requires excellent record keeping over 5-year period





# Re-recognition Criteria: Sections A & B

- Section A: Document Checklist
  - Is the document present? Updated? Hyperlinked?
- Section B: Criteria Elements
  - Elements that are considered “essential/important” for reviewers to see again after 5 years
  - Elements that have been added or are significantly updated from the last time the applicant went through
  - Section B elements are determined by comparing the current criteria to the criteria the eligible re-recognition applicants used on their prior application

# Section A & B Tips and Strategies

- Strongly recommended to read/re-read the criteria elements & hyperlinked guidance
- Don't assume previous documentation will be acceptable
- Collaborate with your peers

## Section C: Narrative Section

- Narrative Questions
  - Chance to 'tell the story' of CQI over the past 5 years
- Order of questions loosely follows CQI process
  - Changes to all-hazards
  - Changes to TNA
  - Changes to WFD
  - Changes to exercises
  - Other changes

# Section C Example

3. Since your previous recognition date, describe **three (3)** significant additions or revisions made to workforce development plan. Include the following details for each example:

- a. How your agency identified the need for the change;
- b. How the change was implemented;
- c. Which skill sets and knowledge areas the change aimed to address; and
- d. How the change improved your agency's ability to respond.

**Narrative Response (Be specific and detailed in your descriptions)**

**Example # 1 (your example must address a, b, c, and d from above)**

**Hyperlink(s) Example #1:**

**Example # 2 (your example must address a, b, c, and d from above)**

**Hyperlink(s) Example #2:**

**Example # 3 (your example must address a, b, c, and d from above)**

**Hyperlink(s) Example #3:**

## Section C Tips and Strategies

- Start early
- Choose DISTINCT examples for each question
- Consider that an example may fit more than one question but try to choose the BEST example for each question
- Read questions carefully—what plan/document is noted for applicable changes? What is the focus/motivation for each question?
- Make connections between broader team/department CQI and the specific examples
- Align answers to lettered items in each question

## Section D: Plan Revisions Matrix

- All things mentioned in Narrative Section C should be reflected in the matrix
- Added grayed out example, added language on recommended # of changes
- Remind applicants on a yearly basis to update this matrix

# Section D Example

## Section D. Plan Revisions Matrix

This table should list all significant additions and revisions to the content or processes in the following documents since the date of PPHR recognition or most recent re-recognition:

- Agency all-hazards plan or EOP *and* associated [annexes](#);
- Workforce development plan; and
- Exercise plan.

Examples of activities that would prompt significant changes include **evaluations of event responses or full-scale or functional exercises, updated federal guidance, updated risk assessments, and major changes in agency structure, policy, programming, or staffing**. They do not include editorial changes or updates that do not alter the nature of the agency's planning and response activities. It is also not necessary to reiterate changes based on the training needs assessment described in Section B, Goal II.

For each example included below applicants should include two hyperlinks, one to the record of revisions page, and a second link to the place in the plan where the change was made. All changes and revisions described in Section D should be significant and should also be listed in Section C.

Please add as many lines as necessary to the table below to include all significant plan additions and revisions. **NACCHO recommends including at least one significant example from each of the five years since previous recognition.**

#	Name of Exercise, Event, Policy, Assessment, etc.	Corrective Action Description	Additional Recommendations	<a href="#">CDC Preparedness Capability(jes)</a>	<a href="#">Capability Element</a>	Primary Responsible Department/ Staff	Completion Date	Hyperlink to Record of Revisions	Hyperlink(s) to place where change was made
1	2016 Tropical Storm (real world event)	Develop a new special medical needs shelter protocol for <a href="#">dealing with</a> supply kits	Transfer responsibility of <a href="#">housing</a> special needs shelter supplies from OEM to County Health	#2 Emergency Operations Coordination  #7 Mass Care	Planning	Office of Public Health Preparedness	08/2016	<a href="#">Record of Revision for SMNs Plan</a>	<a href="#">Page 36 of SMNs Plan</a>

# COVID Addendum

## Notable Additions & Flexibilities

- For both First-Time and Re-Recognition applications, it is **required** or **highly recommended but not required** to provide examples of activities related to your jurisdiction's COVID-19 response.
- Measure #2 Training Needs Assessment
  - May conduct a full TNA or a **training needs gap analysis**
  - TNA completed no earlier than **60 months** prior to application submission date (used to be 36 months)
- Measure #4 Documentation of an Exercise or Real Incident Response
  - Must have occurred within **60 months** prior to application submission date
  - Sub-measure B. Incident Response Documentation (Real Incident): can submit a **tactics meeting – progress notes**
- Both First-Time and Re-Recognition Applications must include an added **COVID-19 response to their Executive Summary**. This response should detail your jurisdiction's COVID response, addressing working relationships with governmental partners, successes and limitations, lessons learned, and recovery efforts currently underway.