

Project Public Health Ready
Criteria FAQ for Applicants and Reviewers (for First-time application version 10.0 Criteria)

General Clarification on Criteria Evidence		
Element/Evidence Provided by Applicant	Question	Clarification
<p>The applicant submits evidence within a plan or application.</p>	<p>What is the difference between when the criteria say, “The application” and “The plan?”</p>	<p>Throughout 10.0 version, criteria elements have been updated to reflect whether the evidence requested should be in the “the plan” or “the application”. The guidance is as follows:</p> <p>Plan: In the context of PPHR ‘the plan’ refers to the LHD’s written all-hazards response plan, including both base plan and accompanying annexes and appendices. Anything that is written by the LHDs and applies to the LHD’s roles in emergency response constitutes “the plan.”</p> <p>Application: In the context of PPHR “the application” refers to any information contained within the application package submitted as evidence to meet the PPHR criteria.</p> <p>*Criteria elements which have an asterisk (*) following them indicates that the evidence provided can exist outside the ‘the plan’ however, the plan should still reference where to find that information.</p> <p>Applicants should carefully read the PPHR criteria in order to submit their evidence accurately.</p>
<p>Application Guideline #1. If you are not the lead agency for a particular task (evidence elements or sub-measure), you must provide a description that includes the following:</p> <ul style="list-style-type: none"> • 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 	<ol style="list-style-type: none"> 1. Does the evidence need to include the lead agency’s plan? 2. If an applicant is “not the lead” for an entire sub-measure, can they submit evidence to meet application guideline #1 once for the entire sub-measure? 	<ol style="list-style-type: none"> 1. In order to address the lead agency’s and the applicant’s roles, it will be necessary to incorporate elements from the lead agency’s plan into the applicant’s plan. While a copy of the lead agency’s plan in its entirety may be helpful for certain criteria, a copy of the entire plan is not required. 2. Not necessarily. For some criteria elements within a sub-measure, the evidence may be the same. However, the activities listed in different elements may have different lead agencies, or the processes for communication and coordination may differ. Therefore, each criteria elements must be considered individually. <p>Moreover, the applicant must provide hyperlinks to evidence for every criteria element, even if the hyperlink(s) are the same as those of other elements in the sub-measure.</p>

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<p>supporting the work of the lead agency;</p> <ul style="list-style-type: none"> • 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). 		
<p>Application Guideline #2. If there is an evidence 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:</p> <ul style="list-style-type: none"> • 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. 	<p>Can an applicant receive a score of Met if they fulfill Application Guidance #2?</p>	<p>No. Application guidance #2 is a mechanism to allow on LHD to receive a Partially Met instead of a Not Met when they have not yet developed the evidence to meet some of the criteria. The highest score an applicant can receive by satisfying Application Guidance #2 is a Partially met.</p>
<p>Applicant includes another agency’s plan, and that plan is in draft form.</p>	<p>Can an applicant receive a Met when it submits another agency’s draft plan as evidence for a criteria element?</p>	<p>It depends. If the draft document is the primary/only evidence, then the applicant cannot receive a Met. If the applicant has also submitted their own plans, not in draft form, that successfully meet the criteria on their own, and the draft is just included to provide additional supporting evidence, then they may receive a Met.</p>
<p>Applicant includes evidence written into the comments section of the criteria crosswalk instead of hyperlinking to evidence in their plans (not comments/clarification on</p>	<p>Should applicants receive credit for information written into the crosswalk when they have not</p>	<p>It depends on the criteria. If the criteria say, “The application demonstrates...” or something similar, then the applicant can receive a score of Met. However, the criteria say “The plan contains...” or something similar, then the evidence must be in the plan to receive a score of Met.</p>

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evidence submitted, but rather the evidence itself).	linked to it in their plan?	
Criteria element says: “The plan describes the process for - _____.”	Is it acceptable for applicants to only list a statement about the process but not provide details about the process?	No. The applicant must describe the process in some detail. Just stating that a process exists or stating that the LHD will follow another agency’s process (e.g. that of the state health department) is not enough to receive a score of Met.
The applicant is hyperlinking to the same evidence for multiple consecutive criteria elements.	Is it acceptable for the applicant to provide the hyperlink(s) once and tell reviewers that they also apply to the subsequent criteria elements?	No. Applicants must provide hyperlink(s) to evidence for every criteria element, even if it is the same evidence provided for the element preceding or following.

Clarification on Specific Criteria Elements		
Version 10.0 Criteria Element	Clarification needed	Guidance
1.B.b2. The application describes how public health preparedness is approached in the jurisdiction, including a description of the planning process and planning team composition.	What is meant by “planning process”?	“Planning process” means a broad description of how the planning team develops a plan, beginning with identifying the need for a plan and ending with plan approval and maintenance. It should describe the major steps along the way and be framed as an established process that will be used going forward. It should <u>not</u> be a historical narrative.
1.D.d1. The plan describes the legal and administrative authority under which the agency would respond to an emergency requiring a public health response. Guidance says: <i>Measure 1.D.d1:</i> Evidence for this element should include citations of applicable statutes or administrative rules governing the plan’s creation and use. This item depends on local and state legal practice.	Does the applicant need to include copies or summaries of the applicable statutes or administrative rules?	No, the criteria only require citations, not copies or summaries. However, including copies or summaries of applicable laws, regulations, and technical materials directly in the plan would likely prove useful during an event, and applicants are encouraged to include them if they believe they would be helpful.
1.D.d2. The plan describes the process for coordinating and communicating with legal counsel.	What is meant by “coordinating and communicating”?	When the element asks for the process of “communicating and coordinating with legal counsel,” it is asking procedures or the steps whereby the LHD Director (or other LHD staff) would speak with the (county) Attorney who operates as counsel for the health department. The preferred communication method may have been developed through informal relationships, but it should also be in

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		written policy. Often for the LHD there is a specific path and approval process before anyone can speak to counsel, since the simple act of an attorney responding to an email will incur a bill. This could very well be the same as everyday steps taken to inform the attorney and share the steps that the LHD is taking.
<p>1.D.d2. The plan describes the process for coordinating and communicating with legal counsel,</p> <p>and</p> <p>1.D.d4. 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/allocating federal/state funds; • Spending federal/state funds; and • Managing workforce; and • Contracting/procuring or mutual aid* 	<p>Are these criteria asking for how these processes occur day-to-day or during an emergency?</p>	<p>These criteria are asking for how these processes are carried out during an emergency. Applicants should focus on how processes may be changed, adapted, and expedited to account for the time and resource constraints of an emergency.</p> <p>A description of how preparedness funds (e.g. PHEP funds) are accepted, allocated, and spent on a <u>routine (non-emergency) basis should not be the focus of the evidence provided.</u></p>
<p>1.I.i1. The plan identifies the party or parties responsible for notification, alerts, and mobilization.</p>	<p>Does “party or parties responsible” refer to staff within the applicant’s agency or to other partner agencies?</p>	<p>This element is asking for the identification of responsible staff <i>within</i> the applicant’s agency, not externally.</p>
<p>Throughout sub-measures K-Y. The evidence for _____ addresses the five items listed as cross-cutting with the concept of operations:</p> <ul style="list-style-type: none"> • Staff roles and responsibilities as related to ESF 8: Public Health and Medical Services. • Response actions that will happen. • When the response actions will happen. • Under whose authority the actions will happen. <p>How response actions will be documented.</p>	<p>What is meant by ‘staff roles and responsibilities as related to ESF 8: Public Health and Medical Services’?</p> <p>Is this asking for the legal authority or just for who is responsible?</p>	<p>This refers to how the LHD staff is fulfilling or supporting the roles related to ESF 8 with respect to each specific sub-measure. For example, in Q. Mass Fatality Management, the agency’s plan should include how the agency staff either carry – out or support mass fatality related ESF 8 functions such as tracking and documenting human remains, establishing morgue facilities etc.</p> <p>This is asking who is responsible, not for a legal statute or code.</p>

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<p>1.K.k7. The application contains samples of two or more types of public alerts (e.g., media alerts, pre-approved press releases, and coordinated messages) issued within the last two years, including the following information:</p> <ul style="list-style-type: none"> • To whom the information was provided; • The date the information was provided; and • For what purpose the information was provided. <p>Guidance says: <i>Measure 1.K.k7:</i> Samples from within the last two years are required. If no alerts have been issued in the last two years, templates are acceptable.</p>	<p>How should this criterion be addressed when the applicant is not responsible for issuing these kinds of public alerts?</p>	<p>The applicant can submit state or local samples and include an explanation of their role in the public alert process.</p>
<p>16. The plan describes a streamlined process for responding to information requests during a public health response.</p> <p>Guidance <i>Measure 1.L.16:</i> The purpose of a streamlined process is to avoid duplication of effort and distraction from response activities.</p>	<p>What does “information requests during a public health response” mean?</p>	<p>Information requests during a public health response include data and situational awareness reports to partners and stakeholders such as various state offices, hospitals, emergency management, incident commanders, elected officials etc.</p> <p>For additional guidance, applicants may review NACCHO’s Administrative Preparedness: Emergency Reporting Practices for Health Departments.</p>
<p>1.M.m2i. The plan contains the protocol(s) for hazard-specific collection of health data for active surveillance and regular passive surveillance of the following:</p> <ul style="list-style-type: none"> • communicable disease (for example, influenza and foodborne illness) • incidents involving chemical or radiological hazards. 	<p>What is meant by "hazard specific collection"?</p>	<p>Different types of hazards may require different surveillance strategies. For example, surveillance for influenza outbreaks can be different than surveillance for foodborne outbreaks, and these will both differ from surveillance for chemical or radiological hazards, such as radiation poisoning. Applicants should describe active and passive surveillance strategies in terms of specific hazards such as these.</p>
<p>1.O.o4. The plan describes the process for determining the method of dispensing the jurisdiction will implement:</p>	<p>What is meant by medical vs. non-medical?</p>	<p>A medical model for MCM dispensing could refer to the type of individuals allowed to dispense medications i.e. licensed medical professionals vs. trained volunteers; it may also refer to the</p>

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<ul style="list-style-type: none"> ▪ open/closed PODs ▪ medical vs. non-medical ▪ alternate modalities <p>Guidance says: <i>Measure 1.O.04.</i> The description should include a discussion of the rationale on deciding which model to use and when. If the jurisdiction does not use any or all of the bulleted methods, explain why. NACCHO recommends including a decision tree or flowchart to describe the triggers and implementation processes for all the bulleted dispensing procedures.</p>		<p>screening process for individuals receiving medical countermeasures i.e. medical POD requires a medical screening for every individual receiving the countermeasure vs. a non-medical model such as a head of household.</p> <p>Applicants should go into detail regarding their process for determining which of these models they will use and why, not just stating which model they will use.</p> <p>The intent is to provide evidence that applicants have thought through these considerations based on their jurisdictional capacity, likely threats etc.</p>
<p>1.O.06. The application contains documentation of legal authority, or memoranda of understanding with outside entities, that includes suspending/altering normal operations to complete medical countermeasure dispensing.</p> <p>Guidance says: <i>Measure 1.O.06:</i> Outside entities may include partners such as schools serving as open POD locations, private companies or community organizations serving as closed POD sites, and transportation companies assisting with distribution of countermeasures or supporting resources. If the applicant references legal statutes or authorities, NACCHO recommends they also include an initial implementation process for this statute or authority.</p>	<p>What is the intent of having outside entities specify that they will suspend normal operations?</p>	<p>The applicant needs to be sure that the outside entity that is agreeing to assist with mass prophylaxis/immunization, such as a school that will serve as a mass vaccination site or a trucking company that will transport SNS assets, is agreeing to prioritize this role over its normal activities. If the normal activities are given priority, the applicant might not be able to respond to the disease threat with the speed required to prevent disease spread.</p>
<p>1.Q.q4. The plan describes how death certificates and other vital records will be handled during emergencies that involve mass fatalities.</p>	<p>What are some aspects of vital records that might differ during a mass fatality event?</p>	<p>Examples of evidence applicants may provide include how they will surge these activities during a mass fatality event and how they will conduct these activities without access to electricity.</p>
<p>1.R.r3. The plan describes the process for determining corrective actions, reporting findings, and establishing</p>	<p>What is the main difference between 1.R.r3i and 1.R.r3iii-iv?</p>	<p>The main difference is that r2i involves controlling an outbreak, while r2iii and r2iv address maintaining safety in an emergency situation.</p>

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<p>responsibilities for emergency actions in the following areas: r3i. Foodborne and waterborne outbreak surveillance, investigation, and control. r3iii. Food safety. r3iv. Drinking water supply and safety.</p>		
<p>1.R.r3. The plan describes the process for determining corrective actions, reporting findings, and establishing responsibilities for emergency actions in the following areas: r3viii. Hazardous waste management. r3xi. Chemical or toxic release control and clean-up.</p>	<p>What if our agency does not do anything regarding hazmat or chemical/toxic clean-up?</p>	<p>If your agency is not the lead, use application guideline #1. In addition, consider potential roles where your agency may play a role to help respond to the what the criteria is asking for, such as assisting with sheltering, providing public information in conjunction with partners, providing expertise on how chemical or toxic affects the public's health or food.</p>
<p>1.Y.y2. The plan describes the process for transitioning from response to short-and long-term recovery.</p>	<p>What does the process for transition from response to recovery look like?</p>	<p>Some examples of processes that indicate the recovery phase is underway are demobilization of response staff and volunteers or services and infrastructure being restored to normal day-to-day operations. Recovery considerations should begin at the outset of a response, so short-term recovery may be taking place simultaneously with certain response actions.</p>
<p>Measure 2. Conduct of Regular Training Needs Assessments</p>	<p>If reviewers identify serious problems with a training needs assessment, can the applicant conduct a new assessment to meet the criteria?</p>	<p>Yes, although it will require re-answering many associated criteria elements. If an applicant has serious problems with their training needs assessment and decides to conduct a new one during the resubmission period, they must resubmit evidence for all of Measures 2 and 3. To demonstrate the PPHR quality improvement process, applicants must show that the priorities identified in the training needs assessment are the main priorities carried through the workforce development plan.</p>
<p>Measure 3. The agency establishes a list of priority staff (e.g., members of the public health preparedness division, all expected responders) who need training on priority training topics, based on the results of the training needs assessment and past corrective actions.</p>	<p>Do all agency staff need to be trained, or do these requirements only apply to priority staff?</p>	<p>While it is recommended to assess and train all staff, the requirement is only for priority staff. However, the applicant does need to define who constitutes priority staff (e.g. members of a public health preparedness division).</p>

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<p>3.E. Just-in-time Training</p>	<p>How long can just-in-time trainings be?</p>	<p>Just-in-time trainings can span from about 15 minutes to one hour in length and <u>ideally</u> should not last longer than 30 minutes. The training materials must be able to be delivered in less than hour in order to meet the criteria.</p>
<p>3.E.e2i-e2v. The workforce development plan includes training curricula (presentations and other materials) for the following just-in-time training topics:</p> <p>Guidance says: <i>Measure 3.E.e2:</i> The just-in-time training curricula must describe job responsibilities and information on how to perform the duties associated with specific jobs and should reflect the agency’s all-hazards plan. The amount of training material provided must be able to be delivered in less than an hour. Evidence must include curricula (presentations or other materials being delivered). Submitting only job action sheets will not satisfy the requirements.</p>	<ol style="list-style-type: none"> 1. Can these criteria be met by just submitting job action sheets? 2. How should the training curricula be incorporated into their response plan? 	<ol style="list-style-type: none"> 1. No. The criteria require just-in-time training curricula. While job action sheets can constitute part of the evidence, additional training materials are needed to meet the criteria. Please see the hyperlinked criteria guidance for more information. 2. The applicant may incorporate the training curricula into their response plan in any way that makes sense for the plan’s format, but they should be able to be easily accessed by staff and volunteers in an emergency.
<p>3.E.e2iii. [The workforce development plan contains training curricula (presentations and other materials) for the following just-in-time training topics:]</p> <p>Applicable NIMS components reflecting the agency’s all-hazards plan.</p>	<p>Do applicants need submit a JITT solely devoted to NIMS for this criteria element, or can they submit a JITT on a different topic that covers NIMS components?</p>	<p>Applicants may submit a JITT on a different topic that covers NIMS components, as long NIMS is comprehensively covered, and the material is tailored to the applicant’s jurisdiction and all-hazards plan.</p>
<p>Goal III. Goal III demonstrates the use of NIMS and Homeland Security Exercise and Evaluation Program (HSEEP) concepts and principles.</p>	<p>Do objectives have to be in SMART format (specific, measurable, achievable, realistic, and task-oriented), as HSEEP used to require?</p>	<p>While use of SMART objectives is encouraged, HSEEP and the PPHR criteria no longer require that objectives be in SMART format.</p>
<p>4.A. Multi-Agency After-Action Report Improvement Plan</p>	<ol style="list-style-type: none"> 1. Is it acceptable to submit more than one AAR/IP to meet different criteria in this measure? 	<ol style="list-style-type: none"> 1. No. The applicant may only submit one AAR to meet all the criteria in this measure. If the applicant wants to answer reviewer requests for additional evidence using a new AAR, they must re-answer all criteria elements in this measure using the new AAR.

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	2. Is it acceptable to submit an AAR/IP that was not written by the applicant (for example, for a regional exercise)?	2. Yes. However, if there are aspects of the AAR that are not specific enough to the applicant's agency, the applicant may have to develop additional documentation (see next question below).
4.A3. Analysis of Capabilities <i>and</i> 4.A4. Improvement Plan	Is it acceptable to submit evidence for these sub-measures that is not specific to the applicant (for example, from an AAR for a regional exercise)?	It depends. In order to demonstrate the successful implementation of quality improvement processes, the applicant must provide evidence that specifically describes health department capabilities and improvement planning. If these are not evident in the AAR, the applicant may develop their own analysis of capabilities and/or improvement plan based on the exercise and submit that as evidence.
4.A.a4ii-iv/4.B.b3ii-iv. The application contains a listing and timetable of any necessary revisions to the agency all-hazards response plan/workforce development plan/exercise plan and schedule, based on gaps identified during the exercise/incident response.	Does the evidence need to include both a listing of corrective actions and a timetable for revisions?	The applicant must provide a listing of corrective actions identified during the exercise/incident response. If any of the corrective actions require revisions to a plan, a timetable for these revisions needs to be provided.
4.A.a4v/4.B.b3v. The application identifies any strengths or weaknesses regarding administrative preparedness or legal preparedness.	Is it acceptable for applicants to put N/A or to omit evidence for this element if their improvement plan does not have any of these items?	Yes, applicants may put N/A or omit evidence for this element if their improvement plan does not identify any strengths or weaknesses regarding administrative preparedness or legal preparedness.
4.B. A response to an incident that will meet this measure must result in the production and approval of an incident action plan (IAP) (i.e., the incident must last more than one operational period.)	What is an appropriate operational period and how should the length be determined?	The operational period is a manageable segment of time within which the agency plans to accomplish or work toward specific objectives. An appropriate period of time could be up to eight, 12, or 24 hours, depending on local operational period mandates, resource availability, involvement of additional jurisdictions or agencies, safety considerations, and environmental considerations (e.g., daylight remaining, weather). The operational period should also be consistent with partner organizations' operational periods. The operational period may be adjusted throughout the event as operations require.
4.B.b2iv. The AAR/IP lists the following: <ul style="list-style-type: none"> • Notable strengths; • Key areas for improvement; and 	Is it acceptable for applicants to put N/A or to omit evidence for the third bullet point in this element if	Yes, applicants may put N/A or omit evidence for the third bullet point in this element if they have no high-level observations from their exercise or response that cut across multiple capabilities.

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If applicable, broad observations that cut across multiple capabilities.	they do not have any high-level observations?	Evidence must still be provided for the first two bullet points.
5.B.b7. The exercise plan shows anticipated participation in an exercise involving community-based organizations.	Do local government agencies count as community-based organizations?	Not for the purposes of this criteria element. Examples of acceptable agencies include local nonprofits, community associations, and faith-based organizations.