June 17, 2015 ADHS BPHEP Training and Exercise Planning Workshop – Transcription/Notes

Preliminary Announcements - Technical Assistance (Vote button test), Participation in today’s Webinar does count towards our HPP/PHEP sub-awardee deliverables, this is a moderated Event and at this time I would like to introduce —— (special instructions) . Note: At the conclusion of today’s session we will arrange to have materials posted on our website (Typically takes approximately two weeks), and we will share the link with you in a follow-up email. Disclaimer - This TEP Webinar is made possible through Grant Funding.

Introduction and Welcome - Antonio Hernandez

Agenda overview - outcomes/objectives (listed from power point presentation slides)

Background - Many of you are familiar with the 2013 Pandemic and All-Hazards Preparedness Reauthorization Act (PAPRA) - a critical step in making our nation more resilient to public health emergencies and disasters. PAPRA also serves as the basis for our Nations Preparedness Goals: PAPRA continues to emphasize the development of a coordinated health security strategy and implementation plan for public health emergency preparedness and response. HPP and PHEP awardees are directed to use the cooperative agreement funding to achieve the following preparedness goals (as described in section 2802 of the Public Health Service Act which align with the PHEP and HPP preparedness capabilities and corresponding resource elements and priorities).

G1) Integration (HPP and PHEP) - A. integration of public health and private medical capabilities with other first responder systems (through periodic drills/exercises). B. integration of the public and private sector - when it comes to public health and medical donations as well as volunteers.

G2) Medical Preparedness (HPP only) - increasing capabilities and surge capacity for hospital facilities (inclusive of mental health as well as ambulatory and long term care) - this includes development and testing of plans such as Medical surge capacity coordination, maintaining responder safety and health during public health emergency, rapid distribution of medical countermeasures, and effectively coordinate Fatality Management.

G3) Public Health (PHEP only) - developing and sustaining PHEP capabilities. Ultimately we are talking about our participating Counties and Tribes achieving operational readiness as it relates to the tasks describes in the PHEP Capabilities guidelines. Arizona PHEP program partners are doing their part by validating through drills/exercises (and real world events) an ability to achieve A. Disease Situational Awareness, B. Disease containment, C. Rapid distribution/administration of medial countermeasures, and D. Effectively implement Risk communications and maintain public/community preparedness.

G4) At-risk individuals (HPP and PHEP) - Achieved though Plans/Training/Exercise that take into account the needs of at-risk individuals including the unique considerations of individuals with disabilities. (the definition of at-risk individuals in coordination with our grant means children, pregnant women, senior citizens, and other individuals who have special needs in the event of a public health emergency).
G5) Coordination (HPP/PHEP) - Minimizing duplication of activities and ensuring coordination between emergency management (bridging our tribes, local, state and federal family)... this is achieved through planning that is based on and consistent with NIMS, National Goals and Response Frameworks.

G6) Continuity of Operations (HPP/PHEP) - Ensuring we all can maintain our vital public health and medical/mental and behavioral health services - this is in order to allow for optimal tribal/local/state/federal operations in the event of an public health emergency.

To achieve these goals - Arizona aligns 5 key planning tools.... 1. our ADHS PHEP/HPP 5 year plan (this 5 year plan is a strategic approach to ensure our program systematically covers all capabilities and their corresponding functions and resource elements by the conclusion of this 5 year grant cycle - we will be entering Budget Period 4 which means a special focus on a portion of the remaining capabilities ear marked for the year). 2. CPG data (a local and state self assessment tool that identifies critical gaps and areas of focus that marks progress in achieving capability development). 3. Agency and Partner Strategic planning (ADHS BPEP Strategic MAP - ensures alignment with Public Health, Emergency Management Goals and Initiatives, Senior Advisory Committee Guidance), 4. HSEEP methods (After Action Reports, Improvement Plans, Gap Based Training Validation, Public Comment and Participant Feedback on preparedness plans/training/exercises), and 5. Annual Grand Initiatives/Requirements to identify our annual grant Workplan and updated Multi-year Training and Exercise Plan (MYTEP) - this includes an annual update of our collective training and exercise priorities.

(INsert TOP 6 PRIORITIES) - share survey results - Validate through participant polling (to support maintaining the current priorities) - meaning as a group we will work together to emphasize and align our training/exercise activities with these priorities.

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MYTEP

Survey question - In this budget year (july 1 - june 30) have you met or plan to meet with your local emergency management and coalition partners and participate in a jurisdictional or
regional Training and Exercise Planning Workshop? Would any of our callers wish to share a brief highlight of their local/regional TEPW (Central Region?, Northern Region?, Western Region?, Southern Region?).

Survey question - Apart from the ADHS MYTEP - do you maintain a local or regional written multi-year training and exercise plan?

Survey question - MYETP elements (list elements - Schedule and Calendar)

Update on the ADHS MYTEP changes for BP4 (what’s new - ADHS state level focus)

Survey question - to our coalition training and exercise workgroup leads or local training and exercise coordinators (Do you have the resource - tools and templates needed to track your training/exercise activities, schedule events and create an updated calendar for BP4? Yes/No)

... our Agency has tools, templates, and resource at your service (highlight a couple of the tools available - schedule and calendar) - this includes technical assistance - requesting technical assistance is best achieved simply by reaching out to your respective PHEP/HPP program coordinators here at ADHS (and that is Stephen Zlotnick - PHEP and Valerie Dempsey - HPP) - they can connect you with our training and exercise staff.

At this time I would like to introduce our State Public Health Emergency Preparedness Training Officer - Ruth Penn (good morning - my name is Ruth Penn and I am a resource available to assist you in gathering information about any program trainings and here to help connect you with access to help equip your program with skills training opportunities as defined in the PHEP/HPP capabilities, I also have templates to help track and validate your annual training plans - this coming year in BP4 we are focusing on developing and providing you access to an ADHS training website with links and toolkits to get the PHEP/HPP training listed in the capability guidance. I look forward to being of service.)

Next it’s my pleasure to introduce our State Public Health Emergency Preparedness Exercise Coordinator - Alyssa Van Story (good morning - my name is Alyssa Van Story and I am a resource available to assist you with examples, tools, and templates to help support your
exercise planning and provide any technical assistance regarding exercise requirements and developing objectives that support testing/validating grant capabilities). I have examples of exercises, templates for your MSEL, Situation Manuals, Exercise Evaluation Guides, and After Action Report templates that align with HSEEP and meet the requirements for the PHEP/HPP grant. This coming year - in BP4, we plan to focus small group activities - look forward to mini-workshops via webinar, focused exercises by invitation in place the full statewide and regional exercises in BP3. We will continue to emphasize access and functional needs preparedness, explore pediatric planning, medical surge, recovery, fatality management, and infectious disease. I look forward to being of service).

(Antonio) - At this time we will share an at-a-glance view at upcoming ADHS training and exercise activities. Keep on the lookout for our monthly ADHS Training and Exercise Newsletter for additional updates (note: this newsletter is emailed out through our PHEP and HPP program coordinators and helps to keep our partners up-to-date and informed).

Survey - during BP3 have you received a copy of the ADHS Training and Exercise Monthly Newsletter?
Survey - do you find the newsletter helpful in keeping you updated on ADHS events and activities?

In BP3 as a collective we have achieved some incredible advances in preparedness through training and exercise events - as well as real world incidents (some highlights include working with emergency management on a statewide resource request exercise, Recovery Boot Camp Training, Coyote Collaborative Southwest Preparedness workshop, communication and information sharing exercises, Monsoon Flooding which validated the effectiveness of COOP preparedness planning, Super Bowl coordination, emergent disease and outbreak response, Ebola Table Top Exercise which help keep our partners up-to-date and in sync with response strategies, Regional Coalition Exercises, HEOC relocation drills, a medical surge and crisis
standards of care workshop, we played a part in weaving connections with our behavioral health preparedness partners, we exercising integrating assistance from our Epi-Lab-Poison Control partners to boost public health and medial capabilities, together we validated roles and responsibilities in fatality management, assisted in preparing our long term care and adult day treatment centers through trainings and table top exercise, schools/first responders/emergency management and public health joined together to enhance planning and preparedness for Active Killer and Active Shooter, and ADHS partnered with the Arizona Department of Emergency and Military Affairs to support tribal preparedness, bring together the 2015 Partners in Preparedness Summit to build community preparedness among children and families with an emphasis on addressing access and functional needs, and Arizona participated in the nations first nuclear incident long-term recovery executive table top.) These successes were made possible through your support and participation in public health training and exercise activities. On behalf of our leadership and event planning partners “Thank you for an outstanding year of preparedness helping fulfill the MYTEP and collectively take a step towards meeting building capabilities and taking a step to meeting PAPRA Goals.”

Here is a brief overview of ADHS’s BP4 Calendar

—- (Walk through the the BP4 Calendar)

OPEN for Questions?????

Next Steps and Closing Remarks

The MYTEP is going to be updated (2015 - 2020), available and distributed early this fall, its going to include the priority domains and a streamlined schedule and calendar with a focus on State Public Health Emergency Preparedness activities. Remember tools are available and our Training officer and exercise coordinator are among your ADHS resources.
For those working on your MYTEP updates, I will close with the following tips for sharing your MYTEP (share TIPS)....

1. Create a distribution list
   a. Start within your agency by identifying key programs/authorities associated with your agency/emergency operations center continuity of operations
   b. Search your public health emergency plans to identify key partners that have a role/responsibility

2. Identify/Survey/Invite local public and private partners involved in similar exercise activities or program mandates (Nationally many programs are aligning – there may be more partners today than you may think)
   a. Provide a brief overview of your program, MYTEP (Multi Year Training and Exercise Plan), and training/exercise schedule and invite participation to your activities

3. Add value to a MYTEP by including
   a. A brief overview of your “Jurisdictional Priorities”
   b. The specific capabilities to be tested (In terms of PHEP – and when applicable in terms of Hospital Preparedness Program Capabilities, or even FEMA Core Capabilities)
   c. Demonstrate how healthcare coalitions, other public health, emergency management, hospitals and additional private and community organizations are involved
   d. Include the following elements
      • Discuss in the narrative how your exercises/trainings develop capabilities and implement with a progressive (building/block) approach
      • Describe how exercises/trainings are conducted and evaluated (e.g. following HSEEP and meeting NIMS requirements)
      • Describe in narrative how exercises/trainings are integrated into improvement planning (e.g. validation, reporting, and documentation resulting in completed
activities, updated plans, and inform stakeholders

- Describe how your exercise/training requirements coordinate across jurisdictions to maximize inclusion of the whole community
- Provide evidence of linking work-plans, budget, and technical assistance are being aligned with relevant activities to close operational gaps
  
  e. Provide proposed schedules that are well planned, clear, and relevant (e.g. describe partner, capabilities, and gaps to be addressed)
  
  f. Provide schedules that include activities to be performed within the 5 year period

We’ll open the lines for our callers - any questions?

Reminder today’s materials will be made available on our website an email with a link will go out over the next few weeks. Looking forward to great year. This now concludes our 2015 ADHS Training and Exercise Planning Workshop. Thank you for your participation.