

AGREEMENT FOR SERVICES #CC2007-10  
AMENDMENT II

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This Amendment II to that Agreement for Services #CC2007-10, made and entered into by and between the County of El Dorado, a political subdivision of the State of California (hereinafter referred to as "El Dorado") and the County of Alpine, a political subdivision of the State of California (hereinafter referred to as "Alpine");

**WITNESSETH**

**WHEREAS**, Alpine has a need for Administrative support services, on a part-time basis for the Hospital Preparedness Program (HPP); and

**WHEREAS**, El Dorado, through its Health Services Department – Public Health Division, Disaster Preparedness Program, shall continue to provide to Alpine administrative support services for the HPP Program; and

**WHEREAS**, the parties hereto have mutually agreed to modify **ARTICLE I - SCOPE OF SERVICES** to add services consistent with the Alpine HPP Work plan; and

**WHEREAS**, the parties hereto have mutually agreed to modify **ARTICLE II - TERM**; and

**WHEREAS**, the parties hereto have mutually agreed to modify **ARTICLE III - COMPENSATION**; and

**WHEREAS**, the parties hereto have mutually agreed to modify **ARTICLE VII – NOTICE TO PARTIES**;

**NOW THEREFORE**, the parties do hereby agree that Agreement for Services #CC2007-10 shall be amended a second time as follows:

## **ARTICLE I – SCOPE OF SERVICES**

El Dorado agrees to provide, on a part-time basis, administrative support services for the ongoing HRSA Program. El Dorado shall provide services under this agreement using the same El Dorado County employee who provides administrative support services to El Dorado County's HRSA Program. The employee functions as the local HRSA Coordinator.

Specific responsibilities for the Local HRSA Coordinator position, as described in *Exhibit A-1, Alpine HRSA Grant*, shall include:

- Develop needed plans, policies, and procedures for surge capacity, including plans for the use of local and regional resources
- Collect data from participating hospital, clinics, and other health care providers
- Develop mutual aid agreement, memorandums of agreement (MOA's), etc
- Coordinate the development and implementation of training and exercises
- Serve as liaison between the health care facilities and Regional Coordinator
- Forward information to the Local Entity for the mid-Year and Final Progress Reports
- Administrative support services to Alpine's HRSA Program will average 8 hours per week.

In addition, for the term July 1, 2008 through August 9, 2009, El Dorado agrees to provide for Alpine, on a part-time basis, administrative support services as outlined below, for the Hospital Preparedness Program (HPP), provided by the El Dorado County employee who functions as the El Dorado local HPP Coordinator, or designee.

Specific responsibilities for the Local HPP Coordinator position, as described in *Exhibit A-2 Parts 1 and 2, Alpine HPP 2007-08 Grant*, some of which will be carried into the term of this agreement, and *Exhibit B – Local HPP Entity 2008-09 Work Plan* incorporated by reference herein, shall include:

1. Assist in the preparation of the narrative and budget portions of the CDC and HPP grants for fiscal year 2008-09. Such assistance to include, but may not be limited to, development of the language of the narrative and review of the budget with suggestions for changes, modifications, corrections and comments needed to obtain fully and timely approval by the California Department of Public Health (CDPH) within the guidelines set by the CDPH.
2. Include Alpine in all drills and exercises planned and executed by El Dorado as needed to meet the requirements of both grants.
3. Assist in preparation and review of all "After Action" reports required by the aforementioned drills and exercises involving both Alpine and El Dorado.
4. Assist in the preparation of all mid-year and end-of-year reports and any other reports as required by the CDPH to meet the requirements of both grants.
5. On-site visit(s) to Alpine County Health and Human Services office as often as once a month, if and when requested by either County at a time and date agreeable to both parties.
6. General assistance with questions of protocol, budget requirements, deadlines, and other matters as needed by Alpine County to meet the requirements of the CDPH for both grants.

**ARTICLE II – TERM** is amended in its entirety to read as follows:

This agreement is effective the date of the original agreement May 16, 2006, and continues through August 9, 2009.

**ARTICLE III – COMPENSATION FOR SERVICES** is amended to add the following:

In lieu of the aforementioned annual amount, for FY 2007-08 Alpine County will provide to El Dorado County a one-time total amount of \$17,262 to conduct planning and testing exercises as required by Alpine’s combined Emergency Preparedness Grant Program guidelines, payable and due on May 1, 2009.

In lieu of the aforementioned annual amount, for FY 2008-09 Alpine County will provide to El Dorado County a one-time total amount of \$42,738 to conduct planning and testing exercises as required by Alpine’s Emergency Hospital Preparedness grant program guidelines, payable and due June 1, 2009.

**ARTICLE VII – NOTICE TO PARTIES** is amended in its entirety to read as follows:

All notices to be given by the parties hereto shall be in writing and served by depositing same in the United States Post Office with postage prepaid.

Notices to Alpine shall be in duplicate and addressed as follows:

**ALPINE COUNTY HEALTH AND HUMAN SERVICES  
75-B DIAMOND VALLEY ROAD  
MARKLEEVILLE, CA 96120  
ATTN: CINDY HANNAH, DIRECTOR**

Or to such other location as Alpine directs.

Notices to El Dorado shall be as follows:

**EL DORADO COUNTY HEALTH SERVICES DEPARTMENT –  
PUBLIC HEALTH DIVISION  
931 SPRING STREET  
PLACERVILLE, CA 95667  
ATTN: NEDA WEST, DIRECTOR**

Or to such other location as El Dorado directs.

Except as herein amended, all other parts and sections of that Agreement #CC2007-10 shall remain unchanged and in full force and effect.



IN WITNESS WHEREOF, the parties hereto have executed this second Amendment to that Agreement for Services #CC2007-10 on the dates indicated below.

-- COUNTY OF EL DORADO --

Dated: \_\_\_\_\_

By: \_\_\_\_\_

Ron Briggs, Chairman  
El Dorado County Board of Supervisors

ATTEST:

*Suzanne Allen de Sanchez, Clerk of the Board of Supervisors*

By: \_\_\_\_\_ Date: \_\_\_\_\_

Deputy Clerk

-- COUNTY OF ALPINE --

Dated: March 17, 2009

By: *Phillip D. Bennett*

Phillip D. Bennett, Chairman  
Alpine County Board of Supervisors

ATTEST:

*Barbara Howard, County Clerk*

By: *Sarah Smith* Date: 3/17/2009

Deputy Clerk

**Exhibit A-2, Part 1**  
**Instructions to Complete the Local Entity HPP 07-08 Grant Form**  
**Work Plan, Mid Year Progress, and Year End Progress**  
**(Includes HPP and Supplemental HPP Pandemic Influenza Funds)**

**Please follow these instructions carefully. The Local Entity HPP 07-08 Grant Form, which follows these instructions, will be used to complete the Work Plan, Mid Year Progress Report, and the Year End Progress Report.**

**I. Form Functions**

1. One form will be used by the local entities for the HPP Work Plan, Mid Year Progress report, and Year End Progress report.
2. The form is initially named Local Entity HPP 07-08 Grant Form and is password protected. The report narrative rows/cells are color-coded to match the type of narrative (Work Plan, Mid Year Progress, and Year End Progress) as depicted in the legend in the page header. The form will only allow the Local Entities to enter information in the Entity Name cell, Work Plan narrative and projected completed MO/YR (blue shaded row/cells), Mid Year Progress narrative and completion code (green shaded row/cells), and Year End Progress narrative and completion code (orange shaded row/cells).
3. The shaded area that appears in the cells is where to place the cursor to enter text. Cells that do not contain the shaded area are locked and text cannot be entered.
4. Use the tab key to navigate from cell to cell; the cursor will only move to those cells that allow text entry.

**II. Completing and Submitting the Work Plan Form**

1. Before you begin to enter the Work Plan narrative, rename or copy Local Entity HPP 07-08 Grant Form to [Entity Name] HPP 07-08 Work Plan. Open the form and enter the required information.
2. **ENTITY NAME:** Enter the name of the public health department (county name only, Contra Costa, for example) or other entity (Sierra-Sacramento Valley Emergency Medical Services, for example). The Entity Name need only be entered on the first page as it repeats automatically on each subsequent page.
3. **BLUE SHADED ROW:** Enter the Work Plan narrative in the first cell and the MO/YR (00/00) in which the Local Entity projects that the capability will be completed in right hand cell.
4. When the Work Plan narrative is complete, email the form to [jhbtprog@cdph.ca.gov](mailto:jhbtprog@cdph.ca.gov) and cc your Regional Project Officer by the due date.

**III. CDPH/EPO Work Plan Review Process**

1. EPO will review the Work Plan narrative and enter the CDPH/EPO comments in the GRAY SHADED ROW.
2. If EPO requires additional information after the first review is complete, EPO will email a file named [Entity Name] HPP 07-08 Work Plan Not Approved to the Local Entity with other documentation (cover letter, etc.)

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**Exhibit A-2, Part 1**  
**Instructions to Complete the Local Entity HPP 07-08 Grant Form**  
**Work Plan, Mid Year Progress, and Year End Progress**  
**(Includes HPP and Supplemental HPP Pandemic Influenza Funds)**

3. After the Local Entity receives [Entity Name] HPP 07-08 Work Plan Not Approved, copy or rename the file to [Entity Name] HPP 07-08 Work Plan Resubmitted. Enter the date and the requested information in the Work Plan narrative cell, below the original Work Plan narrative.
4. When all the additional information requested is entered, the Local Entity will email [Entity Name] HPP 07-08 Work Plan Resubmitted to lhbtprog@cdph.ca.gov and cc the Regional Project Officer by the due date.
5. If EPO does not require additional information after the first and/or second reviews are complete, EPO will send a file named [Entity] HPP 07-08 Work Plan Approved and email it to the Local Entity with other documentation (approval letter, etc).

**IV. Mid Year and Year End Progress Reports**

1. Entering Mid Year Progress Narrative
  - a. When the Local Entity receives the file [Entity] HPP 07-08 Work Plan Approved, rename or copy the file to [Entity Name] HPP 07-08 Mid Year Progress. During the Mid Year Progress period (9/1/07-2/28/08) the Local Entity can enter the mid year progress narrative as work progresses on the Capabilities.
  - b. GREEN SHADED ROW: Enter the Midyear Progress narrative in the first cell and the progress code in the right hand cell: Enter [N] for Not Started, [P] for Partial Progress and [C] for Complete. If the Capability was already completed in the previous grant year, the Local Entity need only enter a [C] in the progress code in the green shaded cell and the mid year narrative is not necessary.
2. Mid Year Progress Submittal Process
  - a. When EPO requests submission of the Mid Year Progress Report, email the file to lhbtprog@cdph.ca.gov and cc the Regional Project Officer by the due date.
3. Entering Year End Progress Narrative
  - a. After the Mid Year Progress report is submitted to EPO, rename or copy the [Entity Name] HPP 07-08 Mid Year Progress file to [Entity Name] HPP 07-08 Year End Progress. During the Year End Progress period (3/1/08-8/9/08) the Local Entity can enter the year end narrative as work progresses on the Capabilities.
  - b. ORANGE SHADED ROW: Enter the Year End progress narrative in the first cell and progress code in the right hand cell: Enter [N] for Not Started, [P] for Partial Progress and [C] for Complete. If the Capability was complete in the Mid Year Progress submission, the Local Entity need only enter a [C] in the progress code in the orange shaded cell and the year end narrative is not necessary.
4. Year End Progress Submittal Process
  - a. When EPO requests submission of the Mid Year Progress Report, email the [Entity Name] HPP 07-08 Year End Progress file to lhbtprog@cdph.ca.gov and cc the Regional Project Officer by the due date.

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**Exhibit A-2, Part 1**  
**National Hospital Preparedness Program (HPP)**  
**Grant Period 9/1/07 - 8/9/08**  
**Local Entity HPP and HPP Supplement for Pandemic Influenza Work Plan**  
**Mid Year (9/1/07 - 2/28/08) and Year End (3/1/08 - 8/9/08) Progress Reports**

|                |
|----------------|
| Sub Capability |
| Local Approach |

|                     |
|---------------------|
| Work Plan Narrative |
| CDPH/EPO Comments   |

|                   |
|-------------------|
| Midyear Progress  |
| Year End Progress |

| ENTITY NAME:                           | Alpine County  | MO/<br>YR | Prog<br>Code |
|--|--|-----------|--------------|
| <b>PRIORITY PROJECT IDENTIFICATION</b> |  |           |              |
| <b>Priority Project #1</b>             |  |           |              |
| P1.1                                   | <p>Description of the Project: What will be accomplished? Which capabilities and/or overarching requirements will be addressed?</p> <p>As per the Hospital Preparedness Program 2007-08 Local Application Guidance, Alpine County plans to address Level I and II capabilities involving interoperable communication systems, advanced registration of volunteer health professionals, overarching requirements involving exercises, evaluations, and corrective actions to improve our emergency planning. This will be done by performing a functional exercise involving emergency partners and the staff at our Public Health Department. The project will help evaluate existing lines of communication with emergency partners and volunteers in addition to testing the pharmaceutical cache distribution plan. The exercise scenario will involve a request for volunteer and pharmaceutical resources from across Alpine County as a result of a terrorist event. During the exercise, contact will be made with participants utilizing a combination of hand-held radios, cell phones, satellite phones, palm computers, land lines, PC's and CAHAN. The Alpine County volunteers will be activated through the California Medical Registry system by the Alpine County Public Health (ACPH) department. The pharmaceutical cache deployment will be simulated as a result of a request from a preparedness partner located in Bear Valley, CA.</p> <p>5/7/08 Additional information provided by e-mail. We plan to contact any local clinics and long term care facilities as part of our exercise. Barton Hospital will be contacted and we will include Carson Valley Medical Clinic, who also staffs the clinic at Kirkwood Ski Resort. Our RN in Bear Valley will also be involved. We will be checking for available hospital beds during this exercise. We will also be drilling on the need and process for setting up an ACS.</p> <p>5/7/08 No additional information needed.</p> |           |              |
| P1.2                                   | Participants: Who will participate in the project? List specific facilities and organizations.   |           |              |

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**Exhibit A-2, Part 1**  
**National Hospital Preparedness Program (HPP)**  
**Grant Period 9/1/07 – 8/9/08**  
**Local Entity HPP and HPP Supplement for Pandemic Influenza Work Plan**  
**Mid Year (9/1/07 - 2/28/08) and Year End (3/1/08 - 8/9/08) Progress Reports**

| Sub Capability   |               | Work Plan Narrative |           | Midyear Progress  |  |
|--|---------------|---------------------|-----------|-------------------|--|
| Local Approach   |               | CDPH/EPO Comments   |           | Year End Progress |  |
| ENTITY NAME:   | Alpine County | MO/ YR              | Prog Code |                   |  |
| <p>The participants include staff at ACPH in the Bear Valley and the Easter Slope of Alpine County, the Alpine County Sheriff's Office, and The Washoe Tribe of California and Nevada. The exercise will take place via teleconferences held in the Bear Valley and East Slope business facilities.</p> <p>5/7/08 No additional information needed.</p>  |               |                     |           |                   |  |
| <p><b>P1.3 Justification:</b> Why was the project selected?</p> <p>The objectives of the ACPHD is to enhance emergency preparedness throughout the county in order to better protect and serve our community. This priority project will reinforce the lines of communication we have in place for risk communications and the emergency notification of service partners. Alpine County volunteer registration process includes the use of the California Medical Registration system and will be validated through the exercise play. The pharmaceutical deployment plan is integral to the overall public health response. The functions were selected for testing to both enhance our existing plans and to accommodate improvements needed per the 2006 HOAC assessment.</p> <p>5/7/08 No additional information needed.</p>  |               |                     |           |                   |  |
| <p><b>P1.4 Project Timeline:</b> What key activities will be completed and what are the projected completion dates?</p> <p>Initial planning began in April 2008 and all project activities will be completed by June 2008. Initial planning meetings are currently being scheduled to coordinate the planning processes and define individual departmental goals. Activation of the exercise play will occur on the morning of June 13, 2008 at 10am and will continue for approximately 2 hours. The primary communications activities and notification will initiate the action and are expected to last approximately 1/2 hour. Subsequent communication activities will take place throughout the exercise and will conclude with a formal notification to all player of the exercise completion. The activation of Alpine County volunteers will take place at approximately 11am and will involve the Calif. Med Reg. system and CAHAN. Pharmaceutical cache deployment will be simulated upon receiving a request from the Bear Valley facility at approximately 11:30am. Hotwash and AAR will occur upon conclusion of the exercise and will reach completion by noon.</p> <p>5/7/08 No additional information needed.</p> |               |                     |           |                   |  |

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**Exhibit A-2, Part 1**  
**National Hospital Preparedness Program (HPP)**  
**Grant Period 9/1/07 - 8/9/08**  
**Local Entity HPP and HPP Supplement for Pandemic Influenza Work Plan**  
**Mid Year (9/1/07 - 2/28/08) and Year End (3/1/08 - 8/9/08) Progress Reports**

|                                       |  |                     |  |                   |                      |
|---------------------------------------|--|---------------------|--|-------------------|----------------------|
| Sub Capability                        |  | Work Plan Narrative |  | Midyear Progress  |                      |
| Local Approach                        |  | CDPH/EPO Comments   |  | Year End Progress |                      |
| <b>ENTITY NAME:</b>                   | <b>Alpine County</b>   |                     |  | <b>MO/<br/>YR</b> | <b>Prog<br/>Code</b> |
| P1.5                                  | <p>Deliverables: What specific products will be produced during the 2007-08 grant period?<br/> The priority project identified will result in the production of all preparatory documentation required for the exercise, scenario supporting media, and corrective action plans resulting from lessons learned. Improvement plans identified will be incorporated into the Alpine County emergency preparedness plans.</p>   |                     |  |                   |                      |
| 5/7/08                                | No additional information needed.  |                     |  |                   |                      |
| P1.6                                  | <p>Evaluation of Project: How will the success of the project be evaluated? What are the quantifiable measurements that will be<br/> The success of the project will be evaluated through post-activity hot wash session and the timely and efficient progression through the exercise scenario. The measurement of communications processes will concentrate on reaction times and recognition of hazard and resource requirements. Activation of local volunteers will be initiated by the East Slope ACPHD and will be considered successful upon response to CAHAN alerting. The pharmaceutical cache deployment will involve successful identification of applicable medications and confirmation of availability. The project will be evaluated through the improvements of the existing emergency preparedness plans as identified in the AAR/IP process.</p> |                     |  |                   |                      |
| 5/7/08                                | No additional information needed.  |                     |  |                   |                      |
| <b>Priority Project #2 (optional)</b> |  |                     |  |                   |                      |
| P2.1                                  | Description of the Project: What will be accomplished? Which capabilities and/or overarching requirements will be addressed?   |                     |  |                   |                      |
| CC2007-10, A-2                        |  |                     |  |                   |                      |

**Exhibit A-2, Part 1**  
**National Hospital Preparedness Program (HPP)**  
**Grant Period 9/1/07 – 8/9/08**  
**Local Entity HPP and HPP Supplement for Pandemic Influenza Work Plan**  
**Mid Year (9/1/07 - 2/28/08) and Year End (3/1/08 - 8/9/08) Progress Reports**

|                     |   |                     |  |                   |                      |
|---------------------|---|---------------------|--|-------------------|----------------------|
| Sub Capability      |   | Work Plan Narrative |  | Midyear Progress  |                      |
| Local Approach      |   | CDPH/EPO Comments   |  | Year End Progress |                      |
| <b>ENTITY NAME:</b> | <b>Alpine County</b>  |                     |  | <b>MO/<br/>YR</b> | <b>Prog<br/>Code</b> |
| P2.2                | Participants: Who will participate in the project? List specific facilities and organizations.  |                     |  |                   |                      |
| P2.3                | Justification: Why was the project selected?  |                     |  |                   |                      |
| P2.4                | Project Timeline: What key activities will be completed and what are the projected completion dates?                                    |                     |  |                   |                      |
| P2.5                | Deliverables: What specific products will be produced during the 2007-08 grant period?  |                     |  |                   |                      |
| P2.6                | Evaluation of Project: How will the success of the project be evaluated? What are the quantifiable measurements that will be evaluated? |                     |  |                   |                      |

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**Exhibit A-2, Part 1**  
**National Hospital Preparedness Program (HPP)**  
**Grant Period 9/1/07 – 8/9/08**  
**Local Entity HPP and HPP Supplement for Pandemic Influenza Work Plan**  
**Mid Year (9/1/07 - 2/28/08) and Year End (3/1/08 - 8/9/08) Progress Reports**

|  |   |                     |  |                   |
|--|---|---------------------|--|-------------------|
| Sub Capability   |   | Work Plan Narrative |  | Midyear Progress  |
| Local Approach   |   | CDPH/EPO Comments   |  | Year End Progress |
| <b>ENTITY NAME:</b>  | Alpine County   |                     |  | <b>MO/<br/>YR</b> |
| <b>WORKPLAN ACTIVITIES</b>   |   |                     |  |                   |
| <b>I. Level One Required Capabilities (ESAR-VHP, Bed Tracking, Interoperable Communications, Fatality Management Plans, and Hospital Evacuation Plans)</b>                               |   |                     |  |                   |
| 1.   | <p>Local HPP Coordinator – Local Entity will continue to fund an HPP Coordinator position. The HPP Coordinator is required to perform or facilitate completion of all tasks related to meeting the requirements of the grant award.</p> <ul style="list-style-type: none"> <li>• Work with the local healthcare facilities (HCFs), California Hospital Association (CHA) Coordinators, and California Department of Public Health (CDPH) Project Officers in ensuring emergency preparedness activities are coordinated between HCFs and LHDs.</li> <li>• Provide the Local Health Department (LHD) with a list of contact numbers for 24/7 contact of emergency response personnel in each HCF. The list must be updated quarterly.</li> </ul> |                     |  |                   |
| 1.1  | Provide the name and contact information for the Local HPP Coordinator.   |                     |  |                   |
| Julie Ola, c/o Alpine County Health & Human Services, 75-B Diamond Valley Rd., Markleeville CA 96120, (530)694-2235, fax (530)694-2252, cell (530)863-3242, julie@hhs.alpinecountyca.gov |   |                     |  |                   |
| 5/7/08 No additional information needed.   |   |                     |  |                   |
| 1.2  | Provide the HCF 24/7 contact numbers by completing the contact list form which is part of this application. Indicate the name and title of the person who will maintain the contact list including 24/7 contact information for this individual. Please see completed contact list.   |                     |  |                   |
| 5/7/08 No additional information needed.   |   |                     |  |                   |
| 1.3  | Identify the approximate amount of money that will be distributed to each hospital, clinic or other HCF to support activities and purchases in this overall program. Describe activities the hospitals, clinics and other HCFs will complete during 2007-08. Alpine County is partnering with Barton Hospital in El Dorado County via an MOU.   |                     |  |                   |
| CC2007-10, A-2   |   |                     |  |                   |

**Exhibit A-2, Part 1**  
**National Hospital Preparedness Program (HPP)**  
**Grant Period 9/1/07 – 8/9/08**  
**Local Entity HPP and HPP Supplement for Pandemic Influenza Work Plan**  
**Mid Year (9/1/07 - 2/28/08) and Year End (3/1/08 - 8/9/08) Progress Reports**

| Sub Capability |  | Work Plan Narrative |           | Midyear Progress  |
|----------------|--|---------------------|-----------|-------------------|
| Local Approach |  | CDPH/EPO Comments   |           | Year End Progress |
| ENTITY NAME:   | Alpine County  | MO/YR               | Prog Code |                   |
| 2.             | Develop a plan for working with HCFs and community partners to identify medical and health volunteers who can be recruited for inclusion in California Medical Volunteers (California's ESAR-VHP). As California Medical Volunteers becomes available in the Operational Area, describe how the HPP Local Entity will promote volunteer registrations.   |                     |           |                   |
| 2.1            | Describe activities that will be undertaken to identify medical and health volunteers who can be recruited for California Medical Volunteers.<br>Alpine County utilizes the California Medical Registry system. All current and newly recruited volunteers will be registered using this system. The ACPHD coordinator will administrate the system for Alpine County. Alpine County will promote future volunteers and register them in the Cal. Med. Reg. system. NOTE: Volunteer recruitment is an ongoing process in Alpine County. The need for volunteers is ongoing and is usually advertised via local newsletters that are mailed out to all county residents, via word of mouth, and sometime via posted flyers.<br>5/7/08 No additional information needed. |                     |           |                   |
| 2.2            | Describe any existing local volunteer registries. Indicate the number of volunteers, the professions represented (e.g., RN, MD, DVM), the data fields (e.g., name, address, email address, etc.), and the software (e.g., Access, Excel, etc.) used in any current registry.<br>Alpine County utilizes the California Medical Registry system. Additional resources will be obtained from neighboring counties should the need arise. Agreements are in place to activate external volunteers in El Dorado County in Calif. Douglas County in Nevada as well as state and federal resources as defined in grant planning.<br>5/7/08 No additional information needed.  |                     |           |                   |
| 2.3            | Identify a local contact for the California Medical Volunteer (CMV) system.<br>Dr. Richard Harvey, PHO at Alpine County Health & Human Services, Public Health Dept. 75 Diamond Valley Road, Markleeville CA 96120 (530) 694-2146.<br>5/7/08 No additional information needed.   |                     |           |                   |

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**Exhibit A-2, Part 1**  
**National Hospital Preparedness Program (HPP)**  
**Grant Period 9/1/07 - 8/9/08**  
**Local Entity HPP and HPP Supplement for Pandemic Influenza Work Plan**  
**Mid Year (9/1/07 - 2/28/08) and Year End (3/1/08 - 8/9/08) Progress Reports**

| Sub Capability |  | Work Plan Narrative |           | Midyear Progress  |
|----------------|--|---------------------|-----------|-------------------|
| Local Approach |  | CDPH/EPO Comments   |           | Year End Progress |
| ENTITY NAME:   | Alpine County  | MO/YR               | Prog Code |                   |
| 3.             | Bed Availability Tracking System. Development and enhancement of bed tracking systems are a required activity for all awardees. Bed categories have been outlined that all systems must contain whether or not bed tracking currently exists.  |                     |           |                   |
| 3.1            | Confirm that a bed tracking system currently exists in the jurisdiction and that the systems are capable of reporting on the bed types outlined in the Program Requirements section of the federal guidance (a copy of the federal guidance has been provided in this application package).  |                     |           |                   |
|                | Not applicable to Alpine County. Alpine County does not have a hospital, no hospital beds, and no bed tracking system. Alpine County does not have a paid subscription through EMSsystem.  |                     |           |                   |
|                | 5/7/08 No additional information needed.   |                     |           |                   |
| 3.2            | Work with the CDPH Project Officer, CHA Coordinator, and all participating hospitals in development and conduct of a bed tracking drill/exercise. Provide the projected MO/YR of the drill. Include in the drill how the tracking system in each hospital is activated and the current chain of reporting from the hospital to the Local HPP entity and on to the Joint Emergency Operations Center at CDPH. Maintain this information at the LHD.   |                     |           |                   |
|                | Alpine County does not have a hospital and does not have any hospital beds to track. However, Alpine County does have an MOU with Barton Hospital in El Dorado County and is working with staff there to develop and participate in a bed tracking exercise. This will include staff from El Dorado County as well as staff from Marshall Hospital in Placerville and will be performed as part of the April 4, 2008 evacuation drill at Barton Memorial Hospital at Lake Tahoe. Alpine County is currently unfamiliar with how Barton's tracking system is activated and how the current chain of reporting functions. This information will be obtained during the development and participation in the drill/exercise on April 4, 2008. Post-drill this information will be maintained at the Alpine County Health & Human Services office.<br>NOTE: For more information on Alpine County's plans to participate in a hospital evacuation drill with Barton Hospital on April 4, 2008. Please see 6.1. |                     |           |                   |
|                | 5/7/08 No additional information needed.   |                     |           |                   |
| 3.3            | Participate in the statewide HavBed reporting drill. More information will be provided at a later date.  |                     |           |                   |
|                | Alpine County plans to participate in the statewide HavBed reporting drill once information is provided.   |                     |           |                   |
|                | CC2007-10, A-2   |                     |           |                   |

**Exhibit A-2, Part 1**  
**National Hospital Preparedness Program (HPP)**  
**Grant Period 9/1/07 – 8/9/08**  
**Local Entity HPP and HPP Supplement for Pandemic Influenza Work Plan**  
**Mid Year (9/1/07 - 2/28/08) and Year End (3/1/08 - 8/9/08) Progress Reports**

| Sub Capability |   | Work Plan Narrative |           | Midyear Progress  |  |
|----------------|---|---------------------|-----------|-------------------|--|
| Local Approach |   | CDPH/EPO Comments   |           | Year End Progress |  |
| ENTITY NAME:   | Alpine County   | MO/YR               | Prog Code |                   |  |
| 5/7/08         | No additional information needed.   |                     |           |                   |  |
| 3.4            | Describe the process by which the Local HPP Entity collects bed availability data from HCFs, aggregates the data and sends it to CDPH. List the title and name of the person who will be reporting the information for each HCF, and the name and title of the person in the Local HPP Entity who will be receiving the information. More information on statewide progress will be sent as it is available.<br><br>Alpine County does not have a hospital and does not have any hospital beds to track. However, Alpine County does have an MOU with Barton Hospital in El Dorado County and is currently working with staff there to develop and participate in a bed tracking exercise that will take place on April 4, 2008. Alpine County is currently unfamiliar with how Barton's tracking system is activated and how the current chain of reporting functions. This information will be obtained during the development and participation in the drill/exercise on April 4, 2008. Post-drill this information will be maintained at the Alpine County Health & Human Services office. Still to be determined is the contact at Barton Hospital who will be reporting the information but we believe it will be Darcie Carpenter, Emergency Mangement Coordinator/Facilities Safety Officer. (At the time of this submission we were awaiting correspondence from Ms. Carpenter.) Richard Harvey, PHO, will be receiving the information for Alpine County. |                     |           |                   |  |
| 5/7/08         | No additional information needed.   |                     |           |                   |  |
| 4.             | Interoperable Communication Systems. Work with HCFs to ensure interoperable communications systems are in place for communicating with response partners. Describe how redundant communication systems will be tested during the grant period. Note: CDPH is responsible for HCF participation in the California Health Alert Network (CAHAN).  |                     |           |                   |  |
| 4.1            | Ensure Local HPP Entity and HCF staff are trained on use of communications equipment (satellite phone, blackberry, pager, etc). Develop a training/education schedule for staff involved in response efforts.<br><br>An exercise is planned to test Alpine County's emergency communications interoperability using a combination of handheld emergency radios, satellite phones, land line phones, and handheld palm computers. This exercise will include public health staff; volunteer fire fighters and EMTs from Markleeville, Woodfords, Bear Valley Ski Resort, and Kirkwood Ski Resort; the Washoe Tribe of California and Nevada; the Alpine County Sheriff's Office; the Alpine County Dept. of Public Works; and the Alpine County Emergency Preparedness Coordinator. Prior to the exercise, all   |                     |           |                   |  |

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**Exhibit A-2, Part 1**  
**National Hospital Preparedness Program (HPP)**  
**Grant Period 9/1/07 - 8/9/08**  
**Local Entity HPP and HPP Supplement for Pandemic Influenza Work Plan**  
**Mid Year (9/1/07 - 2/28/08) and Year End (3/1/08 - 8/9/08) Progress Reports**

| Sub Capability |   | Work Plan Narrative |           | Midyear Progress  |  |
|----------------|---|---------------------|-----------|-------------------|--|
| Local Approach |   | CDPH/EPO Comments   |           | Year End Progress |  |
| ENTITY NAME:   | Alpine County   | MO/YR               | Prog Code |                   |  |
|                | personnel that will be participating will have had at least basic training to use whichever form of communication equipment they will be using for the exercise (and ultimately for any disaster or drill that occurs.) Our AAR will help us determine any gaps in our emergency communications towards the goal of ensuring complete interoperability. Additional exercise and training will occur throughout the year and is identified in the ACPHD exercise training schedule document.   |                     |           |                   |  |
|                | 5/7/08 No additional information needed.  |                     |           |                   |  |
| 4A.            | Interoperable Communications- Hospital Laboratory Reporting. Expand on efforts that have been underway for the past 4 years for packaging, testing lab samples, and reporting lab results. In addition, hospital labs need to be ready to handle the increase in diagnostics that will need to be reported to local health departments and labs within the Laboratory Response Network (LRN) on a 24-7-365 basis. This system should have the ability to exchange data with all partners on demand, in real time, when needed, and as authorized in the operational plans developed by the LHD. Local exercises should test lab reporting capacity. |                     |           |                   |  |
| 4A.1           | Identify activities for expanding lab capacity and/or electronic connectivity to the Laboratory Response Network (LRN). Provide projected MO/YR for completion of those activities.   |                     |           |                   |  |
|                | Alpine County does not have a lab or connectivity to the Laboratory Response Network. Lab services are provided by San Jauquine County through an existing MOU.   |                     |           |                   |  |
|                | 5/7/08 No additional information needed.  |                     |           |                   |  |
| 4A.2           | Identify systems currently in place to ensure hospital labs have the capability to report to and receive 24/7 reports from LHDs and LRN sites.  |                     |           |                   |  |
|                | Service provided through San Jauquine County lab MOU.   |                     |           |                   |  |
|                | 5/7/08 No additional information needed.  |                     |           |                   |  |

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**Exhibit A-2, Part 1**  
**National Hospital Preparedness Program (HPP)**  
**Grant Period 9/1/07 - 8/9/08**  
**Local Entity HPP and HPP Supplement for Pandemic Influenza Work Plan**  
**Mid Year (9/1/07 - 2/28/08) and Year End (3/1/08 - 8/9/08) Progress Reports**

| Sub Capability  |   | Work Plan Narrative |  | Midyear Progress  |              |
|---|---|---------------------|--|-------------------|--------------|
| Local Approach  |   | CDPH/EPO Comments   |  | Year End Progress |              |
| ENTITY NAME:  | Alpine County   |                     |  | MO/<br>YR         | Prog<br>Code |
| 4A.3  | Identify which drills and exercises will include hospital lab personnel.  |                     |  |                   |              |
| Service provided through San Jauquine County lab MOU. |   |                     |  |                   |              |
| 5/7/08 No additional information needed.              |   |                     |  |                   |              |
| 5.  | <p>Fatality Management. Ensure HCFs have fatality management plans that address surge likely to occur during a pandemic influenza. Planning should address the need for expanded refrigerated storage capacity and body bags for deaths occurring in HCFs. HCFs should consider the cultural, religious, legal and regulatory issues involved with the respectful retrieval, tracking, transportation, identification, death certificate completion, and disposition of the deceased under conditions of a natural disease outbreak, natural disaster, and criminal/terrorist events.</p>   |                     |  |                   |              |
| 5.1   | <p>Provide a projected MO/YR when Local HPP Entity will meet with the local Pan Flu Coordinator, LHD all hazards planner, CHA Regional Coordinator, local Coroner, local HCFs, clinics, county legal counsel, and religious leaders to develop community plans for fatality management that address HCF needs.</p> <p>The Alpine County Sheriff's Office serves as the county coroner. Fatality Management is managed through that office and is included in the current Alpine County E.O.P. and F.O.G. The E.P. Coordinator is scheduled to work with the county undersheriff, PHO, Barton Memorial Hospital staff, county legal counsel, and religious leaders to make updates to the plans. Then updates will include information on expanded refrigerated storage and additional body bags that may be needed in the event of a pandemic influenza. The Washoe Tribe of California and Nevada will also be consulted for the purpose of tribal cultural issues. The updated plans will consider all cultural, religious, legal and regulatory issues involving retrieval, tracking, transportation, identification, death certificate completion and disposition of the deceased under conditions of a natural disease outbreak or disaster, or any criminal/terrorist events.</p> |                     |  |                   |              |
| 5/7/08 No additional information needed.              |   |                     |  |                   |              |

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**Exhibit A-2, Part 1**  
**National Hospital Preparedness Program (HPP)**  
**Grant Period 9/1/07 – 8/9/08**  
**Local Entity HPP and HPP Supplement for Pandemic Influenza Work Plan**  
**Mid Year (9/1/07 - 2/28/08) and Year End (3/1/08 - 8/9/08) Progress Reports**

| Sub Capability  |  | Work Plan Narrative | Midyear Progress |                   |
|---|--|---------------------|------------------|-------------------|
| Local Approach  |  |                     |                  | Year End Progress |
| ENTITY NAME:  | Alpine County  |                     | MO/<br>YR        | Prog<br>Code      |
| 5.2   | As part of the pandemic influenza planning effort, identify any body bags, or fatality management supplies and equipment that will be purchased with the HPP Pandemic Influenza funds for the HCFs to support fatality management preparedness. Once the Alpine County E.O.P. and F.O.G. are updated to include expanded refrigerated storage and body bag inventories, the E.P. Coordinator will work with the county undersheriff to determine where and how this expanded refrigerator can be located. Additional body bags will also be purchased and added to existing inventories. |                     | 07/08            |                   |
| 5/7/08 No additional information needed.  |  |                     |                  |                   |
| 6.  | Evacuation Planning. Ensure HCFs have robust evacuation plans in place.  |                     |                  |                   |
| 6.1   | Ensure progress in HCF development of robust evacuation plans that enable facilities to move patients beyond the operational area if required. The HPP Local Entity should ensure that HCF evacuation plans are integrated with local government evacuation plans.   |                     |                  |                   |
| Alpine County has an existing MOU with Barton Memorial Hospital and has participated in a hospital evacuation drill on April 4, 2008. All patients were evacuated from the 2 <sup>nd</sup> floor of Barton Memorial Hospital in El Dorado County during this drill. Patients were moved to a nearby Alternate Care Site and to the local airport for awaiting air ambulances. Alpine County emergency preparedness planning will include contingencies for assisting Barton Hospital in the management and staffing of facilities outside their operation area. |  |                     |                  |                   |
| 5/7/08 No additional information needed.  |  |                     |                  |                   |
| 6.2   | Provide current status of each hospital's evacuation plan revisions to include contingency plans for large scale catastrophic events or describe activities HPP Local Entity will undertake to provide this information in the mid-year progress report.   |                     |                  |                   |
| Alpine County participated in a hospital evacuation drill on April 4, 2008. All patients were evacuated from the 2 <sup>nd</sup> floor of Barton Memorial Hospital in El Dorado County during this drill. Patients were moved to a nearby alternate care site and to the local airport for awaiting air ambulances. Alpine County's role will be to observe and evaluate the drill.   |  |                     |                  |                   |
| Post-drill Alpine County will integrate Barton's evacuation plans with our local emergency planning processes.  |  |                     |                  |                   |
| 5/7/08 No additional information needed.  |  |                     |                  |                   |

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**Exhibit A-2, Part 1**  
**National Hospital Preparedness Program (HPP)**  
**Grant Period 9/1/07 – 8/9/08**  
**Local Entity HPP and HPP Supplement for Pandemic Influenza Work Plan**  
**Mid Year (9/1/07 - 2/28/08) and Year End (3/1/08 - 8/9/08) Progress Reports**

| Sub Capability  |  | Work Plan Narrative<br>CDPH/EPO Comments | Midyear Progress<br>Year End Progress |              |
|---|--|--|---------------------------------------|--------------|
| Local Approach  |  |  |                                       |              |
| ENTITY NAME:  | Alpine County  |  | MO/<br>YR                             | Prog<br>Code |
| <b>II. Level II Capabilities</b> (Alternate Care Sites, Mobile Medical assets. Pharmaceuticals, PPE, and Decontamination).<br>HPP Local Entities can use funds to address Level II Capabilities only if they can clearly demonstrate and provide a statement that all Level I Capabilities have either already been met or are prioritized in such a way that they will be completed by August 8, 2008. |  |  |                                       |              |
| 7.  | ACS expansion of healthcare facilities and the establishment of government-authorized alternate care sites are critical to providing supplemental surge capacity to the healthcare system, with the goal of providing care and allocating scarce equipment, supplies, and personnel. Healthcare facilities and local community planning teams should continue to build surge capacity. |  |                                       |              |
| 7.1   | Describe how HCFs will support Alternate Care Site Planning efforts. List roles and responsibilities of HCFs.  |  |                                       |              |
| 7.2   | Identify how Alternate Care Sites will be staffed.   |  |                                       |              |
| 7.3   | Develop procedures for moving patients from existing HCFs to Alternate Care Sites.   |  |                                       |              |
| 7.4   | Continue HCF surge planning to increase HCF expansion capacity during surge events. Describe activities being undertaken by each participating HCF.  |  |                                       |              |

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**Exhibit A-2, Part 1  
National Hospital Preparedness Program (HPP)  
Grant Period 9/1/07 – 8/9/08**

**Local Entity HPP and HPP Supplement for Pandemic Influenza Work Plan  
Mid Year (9/1/07 - 2/28/08) and Year End (3/1/08 - 8/9/08) Progress Reports**

| Sub Capability |  | Work Plan Narrative<br>CDPH/EPO Comments | Midyear Progress | Year End Progress |              |
|----------------|--|--|------------------|-------------------|--------------|
| Local Approach |  |  |                  |                   |              |
| ENTITY NAME:   | Alpine County  |  |                  | MO/<br>YR         | Prog<br>Code |
| 9.1            | replacement of missing or damaged equipment, or to provide caches of surge supplies to new partners.<br>Develop a plan for resource allocation and deployment of local stockpiles. Identify what will be purchased and plans for storage and maintenance of supplies and equipment.  |  |                  |                   |              |
| 9.2            | Additional PPE can be purchased with HPP Pandemic Influenza funds. Provide a justification, list of equipment and projected MO/YR when the items will be purchased with supplemental pandemic influenza funds.   |  |                  |                   |              |
| 10.            | <p><b>III. Overarching Requirements.</b> The following four overarching requirements must be incorporated into the development and maintenance of all Level I and II Capabilities: (1) NIMS; (2) Education and Preparedness Training; (3) Exercises, Evaluation And Corrective Actions; and (4) Needs of the at-risk population</p> <p>NIMS Related Training. As a condition of receiving HPP funds, ensure HCFs continue adopting and implementing NIMS compliance activities as outlined in FEMA, National Integration Center, Incident Management Systems Division document entitled "NIMS Implementation Activities for Hospitals and Healthcare Systems" found at <a href="http://www.fema.gov/pdf/emergency/nims/imp_hos.pdf">http://www.fema.gov/pdf/emergency/nims/imp_hos.pdf</a>. HPP entities shall use 2007-08 funds to finish the remaining NIMS implementation activities for hospitals and healthcare systems by August 8, 2008. This includes completion of NIMS courses 100, 200, 700, and 800.</p> |  |                  |                   |              |
| 10.1           | Identify HCFs that have not completed required training and work with them to develop a schedule for the training. Alpine County's HCF consists only of a part time health clinic (no hospital beds). This clinic is housed at the Alpine County Health & Human Services Department. All staff at this facility are required to take NIMS/SEMS ICS 100-200 training. Alpine County has scheduled NIMS/SEMS/ICS 100-200 and ICS 800 training sessions for all county employees. (Jan. thru March 2008) All Alpine County H&HS staff members are required to take this training. The following new staff are scheduled for this training: Fiscal Staff Services Manager, Account Clerk, Emergency  |  |                  |                   |              |

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**Exhibit A-2, Part 1**  
**National Hospital Preparedness Program (HPP)**  
**Grant Period 9/1/07 - 8/9/08**  
**Local Entity HPP and HPP Supplement for Pandemic Influenza Work Plan**  
**Mid Year (9/1/07 - 2/28/08) and Year End (3/1/08 - 8/9/08) Progress Reports**

| Sub Capability  |   | Work Plan Narrative |           | Midyear Progress  |  |
|---|---|---------------------|-----------|-------------------|--|
| Local Approach  |   | CDPH/EPO Comments   |           | Year End Progress |  |
| ENTITY NAME:  | Alpine County   | MO/YR               | Prog Code |                   |  |
| <p>Preparedness Coordinator, Social Worker for seniors, Health Ed. Prgms. Coordinator, Director of HHS. ICS/NIMS/SEMS will continue throughout the year in coordination with exercise and emergency preparedness planning.</p> <p>5/7/08 Provided by e-mail-The Training using the HPP funds will be to clinic and long term care facility staff, and to county staff that will be required to assist in the clinics and long term care facilities.</p> |   |                     |           |                   |  |
| 5/7/08 No additional information needed.  |   |                     |           |                   |  |
| 10.2  | <p>Identify the number of personnel targeted (and the anticipated roles during an event) for training, the type of training required for each professional group, and the estimated funding required for accomplishing these tasks.</p> <p>Alpine County has scheduled NIMS/SEMS/ICS 100-200 and ICS 800 training sessions for all county employees. (Jan. thru March 2008) All Alpine County H&amp;HS staff members are required to take this training. The following new staff are scheduled for this training: Fiscal Staff Services Manager, Account Clerk, Emergency Preparedness Coordinator, Social Worker for seniors, Health Ed. Prgms. Coordinator, Director of HHS. Their anticipated roles during an event would be, respectively: Finance/Admin.; Finance/Admin.; Planning and Resources or Logistics; Operations or Logistics; Operations or Logistics; Operations or Logistics; Planning and/or Operations. All other county staff have been encouraged to take this training. All county managers are required to take ICS 800 training. The Alpine County HCF's RN, along with the Emergency Preparedness Coordinator, will be taking Hospital Incident Command Training in late April 2008. These staff members will likely be in charge of setting up a healthcare surge facility in the event of a mass casualty incident.</p> <p>5/7/08 Provided by e-mail-The Training using the HPP funds will be to clinic and long term care facility staff, and to county staff that will be required to assist in the clinics and long term care facilities.</p> |                     |           |                   |  |
| 5/7/08 No additional information needed.  |   |                     |           |                   |  |
| 10.3  | <p>Identify the number of personnel targeted (and the anticipated roles during an event) for training, the type of training required for each professional group, and the estimated funding required for accomplishing these tasks.</p>   |                     |           |                   |  |

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**Exhibit A-2, Part 1**  
**National Hospital Preparedness Program (HPP)**  
**Grant Period 9/1/07 - 8/9/08**  
**Local Entity HPP and HPP Supplement for Pandemic Influenza Work Plan**  
**Mid Year (9/1/07 - 2/28/08) and Year End (3/1/08 - 8/9/08) Progress Reports**

| Sub Capability                           |   | Work Plan Narrative |           | Midyear Progress  |
|--|---|---------------------|-----------|-------------------|
| Local Approach                           |   | CDPH/EPO Comments   |           | Year End Progress |
| ENTITY NAME:                             | Alpine County   | MO/YR               | Prog Code |                   |
| Refer to 10.2, above.                    |   |                     |           |                   |
| 5/7/08 No additional information needed. |   |                     |           |                   |
| 11.                                      | Education and Preparedness Training. Recipients shall assure that education and training opportunities exist for adult and pediatric pre-hospital, hospital, and outpatient healthcare personnel who will respond to a terrorist incident or other public health emergency, around the capabilities described in the 2007-08 HPP guidance. All training opportunities (including those in local health departments, major community healthcare institutions, emergency response agencies, public safety agencies, etc.) must collectively enhance the ability of workers to respond in a coordinated, non-overlapping manner that minimizes duplication and fills gaps in the event of a bioterrorist attack or other public health emergency.<br>The HPP entity shall describe how the education and training activities discussed in this work plan will be linked to exercises/drills and with the overall LHD preparedness plan. The HPP entity shall develop a system for tracking all HPP funded training, drills and exercises. This system shall detail the subject matter, the date of the training, the objectives of the training, and the number trained by healthcare specialty.   |                     |           |                   |
| 11.1                                     | Work with the CDPH Regional Project Officer and the CHA Regional Coordinator to develop a list of HICS training that will be supported by these funds. Provide a projected MO/YR for completion of the training list. Specifically ensure that clinic training is included in this activity. The trainings should ultimately culminate in drills and exercises that demonstrate preparedness.<br>The Alpine County HCF's RN, along with the county's Emergency Preparedness Coordinator, will be taking the "Standards and Guidelines for Healthcare Surge during Emergencies" training in Sacramento on April 1 & 2, 2008. This training is provided by the CDPH. These same two Alpine County Health & Human Services staff members are scheduled to take Hospital Incident Command Training in late April 2008. Registration is already in place at Barton University. These staff members will likely be in charge of setting up a healthcare surge facility in the event of a mass casualty incident. Additionally, the Alpine County E.P. Coordinator is scheduled to attend the Mass Care & Sheltering Seminar in South Lake Tahoe on April 23 <sup>rd</sup> . All of this training, particularly the latter, will be in preparation for the statewide Golden Guardian 2008 exercise. Alpine County also plans to develop and perform its own HCF drill involving a healthcare surge. This planning will occur after the training has taken place. |                     |           |                   |
| 5/7/08 No additional information needed. |   |                     |           |                   |
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**Exhibit A-2, Part 1  
National Hospital Preparedness Program (HPP)  
Grant Period 9/1/07 - 8/9/08**

**Local Entity HPP and HPP Supplement for Pandemic Influenza Work Plan  
Mid Year (9/1/07 - 2/28/08) and Year End (3/1/08 - 8/9/08) Progress Reports**

|   |  |                            |  |                          |
|---|--|----------------------------|--|--------------------------|
| <b>Sub Capability</b>   |  | <b>Work Plan Narrative</b> |  | <b>Midyear Progress</b>  |
| <b>Local Approach</b>   |  | <b>CDPH/EPO Comments</b>   |  | <b>Year End Progress</b> |
| <b>ENTITY NAME:</b>   | <b>Alpine County</b>   |                            |  | <b>MO/<br/>YR</b>        |
| 11.2  | Ensure all HCFs are NIMS compliant and document participation in NIMS/HICS training as well as all other trainings. Describe how training will be tracked across all HCFs and aggregated by the Local HPP Entity. Report which participating hospitals are NIMS compliant. |                            |  | <b>Prog<br/>Code</b>     |
| Alpine County's HCF is NIMS/HICS compliant and will continue to pursue additional training as required. |  |                            |  |                          |
| 5/7/08 No additional information needed.  |  |                            |  |                          |
|   |  |                            |  |                          |
|   |  |                            |  |                          |
|   |  |                            |  |                          |



**Exhibit A-2, Part 2**  
**Attachment B - Instructions to Complete the Local Health Department (LHD)**  
**CDC Public Health Emergency Preparedness/Pandemic Influenza Phase III 07-08 Grant Form**  
**Work Plan, Mid Year Progress, and Year End Progress Narratives**

**Please follow these instructions carefully. The LHD CDC 07-08 Grant Form, which follows these instructions, will be used to complete the LHD Work Plan, Mid Year Progress Report, and the Year End Progress Report.**

**I. Form Functions**

1. One form will be used by the local entities for the Public Health Emergency Preparedness and Pandemic Influenza Phase III Work Plan, Mid Year Progress report, and Year End Progress report.
2. The form is initially named LHD\_CDC\_07-08 Grant Form and is password protected. The report narrative rows/cells are color-coded to match the type of narrative (Work Plan, Mid Year Progress, and Year End Progress) as depicted in the legend in the page header. The form will only allow the LHDs to enter information in the LHD Name cell, Work Plan narrative and projected completed MO/YR (blue shaded row/cells), Mid Year Progress narrative and completion code (green shaded row/cells), and Year End Progress narrative and completion code (orange shaded row/cells).
3. The shaded area that appears in the cells is where to place the cursor to enter text. Cells that do not contain the shaded area are locked and text cannot be entered.
4. Use the tab key to navigate from cell to cell; the cursor will only move to those cells that allow text entry.

**II. Completing and Submitting the Grant Work Plan Form**

1. Before you begin to enter the Work Plan narrative, rename or copy [LHD] CDC 07-08 Grant Form to [LHD] CDC 07-08 Work Plan. Open the form and enter the required information below.
2. LHD NAME: Enter the name of the public health department (county name only, Contra Costa, for example). The LHD Name need only be entered on the first page as it repeats automatically on each subsequent page.
3. BLUE SHADED ROW: Enter the Work Plan narrative in the first cell and the MO/YR (00/00) in which the LHD projects that the activity will be completed in right hand cell.
4. When the Work Plan narrative is complete, email the file to [lhbtprog@cdph.ca.gov](mailto:lhbtprog@cdph.ca.gov) and cc your Regional Project Officer by the due date.

**III. CDPH/EPO Work Plan Review Process**

1. CDPH/EPO will review the Work Plan narrative and enter the CDPH/EPO comments in the GRAY SHADED ROW.
2. If CDPH/EPO requires additional information after the first review is complete, CDPH/EPO will email a file named [LHD] CDC 07-08 Work Plan Not Approved to the LHD with other documentation (not approved letter, etc.)

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**Exhibit A-2, Part 2**  
**Attachment B - Instructions to Complete the Local Health Department (LHD)**  
**CDC Public Health Emergency Preparedness/Pandemic Influenza Phase III 07-08 Grant Form**  
**Work Plan, Mid Year Progress, and Year End Progress Narratives**

3. After the LHD receives [LHD] CDC 07-08 Work Plan Not Approved, copy or rename the file to [LHD] CDC 07-08 Work Plan Resubmitted. Enter the date and the requested information in the Work Plan narrative cell, below the original Work Plan narrative.
4. When all the additional information requested is entered, the LHD will email the file [LHD] CDC 07-08 Work Plan Resubmitted to lhbtprog@cdph.ca.gov and cc the Regional Project Officer by the due date.
5. If CDPH/EPO does not require additional information after the first and/or second reviews are complete, CDPH/EPO will send a file named [LHD] CDC 07-08 Work Plan Approved and email it to the LHD with other documentation (approval letter, etc).

**IV. Mid Year and Year End Progress Reports**

1. Entering Mid Year Progress Narrative
  - a. When the LHD receives the file [LHD] CDC 07-08 Work Plan Approved, rename or copy the file to [LHD] CDC 07-08 Mid Year Progress. During the Mid Year Progress period (8/31/07-2/29/08) the LHD can enter the mid year progress narrative as work progresses on the activities.
  - b. GREEN SHADED ROW: Enter the Midyear Progress narrative in the first cell and the progress code in the right hand cell: Enter [N] for Not Started, [P] for Partial Progress and [C] for Complete. If the Capability was already completed in the previous grant year, the LHD need only enter a [C] in the progress code in the green shaded cell and the mid year narrative is not necessary.
2. Mid Year Progress Submittal Process
  - a. When CDPH/EPO requests submission of the Mid Year Progress Report, email the file to lhbtprog@cdph.ca.gov and cc the Regional Project Officer by the due date.
3. Entering Year End Progress Narrative
  - a. After the Mid Year Progress report is submitted to CDPH/EPO, rename or copy the [LHD] CDC 07-08 Mid Year Progress file to [LHD] CDC 07-08 Year End Progress. During the Year End Progress period (3/1/08-8/9/08) the LHD can enter the year end narrative as work progresses on the activities.
  - b. ORANGE SHADED ROW: Enter the Year End progress narrative in the first cell and progress code in the right hand cell: Enter [N] for Not Started, [P] for Partial Progress and [C] for Complete. If the activity was complete in the Mid Year Progress submission, the LHD need only enter a [C] in the progress code in the orange shaded cell and the year end narrative is not necessary.
4. Year End Progress Submittal Process
  - a. When CDPH/EPO requests submission of the Year End Progress Report, email the [LHD] CDC 07-08 Year End Progress file to lhbtprog@cdph.ca.gov and cc the Regional Project Officer by the due date.

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**Exhibit A-2, Part 2**  
**Attachment B - CDC Public Health Emergency Preparedness (PHEP) and Pandemic Influenza (PI)**  
**Grant Period 8/31/07 - 8/9/08**  
**Local Health Department Work Plan,**  
**Mid Year (8/31/07 - 2/29/08) and Year End (3/1/08 - 8/9/08) Progress Reports**

|                |
|----------------|
| Requirement    |
| Local Approach |

|                     |
|---------------------|
| Work Plan Narrative |
| CDPH/EPO Comments   |

|                   |
|-------------------|
| Mid Year Progress |
| Year End Progress |

| LHD NAME:   | Alpine County Health & Human Services  | MO/<br>YR | Prog<br>Code |
|---|--|-----------|--------------|
| <b>Section I: Priority Projects. The LHD should prioritize items identified in its HOAC Assessment.</b> |  |           |              |
| <b>Priority Project #1 (required): Improve SNS/CRI Operational Plans and Procedures.</b>                |  |           |              |
| P1.1  | Description of the Project: What will be accomplished? Which goals and capabilities and/or overarching requirements will be addressed?   |           |              |
|   | SNS Plan Improvement. Per Alpine County's latest HOAC Assessment there are many areas of the current SNS Plan that need to be expanded and/or need more information. Additionally the current plan is missing some components. Identification of local caches, volunteer recruitment, notification for resources, risk communication, security/control, distribution/transportation, dispensing, and tracking are just some of the areas of the plan that need to be addressed, updated, and improved. |           | 02/08        |
|   | 5/7/08 No additional information needed.   |           |              |
| P1.2  | Participants: Who will participate in the project? List specific facilities and organizations. Participants will include the public health officer, an East Slope public health nurse, the Bear Valley public health nurse, the Alpine County Sheriff's Office, the clinic at the Kirkwood Ski Resort, and the emergency preparedness coordinator.   |           |              |
|   | 5/7/08 No additional information needed.   |           |              |
| P1.3  | Justification: Why was the project selected? How does this project relate to the recommendations from the HOAC LHD assessment?   |           |              |
|   | This project was selected due to the current SNS Self-Assessment (due 02/15/08) that has brought awareness that the current SNS Plan needs much improvement, and although Alpine County has not completed the assessment, preliminarily it is determined that the current plan will score fairly low.  |           |              |
|   | 5/7/08 No additional information needed.   |           |              |

**Attachment B - CDC Public Health Emergency Preparedness (PHEP) and Pandemic Influenza (PI)  
Exhibit A-2, Part 2  
Grant Period 8/31/07 - 8/9/08  
Local Health Department Work Plan,  
Mid Year (8/31/07 - 2/29/08) and Year End (3/1/08 - 8/9/08) Progress Reports**

|                |                     |                   |
|----------------|---------------------|-------------------|
| Requirement    | Work Plan Narrative | Mid Year Progress |
| Local Approach | CDPH/EPO Comments   | Year End Progress |

| LHD NAME:  |   | MO/<br>YR | Prog<br>Code |
|--|---|-----------|--------------|
| Alpine County Health & Human Services  |   |           |              |
| P1.4   | Project Timeline: What key activities will be completed and what are the projected completion dates?<br>Complete SNS Plan Self-Assessment - due 02/15/08. Determine from self-assessment what areas of the current plan need to be addressed, updated, improved. Make updates and additions the current plan as necessary.<br>5/7/08 No additional information needed.  | 07/08     |              |
| P1.5   | Deliverables: What specific products will be produced during the 2007-08 grant period?<br>An updated and improved Alpine County SNS Plan will be produced during the 2007-08 grant period.<br>5/7/08 No additional information needed.  | 08/08     |              |
| P1.6   | Evaluation of Project: How will the success of the project be evaluated? What are the quantifiable measurements that will be evaluated?<br>A state evaluation of the updated and improved Alpine County SNS Plan is the necessary evaluation for this priority project.<br>5/7/08 No additional information needed.   |           |              |
| <b>Priority Project #2 (Pandemic Influenza related project required): Refer to the Local Guidance for suggestions.</b> |   |           |              |
| P2.1   | Description of the Project: What will be accomplished? Which goals and capabilities and/or overarching requirements will be addressed?<br>Collaborative Pan Flu Exercise (with El Dorado County). Alpine County's small population makes it difficult to perform a Pan flu exercise just within the county. In reality, Alpine County would collaborate with neighboring counties/agencies during a Pan Flu emergency. Alpine County plans to test out various communications systems, NIMS/SEMS, CAHAN, etc. while participating in an Pan Flu exercise with El Dorado County.<br>5/7/08 No additional information needed. |           |              |

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**Exhibit A-2, Part 2**  
**Attachment B - CDC Public Health Emergency Preparedness (PHEP) and Pandemic Influenza (PI)**  
**Grant Period 8/31/07 - 8/9/08**  
**Local Health Department Work Plan,**  
**Mid Year (8/31/07 - 2/29/08) and Year End (3/1/08 - 8/9/08) Progress Reports**

|                       |                            |                          |
|-----------------------|----------------------------|--------------------------|
| <b>Requirement</b>    | <b>Work Plan Narrative</b> | <b>Mid Year Progress</b> |
| <b>Local Approach</b> | <b>CDPH/EPO Comments</b>   | <b>Year End Progress</b> |

| <b>LHD NAME:</b> | <b>Alpine County Health &amp; Human Services</b>  | <b>MO/<br/>YR</b> | <b>Prog<br/>Code</b> |
|------------------|---|-------------------|----------------------|
| <b>P2.2</b>      | Participants: Who will participate in the project? List specific facilities and organizations.<br>Alpine County PHO & RN(s), emergency preparedness coordinator, Alpine County Sheriff's Office, Alpine County volunteer EMTs, Alpine County H&HS Director/PIO, the Washoe Tribe of California and Nevada, and El Dorado County personnel.<br>5/7/08 No additional information needed.  |                   |                      |
| <b>P2.3</b>      | Justification: Why was the project selected? How does this project relate to the recommendations from the HOAC LHD assessment?<br>Alpine County's most recent HOAC assessment included a recommendation that Alpine County exercise and document the time required for the Public Health Response Team to report to the Department Operations Center as well as to test the effectiveness of alerting key stakeholders. (As listed in the participants section.) Also recommended is continuing to work with tribal representatives regarding disease reporting and control issues. This project will allow us to test our communications systems. NIMS and CAHAN will be utilized in the exercise.<br>5/7/08 No additional information needed. |                   |                      |
| <b>P2.4</b>      | Project Timeline: What key activities will be completed and what are the projected completion dates?<br>Planning and collaboration for this exercise will begin within Alpine County and with El Dorado County immediately. El Dorado County's exercise is scheduled for April 4, 2008. Alpine County will participate in the exercise with its own specific roles.<br>5/7/08 No additional information needed.   | 04/08             |                      |
| <b>P2.5</b>      | Deliverables: What specific products will be produced during the 2007-08 grant period?<br>After Action Reports and an updated Pan Flu Plan. Based on an assessment of the exercise and comments from the AAR, Alpine County's Pan Flu Plan will be updated.   |                   | 08/08                |

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**Exhibit A-2, Part 2**  
**Attachment B - CDC Public Health Emergency Preparedness (PHEP) and Pandemic Influenza (PI)**  
**Grant Period 8/31/07 - 8/9/08**  
**Local Health Department Work Plan,**  
**Mid Year (8/31/07 - 2/29/08) and Year End (3/1/08 - 8/9/08) Progress Reports**

| Requirement   |  | Work Plan Narrative |           | Mid Year Progress |
|---|--|---------------------|-----------|-------------------|
| Local Approach  |  | CDPH/EPO Comments   |           | Year End Progress |
| LHD NAME:   | Alpine County Health & Human Services  | MO/ YR              | Prog Code |                   |
| 5/7/08  | No additional information needed.  |                     |           |                   |
| P2.6  | Evaluation of Project: How will the success of the project be evaluated? What are the quantifiable measurements that will be evaluated?<br>Alpine County and El Dorado County Pan Flu exercise participants will hold at least one post-exercise meeting/hot wash event. After Action Reports will be written and submitted to the state.  |                     |           |                   |
| 5/7/08  | No additional information needed.  |                     |           |                   |
| <b>Priority Project #3 (required): Refer to the Local Guidance for suggestions.</b> |  |                     |           |                   |
| P3.1  | Description of the Project: What will be accomplished? Which goals and capabilities and/or overarching requirements will be addressed?<br>SEMS/NIMS & National Response Plan training for all Alpine County employees. All Alpine County employees will take a combined course: NIMS/ICS 100 & 200/SEMS between January and March of 2008.   | 03/08               |           |                   |
| 5/7/08  | No additional information needed.  |                     |           |                   |
| P3.2  | Participants: Who will participate in the project? List specific facilities and organizations.<br>All Alpine County employees and the Alpine County Sheriff's Office.  |                     |           |                   |
| 5/7/08  | No additional information needed.  |                     |           |                   |
| P3.3  | Justification: Why was the project selected? How does this project relate to the recommendations from the HOAC LHD assessment?<br>It has been 3 years since existing Alpine County Health & Human Services personnel have taken this training. This course of training is now mandatory for ALL Alpine County staff regardless of their position with the county. By March of 2008 all county employees will be NIMS/SEMS 100/200 certified. |                     |           |                   |

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**Attachment B - CDC Public Health Emergency Preparedness (PHEP) and Pandemic Influenza (PI)  
Exhibit A-2, Part 2  
Grant Period 8/31/07 - 8/9/08  
Local Health Department Work Plan,  
Mid Year (8/31/07 - 2/29/08) and Year End (3/1/08 - 8/9/08) Progress Reports**

| Requirement  |   | Work Plan Narrative |              | Mid Year Progress |
|--|---|---------------------|--------------|-------------------|
| Local Approach   |   | CDPH/EPO Comments   |              | Year End Progress |
| LHD NAME:  | Alpine County Health & Human Services   | MO/<br>YR           | Prog<br>Code |                   |
| 5/7/08   | No additional information needed.   |                     |              |                   |
| P3.4   | Project Timeline: What key activities will be completed and what are the projected completion dates?<br>Three rounds of training are being offered to all Alpine County staff - one each month during January, February, and March of 2008.   | 03/08               |              |                   |
| 5/7/08   | No additional information needed.   |                     |              |                   |
| P3.5   | Deliverables: What specific products will be produced during the 2007-08 grant period?<br>All current Alpine County staff will be NIMS/SEMS 100/200 certified by March of 2008. Course will be filmed and placed on CD's for review by all staff that is hired after March of 2008.   | 03/08               |              |                   |
| 5/7/08   | No additional information needed.   |                     |              |                   |
| P3.6   | Evaluation of Project: How will the success of the project be evaluated? What are the quantifiable measurements that will be evaluated?<br>The success of this project will be determined by the number of Alpine County personnel who have successfully completed that course and will be NIMS/SEMS 100/200 certified. Alpine County will have information on file for all staff that has successfully completed the course. |                     |              |                   |
| 5/7/08   | No additional information needed.   |                     |              |                   |
| <b>Priority Project #4 (Recommended): Refer to the Local Guidance for suggestions.</b> |   |                     |              |                   |
| P4.1   | Description of the Project: What will be accomplished? Which goals and capabilities and/or overarching requirements will be addressed?<br>HazMat Spill Tabletop Drill. A full scale exercise to include all necessary Alpine County stakeholders as listed in the participants section of this Priority Project work plan. Emergency Preparedness funds have been used to provide   | 05/08               |              |                   |

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**Exhibit A-2, Part 2**  
**Attachment B - CDC Public Health Emergency Preparedness (PHEP) and Pandemic Influenza (PI)**  
**Grant Period 8/31/07 - 8/9/08**  
**Local Health Department Work Plan,**  
**Mid Year (8/31/07 - 2/29/08) and Year End (3/1/08 - 8/9/08) Progress Reports**

| Requirement   | Work Plan Narrative                   | Mid Year Progress |
|---|---------------------------------------|-------------------|
| Local Approach  | CDPH/EPO Comments                     | Year End Progress |
| LHD NAME:   | Alpine County Health & Human Services | MO/<br>YR         |
|   | Prog Code                             |                   |
| HazMat and PPE training for Alpine personnel and partner agencies, including representatives from the Washoe Tribal Government. The goal is to test the readiness and capabilities of Alpine County personnel in the event of a HazMat spill in Alpine County.  |                                       |                   |
| 5/7/08 No additional information needed.  |                                       |                   |
| P4.2 Participants: Who will participate in the project? List specific facilities and organizations. Alpine County's Environmental Specialist is assembling a committee to develop the HazMat Spill Tabletop Drill. The East Slope RN is on this committee. The participants of the drill will include the PHO, the emergency preparedness coordinator, Alpine County Dept. of Public Works, The Alpine County Sheriff's Office, Health & Human Services staff, the Washoe Tribe of California and Nevada. |                                       |                   |
| 5/7/08 No additional information needed.  |                                       |                   |
| P4.3 Justification: Why was the project selected? How does this project relate to the recommendations from the HOAC LHD assessment?   |                                       |                   |
| Alpine County has drafted an Area Plan for hazardous material incidents. A tabletop exercise will evaluate Alpine County's drafted plan and allow adjustments to be made as needed. More importantly, the drill will evaluate our current level of readiness and capabilities and subsequently focus on areas of weakness.  |                                       |                   |
| 5/7/08 No additional information needed.  |                                       |                   |
| P4.4 Project Timeline: What key activities will be completed and what are the projected completion dates? The Hazmat Spill Tabletop Drill committee is currently being assembled. The actual drill is expected to be performed in May of 2008. Development of the drill will occur between now and May of 2008.   |                                       | 05/08             |



**Exhibit A-2, Part 2**  
**Attachment B - CDC Public Health Emergency Preparedness (PHEP) and Pandemic Influenza (PI)**  
**Grant Period 8/31/07 - 8/9/08**  
**Local Health Department Work Plan,**  
**Mid Year (8/31/07 - 2/29/08) and Year End (3/1/08 - 8/9/08) Progress Reports**

| Requirement                                    |  | Work Plan Narrative |           | Mid Year Progress |
|--|--|---------------------|-----------|-------------------|
| Local Approach                                 |  | CDPH/EPO Comments   |           | Year End Progress |
| LHD NAME:                                      | Alpine County Health & Human Services  | MO/ YR              | Prog Code |                   |
| 5/7/08   | No additional information needed.  |                     |           |                   |
| P4.5   | Deliverables: What specific products will be produced during the 2007-08 grant period? An After Action Report will determine what areas of strengths and weaknesses were discovered during the tabletop exercise. Comments from the AAR will be incorporated into the draft Alpine County Area Plan for Hazardous Material Incidents.                                    | 08/08               |           |                   |
| 5/7/08   | No additional information needed.  |                     |           |                   |
| P4.6   | Evaluation of Project: How will the success of the project be evaluated? What are the quantifiable measurements that will be evaluated? The Hazmat Spill Tabletop Drill committee and participants will hold at least one post-drill meeting/hot wash event. The team will discuss and record what worked, what didn't, etc. and an after action report will be written. |                     |           |                   |
| 5/7/08   | No additional information needed.  |                     |           |                   |
| <b>Section II: ONGOING WORKPLAN ACTIVITIES</b> |  |                     |           |                   |
| 1.   | Continue to meet target goals and capabilities in the LHD CDC 06-07 Work Plan  |                     |           |                   |
| 1.1  | Continue to meet the target goals and capabilities in the LHD CDC 06-07 Work Plan. When the 07-08 Mid Year and Year End Progress reports are due, describe what activities have been completed since the LHD CDC 06-07 Year End Progress report.   |                     |           |                   |
| 1.2  | Describe ongoing activities to engage special populations (tribal, aged, disabled, etc). Alpine County continues to work closely with the Washoe Tribe of California and Nevada on emergency response, emergency training and procedures, and preparedness. All Alpine County residents receive 2 regular newsletters that   |                     |           |                   |

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**Exhibit A-2, Part 2**  
**Attachment B - CDC Public Health Emergency Preparedness (PHEP) and Pandemic Influenza (PI)**  
**Grant Period 8/31/07 - 8/9/08**  
**Local Health Department Work Plan,**  
**Mid Year (8/31/07 - 2/29/08) and Year End (3/1/08 - 8/9/08) Progress Reports**

| Requirement                                    | Work Plan Narrative   | Mid Year Progress |
|--|---|-------------------|
| Local Approach                                 | CDPH/EPO Comments   | Year End Progress |
| LHD NAME:                                      | Alpine County Health & Human Services   | MO/<br>YR         |
|  | are published from Alpine County departments, that include useful information on emergency preparedness, disaster response, etc.  | Prog<br>Code      |
| 5/7/08   | No additional information needed.   |                   |
| 1.3  | Briefly describe how the LHD integrates with hospitals and other healthcare facilities.   |                   |
|  | Alpine County doesn't have a hospital but works closely with area medical facilities - Barton Hospital in El Dorado County, and Carson Valley Medical Center in neighboring Gardnerville, Nevada for mutual aid, surge planning, etc.             |                   |
| 5/7/08   | No additional information needed.   |                   |
| <b>Section III: TRAINING AND EXERCISE PLAN</b> |   |                   |
| 2.   | Develop a training and exercise plan and schedule according to Homeland Security Exercise Evaluation Program (HSEEP) guidelines.  |                   |
| 2.1  | The plan guidance and schedule document are included in the application package. The LHD must participate in Satellite Tabletop Exercises to be facilitated by CDPH/EPO in preparation for a statewide pandemic influenza exercise in early 2009. |                   |
|  | Please see attached   |                   |
|  |   |                   |
|  |   |                   |
|  |   |                   |

## LOCAL HPP ENTITY 2008-09 WORK PLAN

**Please follow these instructions carefully. The Local Entity HPP 08-09 Grant Form, which follows these instructions, will be used to complete the Work Plan, Mid Year Progress Report, and the Year End Progress Report.**

### **I. Form Functions**

1. One form will be used by the local entities for the HPP Work Plan, Mid Year Progress report, and Year End Progress report.
2. The form is initially named Local Entity HPP 08-09 Grant Form and is password protected. The report narrative rows/cells are color-coded to match the type of narrative (Work Plan, Mid Year Progress, and Year End Progress) as depicted in the legend in the page header. The form will only allow the Local Entities to enter information in the Entity Name cell, Work Plan narrative and projected completion MO/YR (blue shaded row/cells), Mid Year Progress narrative and completion code (green shaded row/cells), and Year End Progress narrative and completion code (orange shaded row/cells).
3. The shaded area that appears in the cells is where to place the cursor to enter text. Cells that do not contain the shaded area are locked and text cannot be entered.
4. Use the tab key to navigate from cell to cell; the cursor will only move to those cells that allow text entry.

### **II. Completing and Submitting the Work Plan Form**

1. Before you begin to enter the Work Plan narrative, rename or copy Local Entity HPP 07-08 Grant Form to [Entity Name] HPP 08-09 Work Plan. Open the form and enter the required information.
2. **ENTITY NAME:** Enter the name of the public health department (county name only, Contra Costa, for example) or other entity (Sierra-Sacramento Valley Emergency Medical Services, for example). The Entity Name need only be entered on the first page as it repeats automatically on each subsequent page.
3. **BLUE SHADED ROW:** Enter the Work Plan narrative in the first cell and the MO/YR (00/00) in which the Local Entity projects that the capability will be completed in right hand cell.
4. When the Work Plan narrative is complete, email the form to [lhbtprog@cdph.ca.gov](mailto:lhbtprog@cdph.ca.gov) and cc your Regional Project Officer by the due date.

### **III. CDPH/EPO Work Plan Review Process**

1. EPO will review the Work Plan narrative and enter the CDPH/EPO comments in the GRAY SHADED ROW.
2. If EPO requires additional information after the first review is complete, EPO will email a file named [Entity Name] HPP 08-09 Work Plan Not Approved to the Local Entity with other documentation (cover letter, etc.)

**LOCAL HPP ENTITY 2008-09 WORK PLAN**

| ENTITY NAME:  | ALPINE COUNTY   | MO/<br>YR | Prog<br>Code |
|---|---|-----------|--------------|
| <b>OVERARCHING REQUIREMENTS (Required)</b>            |   |           |              |
| <b>NIMS/SEMS Compliance (Required)</b>                |   |           |              |
| 1   | <p>Describe activities that will ensure that participating hospitals meet NIMS elements by the end of the grant period. Identify and report with the mid-year progress report which participating hospitals have complied with all 14 NIMS elements as outlined in the <i>NIMS Implementation Activities for Healthcare Organizations</i> (See Attachment 13); also identify which hospitals are still in the process of meeting these requirements and how compliance will be achieved by August 8, 2009.</p> <p>Alpine County does not have a hospital located within its borders. Alpine County Public Health Department (ACPHD) strives to provide our partner hospital; Barton Memorial in South Lake Tahoe, with every opportunity possible to increase their NIMS compliance activities throughout the year. This is done by participating in the exercises scheduled throughout the year that will assist in the efforts to implement the NIMS activities. We will also support any training opportunities in ICS and NIMS provided on the web, CDPH, CHA and private educational institutions. Attendance in courses offered to Barton employees and local communities at Barton University, in South Lake Tahoe will be endorsed and offered to all ACPHD staff. Upon completion of the November exercise scheduled by El Dorado County and Barton Hospital, it is expected the hospital will be compliant with objectives 1-14. Effective participation in HPP meetings with our neighboring county and state hospitals.</p> |           |              |
| <b>Education and Preparedness Training (Required)</b> |   |           |              |
| 2a  | <p>Describe the current status of training, identified gaps, and priorities in 2008-2009.</p> <p>A satellite phone communication drill with Barton Hospital was conducted on August 28, 2008 where gaps in communications were identified with our current satellite vendor. Using a land line was effective modality in communication. March 11, 12, &amp; 13, 2008 all county employees participated in ICS, NIMS, SEMS training including ICS 800 for management staff. October 2, 2008 a tabletop exercise in collaboration with El Dorado liaisons was held in ACPHD conference room where as communication was tested along with CDC Pandemic Influenza guidelines were reviewed and updated. Networking collaboration is an ongoing priority with El Dorado.</p>   |           |              |

## CDC and GF Pandemic Influenza 2008-09 Work Plan

### Instructions for Completing the LHD CDC and GF Pandemic Influenza 2008-09 Work Plan

**Please follow these instructions carefully. Similar to last year, the LHD CDC and GF Pandemic Influenza 2008-09 Work Plan will be used to complete the LHD Work Plan, Mid-Year Progress Report, and the Year-End Progress Report.**

#### I. Form Functions

1. One form will be used by the LHD for the CDC and GF Pan Flu Work Plan, Mid-Year Progress report, and Year-End Progress report.
2. The form is initially named LHD CDC and GF Pan Flu 2008-09 Work Plan and is password protected. The report narrative rows/cells are color-coded to match the type of narrative (Work Plan, Mid-Year Progress, and Year-End Progress) as depicted in the legend in the page header. The form will only allow the LHDs to enter information in the LHD Name cell, Work Plan narrative and projected completion MO/YR (blue shaded row/cells), Mid-Year Progress narrative and completion code (green shaded row/cells), and Year-End Progress narrative and completion code (orange shaded row/cells).
3. The shaded area that appears in the cells is where to place the cursor to enter text. Cells that do not contain the shaded area are locked and text cannot be entered.
4. Use the tab key to navigate from cell to cell; the cursor will only move to those cells that allow text entry.

#### II. Completing and Submitting the 2008-09 Work Plan Form

1. Before you begin to enter the Work Plan narrative, rename or copy LHD CDC and GF Pan Flu 2008-09 Work Plan to LHD name\CDC and GF Pan Flu 2008-09 Work Plan. Open the form and enter the required information below.
2. **LHD NAME:** Enter the name of the public health department (county name only, Contra Costa, for example). The LHD Name need only be entered on the first page as it repeats automatically on each subsequent page.
3. **BLUE SHADED ROW:** Enter the Work Plan narrative in the first cell and the MO/YR (00/00) in which the LHD projects that the activity will be completed in right hand cell.
4. When the Work Plan narrative is complete, email the file to [lhbprog@cdph.ca.gov](mailto:lhbprog@cdph.ca.gov) and cc your Regional Project Officer by the due date.

#### III. CDPH/EPO Work Plan Review Process

1. CDPH/EPO will review the Work Plan narrative and enter the CDPH/EPO comments in the GRAY SHADED ROW.
2. If CDPH/EPO requires additional information after the first review is complete, CDPH/EPO will email a file named [LHD] CDC and GF Pan Flu 2008-09 Work Plan Not Approved to the LHD with other documentation (not approved letter, etc.)
3. After the LHD receives [LHD] CDC and GF Pan Flu 2008-09 Work Plan Not Approved, copy or rename the file to [LHD] CDC and GF Pan Flu 2008-09 Work Plan Resubmitted. Enter the date and the requested information in the Work Plan narrative cell, below the original Work Plan narrative.

## CDC and GF Pandemic Influenza 2008-09 Work Plan

4. When all the additional information requested is entered, the LHD will email the file [\[LHD\] CDC and GF Pan Flu 2008-09 Work Plan Resubmitted to lhbtprog@cdph.ca.gov](#) and cc the Regional Project Officer by the due date.
5. If CDPH/EPO does not require additional information after the first and/or second reviews are complete, CDPH/EPO will send a file named [\[LHD\] CDC and GF Pan Flu 2008-09 Work Plan Approved](#) and email it to the LHD with other documentation (approval letter, etc).

### IV. Mid-Year and Year-End Progress Reports

1. Entering Mid-Year Progress Narrative
  - a. When the LHD receives the file [\[LHD\] CDC and GF Pan Flu 2008-09 Work Plan Approved](#), rename or copy the file to [\[LHD\] CDC and GF Pan Flu 2008-09 Mid-Year Progress](#). During the Mid-Year Progress period (8/10/08-2/28/09) the LHD can enter the mid-year progress narrative as work progresses on the activities.
  - b. GREEN SHADED ROW: Enter the Mid-Year Progress narrative in the first cell and the progress code in the right hand cell: Enter [N] for Not Started, [P] for Partial Progress and [C] for Complete. If the Capability was already completed in the previous grant year, the LHD need only enter a [C] in the progress code in the green shaded cell and the mid-year narrative is not necessary.
2. Mid-Year Progress Submittal Process
  - a. When CDPH/EPO requests submission of the Mid-Year Progress Report, email the file to [lhbtprog@cdph.ca.gov](mailto:lhbtprog@cdph.ca.gov) and cc the Regional Project Officer by the due date.
3. Entering Year-End Progress Narrative
  - a. After the Mid-Year Progress report is submitted to CDPH/EPO, rename or copy the [\[LHD\] CDC and GF Pan Flu 2008-09 Mid-Year Progress file to \[LHD\] CDC and GF Pan Flu 2008-09 Year-End Progress](#). During the Year-End Progress period (3/1/09-8/9/09) the LHD can enter the year end narrative as work progresses on the activities.
  - b. ORANGE SHADED ROW: Enter the Year-End progress narrative in the first cell and progress code in the right hand cell: Enter [N] for Not Started, [P] for Partial Progress and [C] for Complete. If the activity was complete in the Mid-Year Progress submission, the LHD need only enter a [C] in the progress code in the orange shaded cell and the year end narrative is not necessary.
4. Year-End Progress Submittal Process
  - a. When CDPH/EPO requests submission of the Year-End Progress Report, email the file to [lhbtprog@cdph.ca.gov](mailto:lhbtprog@cdph.ca.gov) and cc the Regional Project Officer by the due date.

# CDC and GF Pandemic Influenza 2008-09 Work Plan

|                       |  |
|-----------------------|--|
| <b>Requirement</b>    |  |
| <b>Local Approach</b> |  |

|                            |  |
|----------------------------|--|
| <b>Work Plan Narrative</b> |  |
| <b>CDPH/EPO Comments</b>   |  |

|                          |  |
|--------------------------|--|
| <b>Mid-Year Progress</b> |  |
| <b>Year-End Progress</b> |  |

| LHD NAME:   | Alpine County CDC and GF Pan Flu 2008-09 Work Plan   | MO/<br>YR | Prog<br>Code |
|---|--|-----------|--------------|
| <b>Section 1: Required Overarching Preparedness Activities and Related Priority Projects</b>                        |  |           |              |
| <b>Activity 1 - Identify Coordinators (required)</b>  |  |           |              |
| 1a  | Provide name and contact information (telephone, email and address) for Public Health Emergency Preparedness Coordinator<br>Richard Harvey MD/PHO Alpine County HHS, 75-B Diamond Valley Rd, Markleeville, CA 96120. 530- 694- 2146<br>E mail: <a href="mailto:Rharvey@hhs.alpinecountyca.gov">Rharvey@hhs.alpinecountyca.gov</a>  |           |              |
| 1b  | Provide name and contact information (telephone, email and address) for Pandemic Influenza Coordinator<br>Lynette Bennett- Alpine County HHS, 75-B Diamond Valley Rd. Markleeville, CA 96120 530-694-2146 Email: <a href="mailto:lbennett@hhs.alpinecountyca.gov">lbennett@hhs.alpinecountyca.gov</a>  |           |              |
| <b>Activity 2 - Priority Project 1: Improve SNS/CRI Operational Plans and Procedures (Overarching Requirement):</b> |  |           |              |
| 2a  | Description of the Project: What will be accomplished? What activities will be undertaken to develop/improve SNS/CRI plans and procedures?<br>The Alpine County Public Health Department (ACPHD) will review planning processes and design of the SNS plan to evaluate the capabilities and operational functions. Tests will be conducted through exercises and drills to validate the processes and identify areas of improvement. After action reports, improvement plans, and evaluations will be created as a result of the drills and exercises and will be used to revise the plan. |           |              |
| 2b  | Participants: Who will participate in the project? List specific facilities and organizations.<br>ACPHD will coordinate participation in the project with OES/ Alpine Sheriff Department, CHP, EMS, Alpine Volunteer Fire Department, Washoe Indian tribe, and the El Dorado County Public Health Department (EDCPH). This will be done through exercises  |           |              |

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| and drills to be conducted by ACPHD in our facility and in conjunction with exercises and drills sponsored by EDCPH outside of Alpine County. |   |           |              |
|   |   |           |              |
|   |   |           |              |
| 2c  | <p><b>Justification:</b> Summarize progress on SNS activities over the last year. What are the identified gaps or shortfalls? How will the project address the identified gaps? The justification must address specific gaps identified in the 2008 SNS Self Assessment or 2008 CRI Assessment.</p> <p>ACPHD has reviewed existing plans and is currently working on refinements in communications, security, and command structure design. Gaps have been identified in the communication and notification procedures, smooth integration of security forces into integrated command structures, and the activation/assignment of Command and General staff roles between participating agencies. The project will review the current communication standards and look for areas to improve. Integration of security forces and the activation/assignment of Command and General staff roles will be facilitated through additional SEMS/NIMS training with the partners and through exercises and drills.</p> |           |              |
|   |   |           |              |
| 2d  | <p><b>Project Timeline:</b> What key activities will be completed and what are the expected project completion dates?</p> <p>Communication tests will be scheduled as tabletop activities upon completion of existing plan updates. This process is expected to be completed by 06/09. Testing is likely to reveal additional avenues for improvements and will initiate additional testing processes. Security, Command and Control considerations will be addressed through ICS, SEMS, and NIMS refresher training as the courses become available. Exercises will be conducted with service partners at OES, EMS, Health Service, EDCPH, and will be evaluated for After Action Reports and Improvement Planning. All pertinent service partners will be expected to participate in the May 2009 Statewide Medical/Health Pandemic Influenza Exercise.</p>   |           |              |
|   |   |           |              |
| 2e  | <p><b>Deliverables:</b> What specific products will be produced during the 2008-09 grant period?</p> <p>ACPHD will deliver updated emergency response plans, After Action Reports, Improvement Plans and trainings on new policies and procedures that will be produced as a result of our actions during the 2008-09 grant period.</p>   |           |              |
|   |   |           |              |
| 2f  | <p><b>Evaluation of Project:</b> How will the success of the project be evaluated? What are the quantifiable measurements that will be evaluated?</p> <p>The project will be evaluated through the After Action reports and Improvement Plans. Success will be judged on the identification of best practices, improved response planning, and process validation through testing with service partners at EDCPH,</p>   |           |              |



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|           | Barton Hospital, and EMS. Measurements of plan activation, response times, and resource deployment will be reviewed as quantifiable factors of the plans.  |           |              |
|           |  |           |              |
| 2g        | <p><u>PODs</u>: Describe the current status of plans for antibiotic dispensing within the jurisdiction. Include the number of PODs that the LHD is able to establish, the number of personnel (paid staff and volunteers) likely to be available for this purpose, and the estimated number of individuals to whom the PODs can provide antibiotic prophylaxis over a 48-hour period.</p> <p>Antibiotic dispensing will be handled through combined measures of distribution from PODs and home visits. Plans are currently being refined to activate and staff POD facilities in three separate locations within the county. The primary location at 17300 State Route 89 (Turtle Rock Park) would be capable of servicing over 30% of the population and would be staffed by ACPHD, Health and Human Services, Mental Health, Sheriff Department, and the Department of Transportation. Additional staffing requirements would be filled through agreements being sought with volunteer organizations, neighboring counties, and through Regional and State resources. The total number of staff available within the county would be 12 with a total requirement 36 to staff all three sites at one time.</p> |           |              |
| 2h        | <p><u>Antibiotic Dispensing</u>: Describe actions that will be taken in 2008-09 to ensure that antibiotics can be dispensed to the entire jurisdiction over a 48-hour period. The actions must address specific gaps identified in 2008 SNS Self Assessment or CRI Assessment.</p> <p>Actions taken to ensure dispensing activities include functional tests of activation processes and review of logistics involved in the POD setup. Emphasis will be placed on gaps identified in the self assessment to include staffing, resource deployment, and communications. ACPHD has participated in POD setup drills with EDCPH and will continue to do so in the future.</p>  |           |              |
| 2i        | <p><u>2009 SNS Self Assessment</u>: Indicate your intent to comply with the requirement that a 2009 SNS self assessment be submitted no later than February 15, 2009 using the October 2007 Technical Assistance Review Tool. Provide the projected date when the Self Assessment will be submitted to the Regional SNS Coordinator.</p> <p>ACPDH will utilize the October 2007 Technical Assistance Review Tool and will complete the 2009 SNS self assessment before the end of January 2009. The completed work will be submitted to the Regional SNS Coordinator by February 15, 2009.</p>   |           |              |
| 2j        | <ul style="list-style-type: none"> <li>• <u>RAND Corporation Drills</u>: RAND developed these drills for CDC to assess elements of mass prophylaxis programs. Each LHD must conduct two of the five drills listed below. These can be incorporated into a mass prophylaxis exercise or the required mass vaccination</li> </ul>  |           |              |



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| 3c        | <p><b>Justification:</b> Describe the status of the All Hazards Plan and the supporting plans or procedures for the following:</p> <ul style="list-style-type: none"> <li>• LHD Departmental Operations Center (DOC) operations and staffing,</li> <li>• alerting and notification,</li> <li>• epidemiology and surveillance,</li> <li>• risk communications,</li> <li>• operation of the medical/health desk in the OAEOC,</li> <li>• the public health role in shelter operations, and</li> <li>• identifying health/medical resources, including the use of the MHOAC Resource Directory.</li> </ul> <p>What are the identified gaps or shortfalls? How will the project address the identified gaps?<br/> <i>Please note that the epidemiology and surveillance requirement and the operations of the medical/health desk are individually addressed in other Sections of this Work Plan. It is not necessary to repeat the same information here.</i></p> <p>The Alpine County All Hazards Plan (EOP) addresses the following: alerting and notification, EOC operation and staffing, identifying health/medical resources (including the use of the MHOAC Resource Directory) and epidemiology and surveillance. At this time, we will continue to work with current design and staff as needed. We will establish agreements/MOUs with emergency partners to provide services not supported within our own county; identify needs for our own special needs populations, and continue further testing/exercising. The Alpine County Health Department has an Annex to the EOP that is under constant revision. This document is referred to as the Department Operation Plan (DOP). Gaps in communications involving alerting, notification, and emergency staff activation will be addressed through CAHAN testing scheduled for November 2008.</p> |           |              |
| 3d        | <p><b>Project Timeline:</b> What key activities will be completed and what are the project completion dates?</p> <p>The key activities that will be completed include revision, approval, and adoption of changes in the existing plans identified as a result of the drills and exercises. After action reports and improvement plans will be completed at the end of each drill or exercise. The entire process will continue throughout the grant period and will be formally reviewed by ACPHD by the end of September 2009.</p>  |           |              |
| 3e        | <p><b>Deliverables:</b> What specific products will be produced during the 2008-09 grant period? If any of the above plans or procedures do not exist, provide a completion date for the document during the grant period. Identify the drills and exercises that will test elements of the All Hazards Plan, supporting plans and procedures.</p>  |           |              |

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|  | The products that will be produced include procedural updates to the existing All Hazards Plan, After Action Reports, and Improvement Plans identified in exercises, and tests of the functionality of the plan.   |           |              |
|  |  |           |              |
|  |  |           |              |
| 3f   | <u>Evaluation of Project:</u> How will the success of the project be evaluated? What are the quantifiable measurements that will be evaluated? The project will be considered successful through the enhancement and implementation of updates to the All Hazards Plan (EOP) by the Alpine County Sheriff's Department resulting from the input of ACPHD. Evaluation of the updates will be done through the testing of competencies, activities, and tasks that will be identified in drills and exercises. Improvement Plans will be completed as a result. Measurements will be made on the individual competencies, activities, and tasks identified for improvement through continued drills and exercises. |           |              |
|  |  |           |              |
|  |  |           |              |
|  |  |           |              |
| <b>Activity 4 – Chempack Planning (required):</b>                        |  |           |              |
| 4  | <u>CHEMPACK Plans:</u> Develop a CHEMPACK Plan that includes procedures for requesting, activating, deploying, and receiving as appropriate. Provide the date when a draft Chempack plan will be submitted for review to CDPH.   |           |              |
|  | The ACPHD currently does not have a CHEMPACK Plan and relies on Regional and State support for the function. A plan will be created and agreements will be sought with bordering counties to provide for CHEMPACK deployment. POD planning will be utilized for distribution.  |           |              |
|  |  |           |              |
|  |  |           |              |
| <b>Activity 5 - Ensure the operational capacity of CAHAN (required):</b> |  |           |              |
|  | <u>CAHAN Capacity:</u>   |           |              |
| 5a   | <ul style="list-style-type: none"> <li>• Name a primary and backup Health Alerting Network (HAN) Coordinator for CAHAN</li> <li>• Describe the operational capacity of CAHAN in the jurisdiction.</li> <li>• Describe the LHD's plan to:                             <ul style="list-style-type: none"> <li>○ Ensure attendance at monthly statewide CAHAN all jurisdiction conference calls.</li> <li>○ Maintain CAHAN roles and ensure all participants in the jurisdiction are kept current and properly trained.</li> <li>○ Add Tribal entities and organizations that represent special needs populations.</li> </ul> </li> </ul>   |           |              |
|  | ACPHD HAN/CAHAN administrator is: Lynette Bennett RN, Backup HAN/CAHAN coordinator Dr. Richard A. Harvey PHO The Alpine County Sheriff's Dept was formerly part of the CAHAN network and will be asked to reinstate. ACPHD has contacted Tiffany Magee   |           |              |

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|           | MPH and a request has been made to review and training of CAHAN procedures for the staff at ACPHD. The Washoe Tribe and the Sheriff's Office will be invited to attend the training. The contact person for the Washoe Tribe is Loren Ellery Director of the Washoe Tribal Health Clinic.  |           |              |
|           |  |           |              |
|           |  |           |              |
| 5b        | <p><b>CAHAN Drills and Exercises:</b> Identify drills and exercises that will include use of CAHAN. Include information on use of CAHAN in the Training Drills and Exercise Form, Attachment 17 of the guidance.</p> <p><b>Exercises &amp; Drills</b> will be performed every 3-4 months to include the above new partners. These will be organized by the CAHAN Coordinator. Two drills are currently scheduled during the month of November 2008 to test CAHAN alerting include Golden Guardian 2008 and CAHAN Wake Up Call.</p>   |           |              |
|           |  |           |              |
|           |  |           |              |
|           |  |           |              |
|           | <p><b>Activity 6 - Training (required):</b> Training is a critical element of maintaining public health surge response capability.</p> <p><b>Operational Area EOC Training:</b> List specific training that will be provided to staff assigned to the medical/health branch of the Operational Area EOC. Continue training LHD Staff. This includes completion of NIMS Courses 100, 200, 700, 800 and NIMS 300 and 400 as appropriate. List, by employment title, any individuals to receive NIMS training in the grant year. Identify the proposed emergency response roles of the individuals to be trained.</p> <p><b>Example:</b><br/>                     Clerical support staff will provide clerical support during disaster response. They will receive NIMS 100.<br/>                     Assistant Health Officer will serve as the DOC manager, will receive NIMS 100, 200, ICS 300</p> <p>On March 11, 12, 13 2008 the following AC employees received training NIMS, SEMS, ICS 100-200. Clinical Support Staff who will supply clerical support in the event of a disaster, Fiscal Staff Services, ( same ) Alpine County PHO who will provide and organize medical support, Members of the AC Sheriffs Dept (security), Support Staff from the Administration (clerical), Environmental Specialist (Hazardous Mat. Event), Director of Health and Human Services (administration). All new employees of ACPHD will be required to complete courses in NIMS/SEMS and ICS 100-200. Training will be sought in ICS 300 and 400 by Command Staff to include the Director of Health and Human Services and the Public Health Officer.</p> |           |              |
|           |  |           |              |
|           |  |           |              |
| 6b        | <p><b>Special Populations:</b> Identify specific training that will be provided to members of Tribal entities and organizations representing special populations. The Washoe Tribe will be urged to send representative to any CAHAN trainings and NIMS, SEMS and ICS courses.</p>   |           |              |

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| 6c   | <p><u>Volunteer Training:</u> Identify specific training that will be provided to volunteers or volunteer organizations.</p> <p>The Sheriff's Department is planning a first responder course for all deputies and volunteer firefighters to be completed by March 2009. ACPHD will train any interested volunteers in the CMV registration process and will solicit registration in the MRC.</p>   |           |              |
| 6d   | <p><u>Hospitals/Healthcare Facilities:</u> Identify specific training that will include hospitals and other health care facilities.</p> <p>ACPHD has service agreements with a Hospital and Health Care facility in neighboring counties and will participate in HIC training with each. Staff will be sent to each organization to review policies and engage in exercise activities testing emergency response. After Action Reporting and Improvement Planning will be completed as a concerted effort of all parties involved.</p>  |           |              |
| <p><b>Activity 7 - Maintain Surveillance and Epidemiology Investigation Capacity (required):</b> Maintaining epidemiological and surveillance capacity is a cornerstone to public health surge response.</p> |   |           |              |
| 7a   | <p>Describe how the LHD will conduct an annual assessment of the current plan for epidemiology and surveillance surge capacity.</p> <p>Epidemiology and surveillance are provided to Alpine County through service agreements with partners located in border counties of El Dorado and San Joaquin. Surge capacity considerations are addressed within planning activities of these partners and others managing Hospital and Health Care Facilities. Maintaining appropriate preparedness plans is inherent in the duties of these partners and is included in their annual planning processes. Testing of the functions is completed within their own jurisdictions and will be accomplished within the grant period. ACPHD will monitor the developments through participation in drills and exercises and through review of AAR/IPs.</p> |           |              |
| 7b   | <p>Identify the types of emergencies addressed by the plan, e.g., pandemic influenza, natural disasters, radiation events. Describe how the LHD will modify the plan as appropriate given the demands on epidemiology and surveillance associated with these different types of events.</p> <p>Partner planning for public health emergencies include those risks most likely to affect their own local population. Alpine county has gained service agreements with El Dorado and Washoe counties because their risks mirror those of our own population. ACPHD will respond to any emergency event involving a partner agency by following the guidelines set forth in their emergency response plan and applying it to our local response.</p>   |           |              |

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| 7c  | <p>Describe plans to inventory resources, including existing staff and staff brought on during the emergency. Include an assessment of skills and knowledge of staff. Identify gaps in knowledge and skills and describe plans for addressing the gaps. Use quantitative measures to document current status and progress in eliminating gaps.</p> <p>Inventory planning will be addressed during review of existing plans and emergency response. Deficits will be corrected as they are identified and will be included in Improvement Planning processes. Gaps have been identified in response plans in the areas of knowledge of ICS roles and responsibilities, disaster service work duties, and emergency communication processes. Existing staff will be evaluated on job performance, evaluation of planned exercises, knowledge of NIMS/SEMs and ICS structures during activation testing, and adherence to crisis communication plans. In order to address these gaps we have planned numerous trainings to bring everyone's base knowledge to the same level. These trainings include plan activation drills in November 2008, tabletop exercises involving communication capabilities in November 2008, and the May 2009 Statewide Medical/Health Pandemic Influenza Exercise.</p> |           |              |
| 7d  | <p>Describe plans to conduct an assessment and subsequent development of the type of training that is most appropriate, e.g., annual refresher courses, training on a core set of knowledge, "just-in-time" training, etc.</p> <p>Assessments of staff knowledge will be conducted through drills and exercises. When appropriate, "Just in Time" training will be conducted by subject matter experts involved in the activity. Supplemental training will be provided to staff when needed.</p>  |           |              |
| <b>Activity 8 - Laboratory Preparedness (Sentinel and Reference Labs) (Required):</b> |  |           |              |
| 8a  | <p>Reference and Sentinel Laboratories: Describe plans to assess laboratory protocols to ensure they are up to date and comply with CDC LRN protocols. Information on CDC LRN protocols can be obtained at the following web site: <a href="http://www.asm.org/policy/">http://www.asm.org/policy/</a>.</p> <p>Alpine County does not have a lab or connectivity to the Laboratory Response Network. Lab services are provided by San Joaquin County through an existing MOU.</p>  |           |              |
| 8b  | <p>Reference and Sentinel Laboratories: Confirm that the following activities have been undertaken: subscription to CAP-LPS, maintenance of liaison with clinical/hospital laboratories in your jurisdiction, provision of sentinel training updates to clinic/hospital laboratories in your jurisdiction and tracking of the completed trainings; maintenance of a 24/7 contact list for Sentinel Laboratories in the jurisdiction; provision of a copy of registration under the Select Agent Act, if applicable; and ensuring obligations for training, safety, security, notification and reporting are met. Indicate the</p>  |           |              |







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|           | involved in preparedness planning meetings and will participate in drills and exercises throughout the grant period. Volunteer organizations are active participants in our exercises and will continue to be invited to contribute to developing the maturity of our emergency response. Service partners outside of our county like EDCPH and Barton Memorial Hospital provided integral plan components and will be relied upon to support future development of local and regional response plans.  |           |              |
|           |   |           |              |
|           |   |           |              |
|           | <b>Activity 13 - Operational Area EOC Medical/Health Branch (required):</b> Ensuring efficient operations of the medical/health branch is necessary to support a public health surge response.  |           |              |
| 13a       | <p><u>Status:</u> Assess existing plans/procedures for the operation of the medical/health branch. Identify what gaps exist and describe activities to be completed to address the gaps. If no plan/procedure exists, provide a description of the activities to be completed and completion date (in the 2008-09 grant period) for the plan.</p> <p>No plan currently exists for a medical/health branch within the EOC. If activities warrant the activation of roles that would fall under this branch the ACPHD will provide the staffing and expertise through normal emergency channels. Training of pertinent personnel to fill the roles will be included in activities conducted involving SEMS/NIMS and ICS to include the completion of ICS 300 and 400 if training becomes available within or near our jurisdiction.</p> |           |              |
|           |   |           |              |
|           |   |           |              |
| 13b       | <p><u>Positions:</u> Identify the staff, by daily job title, who will fill the positions in the medical/health branch.</p> <p>The staff that would most likely fill the positions include:<br/>                     Dr. Richard Harvey, County Health Officer<br/>                     Hugh Margesson, Director Health and Human Services<br/>                     Lynette Bennett RN Clinic and Outreach Nurse<br/>                     Shelly Taplin RN Public Health RN</p>  |           |              |
|           |   |           |              |
| 13c       | <p><u>Training</u> Identify training that will be given to staff assigned to the medical/health branch.</p> <p>The identified staff has already received training in NIMS/ICS 100, 200, 700, 800. When local training is available, they will receive ICS 300 and 400. Each has completed Haz Mat training on May 14, 2008.</p>   |           |              |
|           |   |           |              |
|           |   |           |              |
| 13d       | <p><u>Drills and Exercises:</u> List drills and exercises that will include activation and operation of the medical/health branch. Ensure AARs for drills,</p>  |           |              |



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| <b>Activity 16 - Identify and Plan for Operation Of Alternate Care Sites (required):</b> LHDs are required to assist in the development of plans for the operation of government authorized ACS. |  |           |              |
| 16a  | <p>Complete the Surge Bed Capacity Plan (see Attachment 18). Identify the location of each ACS, the potential number of beds at each ACS, the proposed level of care at each ACS, and the status of plans or procedures that will be used to provide staffing, supply and re-supply at each ACS. If plans and procedures do not exist, provide a description below of the activities to be undertaken and completion date during the 2008-09 grant period for the plans and procedures.</p> <p>No licensed health care facilities exist in Alpine County so detailed surge bed capacity planning within the jurisdiction is not necessary. ACPHD does contribute to the planning activities of Barton Hospital in El Dorado County as part of their Surge Bed response and emergency support staffing plans. ACPHD has also identified an alternate care site within Alpine County to serve as a location for the hospital if relocation outside of their local jurisdiction is required. The primary material support for this location, staffing, and the provision of medical services will be provided by Barton Hospital or through MOUs in place with Barton Hospital.</p> |           |              |
| 16b  | <p>Indicate your intent to update the Surge Bed Capacity Plan in the mid-year and year-end progress reports.</p> <p>ACPHD will participate in Bed Poll test exercises conducted by Barton Hospital and El Dorado County Public Health. The Surge Bed Capacity Plans of these two organizations will be updated to reflect the After Action Reports and subsequent Improvement Plans.</p>   |           |              |
| <b>Activity 17 Develop a training and exercise plan and schedule according to Homeland Security Exercise Evaluation Program (HSEEP) guidelines (required):</b>                                   |  |           |              |
| 17a  | <p>List the drills and exercises that will occur during the grant year. Use the Training Drills and Exercises form (Attachment 17) to provide details for the proposed drills and exercises.</p> <p>10/09/08 Drive through flu clinic ( full scale exercise), 11/06/08 Golden Guardian ( Full scale exercise) , 11/13/08 Flu Mist mass vaccination 11/13/08 , Cahan Wake up call ( one time drill) 11/08/09, Pan Flu Sat Training ( Full scale exercise) 5/09/08, My-Pod ( one time drill) 4/09/09. See Attachment 17.</p>   |           |              |
| 17b  | <p>Provide the name of the person responsible for coordinating the LHD participation in the statewide pandemic influenza satellite broadcasts and statewide pandemic influenza full scale exercise in May 2009.</p>  |           |              |

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| Lynette Bennett RN, 530-694-2146 Email: <a href="mailto:Lbennett@hhs.alpinecountycva.gov">Lbennett@hhs.alpinecountycva.gov</a> |   |           |              |
| <b>17c</b>   | <p><b>Mass Vaccination Exercise:</b> Identify the projected date for the exercise and describe how Tribal entities and special populations will be included, including outreach to advise these populations of the exercise. Use the Training Drills and Exercises form (see Attachment 17) to provide the details of the proposed exercise. The exercise must meet HSEEP standards, including preparing and submitting AARs and corrective action plans.</p> <p>A drive through flu clinic will be conducted on October 9, 2008. Emphasis has been placed on attracting at risk populations to include the elderly and young. The local Tribe will also receive notification of the drill. The design of the drill will comply with HSEEP standards and will include tests of capabilities, activities, and tasks as identified in the evaluation guides. An After Action Report and Improvement Plan will be produced upon completions of the drill analysis.</p>   |           |              |
| <b>Activity 18 - Priority Project 3: Pandemic Influenza Planning (Tier 1 CDC Requirement/GF Pan Flu Requirement):</b>          |   |           |              |
| <b>18a</b>   | <p><b>Description of the Project:</b> What will be accomplished? What activities will be undertaken to complete Pandemic Influenza Response Plans and Procedures? Specifically identify how special populations and Tribal Entities are addressed in the Plan.</p> <p>ACPHD will revise existing the Pandemic Influenza Plan and procedures using guidance provided by the State. A workgroup that includes organizations that serve special populations and the local Tribe will be convened to develop/revise localized plan to make it operational. These groups will also be included in pandemic influenza trainings and exercises, information accumulated from the guidance, trainings and exercises will be incorporated into existing plan and updated as needed. All partners will be expected to participate in the May 2009 Statewide Medical/Health Pandemic Influenza Exercise.</p>   |           |              |
| <b>18b</b>   | <p><b>Participants:</b> Describe the specific response partners and organizations such as local businesses and other non-governmental entities that will be required to support local operations during a pandemic. Identify the businesses that will be encouraged to engage in planning with the LHD. Identify, by business/non-governmental agency, the support or commodity the business/entity will be providing during a pandemic, and identify the steps the LHD will take to secure the support of the business/entity. Include pre-identified commodities in the LHD MHOAC Resource Directory discussed in Priority Project 2.</p> <p>Participants include Alpine County Office of Emergency Services, Public Health Department, Emergency Medical Services Agency, Mental Health, Human Services, Barton Memorial Hospital, El Dorado Public Health, Washoe Indian Tribe, and the American Red Cross. ACPHD will also seek out agreements with other agencies and businesses identified as service providers capable of assisting during a pandemic event. MOUs will be sought out to ensure the provision of service without interruption.</p> |           |              |

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| 18c   | <p><u>Justification:</u> Identify the current status of the pandemic influenza emergency response plan. What are the identified gaps or shortfalls? How will the project address the identified gaps?</p> <p>CPHD will work on formalizing the Pandemic Influenza Emergency Response Plan through better process definition and resource acquisition. Guidance will be sought from the State as the development progresses. Gaps in emergency communications processes, POD management, and the distribution of antibiotics will be addressed through drills and exercises involving CAHAN, POD setup, and the Mass Vaccination Drive Through Clinic scheduled for October 9, 2008.</p> |           |              |
| 18d   | <p><u>Project Timeline:</u> What key activities will be completed and what are the projected completion dates?</p> <p>Planning reviews are currently being conducted. Improvements are implemented as identified and new processes defined. ACPHD will work toward having an operational plan by the end of the grant period, August 2009.</p>  |           |              |
| 18e   | <p><u>Deliverables:</u> What specific products will be produced during the 2008-09 grant period?</p> <p>It is our goal to create an operational Pandemic Influenza/ SNS plan with a defined activation process, identified service partners, and clear lines of resource activation.</p>  |           |              |
| 18f   | <p><u>Evaluation of Project:</u> How will the success of the project be evaluated? What are the quantifiable measurements that will be evaluated?</p> <p>The projected will be evaluated through the successful testing of the updated processes and lines of communication. Validation will be gained through drills and exercises targeted at the specific capabilities. After Action Reports and Improvement Plans will be used to enhance the plan.</p>   |           |              |
| <b>Activity 19 - Priority Project 4: Developed by the LHD (Tier 1 Requirement):</b> |   |           |              |
| 19a   | <p><u>Description of the Project:</u> Provide a description of the Priority Project. What will be accomplished? Which capabilities or overarching requirements will be addressed?</p> <p>ACPHD will participate in an exercise with El Dorado County Public Health on functional mass prophylaxis planning and</p>  |           |              |

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|           | distribution. This exercise will occur on 11/2008 and will consist of a drive-by flu shot clinic. Vaccine will be distributed in a manner consistent with a mass prophylaxis and participants will be monitored for time taken to progress through the clinic. This drill will be designed to measure through-put. Any efficiencies of practice identified will be recorded and utilized in the improvement planning process within our own plan.   |           |              |
| 19b       | <p><u>Participants:</u> Who will participate in the project? List specific facilities and organizations.</p> <p>Participants in the project will include Alpine County Public Health, El Dorado County Public Health, EMS, EDC Mental Health, EDC Human Services, Marshall Medical Center, Barton Memorial Hospital, El Dorado County Office of Education, EDC General Services/Fleet, City of Placerville Police Department, South Lake Tahoe Police Department, Fire Safe Council, Shingle Springs Rancheria, and others.</p>   |           |              |
| 19c       | <p><u>Justification:</u> What are the identified gaps or shortfalls? Why was the project selected? How will the project address the identified gaps?</p> <p>This project will address the gaps in the ACPHD plan concerning POD activation, mass dispensing, and command structure design. El Dorado County will be observing gaps or shortfalls identified in the areas of their plans involving:</p> <ul style="list-style-type: none"> <li>• Development of alternate dispensing modalities.</li> <li>• Complete POD site-specific operational assessments and plans</li> </ul>  |           |              |
| 19d       | <p><u>Project Timeline:</u> What key activities will be completed and what are the projected completion dates?</p> <p>Key activities will include the communication processes involved in activation, command and control, and the dispensing processes. Just-in-time training will also occur. Projected date of completion is December 2008.</p>  |           |              |
| 19e       | <p><u>Deliverables:</u> What specific products will be produced during the 2008-09 grant period? For activities that do not result in deliverables, describe how the success of the project will be evaluated. What are the quantifiable measurements that will be evaluated?</p> <p>ACPHD will produce an improved POD activation plan, identify a command and control structure consistent with ICS, SEMS/NIMS, and review mass dispensing processes as it applies to our population. Success will be measured through the development of improved plans for the local deployment and distribution of mass prophylaxis. Drills and exercises will be conducted to</p> |           |              |

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| validate the processes and identify Improvement Plans.                              |   |           |              |
|   |   |           |              |
|   |   |           |              |
| 19f   | <p><u>Evaluation:</u> Describe how the success of the project will be evaluated. What are the quantifiable measurements that will be evaluated?</p> <p>Drills and exercises will be conducted to assess the changes made to the plans and validate the related activities. Emphasis will be placed on efficiency of the activation process and distribution of prophylaxis in a timely manner. Response time will be measured as well as the number of players provided prophylaxis during the drill. After Action Reports and Improvement Plans will be generated as a result of the activities and will guide the development of future enhancements.</p>   |           |              |
|   |   |           |              |
|   |   |           |              |
|   |   |           |              |
| <b>Activity 20 - Priority Project 5: Developed by the LHD (Tier 1 Requirement):</b> |   |           |              |
| 20a   | <p><u>Description of the Project:</u> Provide a description of the Priority Project. What will be accomplished? Which capabilities or overarching requirements will be addressed?</p> <p>ACPHD will conduct an interoperable communications test with Human Services, EDCPH, Barton Hospital and all other available service partners. The test will include CAHAN emergency alerting, telephone call down lists, and short wave radio. The capabilities tested will include communication functions between emergency service partners and response times.</p>   |           |              |
|   |   |           |              |
|   |   |           |              |
| 20b   | <p><u>Participants:</u> Who will participate in the project? List specific facilities and organizations.</p> <p>All emergency service partners will be invited to participant. Specific commitments will be gained from OES, ACPHD, El Dorado Public Health Department, and Barton Memorial Hospital.</p>   |           |              |
|   |   |           |              |
|   |   |           |              |
| 20c   | <p><u>Justification:</u> What are the identified gaps or shortfalls? Why was the project selected? How will the project address the identified gaps?</p> <p>Communication gaps have been identified in emergency communication processes surrounding response to initial activations, call down activation, and the interoperability between ACPHD, Alpine Human Service Department and service partners at EDCPH and Barton Hospital. ACPHD has selected this project to build a more robust communications process by testing functions and creating redundancy where needed. Gaps in activation and response will be addressed in After Action Reports and Improvement Plans. Problems with interoperability will be addressed as needed through equipment updates and training.</p> |           |              |



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| 20d   | <p><u>Project Timeline:</u> What key activities will be completed and what are the projected completion dates?<br/>                     ACPHD will complete the project by July 2009. The key activities addressed will be tested in drills and exercises throughout the grant period.</p>  |           |              |
| 20e   | <p><u>Deliverables:</u> What specific products will be produced during the 2008-09 grant period? For activities that do not result in deliverables, describe how the success of the project will be evaluated. What are the quantifiable measurements that will be evaluated?<br/>                     The specific products of this project will include improvements to communications plans between Human Service, ACPHD and partners at EDCPH and Barton Hospital. We expect to identify individual areas for improvements in each plan and possible conflicts with equipment compatibility between service providers. Efforts will be made to coordinate the updates in each plan and alleviate any technological limitations.</p> |           |              |
| 20f   | <p><u>Evaluation:</u> Describe how the success of the project will be evaluated. What are the quantifiable measurements that will be evaluated?<br/>                     The project will be considered successful through exercises and drills testing the functions that result in increased response times. Any interoperable problems identified will be considered resolved with the implementation of a technological solution or update in equipment.</p>  |           |              |
| <b>Tier 2 Activities (Optional)</b>   |   |           |              |
| <b>Activity 21: Public Health Recovery Plan:</b> In coordination with Operational Area OES and in alignment with the Operational Area Recovery Plan, develop a current Public Health Recovery Plan. |   |           |              |
| 21a   | Describe the current status of the Public Health Recovery Plan  |           |              |
| 21b   | If the plan requires revision or development, list the activities the LHD will conduct during 2008-09 to prepare or improve the plan.   |           |              |

