



# PREPAREDNESS PROGRAM

KANSAS DEPARTMENT OF HEALTH AND ENVIRONMENT

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## PUBLIC HEALTH EMERGENCY PREPAREDNESS (PHEP) PROGRAM REGIONAL PHEP COORDINATOR WORK PLAN GUIDANCE DOCUMENT

**2022-2023: BUDGET PERIOD 4**



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*Kansas Department of Health and Environment*  
*Bureau of Community Health Systems*  
*Preparedness Program*  
*2022-2023*

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## 1. Executive Summary

This guidance document is designed to serve as an implementation guide for the work plan and activity completion requirements for Budget Period 4 for the period of 2022-2023. Under the administrative authority of the Centers for Disease Control and Prevention (CDC), this budget period marks the fourth year of the project period. This budget period is also the fourth year the HPP and PHEP programs are separated fiscally but remain aligned programmatically. New reporting requirements for the PHEP cooperative agreement are not expected to impact the PHEP Regions during this budget period despite the number of work plan activities presented.

This budget period the Regional PHEP work plan is similar to last year's work plan and has a total of thirteen (13) activities. The Regional Coordinator or subject matter expert (SME) for the region will need to know that again this budget period the Local Public Health Departments have been broken into three (3) work plans, Small, Medium and Large, depending on the county size. The Regional Coordinator or SME will need to be familiar and understand all three (3) plans in order to provide technical assistance by the member county health department of the region, plus have a full understanding of the Regional work plan.

Kansas PHEP will continue to focus on developing community partnerships, expanding networking and developing a support framework within communities. KDHE will continue to make diligent efforts to help ensure work plan items for local public health departments and the region are within the requirements of the cooperative agreement and aligned with local public health department activities, regional activities and emergency management practices. KDHE Preparedness Program will also review reporting processes and procedures to reduce the reporting workload on the PHEP administrators and Regional Coordinators.

### 1.1 General Regional Information

The following information is provided to all Preparedness Program participants. Please reference this information as needed:

- When submitting any documentation, ensure the agency name and a point of contact are included within the body of the email so proper credit is awarded. If submitting information for more than one agency in a single email, provide the information noted above for each entity and include the agency's name in attached documents.
- Due dates are outlined in the work plans and will not be extended. The established due dates allow the maximum time needed to complete the activity by the region and allow KDHE Preparedness Program staff time to review, request revisions if necessary and meet the federal guidelines.
- Work plan deliverables may be submitted in KGMS prior to the due date.
- Completed work plan items will be submitted to KGMS, unless otherwise noted. In some cases, items may need to be sent to [KDHE.Preparedness@ks.gov](mailto:KDHE.Preparedness@ks.gov). Please note the work plan activity item number and task being submitted and county name in the email subject line. All submitted documents must be dated.

### 1.2 Statement of Federal Support

The following statement must appear on **ALL** publications that are created or generated by or in relation to this cooperative agreement. This requirement applies to the following: documents, educational materials, deliverables and related supporting information. This also includes within the body of any courses created using preparedness funding. Sign-in sheets are excluded from this requirement.

Required statement for PHEP documents/publications:

*“This publication was supported by the Grant or Cooperative Agreement Number, NU90TP922049, funded by the Centers for Disease Control and Prevention. Its contents are solely the responsibility of the authors and do not necessarily represent the official views of the Centers for Disease Control and Prevention or the Department of Health and Human Services.”*

When issuing statements, press releases, requests for proposals, bid solicitations and other documents describing projects or programs funded in whole or in part with federal money, all awardees receiving federal funds, including state, local governments and recipients of federal research grants, shall clearly state:

- percentage of the total costs of the program or project which will be financed with federal money;
- dollar amount of federal funds for the project of program; and
- percentage and dollar amount of the total costs of the project or program that will be financed by non-governmental sources.

Required statement for conferences/meetings and accompanying materials:

*“Funding for this conference was made possible (in part) by the Centers for Disease Control and Prevention. The views expressed in written conference materials or publications and by speakers and moderators do not necessarily reflect the official policies of the Department of Health and Human Services, nor does the mention of trade names, commercial practices, or organizations imply endorsement by the U.S. Government.”*

### 1.3 PHEP Regional Submission Requirements – Due Dates

Financial Status Reports (FSRs) and Work Plan Progress Reports are due:

- **Quarter 1** (July 1, 2022 – September 30, 2022) – due October 15, 2022
- **Quarter 2** (October 1, 2022 – December 31, 2022) – due January 15, 2023
- **Quarter 3** (January 1, 2023– March 31, 2023) – due April 15, 2023
- **Quarter 4** (April 1, 2023 – June 30, 2023) – due July 15, 2023

*Note: If the quarterly due date falls on a State of Kansas observed holiday or a weekend, the due date becomes the next business day.*

### 1.4 PHEP Regional Submission Requirements – Deliverable Submissions

Work plan deliverables are to be submitted via KGMS

Emails should be sent per the following guidelines to [KDHE.Preparedness@ks.gov](mailto:KDHE.Preparedness@ks.gov) to better facilitate timely responses to questions or concerns on work plans, exercises and/or trainings and FSRs.

- Send emails regarding work plan items with the email subject line: **Region Name, Work plan: Q#** (quarter number) **or Item #**. Only submit work plan concerns and questions using this format. All attachments to the email should be work plan and/or work plan related deliverables.
- Send emails regarding FSR or budget related question with the email subject line: **Region Name, FSR: Q#** (quarter number). You should only submit items relating to the FSR and budget changes on this email. All attachments should be financial in nature and not a work plan deliverable.

- Send emails regarding exercise or training related questions with the subject line: **Region Name, Exercise or Training**.

Using this process will help to quickly route your inquiry to the correct Preparedness Program staff member for follow-up.

## 1.5 Financial Status Reports (FSRs) – Reimbursement Requests

The Regional Coordinator or the Fiscal Agent for the Region will be required to submit their FSRs in the *Kansas Grant Management System* (KGMS) on or before the respective due dates. Please refer to the KGMS user guides for instructions on how to maneuver through the KGMS system. The KGMS user guides can be found by clicking the *Help* button in KGMS. KGMS can be accessed at <https://kgms.ks.gov/> and requires a user ID and password for access.

Supporting documentation should be included for each item submitted on the FSR (e.g., receipts, invoices, purchase orders, etc.). This documentation should be uploaded into KGMS. (See *section 1.3.1 – Instructions Specific to Submission of the Financial Supporting Documentation* below for some helpful tips and instructions.) Expenses listed in the FSR must either be a budgeted item or have prior approval from the KDHE Preparedness Program.

KDHE Preparedness Program staff will review the FSRs to ensure items and/or services remitted on the FSR are allowable using PHEP funds. KDHE fiscal management will review and verify funding is being utilized as allocated. Payments will be made after the KDHE Preparedness Program verifies the quarterly work plan report and deliverables have been submitted to [KDHE.Preparedness@ks.gov](mailto:KDHE.Preparedness@ks.gov). Payments will be made by either electronic funds transfer (EFT) or a paper check (via mail) once all work plan reports and deliverables have been approved by KDHE.

An FSR is **required** for each quarter, even if no funding has been spent in that quarter. FSRs must be remitted in chronological order in KGMS. Failure to remit a quarterly FSR in KGMS, will result that the next quarter FSR will not be generated within the system.

## 1.6 Budgetary Information

The Regional Coordinator and/or the Fiscal Agent will receive notification from KGMS of when to submit an application, preliminary budget and budget narrative for the next budget period. This typically occurs in December of the current budget period. The preliminary budget is based on the prior year's Award Amount.

After the application, preliminary budget and budget narrative are submitted by the agency and received by KDHE these will be reviewed by the KDHE Preparedness Program to assure the items submitted on the budget are reimbursable with PHEP funding.

KGMS will be updated to reflect the Final Award Amount once the KDHE Preparedness Program receives the final award allocation amount. If there is a difference between the preliminary budget and the final award amount, the budget will be returned in KGMS to Agency Processing by KDHE Fiscal. The Regional Coordinator or the Fiscal Agent KGMS Administrator and Financial Officer will then need to adjust the budget to match the final award amount to the penny and then resubmit to KDHE for approval. The Regional Coordinator and/or the Fiscal Agent will receive notification of the final allocation award amount. Notification will be sent to the Regional Coordinator and/or the Fiscal Agent if an update to their budget will be required. Completion of that budget update in KGMS must be completed and resubmitted to KDHE within thirty (30) days after the notification is received. KGMS will not generate the Quarter 1 FSR for the budget period until the budget has been approved by the KDHE Preparedness Program.

All PHEP resources and documents are located on the KDHE Preparedness Program website at:

<https://kdhe.ks.gov/769/Local-Health-Department-Resources>.

Please refer to the list below to determine if the item you wish to purchase is an allowable or unallowable expense. If the item is not on this list, please email [KDHE.Preparedness@ks.gov](mailto:KDHE.Preparedness@ks.gov) for approval of the purchase if PHEP funding will be utilized.

### **Allowable**

- Recipients may use funds only for reasonable program purposes, including:
  - Personnel
  - Travel
    - Conference registrations need to be included in the “Other” category.
    - All other conference travel expenses need to be placed in the “Travel” category.
  - Supplies
  - Services
- Purchase caches of antiviral drugs to help ensure rapid distribution of medical countermeasures.
- PHEP awardees can (with prior approval) use funds to purchase industrial or warehouse-use equipment.
  - Vehicles must be of a type not licensed to travel on public roads.

### **Unallowable**

- None of the funds awarded to these programs may be used to pay the salary of an individual at a rate more than Executive Level II or \$199,300 per year.
- Recipients cannot use funds for the following:
  - Fundraising activities or lobbying.
  - Research.
  - Construction or major renovations.
  - Clinical care (e.g., syringes, band-aids, gowns, etc.).
  - Reimbursement of pre-award costs.
  - Response activities.
  - Purchasing clothing such as polo shirts, sweatshirts, T-shirts, etc.
  - Generally, funds may not be used to purchase food.
  - Vaccines.
- Recipients may supplement, but not replace, existing state, local, or agency funds with federal funds for activities described in the budget.
- The direct and primary recipient in a cooperative agreement program must perform a substantial role in carrying out project objectives and not merely serve as a conduit for an award to another party or provider who is ineligible.
- Payment or reimbursement of backfilling cost for staff is not allowed.
- The Regional Coordinator and/or PHEP Region and/or Fiscal Agent cannot use funds to purchase vehicles to be used as means of transportation for carrying people or goods (e.g., passenger cars or trucks and electrical or gas-driven motorized carts).
- Recipients may not use funds to purchase furniture.
- Proposed equipment purchases must have KDHE approval prior to purchase.

## 1.7 Reporting Formal Training and Informative Presentations Intended to Train

Course information should be provided to [KDHE.Preparedness@ks.gov](mailto:KDHE.Preparedness@ks.gov) via the normal reporting process. The following information needs to be included when reporting:

- Attendee sign-in sheets – should be separate from meeting sign-in sheets and include attendee’s role and organization.
- Course information – title, description, capabilities addressed, and type of personnel to be trained.
- Finalized expenditure report and outcomes of training (course specific).

## 1.8 Compliance Statement

KDHE Preparedness Program Compliance will review all submitted work plans, work plan documentation, benchmark deliverables, and additional supporting documentation to gauge programmatic compliance and activity completion progress. So that KDHE Preparedness Program reporting can be submitted according to CDC deadlines, it is important all work plan activities, regardless of their type, need to be completed on or before the assigned deadlines. It is imperative any challenges or obstacles that will impede completion of these work plan activities, projected or otherwise, are addressed with the KDHE Preparedness Program as soon as possible. KDHE Preparedness Program staff cannot address a challenge if they are unaware there is a challenge in the first place. The KDHE Preparedness Program will work with the Region to find viable solutions to those challenges. Please do not hesitate to contact the KDHE Preparedness Program at [KDHE.Preparedness@ks.gov](mailto:KDHE.Preparedness@ks.gov).

## 1.9 Contact Information

KDHE Preparedness: [KDHE.Preparedness@ks.gov](mailto:KDHE.Preparedness@ks.gov)

Healthcare Coalition (HCC) Readiness and Response Coordinators (RRC) represent the seven (7) HCCs within the state:

<https://kdhe.ks.gov/DocumentCenter/View/6476/Kansas-Healthcare-Coalitions-Map-PDF>

Regional PHEP Coordinators represent the fifteen (15) public health regions:

<https://kdhe.ks.gov/DocumentCenter/View/6253/Public-Health-Emergency-Preparedness-PHEP-Regions-PDF>

## 1.10 Budget Period Insights

This year marks the fourth budget year of the grant period. Three (3) years ago the CDC released several resources that outline the new direction the PHEP Program is taking. These resources include the new Funding Opportunity Announcement (FOA), a revised version of the PHEP Performance Measures, and a few supporting documents that explain how the various work plan activities contribute towards LHD preparedness progress. The LHD will ensure the continued involvement within their jurisdictions, with the HCCs and their work plan activities.

While the PHEP Program and the Healthcare Preparedness Program (HPP) portions of the cooperative agreement have separate application processes, the two (2) programs remain actively aligned with each other. In the instances where the health departments are required to collaborate with their local HCC, the Regional PHEP Coordinators will be tasked with assisting them and the HCC RRC in completing these activities.



This guidance document is specific for Regional Coordinators and their respective Fiscal Agents and outlines KDHE Preparedness Program expectations for the budget period. A listing of resources can be found at the end of this document, and any new or updated guidance from the CDC will be shared.

## 1.11 Carry-over Activities

The Regional PHEP Coordinators may be called upon to assist with the collection of related additional information supporting the work plan activities of the previous budget period. This information will be used to develop the responses for the *Annual Progress Report (APR)*, the *End of the Budget Period Report*, the *End of the Project Period Report*, and the *Capability Progress Guides (CPGs)* for PHEP. These reports, as well as several tie-in reports (programmatic and fiscal), are used by the federal partners of KDHE Preparedness to assess the state's overall PHEP preparedness progress. The more information the creators of these reports have, the easier it will be to provide that level of support on the state's progress

## 2. Regional PHEP Coordinator Work Plan Guidance

The state PHEP program goals for this project period are for the public health system to develop strategies and activities to improve and then expand readiness at the local, state, and national levels. This will lead to a reduction of the impact of identified threats to public health and safety during emergency situations. There is the underlying emphasis of working to improve and exceed the day-to-day capacity and capabilities of the public health response systems in Kansas. This development process can be found in detail in the FOA, **2022-23 Public Health Emergency Preparedness (PHEP) Cooperative Agreement (CDC-RFA-TP19-1901)**. Additionally, further resources are available in **Public Health Emergency Preparedness and Response Capabilities: National Standards for State, Local, Tribal, and Territorial Public Health, October 2018**. Coupled with this guidance document, these sources will assist the administrator with the execution of the contracted work plan. (Please refer to the *Reference appendix* for details).

### 2.1 Work Plan Overview

#### Activity 1

**Regional Coordinators or designated subject matter expert(s) (SME) for regions without a coordinator will convene, at a minimum, quarterly meetings of all the local health departments within the region and maintain minutes and attendee lists using the KDHE Meeting Report template.**

- **Meetings must be set-up in KS-TRAIN at least 30-days prior to the scheduled date so the required registration requirement can be met.**
- **Meetings must include a virtual or conference call option.**
- **A draft of the meeting minutes must be provided to all members and KDHE within 10-business days.**
- **KDHE must be notified of the scheduled quarterly meetings as soon as they have been set-up in KS-Train. Preferably at the beginning of the budget period.**
- **KDHE must be notified of any changes to meeting dates and/or formats as they occur.**

#### **Justification**

This work plan activity remains unchanged from the previous budget period. Quarterly meetings still need to be conducted by the Regional Coordinator for the regional membership.

## **Compliance Requirements**

- The Regional PHEP Coordinator will ensure the KDHE Preparedness Program is notified in a timely manner of the scheduling of all quarterly meetings for the budget period.
- The Regional PHEP Coordinator will ensure that KDHE Preparedness Program is included on all draft email traffic between the coordinator and members. This allows KDHE Preparedness to monitor the regions without requiring a second email confirmation of this activity as a compliance requirement.
- The Regional PHEP Coordinator will need to ensure the draft minutes are provided to the members no later than **ten (10) business days** after the meeting date. Minutes provided after this window will require a statement of lateness to Compliance.
- All records of the meetings (meeting agenda, draft meeting minutes, final minutes, etc.) need to be retained by the coordinator for **no less than five (5) years** to remain compliant with required annual housekeeping activities found at the end of the section.

## **Deliverables**

Submit, in KGMS:

- Minutes of Meeting within 10 days
- KS-TRAIN #

## **Activity 2**

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**Regional Coordinators or designated subject matter expert(s) for regions without a coordinator will attend, in person or virtually, the Healthcare Coalition (HCC) meeting(s). Regional coordinators or designated subject matter expert(s) for regions without a coordinator whose region supports multiple HCCs must attend each HCC meeting within their region (in person or virtually) or send a designee. Designees are permitted if a letter is on file with KDHE and the HCC RRC prior to the meeting date that will be missed. Designee/Proxy Letters will not be made retroactive.**

**Report out to the local health departments with a summary of the HCC meeting.**

## **Justification**

Activity 2 explains the coordinator's requirement to attend all HCC meetings that occur throughout the budget period. The Regional PHEP Coordinator is permitted to act as either a designee or a proxy of one or more health departments within that public health region. As stated, should there be more than one coalition within the region's boundaries, the Regional PHEP Coordinator will need to attend, either in person or virtually, both to receive the proper credit for completion.

## **Compliance Requirements**

- The Regional PHEP Coordinator will need to attend all HCC meetings. In the case of the PHEP region being in more than one HCC coalition area, the Regional PHEP Coordinator will need to attend all HCC meetings for each coalition.
- The Regional PHEP Coordinator will ensure they register on KS-TRAIN to remain compliant with the registration requirement.
- The KDHE Preparedness Program will pull the meeting rosters from KS-TRAIN to validate attendance. The Regional Coordinator is also required to keep copies of the sign-in sheets and may, from time-to-time, be requested to remit a copy of a sign-in sheet.

### **Deliverables**

Submit, in KGMS:

- Meeting Date
- Attendee Name
- KS-TRAIN #
- Attest the HCC meeting summary has been shared with LHDs

### **Activity 3**

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**Regional Coordinators or designated subject matter expert(s), for regions without a coordinator, will ensure each HCC Readiness and Response Coordinator (RRC) has up-to-date email addresses for each member of the PHEP region so that the RRC can include them in the email distribution list for the HCC meeting minutes. Remit the updated list in any quarter where there is a change and if there are no changes you may check the “NO” box indicating there were no updates to the list.**

### **Justification**

This activity ensures the membership of the PHEP region has the most up-to-date contact information available to the HCC’s. The format for this contact roster can be at the coordinator’s discretion, but should include name, agency and current email address. It is recommended that this activity be completed within the first quarter of the budget period and then shared with the KDHE Preparedness Program, which will validate that this activity was completed and provides all levels of the public health spectrum with updated contact information. Updates to this list should be made periodically based on changes within the region’s public health departments and then shared accordingly.

### **Compliance Requirements**

- The Regional PHEP Coordinator needs to provide a template to the region members that they can update and return to the coordinator.
- The Regional PHEP Coordinator will share updates with the KDHE Preparedness Program when the Regional PHEP Coordinator provides this update to the RRC. Regional PHEP Coordinators will then update the RRC and KDHE Preparedness Program, as needed.
- Regional PHEP Coordinators whose PHEP Region is in more than one HCC Region will remit an updated listing of PHEP region members of that HCC to each HCC Region and the KDHE Preparedness Program.

### **Deliverables**

Attest, in KGMS:

- PHEP Regional membership has been updated
- Updated Regional Membership List has been shared with the RRC

### **Activity 4**

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**Regional Coordinators or designated subject matter expert(s), for regions without a coordinator, must attend three (3) Preparedness Regional Coordinator Meetings. The KDHE Preparedness Program will have further meetings with the coordinators as needed. If the regional coordinator cannot attend, he/she will work with KDHE to send a designee. (1st, 3rd, and 4th quarter).**

Date/Time	Meeting
11/2/2022 10:00am	Q2 Regional PHEP Coordinator Meeting- TEPW (Virtual Only)
1/17/2023 09:30am	Q3 Regional PHEP Coordinator Meeting
4/17/2023 09:30am	Q4 Regional PHEP Coordinator Meeting

**Justification**

This activity ensures that the KDHE Preparedness Program and the PHEP regions are properly aligned in their work plan objectives, conducts any training the coordinators might need, creates opportunities of the state to provide technical assistance on work plan items, and provides any critical information the coordinators will need to take back to their regions. The Regional PHEP Coordinators need to ensure they are registered for each event once they are available on KS-TRAIN.

**Compliance Requirements**

- KDHE Preparedness will review the sign-in sheets from these meetings to validate the Regional PHEP Coordinator’s attendance.
- The Regional PHEP Coordinator needs to ensure they sign-up for these events on KS-TRAIN once meetings are announced.

**Deliverables**

Submit, in KGMS:

- Attendee Name

**Activity 5**

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**Regional Coordinators or designated subject matter expert(s) for regions without a coordinator, may attend and/or monitor minutes of the regional Homeland Security Council meetings. This information will be relayed in the PHEP regional meetings for situational awareness to the regional PHEP members.**

**Justification**

The regional Homeland Security Council meeting minutes are important for situational awareness in the region. The Regional PHEP Coordinators are instructed to share this information with the region’s local public health departments. The Regional PHEP Coordinator should ensure pertinent information shared at Homeland Security Council meetings is shared out across the region.

**Compliance Requirements**

The Regional PHEP Coordinator may ensure that the regional Homeland Security Council meeting overviews are placed in the meeting minutes or notated in the minutes that this was discussed, highlighting the major topics of the meeting(s). These dates will also be noted on the work plan quarterly, as relevant.

**Deliverables**

In KGMS:

- Check the Quarter the meeting was attended
- Enter the date the meeting was attended

## Activity 6

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**Regional Coordinators or designated subject matter expert(s), for regions without a coordinator, will maintain a 24/7 emergency contact list of each local health department in their region, to be shared with the LHD admins within that region.**

### **Justification**

This activity will ensure the various internal PHEP and external community partners can contact the region members when the need arises. The Regional PHEP Coordinators may use whatever calling tree format they desire, if the Activation Protocols are updated and available to the regional local public health departments.

### **Compliance Requirements**

The Regional PHEP Coordinator will note the date the Activation Protocols were reviewed and updated.

### **Deliverables**

In KGMS:

- Attest that the 24/7 Emergency Contact List is up to date.
- Enter the date the list was updated.

## Activity 7

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**Regional coordinators or designated subject matter expert(s), for regions without a coordinator, will develop a summary report of their region's county health department needs and improvements from an exercise or real-world incident in BP3, when approved by KDHE. This summary report will include a plan to meet the gaps revealed in the AAR/IP from the exercise or real-world incident approved by KDHE.**

### **Justification**

The Regional PHEP Coordinators will work closely with their region members to develop a summary plan to move forward from the COVID-19 Pandemic. Working with the regions to develop a plan for future outbreaks is critical. This summary will include the gaps witnessed and areas that need improvement.

### **Compliance Requirements**

- The Regional PHEP Coordinator will send in the summary report for review by the KDHE Preparedness Program Training and Exercise Coordinator and Compliance Coordinator.

### **Deliverables**

The Regional PHEP Coordinator will develop a summary report of areas of improvement with the region members and facilitate the completion of training needed per the report.

## Activity 8

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**Regional Coordinators or SME for regions without a coordinator must attend the annual Training and Exercise Planning Workshop (TEPW) to update the KDHE Multi-Year Training and Exercise Plan (MYTEP) for inclusion in the Grant Application for the upcoming budget period.**

### **Justification**

The TEPW for this year will be held November 2, 2022. The purpose of the TEPW is to allow the KDHE Preparedness Program staff and the various PHEP partners the opportunity to plan training for the following budget period. All Regional PHEP Coordinators are required to attend this event and need to plan accordingly. This event will be conducted virtually. Attendance will be validated. This will be the opportunity for the Regional PHEP Coordinators to speak with the KDHE Preparedness Program staff regarding training opportunities, training plans, and receive updated exercise information. This meeting will be developed by the KDHE Preparedness Program Training and Exercise Coordinator. Regional PHEP Coordinators are instructed to sign up for this course on KS-TRAIN #1102263.

### **Compliance Requirements**

- The Regional PHEP Coordinator must attend this event to be compliant with this work plan activity.
- Coordinators need to ensure they sign up for this meeting on KS-TRAIN, once it is available, to receive full credit for attending this event.

### **Deliverables**

The Regional PHEP Coordinator will attend the TEPW that is scheduled for November 2, 2022.

- The Regional PHEP Coordinator will participate and provide planning inputs for the following budget period.

### **Activity 9**

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**Regional Coordinators or SME for regions without a coordinator, will assist the local health department staff in the development, review and update of all local plans as needed, provide technical assistance (TA) and training to the local health department staffing. Coordinators will provide suggestions and/or feedback to the KDHE Preparedness Program regarding local priorities, issues, etc. and provide a year-end, written summary of how PHEP funds assisted and/or improved their region with the year-end summary report. These can include success stories, activities participated in or items purchased for the region that would not have been possible without PHEP funding.**

### **Justification**

Through the summary report this will reflect how the PHEP Grants have made it possible for the local health departments and the PHEP Regions to work together with all levels of community and state partners through emergency preparedness activities and purchases to better prepare for emergencies and disasters locally, within the state and nationally.

### **Compliance Requirements**

- The Regional PHEP Coordinator will remit a written year-end summary report to the KDHE Preparedness Program to be compliant with this work plan activity.
- Written summary must include the PHEP Region Name, Date and the Regional Coordinator Name and be kept to a maximum of (1) page in length. If a Coordinator would like to remit a larger summary report, they must have at least one (1) full page report.

### **Deliverables**

The Regional PHEP Coordinator will remit by the end of the budget period a written summary report to the KDHE Preparedness Program to include the following:

- Assistance provided to local health department staff in the development, review and updating of all local plans as needed,
- Technical Assistance (TA) and training provided to local health department staff,
- Suggestions and/or feedback provided to the KDHE Preparedness Program regarding local priorities, issues, etc.,
- Provide a year-end, written summary of how PHEP funds assisted/improved the region to the KDHE Preparedness Program, and may include success stories, activities or items purchased that would not have been possible without PHEP funding. The summary is required to be a maximum of one (1) page in length and include the Region Name, submitter name and date.

## **Activity 10**

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**Regional Coordinators or SME for regions without a coordinator, will participate in at least one (1) annual exercise (e.g., Tabletop (TTX), Functional (FE), Full Scale (FSE)) as a facilitator, player, or evaluator no later than June 30, 2023. Serving in an observer role does not meet the participation requirement. (Capability 3: Emergency Operations Coordination).**

### **Justification**

This work plan activity is designed to incorporate the Regional PHEP Coordinators into a role for one (1) of the available exercises that are conducted throughout the budget period. This activity has evolved into a way to have the Regional PHEP Coordinators actively involved in the exercise process across the state. The exercise will not count if the Regional PHEP Coordinator is an observer.

### **Compliance Requirements**

- The coordinator will need to provide validation of attending an exercise either as a facilitator, player, or evaluator. Confirmation of this activity can be validated by providing the sign-in sheets from the attended exercise.
- Exercises that the Regional PHEP Coordinator participates in as an observer will not count as participating in the exercise.

### **Deliverables**

- The Regional PHEP Coordinators will participate as a facilitator, player, or evaluator for one (1) exercise during the budget period.
- This requirement is due on or before **June 30, 2023**.

## **Activity 11**

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**Review the local health department's updates to their agency emergency Annexes (as related to Activity #17 of the Local Health Department Work Plan) and ensure each includes the necessary components. KDHE to provide Annex templates (not required for use).**

### **Justification**

This work plan activity is designed to incorporate the Regional PHEP Coordinators into a role to provide direct technical assistance to the local health departments within their region.

### **Compliance Requirements**

The coordinator will utilize the checklist and template provided by the KDHE Preparedness Program for reviewing the COOP plans.

## **Deliverables**

- The Regional PHEP Coordinators will participate by reviewing the local health departments COOP plans and providing feedback and assistance as needed to assure their plans are updated with necessary plans, contacts, processes, etc.
- This requirement is due on or before **June 30, 2023**.

## **Activity 12**

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### **PHEP purchased deployable, non-consumable inventory items will be maintained in the Comprehensive Resource Management and Credentialing System (CRMCS).**

#### **Justification**

This activity will facilitate the continued input of deployable, non-consumable supply information into the CRMCS system. This is crucial information during an incident and items are needed to be deployed county or statewide. The Authorized Equipment List is a list of approved equipment types allowed under FEMA's preparedness grant programs. The intended audience of this tool is emergency managers, first responders, and other homeland security professionals. The list consists of twenty-one (21) equipment categories divided into categories, subcategories and then individual equipment items. Make note there are no commercially available products listed; it only consists of equipment types. This referenced list can be located at: <https://www.fema.gov/authorized-equipment-list>.

#### **Compliance Requirements**

- The administrator will note the requested information on the work plan.
  - Date items were purchased and entered in tracking system.
  - Cache Manager Name.
  - Items disposed of and how.
  - Complete and remit appropriate paperwork to the KDHE Preparedness Program for approval for any item transferred to a county.
- The administrator will send screenshots validating the items purchased have been placed in the CRMCS system.
- Or mark no entry required.

#### **Deliverables**

- Complete a review of the actual deployable inventory, remove expired items and add new items to the hard copy and CRMCS database.
- All items purchased with PHEP funding will be marked as deployable.
- Note the responsible person for the cache, location of the items, and how expired items were disposed of.
- Send in screenshot of items entered with the quarterly work plan.
  - The Region will send a screenshot of items entered regardless of whether ownership was transferred to an individual county after purchase or kept by the region.
- All activities to meet the specified goals are due by **June 30, 2023**.



## Activity 13

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**Regional Coordinators or SME for regions without a coordinator may send staff from their region to attend preparedness-related conferences, trainings or exercises to increase knowledge, skills and abilities to develop and maintain plans, conduct training and exercises and respond to public health threats and emergencies using a whole-community approach to preparedness management. (Examples include but are not limited to: National Preparedness Summit, Four Corners Emergency Management, Kansas Public Health Association.)**

**Conferences and out of state training events must be pre-approved by the KDHE Preparedness Program.**

### **Justification**

The intent of this activity is to officially provide support to the Regional Coordinators or SME in expanding learning and networking opportunities amongst their peers. As the KDHE Preparedness Program is required to have all training and event information as part of the budget submission, information regarding conferences and training opportunities will be provided to the KDHE Preparedness Program with your annual budget. **The intent of this activity is to train multiple region staff.** Please note this only applies to major conferences and out of state training sessions and not local or regional trainings conducted during the budget period normally.

### **Compliance Requirements**

- Prior to attending an out of state conference or training event, the following prerequisites are based on PHEP requirements and needed for final approval by KDHE Preparedness:
  - Title of the conference or training event.
  - Description and/or agenda of the conference or training event.
  - PHEP capabilities addressed.
  - Names and title of staff attendees.
  - County health department name.
  - How does attending this conference or training event impact each attendee?
- Each attendee from the region will be required to provide to the KDHE Preparedness Program how the knowledge gained will be applied to the department's own preparedness efforts and share with the region's members.
  - The event documentation is due to the KDHE Preparedness Program for review within **fifteen (15) days** of returning from the conference or training event by each attendee.
    - What information was learned?
    - How is this information being applied at the local level?
    - How is this information shared within the agency or across the region?

### **Deliverables**

- Prior notification of the need for staff members to attend various preparedness-related conferences, meetings, and trainings throughout the budget period.
- LHD understands the request process for these types of training and network opportunities.
- The staff members who attended will be required to share what they learned during the conference or training event with the KDHE Preparedness Program and the region members.
- All activities to meet the specified goals are due by **June 30, 2023.**

## 2.2 Administrative Requirements

- *Document through job descriptions and employee time and attendance records that all staff members paid with preparedness funds are performing activities related to preparedness.*
- *Retain copies or transcripts of all certificates and/or proof of attendance for trainings completed during the entire project period for at least five (5) years.*
- *Have available signed shared resource agreements Memorandum of Agreement (MOA), Memorandum of Understanding (MOU) and any maintenance contracts relating to PHEP grant funds.*
- *Regional Coordinators will provide to the KDHE Preparedness Program information pertaining to the Performance Measures, Benchmark Requirements and/or any other requested information as related to the Hospital Preparedness Program (HPP) and/or the Public Health Emergency Preparedness (PHEP) Cooperative Agreement.*
- *Retain copies of expenditure reports, including but not limited to, invoices for each capital equipment purchase for a period of at least five (5) years. Capital equipment includes purchases of \$5,000.00 and above and/or with a lifespan of greater than a year.*
- *Regional Coordinators within a Cities Readiness Initiative (CRI) footprint will ensure work plans for the local health departments are completed as well as the CRI work plan items.*

### **Justification**

Work plan items represent the various annual or “housekeeping” activities that each Regional PHEP Coordinator must complete every budget period. Some of the original activities from previous budget periods are now their own work plan activity. In all cases, these activities must be completed on or before **June 30, 2023** and completion dates are needed once each activity is completed. Completion dates can be recorded on the work plan as part of the quarterly updates.

### **Output**

The Regional PHEP Coordinator will complete the Work Plan Administrative Requirements 1 through 6 by **June 30, 2023**.

### **Compliance Requirements**

- The Regional PHEP Coordinator will ensure PHEP-funded staff job descriptions and employee time and effort records are maintained by the local public health department.
- The Regional PHEP Coordinator will ensure that all attendance records and/or course certifications for Preparedness-related (PHEP-related) courses are maintained on-site (recommend electronically) throughout the budget period and for no less than five (5) years.
- The Regional PHEP Coordinator will note the date resource agreements were updated during the budget period and have readily available if requested.
- The Regional PHEP Coordinator will ensure that all items purchased with Preparedness funding is correctly recorded in CRMCS.
  - Information to include storage location as well as the contact name and information for the responsible party.
- The Regional PHEP Coordinator will provide any additional information related to the PHEP cooperative agreement if asked for by either the KDHE Preparedness Program and/or designated staffing at the CDC.
  - Additional information requests will be fully explained,
  - Templates will be provided (if required).
- The Regional PHEP Coordinator will ensure all fiscal documentation is retained for no less than five (5) years.
  - This includes any records for capital equipment, as defined in the work plan activity.

### 3.Summary

*This document provides the Regional PHEP Coordinator with the information needed to be successful during this budget period. Communication is key to any successful venture and this guidance document provides the information required to be compliant with the new budget period work plan activities.*

All work plan progress reports and all reporting deliverables are to be submitted via KGMS.

### The 2022 - 2023 KDHE Preparedness Team

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## Appendix A: Guidance Document Glossary

**Budget Maintenance Request (BMR)** – A BMR is utilized to alter a KDHE approved budget. BMRs are entered in KGMS.

**Budget Period (BP)** – A One (1) year period that goes from July 1st to June 30th. Five (5) budget periods typically make up one project period.

**Centers for Disease Control and Prevention (CDC)** – The managing federal agency for the Public Health Emergency Preparedness Program (PHEP), which is part of the cooperative agreement.

**Compliance** – An evaluation that assesses an institution’s business and financial management systems to ensure that established regulations and policies are being followed by either the institution or its external partners. Compliance is also the term used to describe KDHE’s Preparedness Program’s Preparedness Cooperative Agreement Compliance Program and or the Compliance Coordinator.

**Compliance in Real Time (CRT)** – A real-time monitoring feature of the Preparedness Cooperative Agreement Compliance Program (PCACP), which allows for quarterly reviews of work plan activity progress or review of work plan activities that have a deadline requirement, as defined by the work plan activity and the FOA.

**Compliance Audit** – An audit of the local health departments administrator’s adherence to the programmatic requirements of the work plan and fiscal accountability, as defined by the PHEP Cooperative Agreement. Audits are conducted quarterly to determine that required programmatic progress is being met with due diligence. The audit can be used as a wide-reaching overview of the Administrator’s programmatic and fiscal accountability, or a focused audit that can determine trending for either part of the state or for a certain work plan activity over a work period.

**Cooperative Agreement** – An agreement in which the federal government provides funding, or a thing of value authorized by public statute and the government plays a substantial role. A cooperative agreement is a form of assistance. It reflects a relationship between the U.S. government and a recipient.

**Deliverables** – Items specified on the work plan to validate compliance with the activities listed.

**Deployable** – Items purchased by a county or region that can be deployed to another county and/or region during an incident for utilization.

**Designated Staff** – Any person selected by the local health department administrator to represent the health department in training or attendance at meetings and/or conferences for the PHEP grant requirements.

**Designee** – A Designee is an individual that the local health department administrator appoints/designates that will attend the local Healthcare Coalition (HCC) meetings in the absence of a local health department representative (employee) and they do not have a right to place a vote in the absence of the local health department.

**External Partners** – Any entity that accepts federal funding under the PHEP cooperative agreement and is charged with preparedness for a Healthcare Coalition organization, local public health department, or public health region. These entities will be referred to as administrators.

**Federal Emergency Management Administration (FEMA)** – An agency of the United States Department of Homeland Security, initially created by Presidential Reorganization Plan No. 3 of 1978 and implemented by two (2) Executive Orders on April 1, 1979. The agency's primary purpose is to coordinate the response to a disaster that has occurred in the United States and that overwhelms the resources of local and state authorities.

**Financial Status Report (FSR)** – The FSR is utilized for reimbursement requests. FSRs are entered in KGMS.

**Finding(s)** – An identified or observed shortcoming or oversight in fulfilling the requirements of a task, directive, stipulation, policy, or procedure. Findings can either be identified by the administrator as a method of acknowledging an existing problem (see *gap*) or can be discovered by Compliance during the audit process.

**Funding Opportunity Announcement (FOA)** – A notice in Grants.gov of a federal grant funding opportunity. Also known as a *Notice of Funding Opportunity Announcement* or *NoFO*.

**Gap** – A difference, especially an undesirable one, between two (2) views or situations. Gaps represent challenges to preparedness. Some examples of gaps are: a lack of manpower, financial shortfalls, time constraints, work priorities, and differing interpretations of available information. Creating or changing policies and procedures are ways to overcome gaps.

**Hospital Preparedness Program (HPP)** – A program that provides leadership and funding through grants and cooperative agreements to states, territories and eligible municipalities to improve surge capacity and enhance community and hospital preparedness for public health emergencies. It also represents the preparedness effort that is conducted at the community hospital level and at the level of a larger healthcare community or coalition.

**Homeland Security Exercise and Evaluation Program (HSEEP)** – Provides a set of guiding principles for exercise programs, as well as a common approach to exercise program management, design and development, conduct, evaluation, and improvement planning. HSEEP exercise and evaluation doctrine is flexible, adaptable, and is for use by stakeholders across the whole community and is applicable for exercises across all mission areas – prevention, protection, mitigation, response and recovery.

**Inventory Management and Tracking System (IMATS)** – IMATS is an Inventory and Tracking Management System utilized to house preparedness related supplies and equipment. This is updated by the LHD of their stock. IMATS requires a User ID and Password to access and must be accessed every six (6) months to maintain active status.

**Kansas Department of Health and Environment (KDHE)** – The Kansas agency that is the designated pass-through agency for the cooperative agreement. As the awardee, KDHE is charged with executing and managing the requirements of the cooperative agreement for the state’s administrators.

**Kansas Division of Emergency Management (KDEM)** – A division of the Kansas Adjutant General’s office charged with managing disasters within the state. This emergency management entity is defined by state statute as the lead agency in disaster response and recovery.

**Kansas Grant Management System (KGMS)** – This is a system specifically developed by KDHE to for the Aid-To-Local (ATL) Grants for submission of applications, budgets, reimbursement requests, progress reports, etc. KGMS requires a User ID and Password to access.

**New Employee** – In this document, “new” is defined as an employee of the health department employed six (6) months or less, or is new to the administrator position, six (6) months or less, at the local health department.

**Notice of Award (NoA)** – The legal document issued to notify the grantee that an award has been made and that funds may be requested from the designated Health and Human Services (HHS) payment system or office. The NoA is issued for the initial budget period and each subsequent budget period in the approved project period.

**Notice of Funding Opportunity (NoFO)** – A notice in Grants.gov of a federal grant funding opportunity. Also known as a *Funding Opportunity Announcement* or *FOA*.

**Preparedness Cooperative Agreement Compliance Program (PCACP)** – The evolution of the program formerly known as the Grants Compliance Review Program or GCRP. The name change reflects the shift of the preparedness funding being referred to as a “cooperative agreement” rather than a “grant.” The designation change also marks the

changes implemented for the new project period, with the focus now being on programmatic requirements being spread across the budget period rather than at the end of the budget period. CRT is the active part of PCACP.

**Progress Report** - The Progress Report is utilized for submitting the deliverables of the Work Plan. Progress Reports are entered in KGMS.

**Project Period** – Typically a five (5) year period of work plan covered by the requirements of a single FOA.

**Proxy** - A Proxy is an individual that the local health department administrator appoints/designates that can attend the meetings in the absence of the local health department representative (employee) and they can place a vote on behalf of the local health department in their absence from the local HCC meetings. When assigning Proxy Rights (voting rights) the letter must indicate Proxy or something to the effect of voting and contain a physical signature of the Local Health Department Administrator.

**Public Health Emergency Preparedness Program (PHEP)** – Funding that helps health departments build and strengthen their abilities to effectively respond to a range of public health threats, including infectious diseases, natural disasters, man-made disasters, biological, chemical, nuclear, and radiological events. Preparedness activities funded by the PHEP cooperative agreement are targeted specifically for the development of emergency-ready public health departments that are flexible and adaptable.

**Recipient or Pass-Through Entity** – The eligible entity (in this case KDHE) that carries out an approved project or activity in support of a public purpose and not the direct benefit of the government. KDHE manages oversight on this cooperative agreement, as well as provides direction and monitors progress of the activity in its entirety.

**Subject Matter Expert (SME)** – This is an individual that possess years of experience and knowledge related to a particular topic or subject matter.

**Training** – An organized activity aimed at imparting information and/or instructions to improve the recipient's performance or to help him or her attain a required level of knowledge or skill.

**Work Period** – See *Budget Period*.

**Work Plan** – An outline of a set of goals and processes by which a team, organization, and/or person can accomplish those goals and offering a better understanding of the scope of the project.

**Work Plan Activity** – The objectives of the work plan. They are comprised of one or more tasks that need to be completed to complete the activity.

## References and Resources

The Kansas Department of Health and Environment

<http://kdheks.gov/>

KDHE Preparedness

<http://KSPrepared.org>

KDHE Preparedness: Exercise Library

<http://kdhe-exercises.org/ExerciseLibrary.htm>

KS-HAN: Everbridge member log on

<https://member.everbridge.net/892807736724418/login>

KS-TRAIN

<https://train.org/ks/home>

CRMCS Home page

<http://kansas.responders.us/>

KGMS

<https://kgms.ks.gov/Default.aspx>

## From Federal Partners

CDC-RFA-TP19-1901

PUBLIC HEALTH EMERGENCY PREPAREDNESS (PHEP) COOPERATIVE AGREEMENT

<https://grants.gov/web/grants/view-opportunity.html?oppId=310318>

The Centers for Disease Control and Prevention

<https://www.cdc.gov>

2019-2024 PHEP Cooperative Agreement CDC-RFA-TP19-1901(PDF) and subsequent budget period documents

<https://cdc.gov/cpr/readiness/phep.htm>