

PHEP Fatality Management Performance Measures Overview

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Objectives

- ❑ **Describe the fatality management (FM) performance measures (PM) and reporting requirements**
- ❑ **Explain the alignment of PMs to the functions**
- ❑ **Describe methods for PM implementation**
- ❑ **Explain the data monitoring strategy**
- ❑ **Explain how to put PMs into practice**

PHEP PM 5.1:

- Measure:** The awardee health department has defined fatality management roles and responsibilities of public health in relation to those of key local partners (e.g., emergency management, coroners and medical examiners, and funeral directors) [Yes/No]

Measure Applies To:	Circumstances for Reporting:	For Response Only:	Other Considerations:
<input checked="" type="checkbox"/> States	<input type="checkbox"/> Annual Reporting	<input type="checkbox"/> Incident	<input type="checkbox"/> Optional
<input checked="" type="checkbox"/> Directly Funded Localities	<input checked="" type="checkbox"/> If PHEP Funds Allocated to the Capability or Contracts Plan *	<input type="checkbox"/> Exercise	<input type="checkbox"/> Accountability
<input checked="" type="checkbox"/> Territories or Freely Associated States	<input type="checkbox"/> If Emergency Response Required Use of this Capability, Regardless of Funding	<input type="checkbox"/> Planned Event	<input type="checkbox"/> Data Collected By

* BP1 EXCEPTION: Mid-Year Reporting Required in BP1 for Baseline Data, Irrespective of Funding

PHEP PM 5.2:

- ❑ **Measure:** Proportion of PHEP-funded local health departments (LHDs) that have defined fatality management roles and responsibilities of public health in relation to those of key local partners (e.g., emergency management, coroners and medical examiners, and funeral directors)

Measure Applies To:	Circumstances for Reporting:	For Response Only:	Other Considerations:
<input checked="" type="checkbox"/> States	<input type="checkbox"/> Annual Reporting	<input type="checkbox"/> Incident	<input type="checkbox"/> Optional
<input type="checkbox"/> Directly Funded Localities	<input checked="" type="checkbox"/> If PHEP Funds Allocated to the Capability or Contracts Plan *	<input type="checkbox"/> Exercise	<input type="checkbox"/> Accountability
<input type="checkbox"/> Territories or Freely Associated States	<input type="checkbox"/> If Emergency Response Required Use of this Capability, Regardless of Funding	<input type="checkbox"/> Planned Event	<input type="checkbox"/> Data Collected By

** BP1 EXCEPTION: Mid-Year Reporting Required in BP1 for Baseline Data, Irrespective of Funding*

PHEP Fatality Management Measures: Alignment to Functions

- The PHEP fatality management measures align to the following associated functions:

Measure	Determine role for public health in fatality management (Function 1)	Activate public health fatality management operations (Function 2)	Assist in the collection and dissemination of antemortem data (Function 3)	Participate in survivor mental/behavioral health services (Function 4)	Participate in fatality processing and storage operations (Function 5)
PHEP 5.1	X				
PHEP 5.2	X				

Reporting Requirements

❑ PHEP 5.1

- ❑ Applies to states, directly funded localities, and territories or freely associated states
- ❑ If PHEP funds allocated to the capability plan

❑ PHEP 5.2

- ❑ Applies to states with local health departments
- ❑ If PHEP funds allocated to the capability or contracts plan (to support local level work in this capability)

❑ **BP1 Exception**

- ❑ Mid-Year reporting required for baseline data, irrespective of funding

PHEP Fatality Management Measures: Intent

- ❑ **Why are these data important?**
 - ❑ Encourage public health agencies (including local) to coordinate with leaders/officials who manage fatalities, as well as other jurisdictional partners, to develop a shared understanding of roles and responsibilities related to fatality management.
 - ❑ Ensure that key fatality management partners (including local) are able to effectively coordinate a mass fatality response.

PHEP Fatality Management Measures: How to Apply PHEP 5.1: (Awardee)

- ❑ **For an awardee to receive “Yes,” it must have plans, processes, and/or procedures in place for all of the following elements:**
 - ❑ Identify planning and/or response duties of public health and key partners
 - ❑ Identify legal / regulatory authority governing fatality management in the jurisdiction (e.g., determining cause of death, identifying remains, family notification, burial permits)

PHEP Fatality Management Measures: How to Apply PHEP 5.1: (Awardee) (cont'd)

- ❑ **For an awardee to receive “Yes,” it must have plans, processes, and/or procedures in place for all of the following elements:**
 - ❑ Identify critical pathways/trigger points/circumstances leading to public health response actions
 - ❑ Sign an MOA/MOU/Mutual Aid Agreement (MAA)/contracts/ letters of agreement to support FM activities in the jurisdiction if requested by FM lead
 - ❑ Identify any legal waivers that would need to be in place in order to carry out public health’s FM activities

PHEP Fatality Management Measures: How to Apply (PHEP 5.1) (cont'd)

Example 1: Centralized state with regional/district public health offices and municipal health department in large city

- ❑ Awardee X is a medium-sized state with several state-run district/regional public health offices and a large, independent municipal health department.
- ❑ The PHEP director schedules a meeting with the chief medical examiner, the state emergency management director, and various legal staff to review the elements listed in PHEP 5.1 and plan for the current budget period's mass fatality preparedness activities.

PHEP Fatality Management Measures: How to Apply (PHEP 5.1) (cont'd)

Example 1: Centralized state with regional/district public health offices and municipal health department in large city

- ❑ During the meeting they review the current mass fatality plan and note that they have already identified agencies responsible for certain response duties, legal authorities governing fatality management and trigger points related to initiating public health response actions.
- ❑ The various parties recognize that formal agreements between the medical examiner, emergency management, public health, law enforcement, and other agencies will better serve response needs should a mass fatality incident occur.

PHEP Fatality Management Measures: How to Apply (PHEP 5.1) (cont'd)

Example 1: Centralized state with regional/district public health offices and municipal health department in large city

- ❑ The agencies agree to have agreements in place by the end of the BP1 PHEP project period regarding partner agencies' roles and responsibilities for mass fatality response activities.
- ❑ It was also noted that relevant staff are not currently familiar with what legal waivers might be needed for a mass fatality incident involving public health for their state. Researching these statutes is a PHEP mass fatality activity for BP1.

PHEP Fatality Management Measures: How to Apply (Continued) (PHEP 5.1)

Example 1: Centralized state w/ regional/district public health offices and municipal health department in large city

- ❑ **Question:** How many of the initial five elements of PHEP 5.1 are in place at the beginning of the budget period?
- ❑ **Answer:** Three: Identification of response duties, legal authorities, and triggers to initiate a public health response.

PHEP Fatality Management Measures: How to Apply (Continued) (PHEP 5.1)

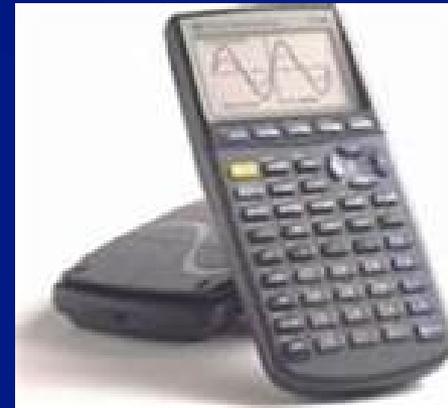
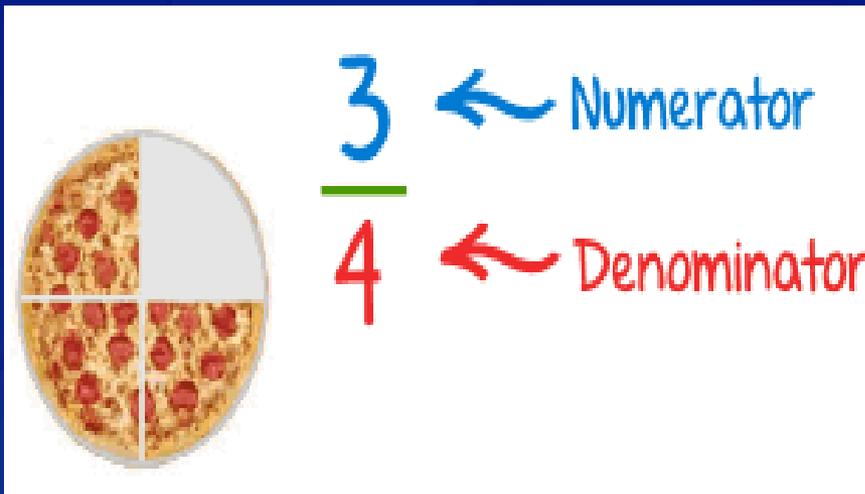
Example 1: Centralized state with regional/district public health offices and municipal health department in large city

- ❑ **Question:** If the fatality management lead does not request MOUs or letters of agreement with partner agencies, including public health, can an awardee still receive a “Yes” for PHEP 5.1 if it completes the remaining four elements for the measure?
- ❑ **Answer:** Yes. If the fatality management lead (e.g., medical examiner, law enforcement, etc.) does not request MOUs or similar agreements, and the awardee completes the remaining four elements, it would receive a “Yes” for PHEP 5.1.

Questions?

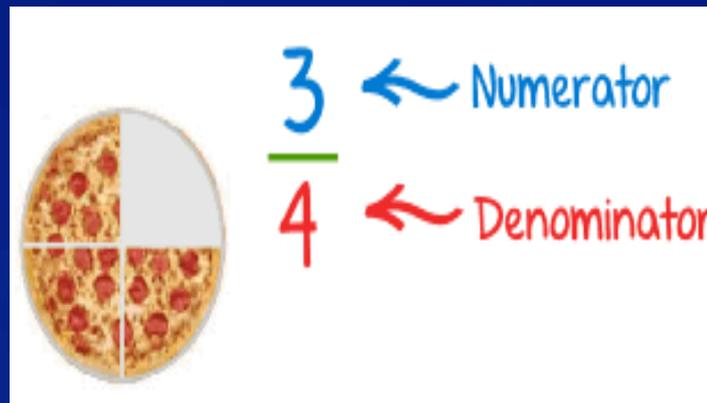
PHEP Fatality Management Measures: How to Apply PHEP 5.2: (LHDs)

- A proportion metric has a numerator and denominator



PHEP Fatality Management Measures: How to Apply PHEP 5.2: (LHDs) (Cont'd)

- ❑ Denominator = Number of LHDs funded to work on fatality management
- ❑ Numerator = Number of LHDs funded to work on fatality management that have addressed all of the fatality management performance measure elements



PHEP Fatality Management Measures: How to Apply PHEP 5.2: (LHDs) (Cont'd)

- ❑ **For an LHD to be included in the numerator, plans and/or procedures must be in place for all of the following elements:**
 - ❑ Identify planning and/or response actions duties of public health and key local partners
 - ❑ Identify legal/regulatory authority governing fatality management in the local jurisdiction (e.g., determining cause of death, identifying remains, family notification, burial permits)

PHEP Fatality Management Measures: How to Apply PHEP 5.2: (LHDs) (Cont'd)

- ❑ For an LHD to be included in the numerator plans and/or procedures must be in place for all of the following elements:**
 - ❑ Identify critical pathways/trigger points/circumstances leading to public health response actions
 - ❑ Sign an MOA/MOU/MAA/contracts/ letters of agreement to support FM activities in the jurisdiction
 - ❑ Identify any legal waivers that would need to be in place in order to carry out public health's FM activities

PHEP Fatality Management Measures: How to Apply PHEP 5.2: (LHDs) (Cont'd)

- ❑ Facilitate a collaborative planning meeting with LHDs funded to work on fatality management at the start of the budget period.



PHEP Fatality Management Measures: How to Apply (PHEP 5.2)

Example 2: Decentralized state with local county health departments

- ❑ State awardee Y is comprised of a state public health office and 35 local (county) health departments operating as units of local government.
- ❑ At the beginning of the budget period, the awardee provides all 35 LHDs with a brief questionnaire that, once aggregated by the state, will be used to answer PHEP 5.2. By the end of the budget period, 22 out of the 35 LHDs have been able to address all five elements in PHEP 5.2 (same elements as PHEP 5.1). Thirteen out of 35 LHDs have addressed zero to four of the sub elements.

PHEP Fatality Management Measures: How to Apply (PHEP 5.2) (Cont'd)

Example 2: Decentralized state with local county health departments

- ❑ **Question:** What should awardee Y report as the numerator and denominator for PHEP 5.2?
- ❑ **Answer:** When reporting is due to CDC, awardee Y can report a numerator of 22 and a denominator of 35.

PHEP Fatality Management Measures: How to Apply (PHEP 5.2) (Cont'd)

Example 2: Decentralized state with local county health departments

- ❑ **Question:** How can awardee Y assist the remaining 13 LHDs that did not “meet the measure?” How can CDC assist awardee Y in helping its LHDs?
- ❑ **Answer:** When collecting for PHEP 5.2, awardee Y is encouraged to track barriers and challenges at the local level. Awardee Y can then use this information to devise strategies for technical assistance or other forms of help. Awardee Y’s CDC project officer can use PHEP 5.2 data to help provide technical assistance or steer awardee Y to other awardees who appear to have done well in this area.

PHEP Fatality Management Measures: How to Apply (PHEP 5.2) (Cont'd)

Example 2: Decentralized state with local county health departments

- ❑ **Question:** Is there a requirement to report on PHEP 5.1 and 5.2 in BP1?
- ❑ **Answer:** Yes. Even if an awardee is not allocating any PHEP funds to FM, it must report on PHEP 5.1. All PHEP-funded or supported LHDs (or regional/district offices), irrespective of capabilities they are funded or supported to work on, should be included as part of the denominator for PHEP 5.2 in BP1 only. After that, only LHDs funded or supported to do FM should be included in the denominator.

Questions?

PHEP Fatality Management Measures: Monitoring

- ❑ **The following elements should be monitored:**
 - ❑ Missing data
 - ❑ Documentation to support / verify reported data
 - ❑ Extremely high or low percentages (e.g., 100%)
 - ❑ Averages varying greatly from national average
 - ❑ Consistency between qualitative and quantitative data

Questions?

PHEP PM Training Schedule for Awardees

- ❑ **December 13, 2012: 1:30 p.m. - 2:45 p.m., Non-Pharmaceutical Intervention**