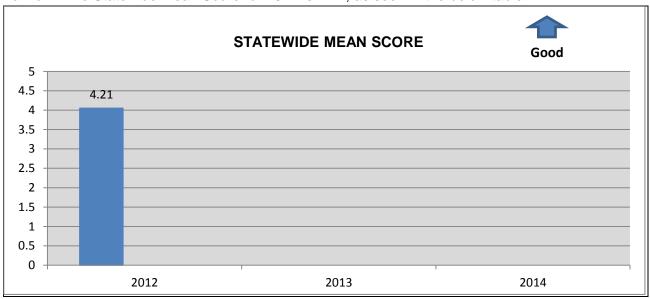
Public Health and Healthcare Preparedness (PHHP) is essential to achieving the Florida Department of Health's mission to promote, protect and improve the health of all people in Florida through integrated state, county & community efforts. Facilitating collaboration among the state's health care partners, including the public health system, pre-hospital, hospital, and medical practitioners, is critical in order to respond as a system of care. The goals, objectives, and strategies outlined in Florida's 2012-14 Public Health and Healthcare Preparedness Strategic Plan provide direction for preparing the state's health and medical system for all-hazard events.

The Department of Health has dual responsibilities in preparedness and response. The first is to maintain the ability to provide core public health services through the development of local and state emergency operations plans. The second is to coordinate the public health and healthcare system preparedness and response activities through the development of county comprehensive emergency management plans and the state comprehensive emergency management plan.

The CHD Preparedness Expectations were initially developed in 2008 and are assessed annually to provide each CHD with a mean score reflecting progress in achieving minimum expectations. Many measures are self-assessed by the county health department, using a 5 point scale (1 = Failing or only meeting minimum criteria; 3 = meeting multiple expectation criteria completely; 5 = Passing or completely meeting all expectation criteria). Data for other measures are provided by the Bureau of Preparedness and Response and the Bureau of Epidemiology (see Table "Summary of 2011 Data by Performance Measure").

In the spring of 2012, the CHD Preparedness Expectations were reviewed and enhanced by a joint workgroup to better align with federal preparedness capabilities and to extend along a three year strategic planning cycle. The resulting expectations are the 2012-2014 CHD Expectations which were approved for use in June 2012 by the Regional Co-Chairs. The 2012 CHD Expectations presented in this summary represent the baseline measurements of the 2012-2014 strategic planning horizon. The Statewide Mean Score for 2012 is 4.21, as seen in the below table.



Black font = Data provided by CHD Self-Assessment Blue font = Performance Data

Summary of 2012 Data by Performance Measure

Summary of 2012 Data by Performance Measure						
Performance Expectation / Measure	Summary of Performance					
CHD Emergency Operations Plan has been updated within the past 36 months. Self-assessed by CHD.	 92.5% (62) Passed 7.5 % (5) Failed Statewide Mean = 4.70					
Approved County Comprehensive Emergency Management Plan identifies roles and responsibilities for the CHD.	100.0 % (67) Passed0.0 % Failed					
Self-assessed by CHD.	Statewide Mean = 5.0					
Response Workforce Development.	Expectation not developed in 2012; not scored.					
Within the past 24 months, the CHD conducted an exercise or real event activation; completed an AAR/IP of the exercise or activation; and completed the AAR/IP within 30 days of exercise or activation	 2.4% (15) CHDs conducted an exercise or real event activation 7.5% (5) CHDs completed an AAR/IP of the exercise or activation 70.1% (47) CHDs completed AAR/IP within 30 days of exercise or activation 					
Self-assessed by CHD.	Statewide Mean = 3.99					
CHD decision-maker has been identified to support county EOC operations; decision maker can report for duty within 60 minutes of request, and this expectation has been exercised or tested within last 12 months	 9.0% (6) CHDs identified decision-maker to support EOC operations 19.4% (13) CHDs identified decision-maker to support EOC operations and decision maker reported for duty within 60 minutes 71.6% (48) CHDs had decision maker, reporting within 60 minutes, and tested same within last 12 months 					
Self-assessed by CHD.	Statewide Mean = 4.25					
CHD has an approved Continuity of Operations Plan; exercised or activated within the last 24 months; and results of exercise are documented in an AAR/IP	 34.3% (23) CHDs has an approved Continuity of Operations Plan 23.8% (16) CHDs have approved COOP; tested through exercise/activation 41.7% (28) CHDs have approved COOP; tested through exercise/activation; and documented in AAR/IP 					
Self-assessed by CHD.	Statewide Mean = 3.19					

April 2, 2013

Performance Expectation / Measure	Summary of Performance
List of key contacts for notification of public health issues is available and reviewed/updated at least annually.	100.0 % (67) Passed0.0 % Failed
Self-assessed by CHD.	Statewide Mean = 5.0
The CHD Key Contacts are identified to receive state level alerts; The Key Contacts are registered FDENS users (CHD Key Contacts role); and Key Contacts respond to state level alert drill or real events within 30 minutes	No statewide FDENS State Level Alert exercise was conducted in 2012; not scored.
Risk Assessment. This expectation is under development.	Expectation will not be scored in 2012.
The CHD conducted vulnerable population assessments using the Local Vulnerable Population Assessment Tool and determined the percent of 10 priority target vulnerable population categories which were fully assessed with the tool.	 23.9% (16) CHDs assessed less than 20% of 10 target populations 7.6% (5) CHDs assessed 21% to 40% of 10 target populations 7.6% (5) CHDs assessed 41% to 60% of 10 target populations 13.6% (10) CHDs assessed 61% to 80% of 10 target populations 46.3% (31) CHDs assessed 81% to 100% of target populations
Self-assessed by CHD.	Statewide Mean = 3.52
Percent of 11 community sectors in which the CHD's key organizations and community agencies which participate in public health, medical, and/or mental/behavioral emergency preparedness efforts, have been identified.	 4.5% (3) CHDs identified 21% to 40% of the community sectors having Key Organization's engagement 7.5% (5) CHDs identified 41% to 60% of the community sectors having Key Organization's engagement 22.4% (15) CHDs identified 61% to 80% of the community sectors having Key Organization's engagement 65.6% (44) CHDs identified 81% to 100% of the community sectors having Key Organization's engagement
Self-assessed by CHD.	Statewide Mean = 4.51

April 2, 2013

	April 2, 2013					
Performance Expectation / Measure	Summary of Performance					
Within the past 36 months, the CHD approved a Special Needs Sheltering (SpNS) operations plan; the SpNS plans were tested through exercise or activation; and results were documented in an AAR/IP.	 Within the past 36 months: 14.9% (10) CHDs plans were revised, updated and approved, but not tested. 23.9% (16) CHDs plans were approved and tested via exercise/activation 61.2% (41) CHDs plans approved; exercise /activated; and documented in AAR/IP within 30 days of completion 					
Self-assessed by CHD.	Statewide Mean = 3.93					
The County Health Department has participated in the local Functional Needs Support Services (FNSS) planning activities. Self-assessed by CHD.	 83.6 % (56) Passed 16.4 % (11) Failed Statewide Mean = 4.34					
Selected CHDs participate in developing shelter surveillance standards, tools and processes.	This expectation is under development and will not be scored in 2012.					
Within the past 24 months, the CHD documented their risk communication message development and dissemination procedures; tested to ensure risk communication message can be disseminated within 3 hours; and documented exercise/incident outcomes in an AAR/IP.	Within past 24 Months: 13.4% (9) CHDs documented their risk communication message development and dissemination procedures 41.8% (28) CHDs tested to ensure risk communication message can be disseminated within 3 hours 44.8% (30) CHDs and documented exercise/incident outcomes in an AAR/IP.					
Self-assessed by CHD.	Statewide Mean = 3.72					
CHD has designated Public Information Officer (PIO) trained to Department of Health (DOH) CERC standards as well as epidemiology and environmental health (EPI / EH) spokesperson(s) trained to DOH CERC standards.	 6.0% (4) CHDs have PIO designated but not trained 10.4% (7) CHDs have PIO designated and trained to DOH CERC standards. 28.4% (19) CHDs have PIO designated and trained to DOH CERC standards; and EPI/EH spokesperson(s) are designated but not trained to DOH CERC standards. 55.2% (37) CHDs have PIO designated and trained to DOH CERC standards and EPI/EH spokesperson(s) are designated and are trained to DOH CERC standards. 					
Self-assessed by CHD.	Statewide Mean = 4.27					

April 2, 2013

Performance Expectation / Measure	Summary of Performance
r enormance Expectation / Measure	Summary of Ferrormance
Local Joint Information Center/Joint Information System Operations lead has list of health and medical contacts provided by the CHD; and CHD submits updated list to local Joint Information Center/Joint Information System Operations lead at least annually.	 98.5 % (66) Passed 1.5 % (1) Failed
Self-assessed by CHD.	Statewide Mean = 4.91
The CHD has procedures for conducting medical clearance that are reviewed and updated annually. Additionally, the CHD maintains a roster of qualified and trained staff to conduct fit testing that is reviewed and updated annually.	73.1 % (49) Passed26.9 % (1) Failed
Self-assessed by CHD.	Statewide Mean = 3.93
Responder Risk and Mitigation. Select counties participate in workgroup to identify and prioritize potential risks to responders.	This expectation is under development and will not be scored in 2012.
Within the last 36 months, CHD has completed a Medical Countermeasure Dispensing Plan (MCDP), outlining how the county will 1) request, 2) receive, 3) dispense, 4) report dispensing of medical countermeasures, and 5) report adverse events. This plan should be approved and tested through exercise or activation, and the results should be documented in an AAR/IP.	 Within the last 36 months: 31.3% (21) CHDs completed and approved the MCDP, but not tested. 13.5% (9) CHDs completed and approved; and tested the MDDP through exercise/activation. 55.2% (37) CHDs completed and approved; tested through exercise/activation; and documented the results in an AAR/IP
	Statewide Mean = 3.48
Self-assessed by CHD.	
Competencies and skills in applied Epidemiology Participation in Epidemiologist Calls & Grand Round Presentations	95.5 % (64) Passed4.5 % (3) Failed
Data provided via Bureau of Epidemiology Education/Training Report	Statewide Mean = 4.82
Process exists to ensure 24/7/ CHD access to collect, Review, and respond to reports of selected diseases	95.5 % (64) Passed4.5 % (3) Failed
Data provided via Bureau of Epidemiology Accessibility Report:	Statewide Mean = 4.82

Ar	ril	2.	20	13	

Performance Expectation / Measure	Summary of Performance
75% or higher rate of disease reporting within 14 days	85.1 % (57) Passed14.9 % (10) Failed
Data provided via Bureau of Epidemiology Accessibility Report	Statewide Mean = 4.40
30% or less annual error rate or unknown values for selected diseases.	85.1 % (57) Passed14.9 % (10) Failed
Data provided via Bureau of Epidemiology Data Quality Report	Statewide Mean = 4.40
Counties with population greater than 100,000 have at least one epidemiologist trained and routinely using FPICN data in ESSENCE	76.1 % (51) Passed23.9 % (16) Failed
Counties with population less than 100,000 have at least one epidemiologist trained to use the FPICN data in ESSENCE	
Data provided via Bureau of Epidemiology ESSENCE Query	Statewide Mean = 3.03
Annual CRI Score	13 CHDs completely passed with a score of 5, with assessment scores ranging from 81% to 100%.
Performance data provided by Bureau of Preparedness and Response	One CRI CHD scored a 3 (41% to 60%) on the assessment, due primarily to their recent beginning in the process.
	Statewide Mean for CRI CHDs= 4.86

2012 Mean Scores **By County Size**

Year	Target	Statewide	Metro Counties	Large Counties	Medium Counties	Small Counties	
2012	Baseline	4.21	4.58	4.32	4.38	4.00	

2012 Scores by Performance Expectation - Measure / by County Size

Performance Expectation-Measure	State View	Metro Counties View	Large Counties View	Medium Counties View	Small Counties View
CHD Emergency Operations Plan	4.70	5.00	5.00	4.73	4.47
County Comprehensive Emergency Management Plan	5.00	5.00	5.00	5.00	5.00
Response Workforce Development					
After Action Report and Improvement Plan	3.99	3.86	4.60	4.20	3.60
CHD Decision Maker for EOC Operations	4.25	4.43	4.33	4.33	4.13
Continuity of Operations	3.19	3.57	3.13	3.47	3.00
Notification of Key Contacts	5.00	5.00	5.00	5.00	5.00
Florida Dept. of Health Emergency Notification System (FDENS) Alerts					
Risk Assessment					
Vulnerable Populations	3.52	3.43	3.47	3.80	3.43
Community Engagement	4.51	4.57	4.53	4.40	4.53
Special Needs Sheltering (SpNS) Operations Functional Needs Support Services (FNSS)	3.93 4.34	4.14 5.00	4.07 5.00	4.33 5.00	3.60 3.53
Shelter Surveillance	4.34	5.00	5.00	5.00	3.33
Risk Communication Messaging Development and Dissemination	3.72	4.71	3.40	3.80	3.60
Public Information Officer and Spokesperson	4.27	4.43	4.67	4.33	4.00
Joint Information Center / Joint Information System Participation	4.91	5.00	4.87	4.73	5.00
N-95 Fit Testing	3.93	4.43	4.47	4.47	3.27
Responder Risk and Mitigation					
Medical Countermeasure Dispensing	3.48	4.71	3.13	3.67	3.27
Competencies and Skills in applied Epidemiology	4.82	5.00	5.00	5.00	4.60
Process exists for 24/7 Health Department access to collect, review, and respond to reports of selected diseases	4.82	5.00	4.73	5.00	4.73
75% or Higher Rate of Disease Reporting Within 14 Days	4.40	5.00	4.73	4.73	3.93
30% or Less Annual Error Rate or Unknown Values for Selected Diseases	4.40	5.00	5.00	4.73	3.80
Florida Poison Information Center Network (FPICN)	3.03	3.86	2.07	2.87	3.40
Annual SNS/CRI Score	4.86	5.00	4.67	5.00	None

2012 Mean Scores by Performance Expectation - Measure / by Region

Performance Expectation - Measure	State View	Region 1 View	Region 2 View	Region 3 View	Region 4 View	Region 5 View	Region 6 View	Region 7 View
CHD Emergency Operations Plan	4.70	5.00	5.00	5.00	4.50	5.0	3.80	4.00
County Comprehensive Emergency Management Plan	5.00	5.00	5.00	5.00	5.00	5.0	5.00	5.00
Response Workforce Development								
After Action Report and Improvement Plan	3.99	3.60	4.80	3.92	4.25	4.11	3.80	4.50
CHD Decision Maker for EOC Operations	4.25	4.20	3.62	4.08	4.75	4.33	4.60	5.00
Continuity of Operations	3.19	3.60	3.00	2.69	4.00	3.44	3.20	2.25
Notification of Key Contacts	5.00	5.00	5.00	5.00	5.00	5.00	5.00	5.00
Florida Dept. of Health Emergency Notification System (FDENS) Alerts								
Risk Assessment								
Vulnerable Populations	3.52	4.40	3.77	3.15	4.63	3.44	2.30	2.75
Community Engagement	4.51	4.80	4.23	4.85	4.75	4.33	4.30	4.00
Special Needs Sheltering (SpNS) Operations	3.93	4.40	3.15	4.23	3.75	3.44	4.40	4.50
Functional Needs Support Services (FNSS)	4.34	5.00	3.77	4.08	5.00	5.00	3.40	5.00
Shelter Surveillance								
Risk Communication Messaging Development and Dissemination	3.72	4.20	3.46	4.23	3.75	3.22	3.20	4.00
Public Information Officer and Spokesperson	4.27	4.30	4.00	4.31	4.38	4.44	4.40	4.00
Joint Information Center / Joint Information System Participation	4.91	5.00	5.00	5.00	5.00	4.78	5.00	4.00
N-95 Fit Testing	3.93	4.60	2.85	3.77	5.00	4.11	4.20	3.00
Responder Risk and Mitigation								
Medical Countermeasure Dispensing	3.48	4.20	3.15	2.69	3.50	3.44	3.60	5.00
Competencies and Skills in applied Epidemiology	4.82	5.00	4.69	4.69	5.00	5.00	4.60	5.00
Process exists for 24/7 Health Department access to collect, review, and respond to reports of selected diseases	4.82	5.00	4.69	5.00	4.50	4.56	5.00	5.00
75% or Higher Rate of Disease Reporting Within 14 Days	4.40	4.60	4.08	4.08	4.50	4.56	4.60	5.00
30% or Less Annual Error Rate or Unknown Values for Selected Diseases	4.40	5.00	3.15	4.69	4.50	5.00	4.20	5.00
FL Poison Information Center Network (FPICN)	3.03	3.00	2.23	3.15	3.50	1.89	4.20	4.00
Annual SNS/CRI Score	4.86	None	3.00	5.00	5.00	5.00	None	5.00
	1		1	1	1	1	1	