

**County Health Department (CHD) Preparedness Expectations  
January 13, 2015; Version 1.2**

Category*	Expectation			Target	Scoring	Federal/State Guidance Alignment **
	2013	2014	2015			
Planning						
PL1 CHD Emergency Operations Plan (EOP)	<ul style="list-style-type: none"><li>CHD Emergency Operations Plan has been updated within the past 36 months.</li></ul>	<ul style="list-style-type: none"><li>CHD Emergency Operations Plan has been updated within the past 36 months.</li></ul>	<ul style="list-style-type: none"><li>County should be able to produce a written plan that has been updated at least once within the last 36 months and that addresses, at a minimum, the elements listed.</li></ul>	<b>Target:</b> 100% of CHDs will meet expectation.  Note: CHDs with Project Public Health Ready (PPHR) certification within past 3 years meet this expectation.	These are Pass/Fail expectations and are scored as follows:  1 = Fail 5 = Pass	CDC PHEP Capability 3, Emergency Operations Coordination, Function 2  PHHP SP Objective 1.2 – Planning  PHEP Performance Measure 3.1: Staff Assembly
PL2 County Comprehensive Emergency Management Plan (CEMP)	<ul style="list-style-type: none"><li>Approved County Comprehensive Emergency Management Plan identifies roles and responsibilities for the CHD.</li></ul>	<ul style="list-style-type: none"><li>Approved County Comprehensive Emergency Management Plan identifies roles and responsibilities for the CHD.</li></ul>	<ul style="list-style-type: none"><li>Approved County Comprehensive Emergency Management Plan identifies roles and responsibilities for the CHD.</li></ul>	<b>Target:</b> Meet expectation each year.	These are Pass/Fail expectations and are scored as follows:  1 = Fail 5 = Pass	CDC PHEP Capability 3, Emergency Operations Coordination, Function 4  PHHP SP Objective 1.2 – Planning  PHEP Performance Measure 3.1: Staff Assembly  HPP Capability 3, Emergency Operations Coordination, Function 1
PL3 Response Workforce Development	<ul style="list-style-type: none"><li>The intent of this expectation is to ensure CHDs have a training plan for response workforce development. Many counties have undergone Project Public Health Ready (PPHR) certification wherein a documented training is required. In addition, DOH required trainings include basic level response training for all</li></ul>	<ul style="list-style-type: none"><li>Workforce development standards will be revisited in 2014.</li></ul>	<ul style="list-style-type: none"><li>The intent of this expectation is to ensure CHDs have a training plan for response workforce development. Many counties have undergone Project Public Health Ready (PPHR) certification wherein a documented training is required. In addition, DOH required trainings include basic level response training for all employees.</li></ul>	<b>Target:</b> 100% of CHDs will meet expectation.  Note: CHDs with Project Public Health Ready (PPHR) certification within past 3 years meet this expectation.	These are Pass/Fail expectations and are scored as follows:  1 = Fail 5 = Pass	CDC PHEP Capability 1, Community Preparedness, Function 2

**County Health Department (CHD) Preparedness Expectations**  
**January 13, 2015; Version 1.2**

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	2013	2014	2015			
	employees.					
PL4 After Action Report and Improvement Plan (AAR/IP)	Within the past 24 months: <ul style="list-style-type: none"> <li>CHD conducted an exercise or real-event activation.</li> <li>CHD completed an AAR/IP of the exercise or activation.</li> <li>CHD has completed AAR/IP within 60 days of exercise or activation.</li> </ul>	Within the past 24 months: <ul style="list-style-type: none"> <li>CHD conducted an exercise or real-event activation.</li> <li>CHD completed an AAR/IP of the exercise or activation.</li> <li>CHD has completed AAR/IP within 60 days of exercise or activation.</li> </ul>	Within the past 24 months: <ul style="list-style-type: none"> <li>CHD conducted an exercise or real-event activation.</li> <li>CHD completed an AAR/IP for an exercise or activation.</li> </ul>	<b>Target:</b> 100% of CHDs will meet expectation.	Within the past 24 months: 1 = CHD conducted an exercise or real event activation.  5 = CHD has completed AAR/IP for an exercise or activation.	CDC PHEP Capability 3, Emergency Operations Coordination, Function 5  PPHP SP Objective 1.3 – Training, Exercise :& Evaluation
<b>Emergency Operations Coordination</b>						
EO1 CHD Decision-Maker for Emergency Operations Center (EOC) Operations	<ul style="list-style-type: none"> <li>CHD decision-maker has been identified to support county EOC operations.</li> <li>CHD decision-maker can report for duty within 60 minutes of request.</li> <li>CHD decision-maker has been exercised or tested within last 12 months.</li> </ul>	<ul style="list-style-type: none"> <li>CHD decision-maker has been identified to support county EOC operations.</li> <li>CHD decision-maker can report for duty within 60 minutes of request.</li> <li>CHD decision-maker has been exercised or tested within last 12 months.</li> </ul>	<ul style="list-style-type: none"> <li>CHD decision-maker has been identified to support county EOC operations.</li> <li>CHD decision-maker can report for duty within 60 minutes of request.</li> <li>CHD decision-maker has been exercised or tested within last 12 months.</li> </ul>	<b>Target:</b> Meet expectation each year.	1 = CHD decision-maker identified to support EOC operations. 3 = CHD decision-maker identified to support EOC operations and can report for duty within 60 minutes. 5 = CHD decision-maker identified, can report to duty within 60 minutes and has been tested within last 12 months.	CDC PHEP Capability 3, Emergency Operations Coordination, Function 2  PPHP SP Objective 2.1 – Emergency Operations Coordination  PHEP Performance Measure 3.1: Staff Assembly
EO2 Continuity of Operations	<ul style="list-style-type: none"> <li>CHD has an approved Continuity of Operations Plan (COOP).</li> <li>COOP has been exercised or activated within the last 24 months.</li> <li>COOP results have been documented in AAR/IP.</li> </ul>	<ul style="list-style-type: none"> <li>CHD has an approved (COOP).</li> <li>COOP has been exercised or activated within the last 24 months.</li> <li>COOP results have been documented in AAR/IP.</li> </ul>	<ul style="list-style-type: none"> <li>CHD has an approved (COOP).</li> <li>COOP has been exercised or activated within the last 24 months.</li> <li>COOP results have been documented in AAR/IP.</li> </ul>	<b>Target:</b> Meet expectation each year.	1 = COOP is approved w/in last 24 months, but not tested. 3 = COOP is approved and exercised/activated w/in past 24 months. 5 = COOP is approved, exercised/activated	CDC PHEP Capability 3, Emergency Operations Coordination, Function 4  PPHP SP Objective 2.1 - Emergency Operations Coordination  HPP Performance Measure Capability 2., Healthcare

**County Health Department (CHD) Preparedness Expectations  
January 13, 2015; Version 1.2**

Category*	Expectation			Target	Scoring	Federal/State Guidance Alignment **
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					and documented in AAR/IP w/in past 24 months.	System Recovery, Function 2
EO3 Notification Contacts	<ul style="list-style-type: none"> <li>List of contacts for notification of public health issues is available and reviewed/updated at least annually.</li> </ul>	<ul style="list-style-type: none"> <li>List of contacts for notification of public health issues is available and reviewed/updated at least annually.</li> </ul>	<ul style="list-style-type: none"> <li>List of contacts for notification of public health issues is available and reviewed/updated at least annually.</li> </ul>	<b>Target:</b> Meet expectation each year.	<p>These are Pass/Fail expectations and are scored as follows:</p> <p>1 = Fail 5 = Pass</p>	<p>CDC PHEP Capability 4, Emergency Public Information &amp; Warning, Function 5</p> <p>PHHP SP Objective 3.2 Public Health and Health Care System Information Sharing</p>
EO4 Florida Department of Health Emergency Notification System (SERVFL) Alerts	<ul style="list-style-type: none"> <li>CHD Key Contacts are identified to receive state level alerts.</li> <li>CHD Key Contacts are registered FDENS users.</li> <li>CHD Key Contacts respond to state level alerts, drills and real events within 30 minutes or less.</li> </ul>	<ul style="list-style-type: none"> <li>CHD Key Contacts are identified to receive state level alerts.</li> <li>CHD Key Contacts are registered FDENS users with CHD Key Contact role.</li> <li>CHD Key Contacts respond to state level alerts, drills, and real events within 30 minutes or less.</li> </ul> <p>Note: FDENS is to become the Florida Notification Responder Management System (FNRMS) during 2014.</p>	<ul style="list-style-type: none"> <li>CHD Key Contacts are identified to receive state level alerts.</li> <li>CHD Key Contacts are registered Everbridge SERVFL users with CHD Key Contact role.</li> <li>CHD Key Contacts respond to state level alerts, drills, and real events within 60 minutes or less.</li> </ul> <p>Note: FDENS was replaced by Everbridge SERVFL Notification System in 2014.</p>	<b>Target:</b> 100% of identified CHD Key Contacts respond to notification within 60 minutes.	<p>Actual time is reported from Everbridge SERVFL notification history log. Expectation will be scored as follows:</p> <p>% of identified individuals responding within 60 minutes or less.</p> <p>1 = 0% - 20% 2 = 21% - 40% 3 = 41% - 60% 4 = 61% - 80% 5 = 81% - 100%</p> <p>CHDs with multiple state level alerts, drills, and real events should report the best percentage score.</p>	<p>CDC PHEP Capability 4, Emergency Public Information &amp; Warning, Function 5</p> <p>PHHP SP Objective 3.2 – Public Health and Health Care System Information Sharing</p> <p>PHEP Performance Measure 3.1: Staff Assembly</p>

**County Health Department (CHD) Preparedness Expectations**  
**January 13, 2015; Version 1.2**

Category*	Expectation			Target	Scoring	Federal/State Guidance Alignment **	
	2013	2014	2015				
Community Preparedness							
CP1 Risk Assessment	<ul style="list-style-type: none"><li>The intent of this expectation is to determine if the CHDs are considering hazard vulnerability or risk assessment in local planning.</li></ul> <p>DOH headquarters is developing an online risk assessment tool that will be piloted this year. It is expected that 2014 criteria will focus on CHD training for using the tool once it is ready for use.</p>	This expectation will be revisited in 2014.	<ul style="list-style-type: none"><li>The intent of this expectation is to determine if the CHDs are considering hazard vulnerabilities or risk assessments in local planning.</li></ul> <p>The Florida Public Health Risk Assessment Tool (FPHRAT) provides state, regional and county-level information regarding hazard probability, social vulnerability, public health, healthcare and behavioral health impacts, capability and resource gaps, community resilience, and hazard risk indexes.</p>	<b>Target:</b> Annually updating the FPHRAT with information regarding local capabilities and resource to address hazards. <p>The completion of this activity will result in a local jurisdictional risk assessment that can be used to prioritize preparedness efforts within the county.</p>	These are Pass/Fail expectations and are scored as follows: <p>1 = Fail 5 = Pass (completed)</p>	CDC PHEP Capability 1, Community Preparedness, Function 1	CDC PHEP Capability 1, Community Preparedness Evaluation Tool
CP2 Vulnerable Populations	<ul style="list-style-type: none"><li>Assessment complete and reviewed within last 24 months..</li></ul>	<ul style="list-style-type: none"><li>Assessment complete and reviewed within last 24 months.</li></ul>	<ul style="list-style-type: none"><li>Assessment complete and reviewed within last 24 months.</li></ul>	<b>Target:</b> By 2015, completed assessments exist for 100% of identified vulnerable populations.	CHD determines actual numerator and denominator. Percentage calculated and scored as follows: <p>1 = 0% - 20% 2 = 21% - 40% 3 = 41% - 60% 4 = 61% - 80% 5 = 81% - 100%</p> <p><b>Numerator:</b> The number of priority vulnerable populations fully identified and assessed.</p> <p><b>Denominator:</b> 10, The number of priority target</p>	CDC PHEP Capability 1, Community Preparedness, Function 1	PHHP SP Objective 7.1 – Community and Health Care System Preparedness

**County Health Department (CHD) Preparedness Expectations**  
**January 13, 2015; Version 1.2**

Category*	Expectation			Target	Scoring	Federal/State Guidance Alignment **
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					populations which can be assessed from the Local Vulnerable Population Assessment Tool.	
CP3 Community Engagement	<ul style="list-style-type: none"> <li>Community agencies participate in public health, medical and/or mental/behavioral health-related emergency preparedness efforts.</li> </ul>	<ul style="list-style-type: none"> <li>Community agencies participate in public health, medical and/or mental/behavioral health-related emergency preparedness efforts.</li> </ul>	<ul style="list-style-type: none"> <li>Community agencies participate in public health, medical and/or mental/behavioral health-related emergency preparedness efforts.</li> </ul>	<b>Target:</b> By 2015, <b>90%</b> of community sectors composed of key agencies and organizations identified by CHDs will have been engaged to participate in public health, medical and/or mental/behavioral health-related emergency preparedness efforts.	CHD determines actual numerator and denominator. Percentage calculated and scored as follows:  1 = 0% - 20% 2 = 21% - 40% 3 = 41% - 60% 4 = 61% - 80% 5 = 81% - 100%	CDC PHEP Capability 1, Community Preparedness, Functions 1 and 2  PPHP SP Objective 7.1 – Community and Health Care System Preparedness
<b>Mass Care</b>						
MC1 Special Needs Sheltering (SpNS) Operations	Within past 36 months: <ul style="list-style-type: none"> <li>SpNS Operations Plans are approved.</li> <li>Plans are tested through exercise or activation.</li> <li>Results documented in AAR/IP within 30 days of the exercise or activation.</li> </ul>	Within past 36 months: <ul style="list-style-type: none"> <li>SpNS Operations Plans are approved.</li> <li>Plans are tested through exercise or activation.</li> <li>Results are documented in AAR/IP within 30 days of the exercise or activation.</li> </ul>	Within past 36 months: <ul style="list-style-type: none"> <li>SpNS Operations Plans are approved.</li> <li>Plans are tested through exercise or activation.</li> <li>Results are documented in AAR/IP within 30 days of the exercise or activation.</li> </ul>	<b>Target:</b> Meet expectation each year.	Expectation will be scored as follows:  1 = Plan is approved in last 36 months, but not tested. 5 = Plan is approved & exercised/activated in past 36 months.	CDC PHEP Capability 7, Mass Care, Functions 2 and 3  PPHP SP Objective 4.2 – Mass Care
MC2 Functional Needs Support Services (FNSS)	<ul style="list-style-type: none"> <li>CHD roles and responsibilities for local implementation of FNSS are documented in CHD EOP.</li> </ul>	<ul style="list-style-type: none"> <li>CHD roles and responsibilities for local implementation of FNSS are documented in CHD EOP.</li> </ul>	<ul style="list-style-type: none"> <li>CHD roles and responsibilities for local implementation of FNSS are documented in CHD EOP.</li> </ul>	<b>Target:</b> By 2015, the CHD roles and responsibilities for local implementation of Functional Needs Support Services are documented in the CHD EOP.	This is a Pass/Fail expectation and scored as follows:  1 = Fail 5 = Pass	CDC PHEP Capability 7, Mass Care, Functions 2 and 4  PPHP SP Objective 4.2 – Mass Care

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MC3 Shelter Surveillance	<ul style="list-style-type: none"> <li>DOH BPR will research and review standard shelter surveillance tools to be shared with CHDs.</li> </ul>	<ul style="list-style-type: none"> <li>This expectation will be revisited in 2014.</li> </ul>	<ul style="list-style-type: none"> <li>This expectation will be revisited in 2015.</li> </ul>	<b>Target:</b> TBD.	Expectation will not be scored in 2015.	CDC PHEP Capability 7, Mass Care, Function 2 PHHP SP Objective 4.2 – Mass Care
<b>Crisis &amp; Emergency Risk Communications</b>						
CE1 Risk Communication Messaging Development and Dissemination	Within the past 24 months: <ul style="list-style-type: none"> <li>Risk communication message development and dissemination procedures are documented.</li> <li>Procedures are tested to ensure message can be disseminated to public within 3 hours of incident.</li> <li>Results are documented in an AAR/IP.</li> </ul>	Within the past 24 months: <ul style="list-style-type: none"> <li>Risk communication message development and dissemination procedures are documented.</li> <li>Procedures are tested to ensure message can be disseminated to public within 3 hours of incident.</li> <li>Results are documented in an AAR/IP.</li> </ul>	Within the past 24 months: <ul style="list-style-type: none"> <li>Risk communication message development and dissemination procedures are documented.</li> <li>Procedures are tested to ensure message can be disseminated to public within 3 hours of incident.</li> <li>Results are documented in an AAR/IP.</li> </ul>	<b>Target:</b> By 2015, risk communications messages can be disseminated to public within 3 hours of event.	1 = Processes are documented, but not tested within last 24 months. 3 = Processes are documented and exercised/activated within past 24 months. 5 = Processes are documented, exercised/activated and documented in AAR/IP within past 24 months.	CDC PHEP Capability 4, Emergency Public Information and Warning, Function 1  PHHP SP Objective 3.1 – Crisis and Emergency Risk Communications
CE2 Public Information Officer (PIO) and Spokespersons	<ul style="list-style-type: none"> <li>CHD has designated PIO trained to DOH CERC standards as well as epidemiology and environmental health spokesperson(s) trained to DOH CERC standards.</li> </ul>	<ul style="list-style-type: none"> <li>CHD has designated PIO trained to DOH CERC standards as well as epidemiology and environmental health spokesperson(s) trained to DOH CERC standards.</li> </ul>	<ul style="list-style-type: none"> <li>CHD has a designated PIO trained to DOH Crisis and Emergency Risk Communications (CERC) standards.</li> </ul>	<b>Target:</b> By 2015, 100% of designated PIOs and spokespersons are trained to DOH CERC standards.	Expectation will be scored as follows:  1 = PIO designated but not trained. 5 = PIO designated and trained.	CDC PHEP Capability 4, Emergency Public Information and Warning, Function 1  PHHP SP Objective 3.1 – Crisis and Emergency Risk Communications.
CE3 Joint Information Center/Joint Information System Participation	<ul style="list-style-type: none"> <li>Local Joint Information Center/Joint Information System Operations lead has list of health and medical contacts.</li> <li>CHD submits updated list of health and medical contacts to local lead at least annually.</li> </ul>	<ul style="list-style-type: none"> <li>Local Joint Information Center/Joint Information System Operations lead has list of health and medical contacts.</li> <li>CHD submits updated list of health and medical contacts to local lead at least annually.</li> </ul>	<ul style="list-style-type: none"> <li>Local Joint Information Center/Joint Information System Operations lead has list of health and medical contacts.</li> <li>CHD submits updated list of health and medical contacts to local lead at least annually.</li> </ul>	<b>Target:</b> Meet expectation each year.	This is a Pass/Fail expectation and scored as follows:  1 = Fail 5 = Pass	CDC PHEP Capability 4, Emergency Public Information and Warning, Functions 1 and 3  PHHP SP Objective 3.1 – Crisis and Emergency Risk Communications

**County Health Department (CHD) Preparedness Expectations**  
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	2013	2014	2015			
Responder Safety and Health						
RS1 N-95 Fit Testing	<ul style="list-style-type: none"><li>CHD procedures for conducting medical clearance are reviewed and updated annually</li><li>Roster of qualified and trained staff to conduct fit testing is reviewed and updated annually.</li></ul>	<ul style="list-style-type: none"><li>CHD procedures for conducting medical clearance are reviewed and updated annually</li><li>Roster of qualified and trained staff to conduct fit testing is reviewed and updated annually.</li></ul>	<ul style="list-style-type: none"><li>CHD procedures for conducting medical clearance are reviewed and updated annually</li><li>Roster of qualified and trained staff to conduct fit testing is reviewed and updated annually.</li></ul>	<b>Target:</b> Meet expectation each year.	This is a Pass/Fail expectation and scored as follows:  1 = Fail 5 = Pass	CDC PHEP Capability 14, Responder Safety and Health, Function 3  PHHP SP Objective 5.4 – Responder Safety and Health
RS2 Responder Risk and Mitigation	<ul style="list-style-type: none"><li>This expectation will not be scored in 2013.</li><li>DOH BPR will finalize the Responder Safety and Health Annex to standardize risk and mitigation guidance and disseminate to CHDs.</li></ul>	<ul style="list-style-type: none"><li>This expectation will be revisited in 2014.</li></ul>	<ul style="list-style-type: none"><li>DOH BPR will finalize the Responder Safety and Health Annex to standardize risk and mitigation guidance and will disseminate Annex to the CHDs.</li></ul> Expectation will be revisited in 2015.	<b>Target:</b> TBD.	Expectation will not be scored in 2015.	CDC PHEP Capability 14, Responder Safety and Health, Function 3  PHHP SP Objective 5.4 – Responder Safety and Health
Medical Countermeasure Dispensing (Mass Prophylaxis)						
MP1 Medical Countermeasure Dispensing	Within the past 36 months: <ul style="list-style-type: none"><li>Medical Countermeasure Dispensing Plan, including all 5 elements, has been approved.</li><li>Plan has been tested through exercise or activation.</li><li>Results are documented in AAR/IP.</li></ul>	Within the past 36 months: <ul style="list-style-type: none"><li>Medical Countermeasure Dispensing Plan, including all 5 elements, has been approved.</li><li>Plan has been tested through exercise or activation.</li><li>Results are documented in AAR/IP.</li></ul>	Within the past 36 months: <ul style="list-style-type: none"><li>Medical Countermeasure Dispensing Plan, including all 5 elements, has been approved.</li><li>Plan has been tested through exercise or activation.</li><li>Results are documented in AAR/IP.</li></ul>	<b>Target:</b> By 2015, 100% of CHDs will have approved and tested Medical Countermeasure Dispensing plan.	1 = Plan is approved within last 36 months, but not tested. 3 = Plan is approved and exercised/activated within past 36 months. 5 = Plan is approved, exercised/activated and documented in AAR/IP within past 36 months.	CDC PHEP Capability 8, Medical Countermeasures Dispensing, Functions 1, 2, 3 and 4  PHHP SP Objective 5.1 – Medical Countermeasures Dispensing
Public Health Surveillance & Epidemiological Investigation						
EPI1 Competencies and Skills in Applied Epidemiology	<ul style="list-style-type: none"><li>Counties with population <b>greater than 100,000</b>: Epidemiologist calls in to at least 20 Bi-weekly</li></ul>	<ul style="list-style-type: none"><li>Counties with population <b>greater than 100,000</b>: Epidemiologist calls in to at least 20 Bi-weekly</li></ul>	<ul style="list-style-type: none"><li>Counties with population <b>greater than 100,000</b>: Epidemiologist calls in to at least 20 Bi-weekly</li></ul>	<b>Target:</b> Meet expectation each year.	These are Pass/Fail expectations and are scored as follows:	CDC PHEP Capability 13, Public Health Surveillance and Epidemiological Investigation, Function 1



**County Health Department (CHD) Preparedness Expectations**  
**January 13, 2015; Version 1.2**

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	<p>Epidemiology Conference Calls or regional calls per year and attends 3 Grand Rounds presentations per year.</p> <ul style="list-style-type: none"> <li>Counties with population <b>less than 100,000</b>: Epidemiologist calls into at least 12 bi-weekly epidemiology conference calls or regional calls during year and attends 3 Grand Rounds presentations per year.</li> </ul>	<p>Epidemiology Conference Calls or regional calls per year and attends 3 Grand Rounds presentations per year.</p> <ul style="list-style-type: none"> <li>Counties with population <b>less than 100,000</b>: Epidemiologist calls into at least 12 bi-weekly epidemiology conference calls or regional calls during year and attends 3 Grand Rounds presentations per year.</li> </ul>	<p>Epidemiology Conference Calls or regional calls per year and attends 3 Grand Rounds presentations per year.</p> <ul style="list-style-type: none"> <li>Counties with population <b>less than 100,000</b>: Epidemiologist calls into at least 12 bi-weekly epidemiology conference calls or regional calls during year and attends 3 Grand Rounds presentations per year.</li> </ul>		<p>1 = Fail 5 = Pass</p>	<p>PHHP SP Objective 6.2 – Public Health Surveillance and Epidemiological Investigation</p> <p>PHEP Performance Measures 13.1: Disease Reporting</p> <p>PHEP Performance Measures 13.2: Disease Control</p>
EPI2 24/7 Health Department Access to Collect, Review and Respond to Reports of Selected Diseases	<ul style="list-style-type: none"> <li>Process exists to ensure 24/7/365 reporting of cases and suspected cases.</li> <li>Data provided via 77% or higher rate of disease reporting within 14 days.</li> <li>30% or less annual error rate or unknown values for selected diseases.</li> </ul>	<ul style="list-style-type: none"> <li>Process exists to ensure 24/7/365 reporting of cases and suspected cases.</li> <li>Data provided via 77% or higher rate of disease reporting within 14 days.</li> <li>30% or less annual error rate or unknown values for selected diseases.</li> </ul>	<ul style="list-style-type: none"> <li>Process exists to ensure 24/7/365 reporting of cases and suspected cases.</li> <li>Data provided via 77% or higher rate of disease reporting within 14 days.</li> <li>30% or less annual error rate or unknown values for selected diseases.</li> </ul>	<b>Target:</b> Meet expectation each year.	<p>These are Pass/Fail expectations and are scored as follows:</p> <p>1 = Fail 5 = Pass</p>	<p>CDC PHEP Capability 13, Public Health Surveillance and Epidemiological Investigation, Function 1</p> <p>PHHP SP Objective 6.2 – Public Health Surveillance and Epidemiological Investigation</p> <p>PHEP Performance Measures 13.1: Disease Reporting</p> <p>PHEP Performance Measures 13.2: Disease Control</p>
EPI3 Using Electronic Surveillance System for the Early Notification of Community-based Epidemics (ESSENCE).	<ul style="list-style-type: none"> <li>Counties with population <b>greater than 100,000</b> have at least one epidemiologist trained and routinely using FPICN data in the ESSENCE system.</li> </ul>	<ul style="list-style-type: none"> <li>The CHD is expected to have designated and trained a primary and secondary ESSENCE-FL contact person to use this system to support local epidemiology functions.</li> </ul>	<ul style="list-style-type: none"> <li>The CHD is expected to have designated and trained a primary and secondary ESSENCE-FL contact person to use this system to support local epidemiology functions.</li> </ul>	<b>Target:</b> By 2015, 100% of CHDs will meet the expectation.	<p>These are Pass/Fail expectations and are scored as follows:</p> <p>1 = Fail 5 = Pass</p>	<p>CDC PHEP Capability 8, Medical Countermeasures Dispensing, Functions 5</p> <p>CDC PHEP Capability 13, Public Health Surveillance and Epidemiological Investigation, Function 2</p>



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	<ul style="list-style-type: none"> <li>Counties with population <b><i>less than 100,000</i></b> have at least one epidemiologist trained to use the FPICN data in the ESSENCE system.</li> </ul>	<ul style="list-style-type: none"> <li><b>Small</b> counties with population <b><i>less than 200,000</i></b> have logged into ESSENCE-FL once per week for no less than 40% of all weeks in the calendar year.</li> <li><b>Large</b> counties with population <b><i>greater than or equal to 200,000</i></b> have logged into ESSENCE-FL 3 times per week for 75% of all weeks.</li> </ul>	<ul style="list-style-type: none"> <li><b>Small</b> counties with population <b><i>less than 200,000</i></b> have logged into ESSENCE-FL once per week for no less than 75% of all weeks in the calendar year.</li> <li><b>Large</b> counties with population <b><i>greater than or equal to 200,000</i></b> have logged into ESSENCE-FL 3 times per week for 85% of all weeks.</li> </ul>			PHHP SP Objective 5.1 – Medical Countermeasures Dispensing

**Expectation Numbering Convention:** Each expectation will have a two or three letter identifier and a number which identifies the expectation within the general capability grouping; for example, PL1 is assigned to the expectation “CHD Emergency Operations Plan” as the first expectation within the general capability grouping of Planning.

• PL	Planning	PL1, PL2, PL3, PL4
• EO	Emergency Operations Coordination	EO1, EO2, EO3, EO4
• CP	Community Preparedness	CP1, CP2, CP3
• MC	Mass Care	MC1, MC2, MC3
• CE	Crisis and Emergency Risk Communications	CE1, CE2, CE3
• RS	Responder Safety and Health	RS1, RS2
• MP	Medical Countermeasures Dispensing	MP1
• EPI	Public Health Surveillance and Epidemiological Investigation	EPI1, EPI2, EPI3

**Federal State Alignment References:**

- ASPR HPP – Healthcare Preparedness Capabilities: National Guidance for Healthcare Systems Preparedness, January 2012.
- CDC PHEP – Public Health Emergency Preparedness Capabilities: National Standards for State and Local Planning, March 2011.
- ASPR HPP – HPP Budget Period 3 (BP3):1 July 2014–30 June 2015.
- CDC PHEP – Budget Period 3 Performance Measure Specifications and Implementation Guidance; Version 1, July 1, 2014 – June 30, 2015.
- Florida Department of Health – Florida Public Health and Healthcare Preparedness 2014-17 Strategic Plan, August 2014.

Note: For any CHD Expectation referencing accomplishment within a certain timeframe (e.g., “within the last 36 months”), use December 31, 2015 as the time point of reference.