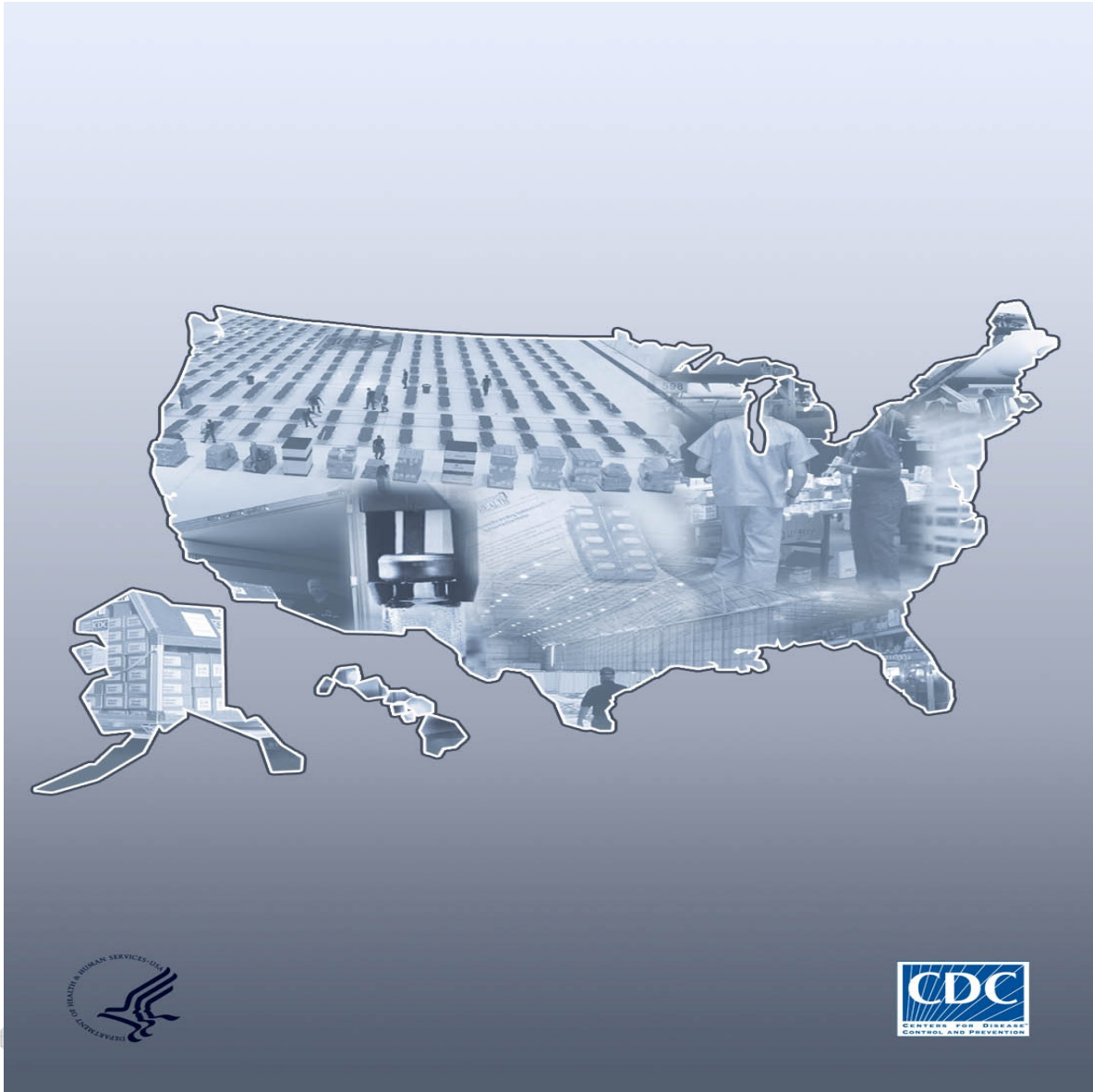


Strategic National Stockpile
State Technical Assistance Review Tool Users Guide
March 2009



Centers for Disease Control and Prevention
Coordinating Office for Terrorism Preparedness and Emergency Response
Division of Strategic National Stockpile
Program Preparedness Branch

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PURPOSE

The Centers for Disease Control and Prevention's (CDC) Division of Strategic National Stockpile (DSNS) State Technical Assistance Review (TAR) Tool Users Guide (Guide) provides a blueprint for understanding and conducting a state's Strategic National Stockpile (SNS) TAR. The Guide should be used in conjunction with the TAR tool which outlines thirteen (13) elements to be evaluated annually for evidence of overall readiness to manage, distribute, and dispense SNS materiel during a public health emergency. These elements include:

- Developing an SNS plan
- Requesting SNS assistance
- Managing SNS operations
- Tactical communications
- Public information and communications
- Security
- Receiving, staging, and storing
- Controlling inventory
- Repackaging
- Distribution
- Dispensing
- Hospitals and alternate care facilities coordination
- Training, exercising, and evaluating

SECTION	FUNCTION	OVERALL SCORE		Section Fraction	Weight	Weighted Score
		Points	Max Points			
1	Developing a SNS plan	7			03	
2	Management of SNS/Command & Control	6			10	
3	Requesting SNS	6			03	
4	Tactical Communications	6			03	
5	Public Information and Communication	6			07	
6	Security	8			10	
7	Receipt, Store, Stage	24			14	
8	Controlling Inventory	6			03	
9	Repackaging	4			02	
10	Distribution	8			10	
11	Dispensing	9			22	
12	Treatment Center	6			03	
13	Training, Exercise and Evaluation	23			10	
		Overall Score = Sum of 13 Function Scores =				

This guide offers examples as a base threshold for the minimal documentation a state is required to submit as verification of achievement for the range of scores assigned to each element outlined in the TAR tool. The examples included in this guide do not represent the entire spectrum of documentation, and as such there may be further examples not cited in this document.

ROLES AND RESPONSIBILITIES

The SNS is a collection of large quantities of medical materiel, equipment, and pharmaceuticals. The mission of the CDC's DSNS is to deliver critical medical assets to the site of a national emergency. The state is responsible for ensuring all localities within its borders are prepared to receive SNS assets and to provide them to the people in need. The CDC DSNS staff provides assistance to state SNS programs, with planning, exercising, evaluating, and training, to achieve and maintain overall readiness in critical preparedness functions.

State SNS programs will be reviewed on an annual basis. The state's SNS coordinator is responsible for ensuring a credible and accurate review. The review is conducted with the respective designated CDC's DSNS program services consultant. The state's SNS coordinator must gather all materials that will be presented during the review, and make the necessary materials available to the CDC's DSNS program services consultant at least fourteen business days prior to the date of the review. The materials and documentation can be made available electronically. Additional materials and documentation may also be presented during the on-site assessment. The state's SNS coordinator should use both the TAR tool and the automated scoring tool to conduct a self-assessment prior to the official review. The self-assessment should be made available to the CDC's DSNS program services consultant at least one week prior to the official review.

The CDC's DSNS program services consultant will review all materials prior to the official review. On the day of the official review, the state's SNS coordinator and their partners should be prepared to present the state's SNS plan (plan) and accomplishments in each of the thirteen functional areas of the TAR tool. The state's partners and organizations, that represent the agreed upon roles and responsibilities within the respective functional areas, should be present during the official review.

The CDC's DSNS program services consultant is responsible for the official scoring. They will complete a narrative report that describes the accomplishments and gaps in planning identified during the review. The report will also note recommendations and action items that the state must address to correct gaps in planning. The report is due to the state's SNS coordinator fifteen working days from the date of the review. The state's SNS coordinator should review the report and return the state's comments and supporting documentation to the CDC's DSNS program services consultant within five working days after receipt of the report. The CDC's DSNS program services consultant will make the necessary revisions and officially file the report. The report will be used as the baseline for the subsequent review.

SCOPE AND APPLICABILITY

The Guide is applicable to all state departments and agencies that are responsible for sustaining all aspects of managing, receiving, storing, staging, distributing, and dispensing SNS materiel during a public health emergency. It serves as an adjunct to, not a replacement of, existing documentation and tools used for SNS planning and management.

In addition, the Guide:

- Augments the TAR tool to establish the minimal documentation and material to be assessed during a standard annual review.
- Draws on existing SNS documents to provide references for the requirements outlined in the TAR tool.
- Identifies assumptions and considerations inherent to assessment of the required elements in the TAR tool.

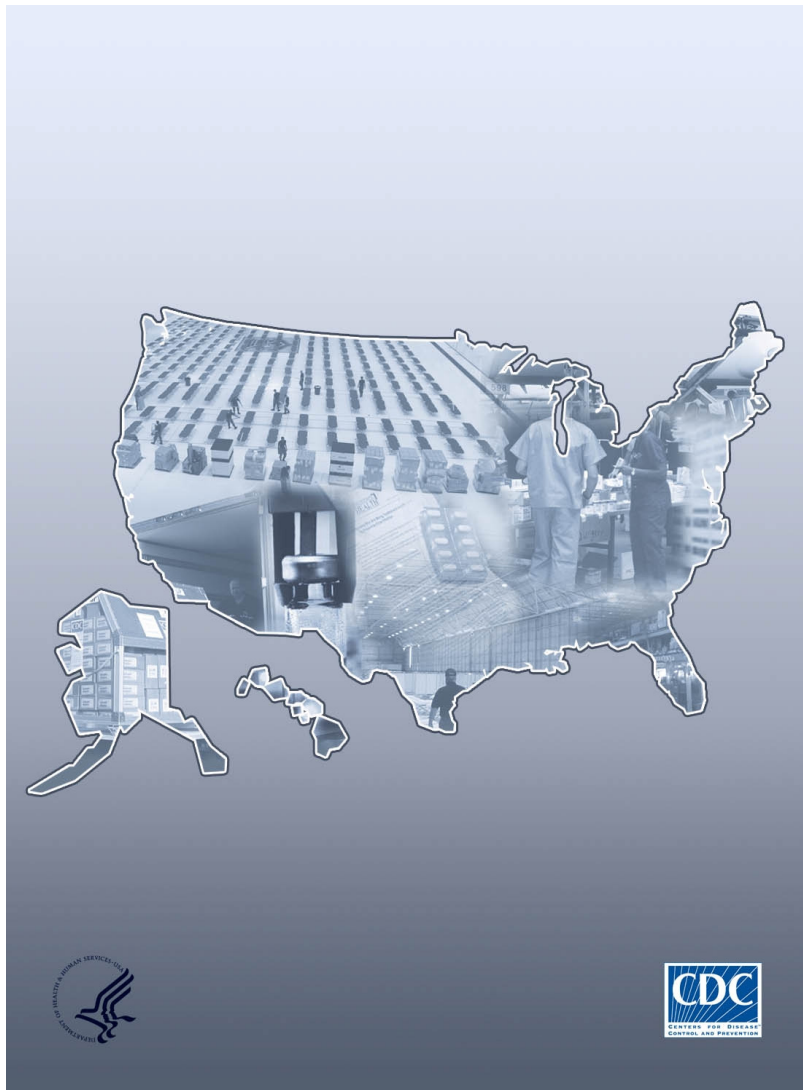
ASSUMPTIONS AND CONSIDERATIONS

- All persons in the United States are at-risk during a public health emergency and this necessitates a comprehensive response plan for distributing and dispensing SNS materiel quickly and efficiently.
- Programmatic funding will be available for required state SNS planning and management.
- There will be ongoing assessment of the components of the TAR tool. Outcomes of these assessments could prompt further revisions to the TAR tool and the Guide.
- The TAR tool and the Guide will comply with regulatory statutes. Statutory changes could influence revisions to existing guidelines for SNS planning and management.

ACKNOWLEDGEMENTS

This document was developed by core team members Linda Neff, Pamela Nonnenmacher, Patrick Nonnenmacher, Lisa Dillard, and Tracye Poole in the Program Preparedness Branch, Division of Strategic National Stockpile, Coordinating Office for Terrorism Preparedness and Emergency Response, Centers for Disease Control and Prevention. The core team members would like to thank those who assisted with this project by providing careful review and contributions throughout, particularly Bernard Benecke, Deborah Loveys, Joseph Merlino, and Scott Rice. We also thank the representatives of the state stockpile programs in Iowa, Kentucky, Michigan, New York, and Wyoming for their timely and thoughtful comments.

State Strategic National Stockpile Technical Assistance Review Elements



Baseline and Section I: Developing a Plan with Strategic National Stockpile Elements

BASELINE

The state's SNS coordinator is responsible for providing baseline data to their CDC DSNS program services consultant. The baseline data is noted on the first page of the TAR tool. It is important to provide updates of any changes in the data during the interim between reviews.

SECTION I-DEVELOPING A PLAN WITH SNS ELEMENTS (3%)

1.1 State SNS planning elements are incorporated into an up-to-date state all hazards plan; Plan is National Incident Management System (NIMS) compliant.

RATIONALE: A comprehensive, written plan is essential to facilitating the receipt, distribution, and dispensing of SNS assets quickly and efficiently.

REFERENCE: V10.02 – page 1.2; TCL page 479 Res.C2a 1.1-1.3

SCORING CRITERIA:

1-Award a full score if:

- the state's plan has been presented:
 - it has a medical and health annex which contains the SNS functional areas of support
 - NIMS requirements are met

0-Award a zero score if:

- state's plan has not been presented

1.2 State SNS planning elements are updated annually based on deficiencies revealed during DSNS TARs, state/local trainings and exercises.

RATIONALE: A robust plan is a working document which is revised based on gap analyses identified in the annual review and through exercises, trainings, workgroups, and various other methods for lessons learned. It should be supported by an ongoing action plan, with identified gaps aligned with corrective actions, and a timeline for achieving improvement.

REFERENCE: V10.02 – page 1.3; TCL page 479 Res.C2a 1.1-1.3

SCORING CRITERIA:

1-Award a full score if:

- updates to the plan have been noted and presented

0-Award a zero score if:

- the plan has not been updated based on identified gaps and corrective actions or recommendations provided by their DSNS program services consultant

1.3 A multi-discipline planning/advisory group meets annually to review and update the SNS planning elements in the plan.

RATIONALE: SNS planning requires the coordination, collaboration and integration of a multi-disciplinary approach. It will take the collective effort of many diverse agencies to support the response to a public health emergency.

REFERENCE: V10.02 – page 1.3; TAR tool –page 2

SCORING CRITERIA:

1-Award a full score if:

- meeting agendas and minutes of proceedings have been presented
- 50% of the applicable agencies listed in the TAR tool are represented on the state’s planning /advisory group
- minutes of the proceedings note any SNS related discussion

0.5-Award half score if:

- meeting agendas have been presented
- less than 50% of the applicable agencies listed in the TAR Tool have been represented on the state’s planning /advisory group

0-Award a zero score if:

- a planning /advisory group has not been formed
- meeting agendas have not been made available for review

1.4 The roles and responsibilities of state and local agencies and other organizations concerning SNS planning elements are documented. State coordination efforts should consider including related Emergency Support Function partners in their designated roles and responsibilities for emergency response.

RATIONALE: An emergency will require the coordinated efforts of state and local personnel to deliver SNS assets quickly to those who need it. The plan must clearly identify the responsibilities of both state and local authorities during the deployment of SNS assets.

REFERENCE: V10.02 – page 1.3

SCORING CRITERIA:

1-Award a full score if:

- there is documentation that all agencies and / or other organizations have acknowledged their role and responsibilities in SNS planning elements. (a signatory page contained within the plan presenting signatures from local authorities can be provided as evidence)

0-Award a zero score if:

- no documentation has been presented that shows that state agencies and other authorities have acknowledged their role and responsibilities in SNS planning



1.5 Policies and procedures to support medical supplies management and distribution and mass prophylaxis operations are outlined in plan. The following issues should be addressed:

- Process for requesting SNS assistance
- Number of regimens that a family member can pick-up at a dispensing site
- Unaccompanied minor
- Minimum identification requirements in order to receive medication
- Use of force guidelines for law enforcement
- Providing prophylaxis to tribal nations (if applicable)
- Providing prophylaxis to military installations within jurisdictions (if applicable)

RATIONALE: To maintain civil order, policies must be in place prior to a public health emergency, and the public should be informed of the policies.

REFERENCE: V10.02 – pages 1-7, 1-8, 1-9

SCORING CRITERIA:

1-Award a full score if:

- at least five of the policy issues cited in section 1.5 of the TAR tool have been reviewed
- documentation has been presented to demonstrate that policy issues cited in section 1.5 of the TAR tool have been incorporated into the plan

0.5-Award half score if:

- two to four policy issues cited in section 1.5 of the TAR tool have been reviewed
- documentation has been presented to demonstrate that policy issues cited in section 1.5 of the TAR tool have been incorporated into the plan

0-Award a zero score if:

- less than two of policy issues sighted in section 1.5 of the TAR tool have been addressed

1.6 Legal issues to support medical supplies management and distribution and/or mass prophylaxis operations are outlined (origin citations should be included) in plan. The following issues should be addressed:

- Medical practitioners authorized to issue standing orders and protocols for dispensing sites
- Personnel authorized to dispense medications during a state of emergency
- Procurement of private property
- Liability protection
- Workers compensation
- Staff compensation

RATIONALE: To sustain an effective and efficient response, all legal issues must be reviewed and understood prior to a public health emergency. Medical practitioners should know and understand their responsibilities and liabilities.

REFERENCE: V10.02 - page 1-4

SCORING CRITERIA:

1-Award a full score if:

- at least five of the policy issues sighted in section 1.6 of the TAR tool have been addressed in the plan

0.5-Award half score if:

- two to four of the policy issues sighted in section 1.6 of the TAR tool have been addressed in the plan

0-Award a zero score if:

- less than two of the policy issues sighted in section 1.6 of the TAR tool have been addressed

1.7 The state has addressed Technical Advisory Response Unit (TARU) pick-up/management in the plan.

RATIONALE: DSNS has designed the TARU to be as self-sufficient as possible. However, because of the need to move quickly, states may be asked to provide some assistance to the TARU. The following items should be addressed in the plan:

- Vehicles and drivers to transport up to 4 TARU members and 128 cubic feet of equipment to the RSS site
- Vehicles and drivers to transport up to 2 TARU liaisons to the primary health operations or state's emergency operations center (EOC)

- The state has identified the location for TARU liaison support
- The state has identified who is responsible for meeting TARU members at the airport

REFERENCE: V10.02 – page 2.6; TAR tool – item 6.3

SCORING CRITERIA:

1- Award a full score if:

- 100% of the items denoted in the rationale 1.7 are documented in a plan

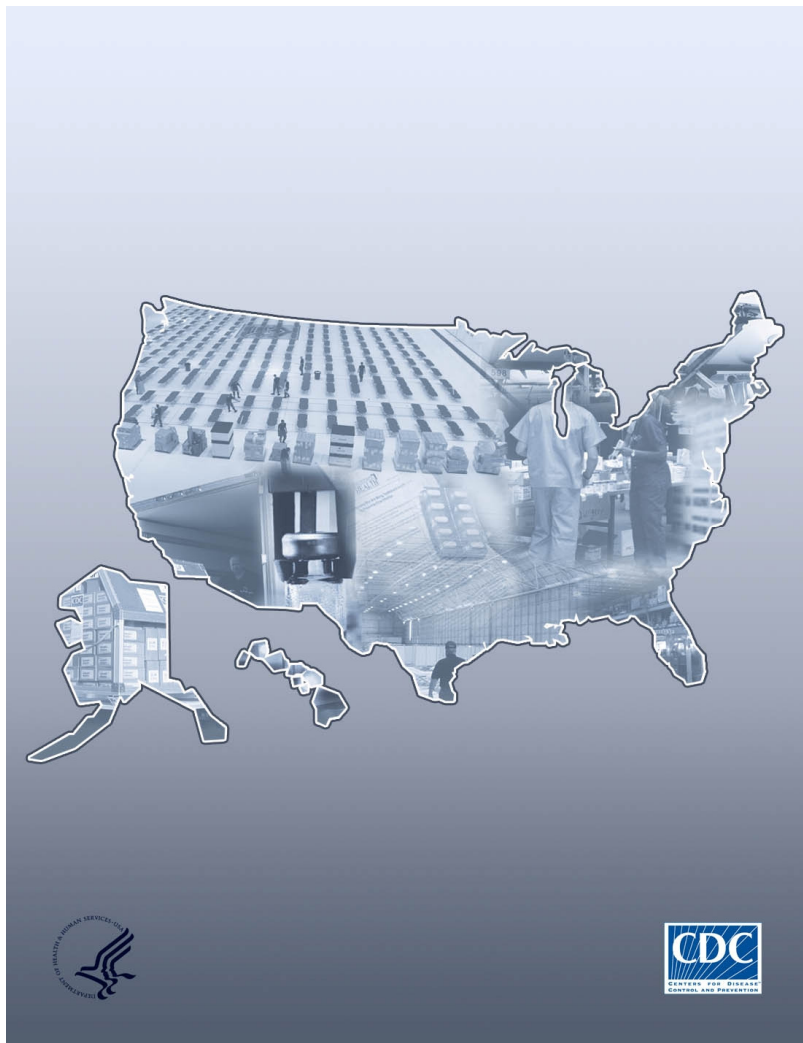
0.5- Award a half score if:

- at least two of the items denoted in the rationale 1.7 have been addressed in the plan

0- Award a zero score if:

- none of the items listed above have been documented in a plan

State Strategic National Stockpile Technical Assistance Review Elements



Section II: Management of the Strategic National Stockpile

SECTION II-MANAGEMENT OF THE STRATEGIC NATIONAL STOCKPILE (10%)

2.1 The state's SNS Coordinator and backup are identified and have point of contact (POC) information.

RATIONALE: Management of the SNS will require a leader. The state's SNS coordinator will be the most knowledgeable person concerning state SNS planning and execution.

REFERENCE: V10.02 – page 4.3

SCORING CRITERIA:

1-Award a full score if:

- the state's SNS coordinator and backup have been identified
- contact information (more than one phone number) is documented as an appendix in the plan

0.5 -Award a half score if:

- the state's SNS coordinator has been identified but:
 - no back-up has been identified
 - or
 - no POC information has been presented

0-Award a zero score if:

- the state's SNS coordinator has not been identified

2.2 At the state level, and dependent upon the placement of the activities in the state's NIMS compliant organizational structure, the following functions have personnel (primary and backup) identified with documented contact information.

- Staffing/volunteer coordination
- Tactical communications/information and technology (IT) support
- SNS security coordination
- RSS leader
- Distribution leader/manager
- Repackaging leader/manager
- Dispensing site supervisor/leader
- Hospital/alternate care facilities coordination

- Public information and communication

RATIONALE: A team comprised of experts in the various functions described in the TAR tool, section 2.2, will augment the overall construction and execution of the plan.

REFERENCE: V10.02 – page 4.2

SCORING CRITERIA:

1- Award a full score if:

- all personnel (primary and backup) for each function described in the TAR tool, section 2.2, have been identified
- documentation of contact information has been presented as an appendix in the plan

0.5- Award a half score if:

- all personnel (primary and backup), for each function described in the TAR tool, section 2.2, have been identified
and
- documentation of contact information is accessible for six of the functions described in the TAR tool, section 2.2

0- Award a zero score if:

- personnel for less than six of the functions described in the TAR tool, section 2.2, have been identified

2.3 Call down rosters for personnel identified in item 2.2 are current and updated at least quarterly.

RATIONALE: To support an effective and efficient response to a public health emergency, it is necessary to have accurate information for notification of essential personnel.

REFERENCE: V10.02 – page 3.7

SCORING CRITERIA:

1-Award a full score if:

- a call down roster has been presented as an appendix in the plan
- there is documentation of quarterly updates

0.5-Award a half score if:

- a call down roster has been presented as an appendix in the plan, but is not updated quarterly

0-Award a zero score if:

- a call down roster is not documented

2.4 State conducts and documents call down exercises of all personnel identified in item 2.2 to test response rates quarterly.

RATIONALE: It is necessary to test the notification systems to maintain readiness for a public health emergency.

REFERENCE: V10.02 – page 3.7

SCORING CRITERIA:

1-Award a full score if:

- the state provides documentation that shows call down drills have been conducted on a quarterly basis
- corrective actions have been executed
- documentation can include a report that describes protocol and procedures of the drill with results, such as the number of people reached and acknowledged

0.5 -Award a half score if:

- the state has conducted call down drills, but less than quarterly

0-Award a zero score if:

- there is no documentation of call down drills

2.5 SNS functions are integrated within state's Incident Command System (ICS) structure and are NIMS compliant.

RATIONALE: As part of any event involving emergency management, government agencies will use the ICS.

REFERENCE: V10.02 – page 2.2 to 2.7

SCORING CRITERIA:

1-Award a full score if:

- documentation has been presented that indicates NIMS compliance
- an ICS organizational chart has been presented that integrates the SNS functions

0-Award a zero score if:

- no ICS organizational chart has been presented that integrates the SNS functions

2.6 The state has a plan to annually test and exercise notification and activation of volunteers below the state level positions identified in item 2.2.

RATIONALE: It is necessary to have a documented plan for testing volunteer notification systems to maintain readiness for a public health emergency.

REFERENCE:

SCORING CRITERIA:

1-Award a full score if the state has provided:

- documentation of an annual exercise plan
 - the exercise plan has been tested
- documentation indicating a corrective action plan
 - examples of documentation are:
 - an exercise plan
 - an after action report (AAR) from an annual exercise
 - a corrective action plan that meets the Homeland Security Exercise and Evaluation Program (HSEEP) requirements

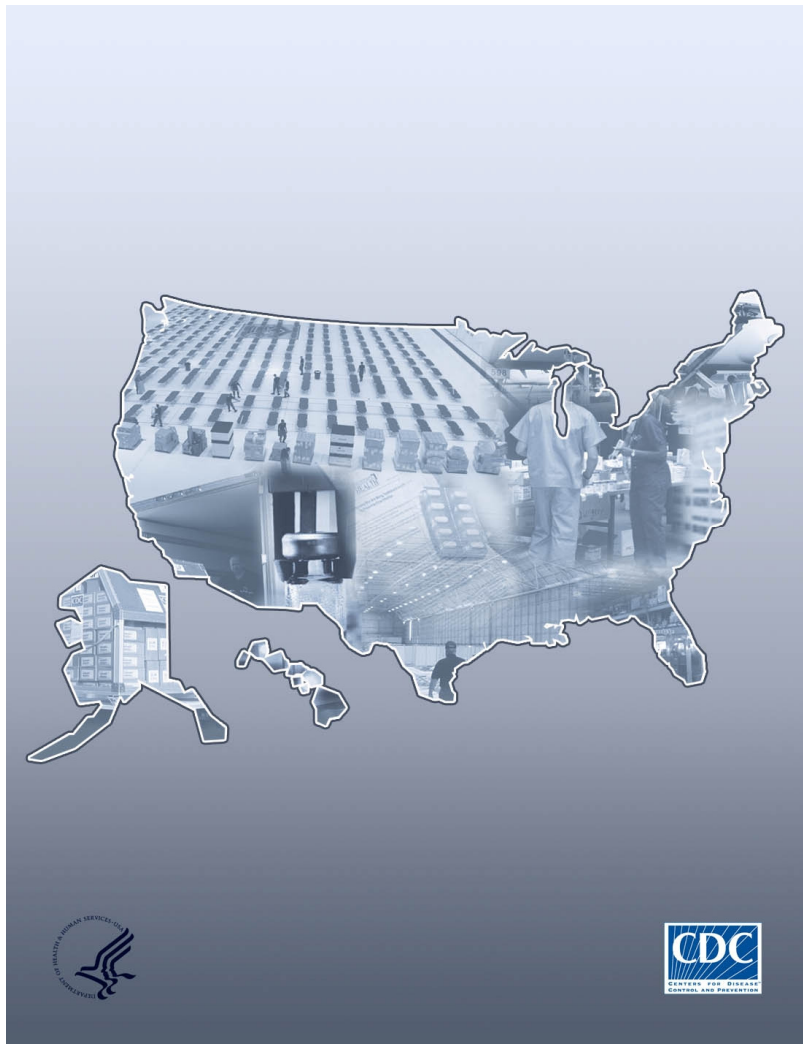
0.5 -Award a half score if the state has provided:

- documentation of an exercise plan, but it is not an annual plan
 - the exercise plan has been tested
- provides documentation indicating a corrective action plan

0-Award a zero score if:

- the state does not have an exercise notification and activation plan

State Strategic National Stockpile Technical Assistance Review Elements



Section III: Requesting the Strategic National Stockpile

SECTION III-REQUESTING THE STRATEGIC NATIONAL STOCKPILE (3%)

3.1 Signed memorandum of understanding (MOU) between CDC and the state.

RATIONALE: A MOU between CDC and the state will describe the terms, conditions, and responsibilities to facilitate the transfer of medical materiel from the DSNS to the state.

REFERENCE: V10.02 – page 3.1; TCL page 482 Res.C2a 4.4

SCORING CRITERIA:

1-Award a full score if:

- a signed MOU between CDC and the state has been presented

0-Award a zero score if:

- a signed MOU has not been presented

3.2 Plan to communicate with the governor, and other key state officials, to discuss the incident and to determine when to request SNS materiel.

RATIONALE: State officials making a timely request, during the early stages of a public health emergency, will maximize the amount of available time to provide prophylaxis and / or treatment to the population at risk.

REFERENCE: V10.02 – page 3.2-3.5

SCORING CRITERIA:

1-Award a full score if:

- a written systematic process for requesting SNS material has been presented
 - the process should include instructions for information that should be available when requesting SNS assets, such as:
 - a clear, concise description of the situation
 - results of specimen testing
 - actions already taken or decisions that have been made (target population)
 - other mitigation measures
 - availability of state and local response assets
 - a clear description of the SNS assets needed to support the response

0-Award a zero score if:

- a written systematic process for requesting SNS material has not been presented

3.3 Person(s) authorized by the governor to request SNS materiel are identified in the plan with contact information.

RATIONALE: Authorized person(s) (by name or position) and their contact information should be available to eliminate delays during an emergency. Authorized person (s) identified should be included in training and exercises to gain knowledge and understanding of their role and responsibilities in this function.

REFERENCE: V10.02 – page 3.5

SCORING CRITERIA:

1-Award a full score if:

- documentation has been presented as an appendix in the plan that lists all authorized personnel with current contact information

0-Award a zero score if:

- no documentation has been presented to show that all authorized personnel are listed in the plan

3.4 Plans and procedures contain initial request justification guidelines and procedures for state to request SNS materiel from CDC.

RATIONALE: A plan on that details who to call and how to justify requests for SNS assets should be in place to illustrate a clear communications process.

REFERENCE: V10.02 – page 3.2-3.5

SCORING CRITERIA:

1-Award a full score if:

- written, systematic guidelines and procedures for the initial request of SNS materiel is documented in the plan and has been presented
 - the guidelines should include information about an expedited communication process for rapidly informing local and state officials, including the governor, of an actual or potential public health emergency

- information should also be included on how the request from the state can be made to CDC's Director's Emergency Operations Center and who is involved in the decision-making processes

0-Award a zero score if:

- written, systematic guidelines and procedures for the initial request of SNS materiel is not presented



3.5 State plans contain procedures to request re-supply of SNS materiel from CDC.

RATIONALE: It is possible that the situation during a public health emergency will exceed the state and local response capabilities and additional assets will be needed. Contingency plans should document guidelines and procedures for requesting additional SNS materiel during a crisis.

REFERENCE: V10.02 – page 3.9

SCORING CRITERIA:

1-Award a full score if:

- a written systematic process for requesting re-supply of SNS materiel is documented in the plan and has been presented

0-Award a zero score if:

- a written systematic process is not presented



3.6 State plans contain the request procedures for locals to request SNS materiel from the state.

RATIONALE: To expedite an appropriate response, it is imperative that the state and local authorities have knowledge and exercise the procedures for making a timely request for SNS materiel.

REFERENCE: V10.02 – page 3.2-3.9; TCL page 482 Res C2a 3.3.1, Res. C2a. 4.4

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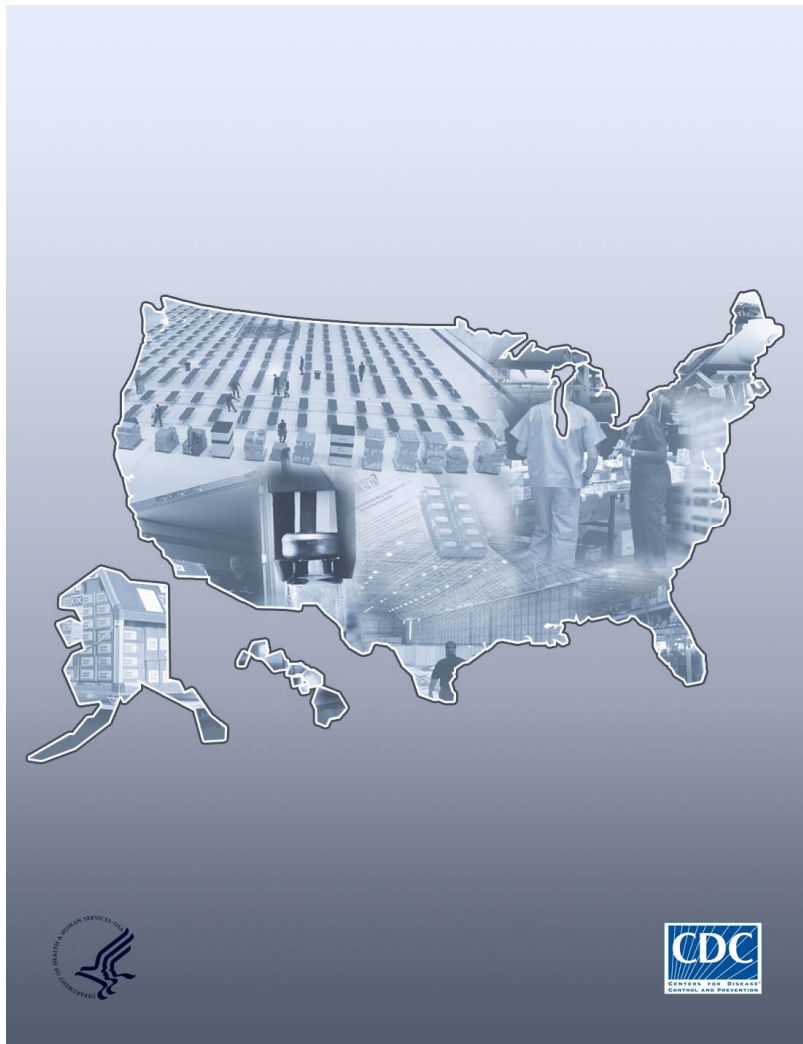
1-Award a full score if:

- written systematic guidelines and procedures for local authorities to request SNS materiel is documented in the plan and presented

0-Award a zero score if:

- plans do not describe systematic guidelines and procedures for local authorities to request SNS materiel

State Strategic National Stockpile Technical Assistance Review Elements



Section IV: COMMUNICATIONS PLAN (TACTICAL)

SECTION IV-COMMUNICATIONS PLAN (TACTICAL) (3%)

4.1 Tactical communications and IT support call-down lists are reviewed and updated quarterly.

RATIONALE: During an event, communications pathways cannot be interrupted. Communications /information technology (IT) support personnel are responsible for keeping these tactical communication platforms up and running.

REFERENCE: V10.02, page 5-4, 5-5; TCL page 479, Res.C1a 1.3.3

SCORING CRITERIA:

1-Award a full score if:

- the state has provided a log-type mechanism that tracks the reviews and updates to the call-down rosters including the tactical communications and IT support personnel
- examples include:
 - cover sheet with review dates
 - spreadsheets
 - memo

0-Award a zero score if:

- the state cannot provide a quarterly log-type mechanism

4.2 Communications/ IT support has a job action sheet.

RATIONALE: During an event, it is vital that the communications and IT personnel understand their roles and responsibilities, as well as their place in the incident command structure.

REFERENCE: V 10.02, page 5-4

SCORING CRITERIA:

1-Award a full score if:

- the state has provided a job action sheet that states the roles, responsibilities, and place within the incident command system for the communication/IT support personnel

0-Award a zero score if:

- the state cannot provide a job action sheet that states the roles, responsibilities, and place within the incident command system for the communication/IT support personnel

4.3 Communication pathways are established between command and management locations and support agencies.

RATIONALE: During an event, it is vital that each involved agency or location know the agency, or position with whom they must communicate for guidance, requests, and information.

REFERENCE: V10.02, page 5-2, 5-3

SCORING CRITERIA:

1-Award a full score if:

- the state has established a procedure that details how information and requests will flow in an organized manner
 - examples of acceptable documentation could include:
 - flow charts
 - matrices
 - graphs
 - maps using GIS
 - lists/paragraphs within the plan

0-Award a zero score if:

- the state cannot present an established procedure that details how information and requests will flow in an organized manner



4.4 Communication networks (equipment /hardware) between command and management locations and support agencies are tested and exercised quarterly.

RATIONALE: Communications will be the key element for a smooth and effective operation of distributing, transporting, and dispensing assets in an event. Ensuring the modes of communication between decision making agencies are in a continual state of readiness is vital.

REFERENCE: V10.02, 5-1; RAND Corporation Points of Dispensing (POD) Drill Working Paper (draft)

SCORING CRITERIA:

1-Award a full score if:

- the state conducted call down drills, site activation drills, set up drills, other exercises, or real world events that used the communication equipment or networks
- documentation of those activities occurring at least quarterly is essential for the full score
- indications are made that any areas for improvement were addressed and corrected
 - documentation could include:
 - AAR
 - call logs
 - memos for record
 - RAND metric sheets
 - drill summary sheets

0.5-Award a half score if:

- the state conducted documented call down drills, site activation drills, set up drills, other exercises, or real world events that used the communication equipment or networks at least within the 12 months before the TAR
- the state conducted exercises quarterly but did not indicate corrective actions for discrepancies

0-Award a zero score if:

- the state conducted call down drills, site activation drills, set up drills, other exercises, or real world events that used the communication equipment or networks but did not present any documentation
- the state conducted call down drills, site activation drills, set up drills, other exercises, or real world events that used the communication equipment or networks more than 12 months before the TAR

4.5 Redundant communications systems are in place and are tested quarterly to ensure communications remain available in the event primary communication systems are unavailable.

RATIONALE: Because communications plays a key role in the success of public health emergency response, every method of communications should have some form of backup system.

REFERENCE: V10.02, page 5-2; Corporation POD Drills Working Paper (draft); TCL page 481, Res.C2a 3.5

SCORING CRITERIA:

1-Award a full score if:

- the state has provided documentation that the identified backup systems are tested at least quarterly:
 - for example:
 - call logs
 - computer tracking mechanisms
 - AARs
 - RAND metric sheets
 - drill summary sheets
 - memos for record

0.5-Award a half score if:

- the state has provided documentation that the identified backup systems are tested, but the system is not tested on a quarterly basis

0-Award a zero score if:

- the state cannot provide documentation illustrating that the backup communications systems has been tested

4.6 Designated personnel (identified in item 2.2) are trained in the use of redundant communications equipment.

RATIONALE: While testing and exercising primary and redundant communications systems are important pieces of a response, these steps are only relevant if the personnel utilizing those systems are not well-versed in their operation.

REFERENCE: V10.02, page 5-4, 5-5; TCL page 480 Res.C2a 2.1.2

SCORING CRITERIA:

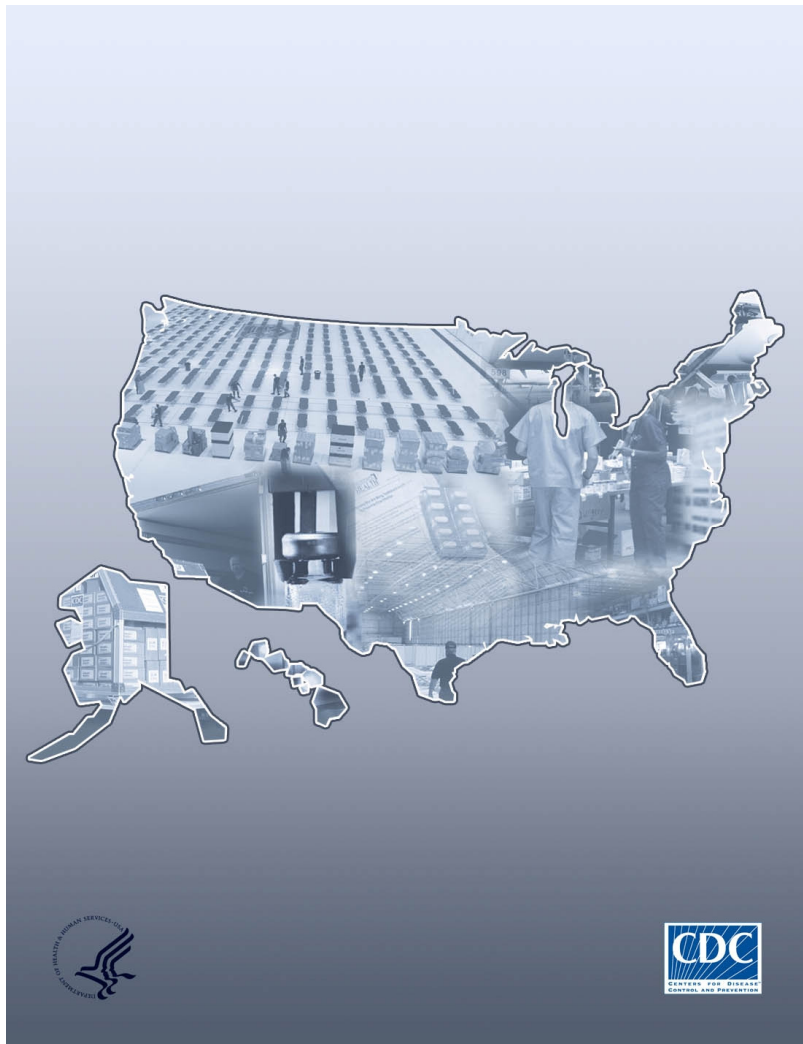
1-Award a full score if:

- the state has provided documentation that tracks those personnel who need to be well versed in the operation of communication equipment during a response
 - for example:
 - AARs
 - training rosters
 - call logs
 - memos for record

0-Award a zero score if:

- the state cannot provide any documentation that personnel are trained in the operation of communication equipment

State Strategic National Stockpile Technical Assistance Review Elements



Section V: Public Information and Communication

SECTION V-PUBLIC INFORMATION AND COMMUNICATION (7%)

5.1 Public Information and Communication (PIC) (primary and backup) have been identified and trained regarding responsibilities associated with a mass prophylaxis campaign.

RATIONALE: PIC personnel inform, educate, and communicate with the public regularly. When there is an event, that requires mobilizing the public to perform specific actions, it is critical that PIC personnel understand and are involved in the nuances, details, and policy deviations/changes that make up the planning for such an event.

REFERENCE: V10.02, pg 6-1, 6-2; TCL page 480, Res.C2a 2.1.3

SCORING CRITERIA:

1-Award a full score if:

- both primary and backup PIC personnel are identified in their planning documentation
 - examples of documentation for the local PIC personnel include:
 - contact lists of local PIC personnel maintained within the health department's health alert network personnel directory
 - spreadsheets
 - email distribution lists
- PIC personnel have been trained in mass prophylaxis campaigns
- PIC personnel at the local level have been offered training opportunities
 - examples of training documentation for the local PIC personnel include:
 - flyers offering training opportunities
 - newsletters with class schedules
 - tracking mechanisms from databases
 - snapshots from websites with class schedules
 - training summary reports
 - memos for record
 - training rosters
 - sign-in sheets

0.5-Award a half score if:

- the state has provided only one of the following:
 - primary and backup PIC personnel have been identified and trained
 - contact list of local PIC personnel has been presented
 - documentation illustrating training opportunities offered to local PIC personnel has been provided

0-Award a zero score if:

- the state cannot provide any documentation on PIC personnel

5.2 Written communication plan includes messages, methods, and materials for use in a mass prophylaxis campaign or when medical supplies management and distribution efforts are required.

RATIONALE: The development of a written communication plan serves as a way to develop

the public information process as well as collect the messages, methods, and materials for use during a mass prophylaxis campaign.

REFERENCE: V10.02, page 6-4; TCL page 480 Res.C2a 1.3.3.1

SCORING CRITERIA:

1-Award a full score if:

- state has provided a consolidated group of documents that includes:
 - pre-developed messages
 - various methods of disseminating the messages
 - materials to be used to deliver the messages for a mass prophylaxis campaign

0-Award a zero score if:

- the state cannot provide a consolidated group of documents that addresses the messages, methods, and materials for a mass prophylaxis campaign



5.3 The state has developed mass prophylaxis campaign messages and provided guidance to the locals to ensure message consistency.

RATIONALE: Well-crafted messages are important during an emergency to help gain trust and encourage the public to make the right choices regarding their health. These key messages are the basis for all communication materials used before, during, and after an event.

REFERENCE: V10.02 – page 6-4; TCL page 481 Res.C2a 3.4, page 485 Res.C2a 9.1., 9.1.2

SCORING CRITERIA:

1-Award a full score if state has developed messages:

- contain specific wording:
 - that will provide information to the population about what is happening
 - which provide the population with actions to take immediately (such as go to a dispensing site)
 - which provide the population with actions to take over time (such as medication compliance, allergic reaction signs and symptoms, etc.)
 - about what to expect at the dispensing sites
- these messages should also have been provided to the locals for message consistency

0.5-Award a half score if:

- the state has developed, coordinated, and incorporated three to five of these messages into their planning
- provided messages to the locals for consistency

0-Award a zero score if:

- the state can only provide documentation for two or less of these messages that have been developed, coordinated, and incorporated into their planning

5.4 The state reviews local plans and provides guidance to locals on methods to disseminate the messages indicated in item 5.3.

RATIONALE: It is important to identify methods of communication before an event occurs to ensure that all target audiences are reached with carefully crafted messages and materials.

REFERENCE: V10.02 – page 6-4, 6-5; TCL page 481, Res.B3b 3.2.2

SCORING CRITERIA:

1-Award a full score if:

- state has provided documentation that indicates:
 - planning with partners on how messages will be disseminated to the public during a public health emergency
 - planning guidance has been provided to locals about the dissemination of messages to the public during a public health emergency
 - examples of documentation include:
 - interactions with media (demonstrated by media contact lists, meeting notes, AARs, etc.)
 - relationships with community partners (such as printing companies, libraries, local businesses, places of worship, etc.)
 - lists of those individuals who will participate in getting the word out to people
 - meeting notes with designated partner(s)
 - standard operating procedures for internal responses
 - correspondence from partners indicating their roles and responsibilities
 - memorandum of understanding/agreement with partners
 - AARs
 - training class rosters
 - local plans about the dissemination of messages during a public health emergency have been reviewed:
 - examples of documentation include:
 - talking points summarizing trends found in local plans
 - spreadsheets indicating which plans were reviewed during a time period
 - meetings notes with the locals to provide feedback and guidance for improvement of plans
 - correspondence between the state and locals regarding results of plan review, etc

0.5-Award a half score if:

- the state has provided these types of documentation for three or four of the items listed on the TAR tool

0-Award a zero score if:

- the state has provided these types of documentation for two or less of the items listed on the TAR tool

5.5 The state reviews local plans and provides guidance to locals on developing materials to ensure consistent state-wide information.

RATIONALE: During an emergency, the use of pre-developed, cleared materials and templates will assist in getting messages out quickly. When materials are developed at the broadest level and then customized to the specific locality and event, it ensures that there is consistent state-wide information being disseminated.

REFERENCE: V10.02, page 6-6 – 6-9

SCORING CRITERIA:

1-Award a full score if state has:

- reviewed local plans that indicate messaging materials for a mass prophylaxis campaign and documentation illustrating examples have been presented
 - for example:
 - fact sheets
 - media kits
 - press releases
 - flyers
 - brochures
 - videos
 - podcasts
 - signage
 - pictograms
 - scripts for announcers
 - posters
- state provided materials indicating how messaging will be reproduced during the event
 - for example:
 - contracts with printing company
 - priority use of department’s document reproduction services

0.5-Award a half score if:

- the state has provided the documentation described for only three to five of the items listed in the TAR tool

0-Award a zero score if:

- the state has provided the documentation described for one or less of the items listed in the TAR tool

5.6 The state reviews local plans and provides guidance to locals on at-risk populations.

RATIONALE: Plans to provide information to the population includes those segments of the population that may need targeted messages, materials, and/or alternate methods of delivering those messages and materials for a variety of reasons: language barriers, trust issues, literacy issues, etc.

REFERENCE: V10.02, page 6-5; TCL page 480 preparedness measure #5, #6

SCORING CRITERIA:

1-Award a full score if:

- the state has reviewed local plans to ensure they include messaging that identify those segments of the population that may need targeted materials or methods to reach and mobilize a response
- the plans should include written materials
 - translated into non-English languages
 - modified for visually-impaired (translated into Braille)
 - modified for functionally illiterate

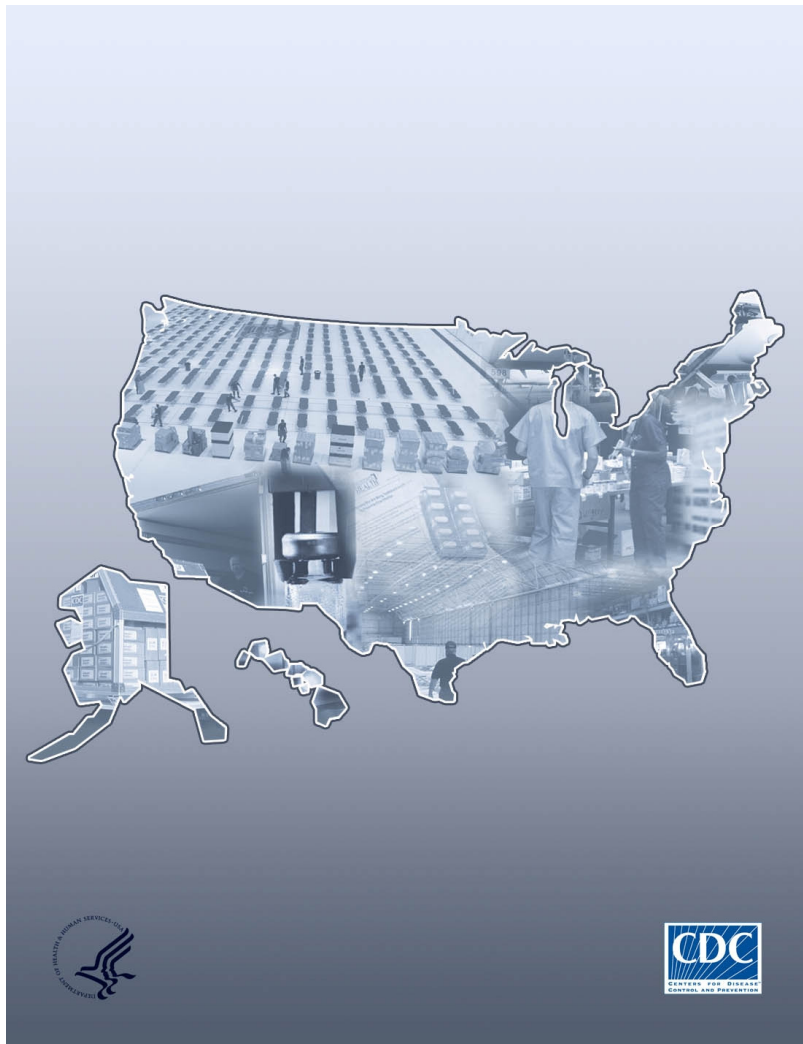
0.5-Award a half score if:

- the state has provided the described documentation for two items on the TAR tool

0-Award a zero score if:

- the state has provided the described documentation for only one or none of the items in the TAR tool

State Strategic National Stockpile Technical Assistance Review Elements



Section VI: Security

SECTION VI-SECURITY (10%)

6.1 The state level position (identified in item 2.2) that coordinates the overall security issues should be trained on the specific security requirements for medical supplies management and distribution operations.

RATIONALE: Security planning is an essential, yet complex, component of overall planning efforts for mass prophylaxis campaigns. Enlisting the aid of law enforcement provides a subject matter expert in security and protection.

REFERENCE: V10.02, page 7-1, 7.6; TCL page 480, Res.C2a 1.5.1 and Res.C2a 2.1.4; TCL page 481 Res.C2a 3.3.4

SCORING CRITERIA:

1-Award a full score if:

- the state has provided the documentation which includes the names, positions, agency, and contact information for the primary and backup security coordinator
- documentation illustrating orientation and/or training of those coordinators regarding mass prophylaxis campaigns has been presented
 - for example:
 - meeting minutes
 - training rosters
 - training aids
 - other correspondence

0.5-Award a half score if:

- the state has provided only the contact information for the primary and backup coordinator
- cannot provide documentation illustrating orientation and/or training of those coordinators regarding mass prophylaxis campaigns

0-Award a zero score if:

- the state has not yet identified a primary or backup security coordinator or support agency for security

6.2 Security plans for transportation of medical materiel have been developed.

RATIONALE: Crossing jurisdictional lines and governmental sovereignty, if not addressed and coordinated early, may result in delays or restrictions in the delivery of medical materiel.

REFERENCE: V10.02, page 7-5; TCL page 481 Res.C2a 3.3.4

SCORING CRITERIA:

1-Award a full score if:

- the security portion of the plan:
 - has been developed in conjunction with law enforcement
 - addresses the protection of medical materiel in transit
 - addresses the protection of in-transit materiel across state and/or local jurisdictional boundaries

0-Award a zero score if:

- the security portion of the plan does not address:
 - protection of medical materiel in transit
 - protection of medical materiel across jurisdictional boundaries



6.3 Security plans for transporting TARU from the airport to the receive, stage, and store (RSS) site and/or health/state EOC has been developed.

RATIONALE: Security escorts may be helpful in planning routes and traffic control for responding TARU personnel to ensure a timely and safe arrival to their designated work areas.

REFERENCE: V10.02, page 7-10, 7-11, 7-12

SCORING CRITERIA:

1-Award a full score if:

- the plan to receive and support the TARU includes:
 - specifics concerning the protection of the TARU personnel in transit to their work stations (both to the RSS and to the state/health EOC)
 - identification of which agency will be responsible for TARU transportation security

0-Award a zero score if:

- the plan does not address the specific security measures to be taken to safely transport the TARU personnel



6.4 Procedures are in place to provide badges/identification for all personnel responding to a public health event involving medical materiel and resources.

RATIONALE: Establishing access control measures lessens the probability that unauthorized individuals will gain access to sensitive and/or confidential response areas.

REFERENCE: V10.02, page 7-7; TCL page 482 Res.C2a 4.2.3, Res.C2a 4.3.1

SCORING CRITERIA:

1-Award a full score if:

- the state has a system in place to provide badges for personnel involved in the response effort
 - examples of this system can be illustrated by the following:
 - a standard operating procedure that details how the system will be activated, implemented, tracked, and maintained during a response effort
 - meeting minutes

0-Award a zero score if:

- the state cannot provide written documentation addressing a badge identification system

6.5 RSS site-specific security plans have been developed.

RATIONALE: The RSS is a vital component of a mass prophylaxis campaign. Any incident that compromises security, maintenance, receipt and distribution activities may result in materiel not reaching the affected population.

REFERENCE: V10.02, page 7-11, 7-12; TCL page 482, Res.C2a 4.3.2

SCORING CRITERIA:

1-Award a full score if:

- the state has provided a security plan for the RSS that addresses each of the items listed on the TAR tool
- the security plan has been approved and/or coordinated with the law enforcement agencies with a role in the implementation of the security plan

0.5-Award a half score if:

- the RSS security plan addresses up to five of the items listed in the TAR tool

0-Award a zero score if:

- the RSS security plan addresses less than two of the items

6.6 Standardized security planning guidance and checklists have been developed and distributed to local health departments.

RATIONALE: There are security measures that could be applied to each location involved in dispensing, staging, and distributing medical materiel. Using law enforcement to help create those basic security measures, at the state level, may ensure a minimum level of security at each dispensing location.

REFERENCE: V10.02, page 7-9, 7-10; TCL page 482, Res.C2a 4.3.2

SCORING CRITERIA:

1-Award a full score if:

- the state has provided the documentation correspondence to local health departments conveying guidance concerning dispensing site security measures
 - for example:
 - dispensing site security plan templates
 - rosters and/or minutes from training classes
 - minutes from meetings in which site security was discussed with local health departments
 - site security checklists
 - posting date of checklists and/or guidance on information network systems (health alert network, web-based secure sites, emails, etc.)
 - tracking rosters

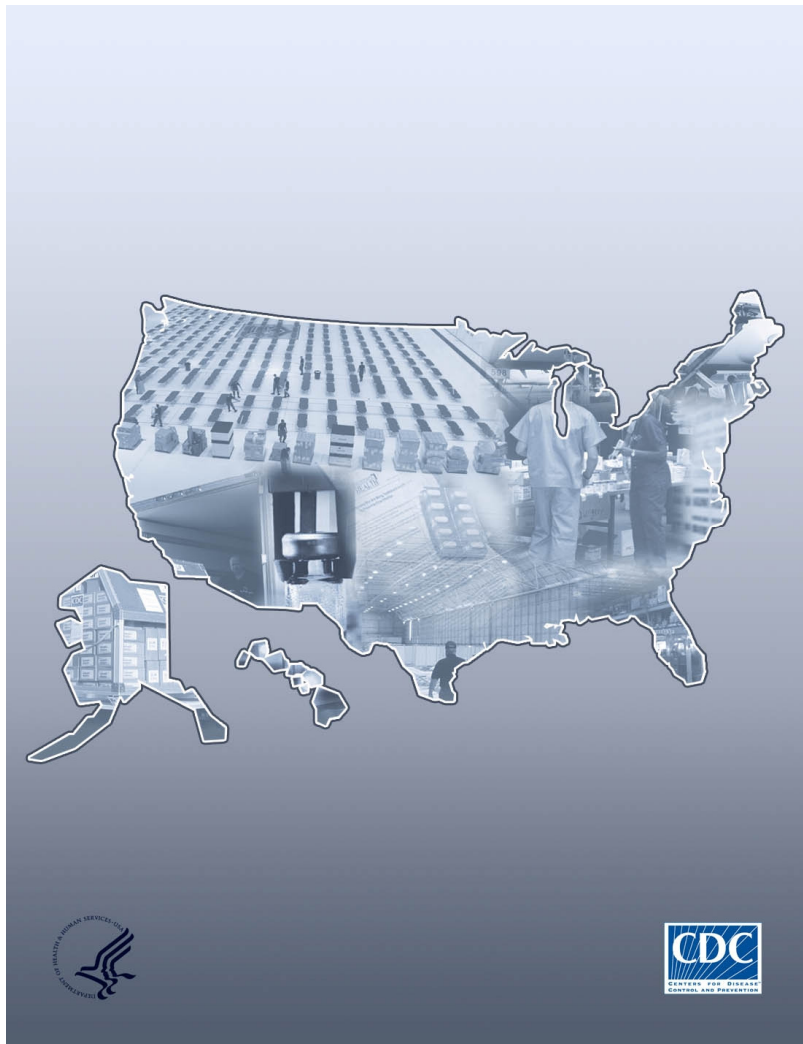
0.5-Award a half score if:

- the state has provided the documentation but has not presented an example of a checklists that will be distributed to local health departments

0-Award a zero score if:

- the state cannot provide documentation that guidance or checklists concerning site security has been addressed or developed

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Section VII: Receipt, Store and Stage

SECTION VII- Receipt, Store and Stage (14%)

7.1 The state’s RSS strategy expedites the movement of materiel to the sites designated in the state’s plan (such as regional distribution sites, PODs, hospitals, alternate care facilities, etc.).

- The state has identified adequate RSS facilities to ensure statewide delivery of medical materiel
- Primary and backup locations have been identified
- Locations are based on time and distance
- Locations are based on population

RATIONALE: The RSS facility is the hub from which the state provides support to the local jurisdictions. It is critical that the state have adequate RSS sites to meet the supply and demand for their jurisdictions. The sites should be strategically located to move assets quickly to those in need during an emergency.

REFERENCE: V10.6-0 – page 8.8; TCL page 479 Res C2a 1.2, page 483 Res C2a 5.2

SCORING CRITERIA:

1-Award a full score if:

- a map of strategically located RSS sites has been presented
- a rationale that demonstrates feasible timelines for delivery of medical materiel (the primary criterion is proximity to PODs and treatment centers)

0.5-Award a half score if:

- evidence has been presented that RSS planning is underway, but not complete

0-Award a zero score if:

- no documentation has been presented to demonstrate RSS planning

7.2 RSS facilities reviewed and validated by CDC’s DSNS program services consultant using the RSS site survey tool.

RATIONALE: It is critical that the RSS sites meet the standards in the RSS site survey tool and are validated by the CDC’s DSNS program services consultant.

REFERENCE: V10.02 – page 1.2

SCORING CRITERIA:

1-Award a full score if:

- all locations have been reviewed and validated by the CDC’s DSNS program services consultant

0.5 -Award a half score if:

- 50% of all locations have been reviewed and validated by the DSNS program services consultant

0-Award a zero score if:

- none of the locations have been reviewed and validated by the DSNS program services consultant



7.3 MOAs are in place for reviewed and validated RSS sites.

RATIONALE: A MOA will help to ensure a facility will be available during a public health emergency.

REFERENCE: V10.02 – page 1.2

SCORING CRITERIA:

1- Award a full score if:

- the state has a signed MOA for all RSS sites (a signed letter of agreement is acceptable)

0.5 -Award a half score if:

- signed MOAs (or signed letters of agreement) are presented for at least 50% of the RSS sites

0-Award a zero score if:

- no MOA (or signed letter of agreement) has been presented for any RSS site



7.4 The following RSS managers/staff have been identified with backup and POC information for each RSS facility identified.

- RSS manager / leader
- Security manager / leader
- Safety manager / leader
- Communications / IT manager / leader
- Inventory control / manager / leader
- Shipping / receiving manager / leader
- Pick team manager / leader
- Quality control manager / leader

RATIONALE: It is critical for a safe and efficient warehouse operation to have trained leads.

REFERENCE: V10.6-0 – page 8.2-8.7

SCORING CRITERIA:

- 5 points are awarded for each lead position when a primary and a back person along with redundant contact information is documented in the plan. The maximum points that can be received in this element are 8 points



7.5 RSS leaders/managers and back-ups have job action sheets and have been trained in RSS Operations.

RATIONALE: It is critical the leads know their responsibilities / job elements to include whom they supervise and whom they report to.

REFERENCE: V10.6-0 – page 8.2-8.7

SCORING CRITERIA:

1- Award a full score if:

- all RSS leads and their backups have job action sheets that are presented for review (Position descriptions would also be acceptable documentation)
- documentation that demonstrates RSS leads and their backups are trained in RSS operations has been presented
 - for example:
 - sign-in sheets
 - training rosters

0.5 -Award a half score if:

- the state has presented job action sheets for all RSS leads and their backups, but no documentation demonstrating training of leads in RSS operations has been presented

0-Award a zero score if:

- no job action sheets or documentation of training are presented

7.6 Safety manager/leader and back-ups have job action sheet and have been trained in their RSS function.

RATIONALE: It is critical the leads know their responsibilities / job elements to include whom they supervise and whom they report to.

REFERENCE: V10.6-0 – page 8.2-8.7

SCORING CRITERIA:

1- Award a full score if:

- all safety leads and their backups have job action sheets that are presented for review (Position descriptions would also be acceptable documentation.)
- documentation that demonstrates all safety leads and their backups are trained in RSS operations has been presented
 - for example:
 - sign-in sheets
 - training rosters

0.5 - Award a half score if:

- the state has presented job action sheets for all safety leads and their backups, but no documentation demonstrating training of leads in RSS operations has been presented

0-Award a zero score if:

- no job action sheets or documentation of training are presented

7.7 Communications/IT support and backups have job action sheet and have been trained in their RSS function.

RATIONALE: It is critical the leads know their responsibilities / job elements to include whom they supervise and whom they report to.

REFERENCE: V10.6-0 – page 8.2-8.7

SCORING CRITERIA:

1- Award a full score if:

- all communication and IT leads and their backups have job action sheets that are presented for review (Position descriptions would also be acceptable documentation).
- documentation that demonstrates all communication and IT leads and their backups are trained in RSS operations has been presented
- for example:
 - sign-in sheets
 - training rosters

0.5 - Award a half score if:

- all communication and IT leads and their backups have job action sheets and job action sheets are available for review, but no documentation demonstrating training of leads in RSS operations has been presented

0-Award a zero score if:

- no job action sheets or documentation of training are presented



7.8 Inventory manager/leader and backups have job action sheets and have been trained in their RSS function.

RATIONALE: It is critical for a safe and efficient warehouse operation to have trained leads.

REFERENCE: V10.6-0 – page 8.2-8.7

SCORING CRITERIA:

1- Award a full score if:

- all inventory management leads and their backups have job action sheets that are presented for review (Position descriptions would also be acceptable documentation)
- documentation that demonstrates inventory management leads and their backups are trained in RSS operations has been presented
- for example:
 - sign-in sheets
 - training rosters

0.5 - Award a half score if:

- all inventory manager leads and their backups have job action sheets and job action sheets are available for review, but no documentation demonstrating training of leads in RSS operations has been presented

0-Award a zero score if:

- no job action sheets or documentation of training are presented

7.9 Shipping/receiving manager/leader and backups have job action sheet and have been trained in their RSS function.

RATIONALE: It is critical for a safe and efficient warehouse operation to have trained leads.

REFERENCE: V10.6-0 – page 8.2-8.7

SCORING CRITERIA:

1- Award a full score if:

- all shipping/receiving manager/leads and their backups have job action sheets that are presented for review (position descriptions would also be acceptable documentation)
- documentation that demonstrates all shipping/receiving manager/leads and their backups are trained in RSS operations are presented
 - for example:
 - sign-in sheets
 - training rosters

0.5 - Award a half score if:

- all shipping/receiving manager/leads and their backups have job action sheets and job action sheets are available for review, but no documentation demonstrating training of leads in RSS operations has been presented

0-Award a zero score if:

- no job action sheets or documentation of training are presented

7.10 Pick team manager/leaders and back-ups have job action sheet and have been trained in their RSS function.

RATIONALE: It is critical for a safe and efficient warehouse operation to have trained leads.

REFERENCE: V10.6-0 – page 8.2-8.7

SCORING CRITERIA:

1- Award a full score if:

- all pick team manager/leads and their backups have job action sheets that are presented for review(position descriptions would also be acceptable documentation)
- documentation that demonstrates all pick team manager/leads and their backups and their backups are trained in RSS operations has been presented
 - for example:
 - sign-in sheets
 - training rosters

0.5 - Award a half score if:

- all pick team manager/leads and their backups have job action sheets and job action sheets are available for review, but no documentation demonstrating training of leads in RSS operations has been presented

0-Award a zero score if:

- no job action sheets or documentation of training are presented



7.11 Quality control managers/leaders and back-ups have job action sheet and have been trained in their RSS function.

RATIONALE: It is critical for a safe and efficient warehouse operation to have trained leads.

REFERENCE: V10.6-0 – page 8.2-8.7

SCORING CRITERIA:

1- Award a full score if:

- all quality control manager and leads and their back ups have job action sheets that are presented for review (position descriptions would also be acceptable documentation)
- documentation that demonstrates all quality control manager and leads and their backups are trained in RSS operations has been presented

- for example:
 - sign-in sheets
 - training rosters

0.5 - Award a half score if:

- all quality control manager and leads and their backups have job action sheets and they are available for review, but no documentation demonstrating training of leads in RSS operations has been presented

0-Award a zero score if:

- no job action sheets or documentation of training are presented



7.12 Call down rosters for 24/7 operations for all RSS managers and staff/volunteers are reviewed for accuracy and tested at least quarterly.

RATIONALE: It is critical for a safe and efficient warehouse operation to have trained leads.

REFERENCE: V10.6-0 – page 8.2-8.7

SCORING CRITERIA:

1- Award a full score if:

- the state has provided the documentation that the call-down rosters are tested at least quarterly
 - for example:
 - call logs
 - computer tracking mechanisms
 - AARs
 - RAND metric sheets
 - drill summary sheets
 - memos for record

0.5 -Award a half score if:

- documentation of call down lists has been presented

0-Award a zero score if:

- no documentation of call-down lists has been presented

7.13 Just-in-time (JIT) training materials have been developed for each of the RSS functions to familiarize personnel working within those functions:

- Safety
- Shipping / Receiving
- Communications / IT
- Pick Teams
- Quality Control
- Inventory Management
- Other functions, as appropriate

RATIONALE: It is critical for a safe and efficient warehouse operation to have trained leads. There is potential for some personnel to have not received training in their RSS function prior to an event. JIT training will need to be available for untrained personnel or for surge personnel who might be called upon to assist in a large scale or long-term response.

REFERENCE: V10.6-0 – page 8.2-8.7

SCORING CRITERIA:

1- Award a full score if:

- training materials are presented for each of the RSS functions

0.5 -Award a half score if:

- training materials are presented for at least 4 of the above listed RSS functions

0-Award a zero score if:

- no training materials are presented

7.14 An inventory of material handling equipment for each RSS site should be documented along with a list of materials/supplies that need to be procured and/or delivered at the time of event.

RATIONALE: Equipping each RSS facility properly will significantly reduce the time and effort to process SNS assets for delivery to dispensing, treatment, and intermediate distribution sites.

REFERENCE: V10.6-0 – page 8.2-8.7

SCORING CRITERIA:

1- Award a full score if:

- an inventory listing of appropriate handling equipment has been presented for 100% of the state's RSS sites

0.5 -Award a half score if:

- an inventory listing of appropriate handling equipment has been presented for 75% of the state's RSS sites

0-Award a zero score if:

- no inventory listing of appropriate handling equipment has been presented for the state's RSS sites

7.15 An inventory of office equipment for each RSS site should be documented along with a list of materials/supplies that will need to be delivered and/or procured at time of event.

RATIONALE: Equipping each RSS facility properly will significantly reduce the time and effort to process SNS assets for delivery to dispensing, treatment, and intermediate distribution sites.

REFERENCE: V10.6-0 – page 8.2-8.7

SCORING CRITERIA:

1- Award a full score if:

- an inventory listing of appropriate office equipment has been presented for 100% of the state's RSS sites

0.5 -Award a half score if:

- an inventory listing of appropriate office equipment has been presented for 75% of the state's RSS sites

0-Award a zero score if:

- no inventory listing of appropriate office equipment has been presented for the state's RSS sites

7.16 The state plan lists individuals who are authorized to sign for SNS materiel.

RATIONALE: The SNS materiel is a national security asset that must be received by a competent authority on behalf of the governor.

REFERENCE: V10.6-0 – page 8.2-8.7

SCORING CRITERIA:

1- Award a full score if:

- documentation has been presented as evidence that an individual (s) have been identified that as an authority to sign for SNS materiel
- documentation (contact information and official letter for authority) for the identified individual (s) must be included in the plan

0-Award a zero score if:

- no documentation has been presented as evidence that an individual (s) have been identified as an authority to sign for SNS materiel



7.17 The state plan addresses staff/volunteer management (for example, work breaks, shift schedules, meals/snacks, lodging, family care, etc.).

RATIONALE: An emergency response will require the coordinated efforts of many state and local personnel with diverse backgrounds. It is vital to protect the essential personnel who will be responsible for the various SNS functions that will ensure an efficient and effective response during an emergency.

REFERENCE: V10.6-0 – page 8.2-8.7

SCORING CRITERIA:

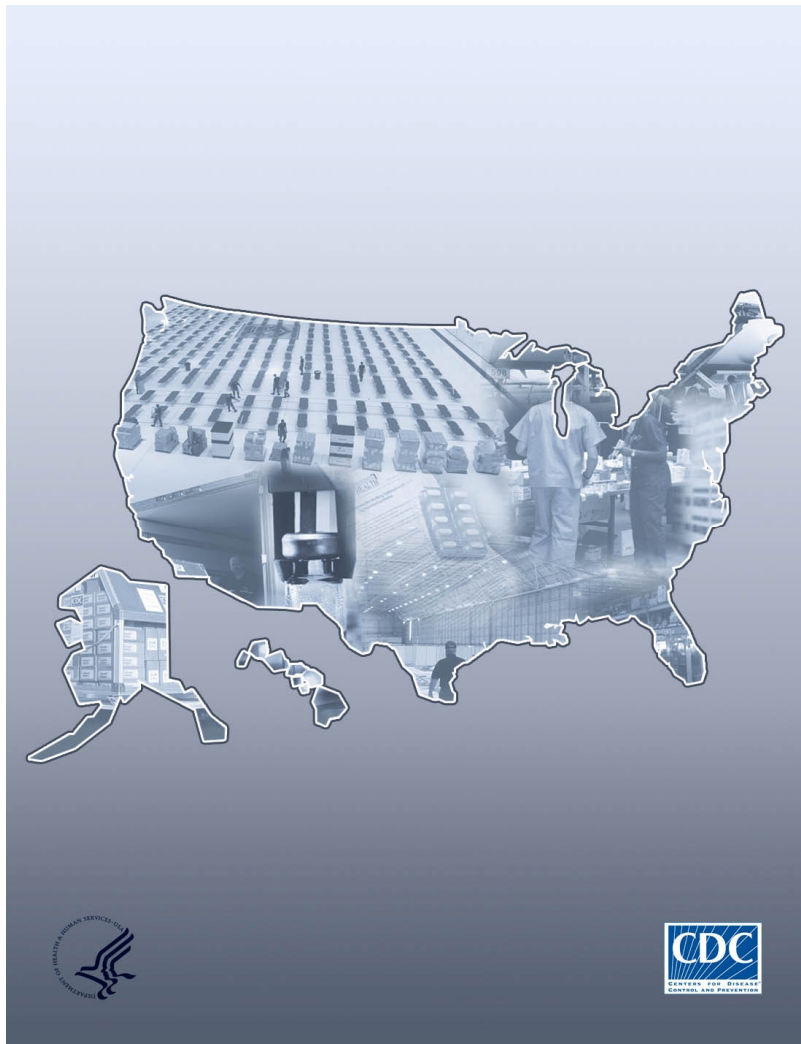
1- Award a full score if:

- staff/volunteer management issues are incorporated in the plan
- written agreements between the state and organizations that will provide services during an emergency are presented

0-Award a zero score if:

- no documentation of a management plan has been presented

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Section VIII: Controlling Inventory

SECTION VIII-CONTROLLING INVENTORY (3%)

8.1 Plan for inventory management system (IMS) in place with backup:

- Inventory management software system
- Electronic spreadsheet
- Paper system

RATIONALE: For an efficient and effective response, it is vital to have a IMS in place to manage, allocate, control and re-order SNS materiel.

REFERENCE: V10. – page 9.1-9.2

SCORING CRITERIA:

1-Award a full score if:

- documentation has been presented as evidence that the state has more than one functional IMS in place

0.5-Award a half score if:

- documentation has been presented as evidence that state has one functional IMS in place

0-Award a zero score if:

- the state does not have any functional IMS in place

8.2 All inventory staff is trained in IMS functions.

RATIONALE: An emergency response will require the coordinated efforts of many state and local personnel from diverse backgrounds. It is vital to protect the essential personnel who will be responsible for the various SNS functions during an emergency.

REFERENCE: V10.02 – page 9.1-9.4

SCORING CRITERIA:

1-Award a full score if:

- documentation has been presented as evidence that management staff have been identified
- documentation has been presented as evidence that management staff have been trained on IMS functions by all inventory management staff

- documentation must include contact information and must be included in an appendix of the plan

0.5-Award a half score if:

- management staff have been identified, but have not attended IMS training
- documentation must include contact information and must be included in an appendix of the plan

0-Award a zero score if:

- management staff have not been identified



8.3 Chain of custody procedures are outlined in the state plan including the ability to track pharmaceutical lot numbers.

RATIONALE: During an event, particularly in the first several days of a large-scale emergency, treatment centers may be overwhelmed with casualties. It will be necessary to have a plan in place that dictates the procedures for shipment and receipt of SNS materiel to the PODs and treatment centers in a timely manner.

REFERENCE: V10.02 – page 9.1-9.4

SCORING CRITERIA:

1- Award a full score if:

- documentation has been presented as evidence that a written plan is in place for shipping and receiving and tracking lot numbers of SNS materiel
- a procedure outlining how the inventory is maintained, with a list of responsible parties, should be included in the plan

0-Award a zero score if:

- no documentation of a plan has been presented



8.4 The state plan lists Drug Enforcement Administration (DEA) Registrants to receive materiel from DSNS requiring DEA Form 222.

RATIONALE: A DEA number is required by law. The DEA regulates the storage and transfer of Schedule II substances in accordance with Title 21 of the US Code of Federal Regulations. The DEA registers individuals and organizations like hospital pharmacies to handle specific classes of controlled substances by issuing a distributor's license. If transfer of controlled substances to the state's SNS site is necessary, but DEA registrant is unavailable, it is necessary for the CDC to know the name and DEA number of the person who will eventually sign the Form-222.

REFERENCE: V10.6-0– page 8.5-8.6

SCORING CRITERIA:

1-Award a full score if:

- documentation has been presented as evidence that the state has identified and documented more than one DEA registrant to issue DEA Form 222

0.5-Award a half score if:

- documentation has been presented as evidence that the state has identified one DEA registrant to issue DEA Form 222

0-Award a zero score if:

- no documentation has been presented



8.5 The procedure for chain of custody involving controlled substances received from DSNS is outlined in plan.

RATIONALE: During an event, particularly in the first several days of a large-scale emergency, treatment centers may be overwhelmed with casualties. It will be necessary to have a plan in place that dictates the procedures for shipment and receipt of SNS materiel to the PODs and treatment centers in a timely manner.

REFERENCE: V10.02 – pages 8.2-8.5, 9.1-9.6

SCORING CRITERIA:

1- Award a full score if:

- documentation has been presented as evidence that a written plan is in place for shipping and receiving and tracking lot numbers of SNS materiel
- the plan should list, by position, those who are authorized to sign for controlled substances

0-Award a zero score if:

- no documentation of a plan has been presented

8.6 The state has registered with the DEA as a distributor.

RATIONALE: A DEA number is required by law. The DEA regulates the storage and transfer of Schedule II substances in accordance with Title 21 of the U.S. Code of Federal Regulations. The DEA registers individuals and establishments like hospital pharmacies to handle specific classes of controlled substances, by issuing a distributor's license.

REFERENCE: V10.6-0 – page 8.5-8.7

SCORING CRITERIA:

0-Award a full score if:

- documentation has been presented as evidence that the state has received a DEA registration number

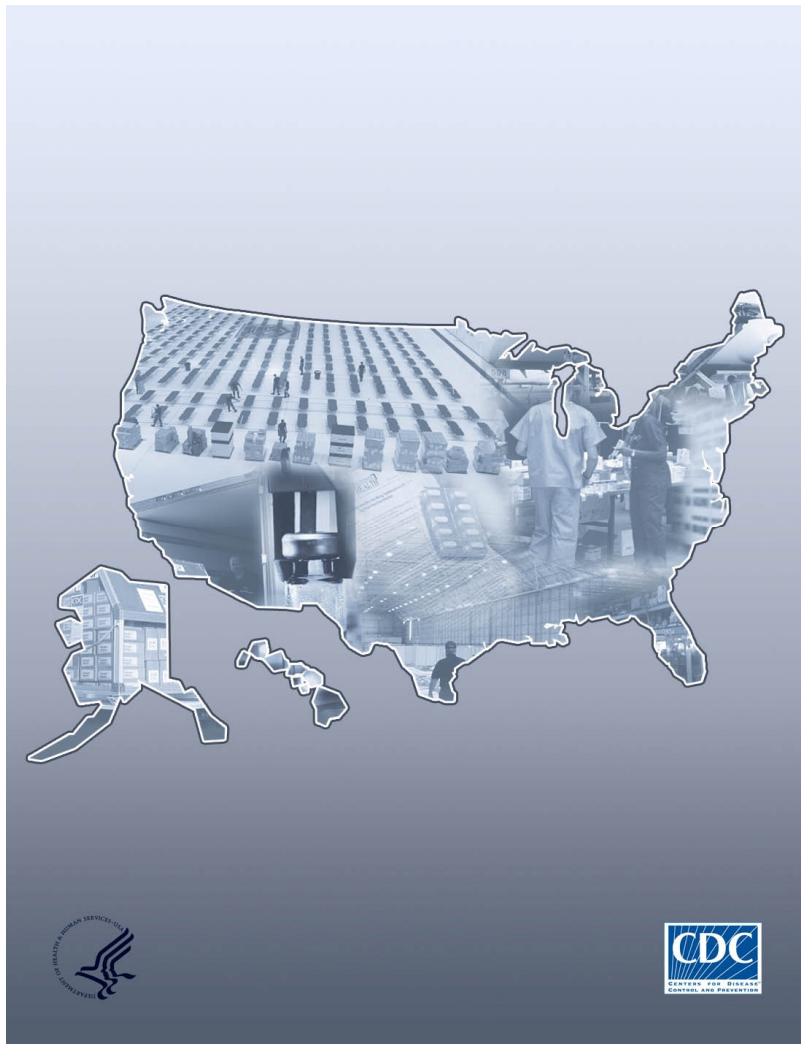
0.5-Award a half score if:

- the state has applied for a DEA number
- a copy of the application must be presented

0-Award a zero score if:

- the process has not been initiated

State Strategic National Stockpile Technical Assistance Review Elements



Section IX: Repackaging

SECTION IX-REPACKAGING (2%)

9.1 Repackaging manager and back-up have job action sheets and have been trained in their function.

RATIONALE: States need to be prepared for the possibility of having to repackage some medications at the local level. It is important to have individuals identified and trained in this highly specialized function.

REFERENCE: V10.6-0 – page

SCORING CRITERIA:

1- Award a full score if:

- all repackaging managers and backups have job action sheets that are presented for review
- documentation has been presented that demonstrates all repackaging leads are trained in their assigned duties

0.5 -Award a half score if:

- only documentation of job action sheet has been presented

0-Award a zero score if:

- no job action sheets or documentation of training are presented

9.2 Repackaging plan or contingent contracts have been developed.

RATIONALE: Bulk pharmaceuticals or repackaging equipment are not contained in the 12-hour Push Package. All pharmaceuticals in a 12-hour Push Package come in 10-day, unit-of-use, labeled childproof bottles. States need to be prepared for the possibility of having to repackage some medications at the local level. There are some bulk drugs that might have to be shipped during an emergency if:

- individual regimens in the SNS inventory are insufficient
- shipments of prepackaged drugs from vendors are delayed, or
- prepackaged medicines in the 12-hour Push Package are not effective against a particular threat, and new drugs arrive in bulk

REFERENCE: V10.6-0 – page 10.2

SCORING CRITERIA:

1- Award a full score if:

- documentation has been presented as evidence of a written, approved plan and/ or contingent signed contracts are included in the plan

0-Award a zero score if:

- there is no documentation of a written plan or contracts



9.3 JIT training materials have been developed for the repackaging function.

RATIONALE: States need to be prepared for the possibility of having to repackage some medications at the local level. It is important to have individuals identified and trained in this highly specialized function.

REFERENCE: V10.6-0 – page

SCORING CRITERIA:

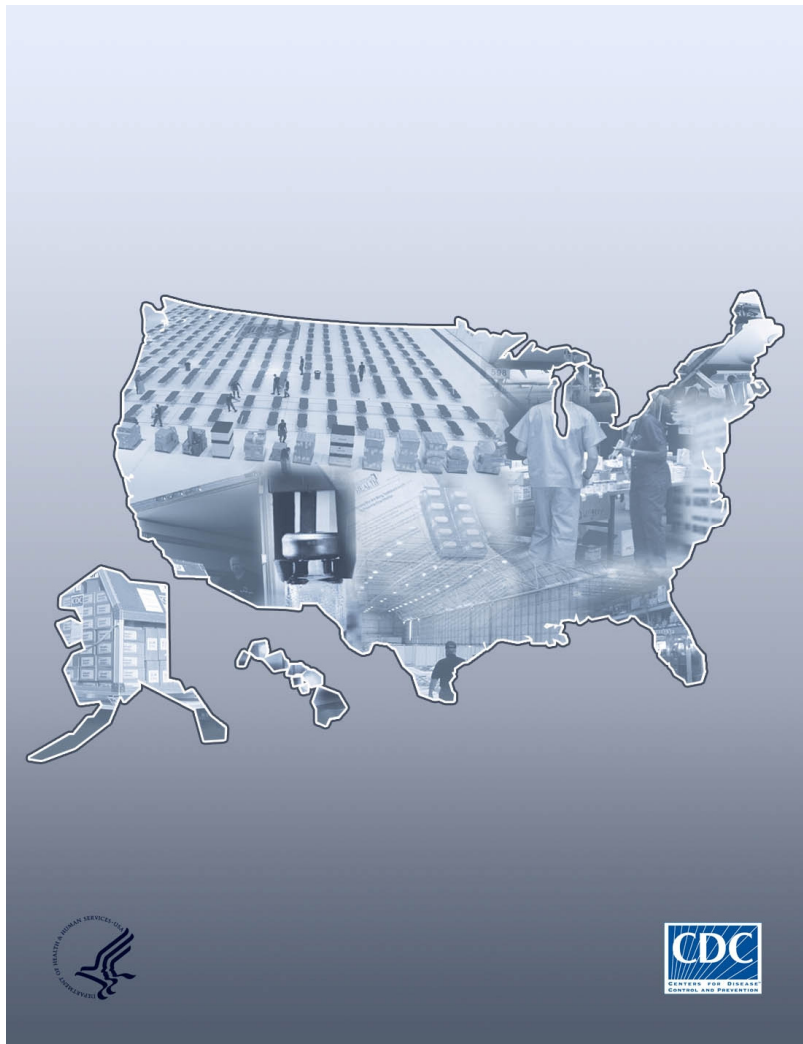
1- Award a full score if:

- training materials are presented for repackaging function

0-Award a zero score if:

- no training materials are presented

State Strategic National Stockpile Technical Assistance Review Elements



Section X: Distribution

SECTION X-DISTRIBUTION (10%)

10.1 Distribution manager and backup(s) have a job action sheet and have been trained in their function.

RATIONALE: It is critical for a safe and efficient distribution operation to have trained leads that are able to effectively manage the frequency and urgency of deliveries to multiple locations using the delivery fleet, routes, personnel, and reporting requirements.

REFERENCE: V10.02, page 11-6, TCL Rec.C1c 6.6 page 469.

SCORING CRITERIA:

1- Award a full score if:

- all distribution managers have job action sheets that are presented for review
- documentation has been presented that demonstrates all distribution leads are trained in roles and responsibilities

0.5 -Award a half score if:

- only documentation of job action sheet has been presented

0-Award a zero score if:

- no job action sheets or documentation of training are presented

10.2 Plan includes distribution strategy for delivery of medical materiel (such as delivery locations, routes, delivery schedule/frequency, fueling, repair, recovery, etc.).

RATIONALE: Effective, timely, and uninterrupted deliveries is essential to the success of a mass prophylaxis campaign.

REFERENCE: V10.02, page 11-6 ; TCL Rec.C1c 6.6 page 469, Res.C1c 3.2 page 468

SCORING CRITERIA:

1- Award a full score if:

- the state has provided the documentation that has been incorporated into the plan that includes detailed information on the distribution strategy
 - these details include:
 - maps showing potential routing based on exercises
 - traffic flow patterns

- results from modeling programs
- advice from public works
- public safety
- plans are presented on how to handle vehicle repairs, maintenance, fueling/refueling, or other emergent issues with vehicles
 - delivery locations are identified or mapped either by using manual maps, GIS software

0.5 -Award a half score if:

- the state cannot provide documentation of any type of distribution plan or strategy
- documentation provided lacks detailed planning, but does provide general plans for distribution operations
- the distribution operations have not been coordinated with supporting agencies

0-Award a zero score if:

- the state cannot provide documentation of any type of distribution plan or strategy



10.3 Primary agency/organization has been assigned to distribute medical materiel and a written agreement is in place.

RATIONALE: It is vital that the agency/organization responsible for providing support for the distribution function such as vehicles, drivers, mechanics, etc. are identified along with a form of contractual agreement for those services.

REFERENCE: V10.02, page 11-6; TCL Rec.C1c 6.6 page 469.

SCORING CRITERIA:

1- Award a full score if:

- the state can produce contractual agreements with agencies/organizations that have agreed to provide distribution assets (these contractual agreements can be in the form of MOUs, MOAs, letters from delegating authorities if other legal documentation is not required or cannot be obtained, or written and referenced in other annexes of the plan)
- identifies which assets are covered under the agreement

0-Award a zero score if:

- the state cannot produce documentation listed above



10.4 Backup agency/organization has been assigned to distribute medical materiel and a written agreement is in place.

RATIONALE: In the event the primary distribution source is not able to either fulfill its requirements or needs additional assistance due to the severity of the incident, having an alternate source of assets with agreements in place would be essential.

REFERENCE: V10.02, page 11-6; TCL Rec.C1c 6.6 page 469.

SCORING CRITERIA:

1–Award a full score if:

- the state can produce contractual agreements with agencies/organizations that have agreed to provide distribution assets (these contractual agreements can be in the form of MOUs, MOAs, letters from delegating authorities if other legal documentation is not required or cannot be obtained, or written and referenced in other annexes of the plan)
- identifies which assets are covered under the agreement

0–Award a zero score if:

- the state cannot produce documentation listed above

10.5 Resource needs have been identified and include the necessary number and type of vehicles, drivers and support personnel.

RATIONALE: Knowing the appropriate number and type of resources that can best support the distribution strategy is of utmost importance.

REFERENCE: V10.02, page 11-6, TCL Rec.C1c 6.6 page 469

SCORING CRITERIA:

1–Award a full score if:

- the state’s documented distribution strategy has determined through exercises, modeling programs and tools, or through advice and assistance of subject matter experts what would best serve their geographic area as it pertains to the types of vehicles, how many vehicles, and what type of drivers, mechanics, dispatchers, etc. will be needed for those vehicles.

0.5–Award a half score if:

- the state’s documented distribution strategy has not identified all of the resource needs but has identified at least half of what is needed

0-Award a zero score if:

- the state's documented distribution strategy has identified less than half of what is needed

10.6 The state provides guidance for appropriate material handling equipment (MHE) for sites that are designated to receive materiel (off-loading and loading as needed such as pallet jacks, hand carts/dollies, and forklifts).

RATIONALE: Timely dispensing is impacted by multiple factors associated with distribution including offloading capability at receiving sites. Sites without proper handling equipment can delay dispensing activities.

REFERENCE: V10.02, page 11-6, TCL Rec.C1c 6.6 page 469.

SCORING CRITERIA:

1 – Award a full score if:

- the state can produce documentation that it has provided guidance to receiving sites about the offloading capabilities required for timely and effective receipt of deliveries
 - this documentation can include:
 - users guides
 - flyers
 - brochures
 - checklists

0-Award a zero score if:

- the state cannot produce documentation listed above

10.7 JIT training materials have been developed for the distribution function such as chain of custody protocols, routing information, security/communication procedures, appropriate use of MHE, and loading and off-loading of materiel.

RATIONALE: Even when using skilled, qualified, and trained staff, there are certain details that will be specific to a mass prophylaxis campaign and must be communicated effectively to those staff.

REFERENCE: V10.02, page 11-6, TCL Rec.C1c 6.6 page 469.

SCORING CRITERIA:

1 – Award a full score if:

- the state has provided the documentation that supports the JIT training materials for the distribution function
 - documentation can include:
 - checklists
 - job action sheets
 - brochures
 - flyers
 - wallet cards for staff
 - posters or other signage
 - videos
 - computer-based training, or other types of information dissemination tools

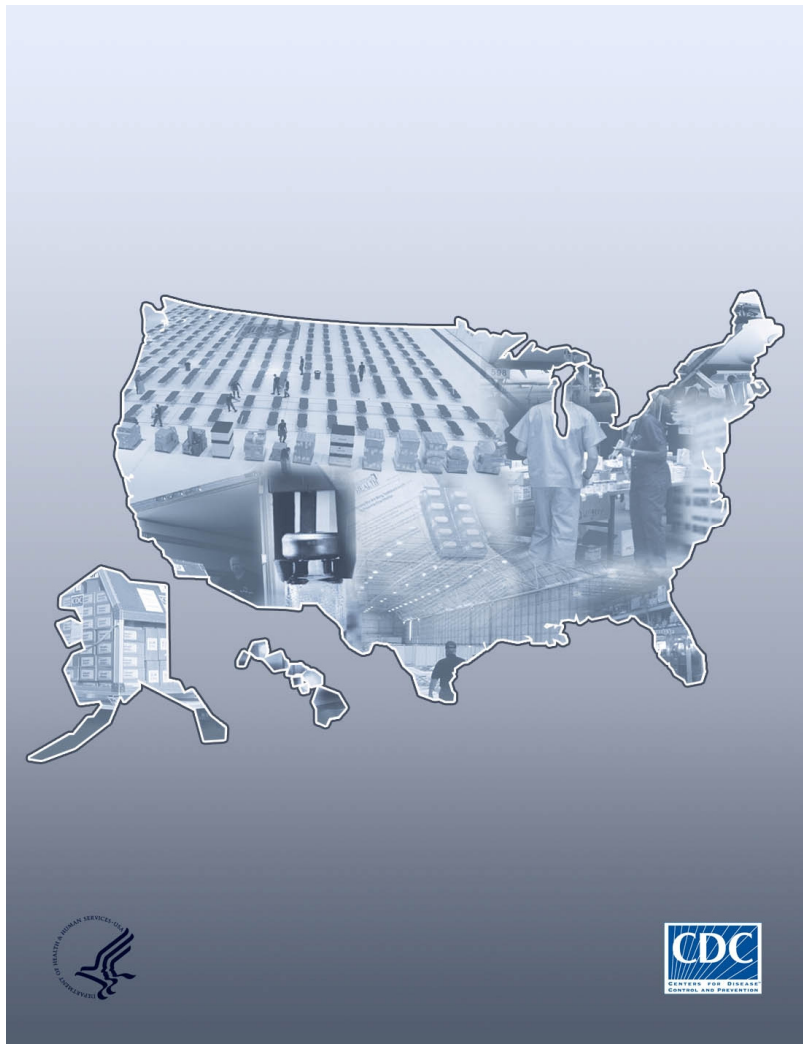
0.5 – Award a half score if:

- the state has provided the documentation but the information only covers up to five items in the TAR tool

0-Award a zero score:

- if the state has provided the documentation but the information only covers one of the items
- or
- if the state cannot provide any documentation for this element

State Strategic National Stockpile Technical Assistance Review Elements



Section XI Dispensing Prophylaxis

SECTION XI-DISPENSING PROPHYLAXIS (22%)

11.1 The state has developed and disseminated to their local areas specific guidelines and templates for dispensing/POD management.

RATIONALE: While there are a myriad of dispensing methods and modalities, there are certain aspects that must be standardized throughout the state in an effort to reduce perceptions related to service or access.

REFERENCE: V10.02, page 12-3, 12-5; TCL, page 479 Res.C2a 1.4.2; page 481 Res.C2a 3.2.4

SCORING CRITERIA:

1-Award a full score if:

- the state addresses standard dispensing aspects
 - documentation could include:
 - policy letter
 - manual
 - checklist
 - training plan
 - dispensing guide
 - dispensing templates
- state has provided the documentation that the products were disseminated to the local levels
 - documentation could include:
 - emails
 - web notice on intranet/internet or other web-based system
 - training class rosters
 - meeting minutes
 - colleague letter

0.5-Award a half score if:

- the state can only provide the documentation of the guidance but cannot demonstrate dissemination to local partners

0-Award a zero score if:

- the state cannot provide documentation of the guidance

11.2 The state coordinated the development of volunteer registries and tracks registration at the local level or provided volunteer registry development and tracking at the state level.

RATIONALE: Having the ability to identify potential volunteers from a single point source, such as a volunteer registry tracking system, decreases the amount of time needed to ensure adequate staffing levels for a mass prophylaxis campaign will be available in a timely manner.

REFERENCE: V10.02, page 12-18; TCL page 483, Res.C2a 5.1.4

SCORING CRITERIA:

1-Award a full score if:

- the state has provided the documentation:
 - printout from the volunteer registry
 - demonstration of the volunteer registry tracking system
 - reports from volunteer registry systems(either from the state level or from the local levels)
 - demonstration of how the state coordinates local level registries

0-Award a zero score if:

- no documentation was presented indicating a state registry or state oversight of local level registries

11.3 The state can demonstrate that they have reviewed and provided annual feedback for all local and/or regional dispensing plans in the state.

RATIONALE: Although the methods of dispensing may vary between jurisdictions, the state must review each jurisdictional plan to ensure adherence to those identified areas of uniformity (linked with 11.1).

REFERENCE: TCL page 481 Res.C2a 3.2, V10.02 page 12-3, 12-5

SCORING CRITERIA:

1-Award a full score if:

- the state has provided
 - spreadsheets indicating the ongoing tracking of local plan reviews
 - minutes of feedback sessions with local planners
 - emails that notify of planning gaps
 - rosters of trainings and/or meetings that target planning gaps seen in most local plans
 - web-based products that provide information to local planners
 - other tracking mechanisms that includes more than half of the local plans

0.5-Award a half score if:

- less than half of the local plans have been reviewed and feedback was provided

0-Award a zero score if:

- the state cannot provide documentation that any of the plans were reviewed

or

- the state has not reviewed any of the local plans

11.4 The state reviews local plans for appropriate numbers of dispensing sites/PODs to cover each jurisdiction's population and has provided feedback to improve the jurisdiction's coverage.

RATIONALE: Local planners may be more familiar with their planning jurisdiction; however, objective reviews by the state may be helpful to enhance local planning for dispensing coverage.

REFERENCE: TCL page 482, Res.C2a 4.3.1; V10.02 page 12-3

SCORING CRITERIA:

1-Award a full score if:

- the state has provided:
 - spreadsheets indicating the ongoing tracking of local plan reviews
 - minutes of feedback sessions with local planners
 - emails that notify of planning gaps
 - rosters of trainings and/or meetings that target planning gaps seen in most local plans
 - web-based products
 - other tracking mechanisms that includes more than half of the local plan

0.5-Award a half score if:

- less than half of the local plans have been reviewed, and feedback was provided

0-Award a zero score if:

- the state cannot provide documentation that any of the plans were reviewed
or
- the state has not reviewed any of the local plans

11.5 The state reviews local plans to ensure adequate staffing (paid staff plus volunteers) for the identified dispensing sites/PODs and has provided feedback.

RATIONALE: Local planners may be more familiar with their planning jurisdiction; however, objective reviews by the state may be helpful to enhance and/or provide recommendations for mass prophylaxis staffing sources (helps to link back to 11.2).

REFERENCE: V10.02 page 12-3, 12-18; TCL page 483 Res.C2a 5.1.4

SCORING CRITERIA:

1-Award a full score if:

- the state has provided:
 - spreadsheets indicating the ongoing tracking of local plan reviews
 - minutes of feedback sessions with local planners
 - emails that notify of planning gaps
 - rosters of trainings and/or meetings that target planning gaps seen in most local plans
 - web-based products
 - other tracking mechanisms that includes more than half of the local plans

0.5-Award a half score if:

- less than half of the local plans have been reviewed and feedback was provided

0-Award a zero score if:

- the state cannot provide documentation that any of the plans were reviewed

or

- the state has not reviewed any of the local plans

11.6 The state reviews and provides feedback on local plans to ensure alternate methods of dispensing are being developed to augment POD shortages and supplement the POD system.

RATIONALE: Reviewing the local plans for alternate methods allows the state to identify any potential duplication in provided services or other resources across geographical boundaries, and also to identify potential benchmarks for other areas in the state.

REFERENCE: V10.02, page 12-1, 12-2,12-3; TCL page 481 Res.B3b 3.3.2

SCORING CRITERIA:

1-Award a full score if:

- the state has provided
 - spreadsheets indicating the ongoing tracking of local plan reviews
 - minutes of feedback sessions with local planners
 - emails that notify of planning gaps
 - rosters of trainings and/or meetings that target planning gaps seen in most local plans
 - web-based products
 - other tracking mechanisms that includes more than half of the local plans

0.5-Award a half score if:

- less than half of the local plans have been reviewed and feedback was provided

0-Award a zero score if:

- the state cannot provide documentation that any of the plans were reviewed

or

- the state has not reviewed any of the local plans

11.7: The state reviews local plans to ensure procedures are in place to provide prophylaxis to local public health responders, local first responders, and other local critical infrastructure staff.

RATIONALE: Reviews by the state for critical infrastructure personnel prophylaxis may benefit the overall local planning effort, by ensuring there are reasonably similar definitions of critical infrastructure personnel and uniformity of certain procedures.

REFERENCE: V10.02 page 12-30; TCL page 479 Res.C2a 1.4

SCORING CRITERIA:

1-Award a full score if:

- the state has provided:
 - spreadsheets indicating the ongoing tracking of local plan reviews
 - minutes of feedback sessions with local planners
 - emails that notify of planning gaps
 - rosters of trainings and/or meetings that target planning gaps seen in most local plans
 - web-based products
 - other tracking mechanisms that includes more than half of the local plans

0.5-Award a half score if:

- less than half of the local plans have been reviewed and feedback was provided

0-Award a zero score if:

- the state cannot provide documentation that any of the plans were reviewed

or

- if the state has not reviewed any of the local plans

11.8: The state has plans to provide prophylaxis to state-level public health responders.

RATIONALE: The state, as well as local planners, will need to provide prophylaxis to those identified personnel who will provide critical support during a response campaign.

REFERENCE: RAND POD drill working paper (draft); V10.02 page 12-30; TCL page 479 Res.C2a 1.4

SCORING CRITERIA:

1-Award a full score if:

- the state has provided:
 - documentation of their planning efforts to identify:
 - personnel as critical personnel
 - mechanisms by which those identified personnel and their family members will receive prophylaxis
 - timelines at which the process will begin
 - source of the prophylaxis
 - documentation may be in the form of:
 - appendix to the mass prophylaxis plan
 - a standard operating procedure guide
 - policy letter

0-Award a zero score if:

- the state cannot provide documentation that planning efforts have occurred in this area

11.9: The state monitors local jurisdictions to ensure that yearly dispensing/POD training occurs or directly serves as the primary purpose of dispensing/POD training to the local jurisdictions.

RATIONALE: The state may provide or track dispensing training for local jurisdictions to enhance knowledge about dispensing guidelines.

REFERENCE: V10.02 page 12-22; TCL page 480 Res.C2a 2.1, page 481 Res.C2a 2.1.6, Res.C2a 2.2

SCORING CRITERIA:

1-Award a full score if:

- the state has provided a tracking mechanism that documents dispensing training at the local level occurred at least annually
- training was provided either directly from the state or through other training providers via:
 - spreadsheet
 - a web-based program
 - training rosters
 - schedule of broadcasts, etc

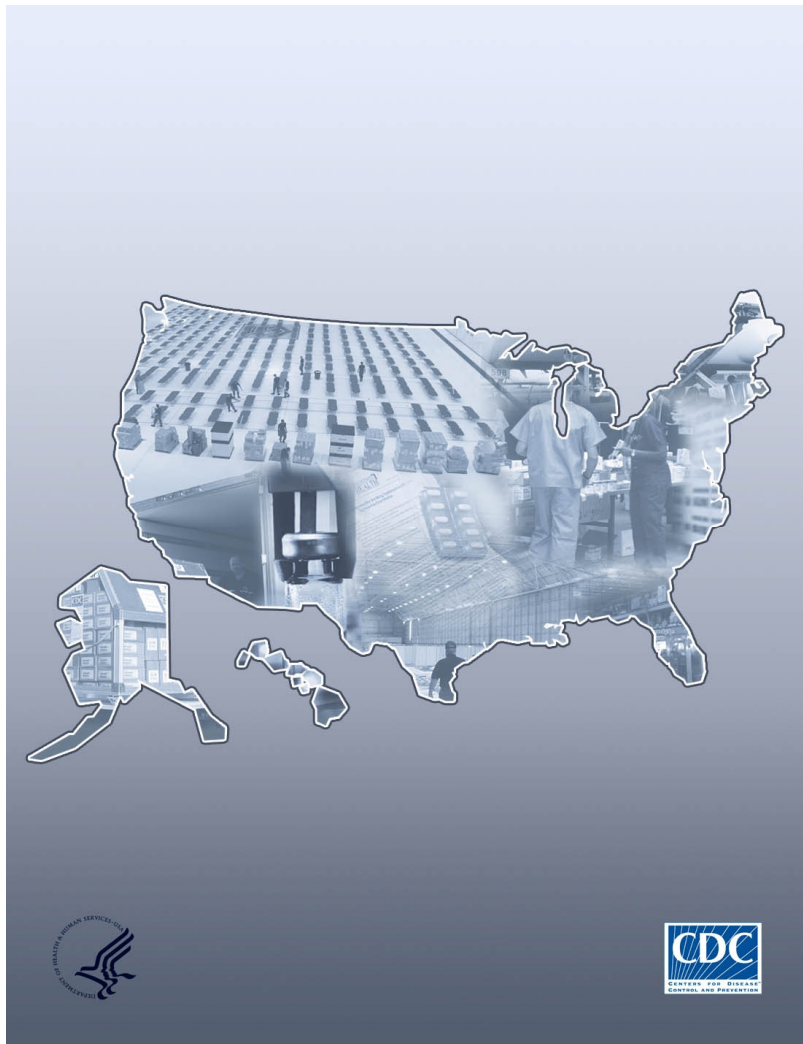
0.5-Award a half score if:

- the state has provided the documentation for at least half of the local jurisdictions

0-Award a zero score if:

- the state cannot provide documentation that indicates training occurred within the state or at the local level

State Strategic National Stockpile Technical Assistance Review Elements



Section XII: Hospitals and Alternate Care Facilities Coordination

SECTION XII-HOSPITALS AND ALTERNATE CARE FACILITIES COORDINATION (3%)

12.1: Coordination exists between the SNS coordinator and hospital preparedness coordinator to inform hospitals and alternate care facilities on how to procure emergency medical materiel.

RATIONALE: Dispensing will not be the only activity occurring during a mass prophylaxis campaign. Those displaying signs and symptoms will be seeking medical care. Thus, it is essential that early coordination occurs and appropriate procurement channels are utilized.

REFERENCE: V10.02 page 13-2; TCL page 479 Res.C2a 1.4.1

SCORING CRITERIA:

1-Award a full score if:

- the state has provided documentation such as
 - meeting minutes
 - training class rosters
 - working groups that include both SNS and hospital preparedness coordinators
 - written procedures, protocols, or checklists within the plan

0-Award a zero score if:

- the state cannot provide documentation

12.2: Persons authorized to request emergency medical materiel on behalf of the hospitals and alternate care facilities have been identified and documented. Contact information is updated quarterly.

RATIONALE: Timely and accurate communication with hospitals and alternate care facilities are vital during a response. Redundant contact information for multiple contacts at each facility are recommended.

REFERENCE: TCL page 479 Res.C2a 1.4.1, V10.02 page 13-2

SCORING CRITERIA:

1-Award a full score if:

- the state has provided a mechanism by which the contacts for every hospital is identified and updated quarterly
 - mechanism may be through other agencies such as emergency management or hospital associations (if the mechanism is through other agencies, the state should provide procedures on how they access the information from those agencies)

0.5-Award a half score if:

- the state has provided a mechanism for identifying at least half of the hospital contacts are identified and updated quarterly

0-Award a zero score if:

- the state has provided a mechanism for identifying less than half of the hospitals

12.3: Procedures are documented in the state plan for hospitals and alternate care facilities to request emergency medical materiel.

RATIONALE: Consistent procedures for requesting emergency medical materiel is vital for effective and expedient distribution and delivery.

REFERENCE: V10.02 page 13-2; TCL page 479 Res.C2a 1.4.1

SCORING CRITERIA:

1-Award a full score if:

- the state can indicate a process is in place that identifies the specifics of how hospitals and alternate care facilities will request emergency medical materiel
- provides written protocols, procedures, checklists, or other agreed upon documentation (such as MOA, MOU, letters of acknowledgement)

0-Award a zero score if:

- the state cannot provide documentation
-

12.4: Hospitals and alternate care facilities are trained on the emergency medical materiel request procedures.

RATIONALE: Dispensing will not be the only activity occurring during a mass prophylaxis campaign. Those displaying signs and symptoms will be seeking medical care. Thus, it is essential that early coordination occurs.

REFERENCE: TCL page 481 preparedness measure #7

SCORING CRITERIA:

1-Award a full score if:

- the state has provided documentation of training for all hospitals such as
 - meeting minutes
 - training class rosters
 - webcasts or other web-based products

0.5-Award a half score if:

- at least half of the hospitals were trained

0-Award a zero score if:

- the state cannot provide documentation that any hospital was trained
-

12.5: Hospitals and alternate care facilities request procedures have been exercised.

RATIONALE: Dispensing will not be the only activity occurring during a mass prophylaxis campaign. Those displaying signs and symptoms will be seeking medical care. Thus it is essential that testing the coordination effort occurs.

REFERENCE: V10.02 page 13-2; TCL page 479 Res.C2a 1.4.1

SCORING CRITERIA:

1-Award a full score if:

- the state has provided documentation of coordination such as
 - meeting minutes
 - training class rosters
 - working groups that include both SNS and hospital preparedness coordinators,
 - written procedures, protocols, or checklists

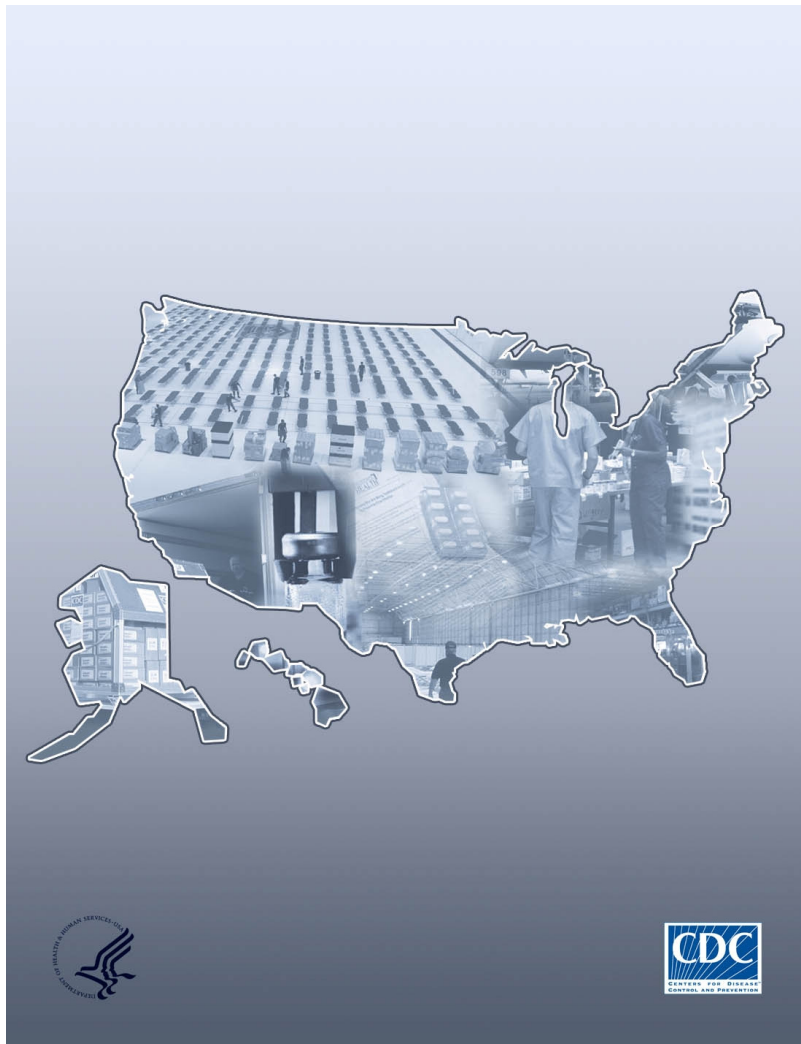
0.5- Award a half score if:

- the state has provided documentation for 50% of state hospitals coordinators

0-Award a zero score if:

- the state cannot provide documentation

State Strategic National Stockpile Technical Assistance Review Elements



Section XIII: Training, Exercise, and Evaluation

SECTION XIII: TRAINING, EXERCISE, AND EVALUATION (10%)

13.1: Personnel have been assigned to lead, plan, and oversee SNS related training, exercise, and evaluation.

RATIONALE: Dedicated personnel to lead and plan SNS-related training and HSEEP compliant exercises and evaluations increases the potential for successful implementation of plans.

REFERENCE: V10.02 page 14-1

SCORING CRITERIA:

1-Award a full score if:

- the state has provided documentation:
 - for example:
 - letters of designation
 - organizational chart

0-Award a zero score if:

- the state cannot provide documentation

13.2: The state has a training plan that incorporates mass prophylaxis, medical supplies management and distribution, and other SNS-specific topics to include course objectives, schedule, and targeted audience for each (to include volunteers).

RATIONALE: An all-inclusive plan increases the potential that the training will be understood, retained, and useful during an actual incident, event, or emergency.

REFERENCE: V10.02, chapter 14; TCL page 267 Preparedness Measures for Develop and Maintain Training and Exercise Programs

SCORING CRITERIA:

1-Award a full score if:

- the state has provided documentation of a written, approved, and coordinated plan that includes specifically address SNS-related topics including:
 - training objectives
 - frequency
 - methodology
 - targeted audiences
 - documentation could include:
 - course lesson plans
 - workbooks
 - videos
 - manuals
 - pre/post testing when applicable

0-Award a zero score if:

- the state cannot provide documentation

13.3: Training plan components that are specific to mass prophylaxis and/or medical supplies management and distribution is implemented.

RATIONALE: Planning to train response personnel is effective only when those plans have been conducted and personnel have attended the appropriate courses.

REFERENCE: V10.02 page 14-5

SCORING CRITERIA:

1-Award a full score if:

- the state has provided documentation of training courses being conducted such as:
 - student sign-in sheets
 - class rosters
 - evaluation summaries

0-Award a zero score if:

- the state cannot provide documentation

13.4: The state has an exercise plan developed in accordance with the HSEEP guidance that allows medical supplies management and distribution and/or mass prophylaxis plans to be tested and evaluated.

RATIONALE: Planning exercises can be time-consuming and expensive; therefore, it is vital to take a long-term approach to exercising. Planning exercises provides opportunities to consolidate exercises thus relieving the burden on jurisdictions.

REFERENCE: V10.02, page 14-8

SCORING CRITERIA:

1-Award a full score if:

- the state has provided documentation of exercise planning
 - for example:
 - exercise schedule
 - exercise objectives
 - types of exercises
 - meeting minutes that discuss exercise planning

0-Award a zero score if:

- the state cannot provide documentation

13.5: Exercise plan components that are specific to mass prophylaxis and/or medical supplies management and distribution.

RATIONALE: Conducting exercises provides opportunities to identify planning areas needing improvement, after action reporting provides the written vehicle to document those areas, and corrective action planning tracks the efforts undertaken to improve those areas.

REFERENCE: V10.02, chapter 14; HSEEP guidance

SCORING CRITERIA:

1-Award a full score if:

- the state has provided documentation such as:
 - after action reports that indicate areas needing improvement
 - action plans that indicate what steps will be taken to improve those areas
 - tracking mechanism to ensure those steps are taken

0.5- Award a half score if:

- documentation is provided only for identifying areas needing improvement and indicating the steps to take to improve those areas

0-Award a zero score if:

- the state cannot provide documentation

13.6: Listing of training, exercises, after action reporting, and corrective action planning.

RATIONALE: Although training, exercising, evaluating, and updating of plans is critical, there are instances in which a required response to a situation provides the same mechanisms, processes, procedures, and personnel normally used during exercises.

REFERENCE: HSEEP

SCORING CRITERIA:

For the training column, if there are sign-in sheets, course rosters, etc. that indicate training courses or opportunities were held then assign a 0.5 to each appropriate row.

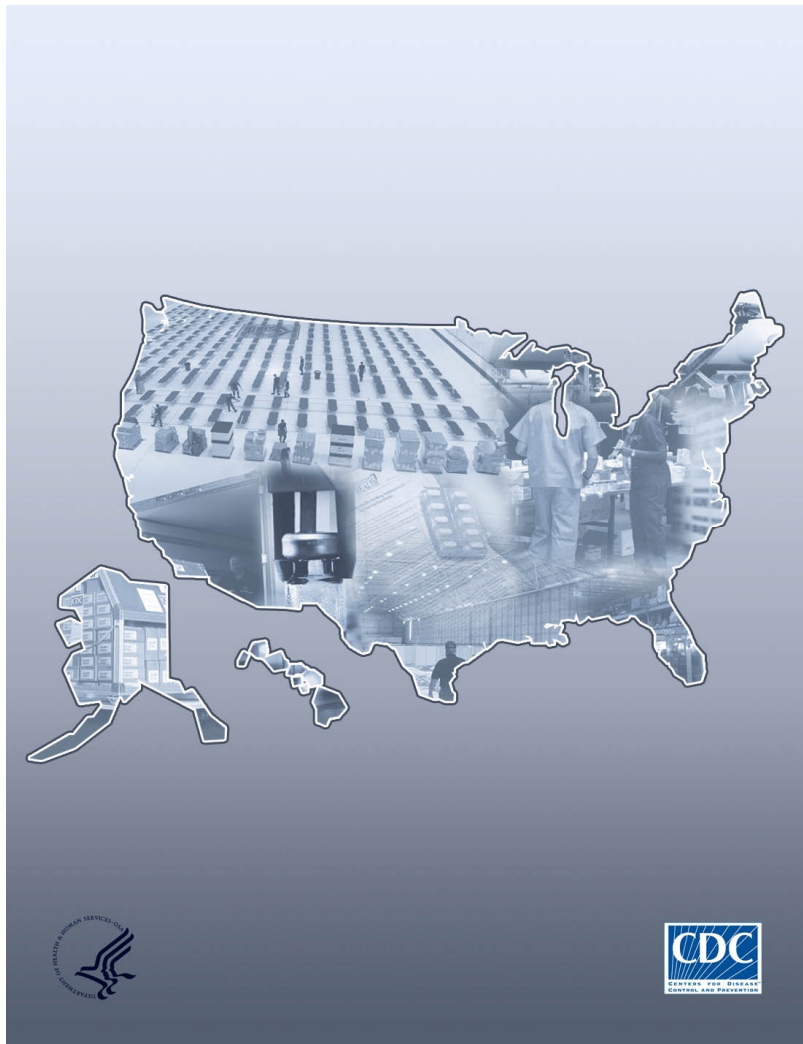
For the exercise column, determine the type of exercise that occurred within the time period since the last TAR for each row. The choices are full scale, functional, drill, table top, games, workshop, seminar, and real-world.

For the after action report column, determine if the exercises that were conducted resulted in an evaluation that identified areas needing improvement then assign a 0.5 to each appropriate row.

For the corrective action plan column, determine if the exercises that were conducted and had a resulting evaluation have a mechanism in which those areas needing improvement are being

tracked and worked to provide those improvements. If the tracking is there then assign a 0.5 to the appropriate row.

Appendices



APPENDIX A-REFERENCES

This section includes a listing of documents that will assist personnel at the state level to compile, update, enhance, and integrate public health emergency preparedness and response plans. Many of these documents were utilized in the preparation of this document to support the rationale for questions listed on the TAR.

Capabilities-Based Planning Tools - Tools are accessible at <https://www.llis.dhs.gov>. LLIS.gov is password protected and requires user registration.

Capabilities-Based Planning Fact Sheet

Department of Defense Support to Domestic Incidents

Division of Strategic National Stockpile Technical Assistance Review Tool

Emergency Management Assistance Compact (EMAC): Overview

Homeland Security Grant Program

Homeland Security Information Network (HSIN)

Homeland Security Exercise and Evaluation Program (HSEEP)

National Incident Management System (NIMS)

National Preparedness Guidance

National Preparedness Goal

National Priorities Fact Sheet

National Emergency Management Association.

National Exercise Program (NEP)

National Infrastructure Protection Plan (NIPP)

National Response Framework (NRF)

Pandemic and All-Hazards Preparedness Act (PAHPA)

RAND Corporation Points of Dispensing (POD) Drill Working Paper (draft)

Stakeholder Engagement Fact Sheet

APPENDIX A-REFERENCES

Target Capabilities List (TCL)

Version 10.02 Strategic National Stockpile Guidance (V10.02)

White House. Homeland Security Presidential Directive 5: Management of Domestic Events. http://www.dhs.gov/xabout/laws/editorial_0607.shtm. Accessed on March 31, 2008.

White House. Homeland Security Presidential Directive 7 : Critical Infrastructure, Identification, Prioritization, and Protection. http://www.dhs.gov/xabout/laws/editorial_0607.shtm. Accessed on March 31, 2008.

White House. Homeland Security Presidential Directive 8: National Preparedness. http://www.dhs.gov/xabout/laws/editorial_0607.shtm. Accessed on March 31, 2008.

White House. Homeland Security Presidential Directive 21: Public Health and Medical Preparedness. http://www.dhs.gov/xabout/laws/editorial_0607.shtm. Accessed on March 31, 2008.

APPENDIX B-REVIEW OF AGGREGATE STATE TAR SCORES, 2006-2007

A study was conducted to identify overall strengths and weaknesses across all states in the 13 function areas assessed by the TAR tool. The data would be used to help direct technical assistance to those areas needing the most improvement.

PURPOSE: To analyze the questions asked within the State DSNS TAR tool for trends.

METHODS:

The scores from each question within the State DSNS TAR tool were entered into a Microsoft Excel spreadsheet. The Referenced scores are the scores of 1 or 0 (0.5 when appropriate). Each row represented a question with the individual states represented in each column. Calculations were then based on each row (representing each question). The fully compliant score was defined as those questions which were scored a “1” on the State DSNS TAR tool. The percentage displayed is the average of the 46 responses to that question. Those percentages that are 69 or below are in italics. The State DSNS TAR tool Referenced is the September 2006 version and represents 92% of the 50 states.

RESULTS:

Section One – Developing a SNS Plan – Overall Section Average: 87%

Percent questions scoring 69 or below: 43% (3/7)

<u>Question</u>	<u>Percentage that received a fully compliant score</u>
1. State SNS Plan incorporated to All Hazard Plan	95%
2. State SNS Plan reviewed annually	93%
3. Multi-discipline planning / advisory group meeting	80%
4. SNS Plan sign-off documented	67%
5. Policy issues in plan for SNS support	56%
6. Legal issues in plan for SNS support	67%
7. TARU pick up in plan	93%

Section Two – Management of SNS - Overall Section Average: 88%

Percent questions scoring 69 or below: 33% (2/6)

<u>Question</u>	<u>Percentage that received a fully compliant score</u>
1. SNS coordinator and backup identified	93%
2. State planning leads identified	65%
3. Call down rosters for state planning leads updated	65%
4. Call down exercises of all SNS function rosters	76%
5. SNS functions integrated into State ICS structure	98%
6. Command structure established at RSS	89%

APPENDIX B- REVIEW OF AGGREGATE STATE TAR SCORES, 2006-2007

Section Three – Requesting SNS – Overall Section Average: 93%

Percent questions scoring 69 or below: 0%

<u>Question</u>	<u>Percentage that received a fully compliant score</u>
1. Signed MOU between CDC and State	98%
2. Plan to communicate with State officials	98%
3. Authorized individuals to request SNS	84%
4. Plan with initial request justification	98%
5. State resupply request procedures	84%
6. Local resupply request procedures	84%

Section Four – Tactical Communications – Overall Section Average: 86%

Percent questions scoring 69 or below: 17% (1/6)

<u>Question</u>	<u>Percentage that received a fully compliant score</u>
1. IT support call down lists updated	83%
2. IT support has job action sheet	95%
3. Communication pathways established	88%
4. <i>Communication networks tested</i>	52%
5. Redundant communication systems in place	91%
6. Designated leads trained in communication systems	76%

Section Five – Public Information and Communication – Overall Section Average: 81%

Percent questions scoring 69 or below: 67% (4/6)

<u>Question</u>	<u>Percentage that received a fully compliant score</u>
1. Public information personnel identified/trained	87%
2. Written communication plan developed	84%
3. <i>State developed dispensing messages</i>	63%
4. <i>State review plans and methods</i>	50%
5. <i>State review plans and materials</i>	57%
6. <i>State review plans for at-risk populations</i>	51%

Section Six – Security – Overall Section Average: 77%

Percent questions scoring 69 or below: 0%

<u>Question</u>	<u>Percentage that received a fully compliant score</u>
1. State-level SNS security coordinator trained	74%
2. Transportation security plans for material developed	80%
3. Transportation security plans for TARU developed	83%
4. Escort plans for materiel leaving RSS developed	76%

APPENDIX B- REVIEW OF AGGREGATE STATE TAR SCORES, 2006-2007

Section Seven – Receipt, Store, Stage – Overall Section Average: 83%

Percent questions scoring 69 or below: 59% (10/17)

<u>Question</u>	<u>Percentage that received a fully compliant score</u>
1. RSS strategy expedites materiel movement	80%
2. <i>RSS facilities validated</i>	67%
3. <i>MOAs in place for facilities</i>	57%
4. RSS managers/staff identified (total of 8 points) average number of points received: 6.93	
4 lowest scoring positions (primary): Safety, Shipping/Receiving, Pick Team, Quality Control	
Only three positions scoring higher than 86 for backup: RSS Manager, Security, Communications	
5 – 7: RSS, Safety, and Communications Manager trained	71%
8. <i>Inventory Manager trained</i>	67%
9. <i>Shipping/Receiving Manager trained</i>	65%
10. <i>Pick Team Manager trained</i>	61%
11. <i>Quality Control Manager trained</i>	61%
12. <i>Call down rosters for RSS manager/staff tested</i>	46%
13. <i>Just in time training developed</i>	54%
14. <i>Material handling equipment inventory documented</i>	69%
15. <i>Office equipment inventory documented</i>	65%
16. Authorized receipt personnel documented	93%
17. <i>Care/Feed plan for staff developed</i>	67%

Section Eight – Controlling Inventory – Overall Section Average: 82%

Percent questions scoring 69 or below: 17% (1/6)

<u>Question</u>	<u>Percentage that received a fully compliant score</u>
1. Inventory Management System in place	89%
2. Inventory staff identified and trained in IMS functions	76%
3. Procedure for chain of custody involving SNS materiel	89%
4. Chain of custody procedures for controlled substances	85%
5. SNS plan lists DEA registrant	94%
6. <i>State registered with DEA as distributor</i>	31%

Section Nine – Repackaging – Overall Section Average: 67%

Percent questions scoring 69 or below: 100% (4/4)

<u>Question</u>	<u>Percentage that received a fully compliant score</u>
1. <i>Manager and backup trained</i>	64%
2. <i>Plan/contracts developed</i>	67%

3. *Call down rosters tested* 44%

APPENDIX B- REVIEW OF AGGREGATE STATE TAR SCORES, 2006-2007

4. *Just in time training materials developed* 59%

Section Ten – Distribution – Overall Section Average: 75%

Percent questions scoring 69 or below: 25% (2/8)

<u>Question</u>	<u>Percentage that received a fully compliant score</u>
1. Manager and backup trained	76%
2. <i>Distribution strategy</i>	54%
3. Primary distribution method in place	83%
4. <i>Backup distribution method in place</i>	63%
5. Adequate resources available	73%
6. State provides guidance for material handling equipment	76%
7. Procedure for badging drivers and support personnel	78%
8. <i>Just in time training materials developed</i>	37%

Section Eleven – Dispensing Prophylaxis – Overall Section Average: 73%

Percent questions scoring 69 or below: 67% (6/9)

<u>Question</u>	<u>Percentage that received a fully compliant score</u>
1. State developed/disseminated guidance for dispensing	80%
2. State mandated/tracked volunteer registries	74%
3. <i>State demonstrate reviewed/feedback local plans</i>	59%
4. <i>State reviews plan for appropriate numbers of sites</i>	63%
5. <i>State reviews plan to ensure appropriate staffing</i>	46%
6. <i>State reviews/feedback to ensure alternate methods of dispensing</i>	43%
7. <i>State reviews plans for first responder prophylaxis</i>	57%
8. State has plans to prophylax first responders at state level	72%
9. <i>State monitors training at local level</i>	46%

Section Twelve – Treatment Center Coordination – Overall Section Average: 62%

Percent questions scoring 69 or below: 60% (3/5)

<u>Question</u>	<u>Percentage that received a fully compliant score</u>
1. Coordination between SNS and HRSA	85%
2. <i>Identified treatment center personnel authorized to request</i>	44%
3. Request procedures for treatment centers documented	80%
4. <i>Treatment centers trained on request procedures</i>	35%
5. <i>Treatment centers exercised on request procedures</i>	24%

Section Thirteen – Training, Exercise, and Evaluation – Overall Section Average: 80%

Percent questions scoring 69 or below: 17% (1/6)

APPENDIX B- REVIEW OF AGGREGATE STATE TAR SCORES, 2006-2007

<u>Question</u>	<u>Percentage that received a fully compliant score</u>
1. Personnel assigned to lead, plan, oversee training	100%
2. <i>SNS-specific training plan</i>	64%
3. SNS training plan implemented	73%
4. SNS-specific exercise plan developed	80%
5. SNS exercise plan implemented	80%
6. Exercises	
Total of 18 points available	Average number of points scored: 13.86

SECTION I-DEVELOPMENT OF STATE PLAN WITH SNS ELEMENTS

1.1 State SNS planning elements are incorporated into an up-to-date state all hazards plan; Plan is National **(page 7)**

1.2 State SNS planning elements are updated annually based on deficiencies revealed during DSNS TARs, state/local trainings **(pages 7-8)**

1.3 A multi-discipline planning/advisory group meets annually to review and update the SNS planning elements in the plan. **(page 8)**

1.4 The roles and responsibilities of state and local agencies and other organizations concerning SNS planning elements are documented. State coordination efforts should consider including related Emergency Support Function partners in their designated roles and responsibilities for emergency response. **(pages 8-9)**

1.5 Policies and procedures to support medical supplies management and distribution and mass prophylaxis operations are outlined in plan. **(page 9)**

1.6 Legal issues to support medical supplies management and distribution and/or mass prophylaxis operations are outlined (origin citations should be included) in plan. **(page 12)**

1.7 The state has addressed Technical Advisory Response Unit (TARU) pick-up/management in the plan. **(pages 10-11)**

SECTION II-MANAGEMENT OF THE STRATEGIC NATIONAL STOCKPILE

2.1 The state's SNS Coordinator and backup are identified and have point of contact (POC) information. **(page 13)**

2.2 At the state level, and dependent upon the placement of the activities in the state's NIMS compliant organizational structure. **(pages 13-14)**

2.3 Call down rosters for personnel identified in item 2.2 are current and updated at least quarterly. **(pages 14-15)**

2.4 State conducts and documents call down exercises of all personnel identified in item 2.2 to test response rates quarterly. **(page 15)**

2.5 SNS functions are integrated within state's Incident Command System (ICS) structure and are NIMS compliant. **(pages 15-16)**

2.6 The state has a plan to annually test and exercise notification and activation of volunteers below the state level positions identified in item 2.2. **(page 16)**

SECTION III-REQUESTING THE STRATEGIC NATIONAL STOCKPILE

- 3.1** Signed memorandum of understanding (MOU) between CDC and the state. **(page 18)**
- 3.2** Plan to communicate with the governor, and other key state officials, to discuss the incident and to determine when to request SNS materiel. **(pages 18-19)**
- 3.3** Person(s) authorized by the governor to request SNS materiel are identified in the plan with contact information. **(page 19)**
- 3.4** Plans and procedures contain initial request justification guidelines and procedures for state to request SNS materiel from CDC. **(pages 19-20)**
- 3.5** State plans contain procedures to request re-supply of SNS materiel from CDC. **(page 20)**
- 3.6** State plans contain the request procedures for locals to request SNS materiel from the state. **(page 20-21)**

SECTION IV-TACTICAL COMMUNICATIONS PLAN

- 4.1** Tactical communications and IT support call-down lists are reviewed and updated quarterly. **(page 23)**
- 4.2** Communications/ IT support has a job action sheet. **(page 23)**
- 4.3** Communication pathways are established between command and management locations and support agencies. **(pages 23-24)**
- 4.4** Communication networks (equipment /hardware) between command and management locations and support agencies are tested and exercised quarterly. **(pages 24-25)**
- 4.5** Redundant communications systems are in place and are tested quarterly to ensure communications remain available in the event primary communication systems are unavailable. **(page 25)**
- 4.6** Designated personnel (identified in item 2.2) are trained in the use of redundant communications equipment. **(pages 25-26)**

SECTION V-PUBLIC INFORMATION AND COMMUNICATION

- 5.1** Public Information and Communication (PIC) (primary and backup) have been identified and trained regarding responsibilities associated with a mass prophylaxis campaign. **(page 28)**

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5.2 Written communication plan includes messages, methods, and materials for use in a mass prophylaxis campaign or when medical supplies management and distribution efforts are required. **(pages 28-29)**

5.3 The state has developed mass prophylaxis campaign messages and provided guidance to the locals to ensure message consistency. **(page 29)**

5.4 The state reviews local plans and provides guidance to locals on methods to disseminate the messages indicated in item 5.3. **(page 30)**

5.5 The state reviews local plans and provides guidance to locals on developing materials to ensure consistent state-wide information. **(page 31)**

5.6 The state reviews local plans and provides guidance to locals on at-risk populations. **(pages 31-32)**

SECTION VI-SECURITY

6.1 The state level position (identified in item 2.2) that coordinates the overall security issues should be trained on the specific security requirements for medical supplies management and distribution operations. **(page 34)**

6.2 Security plans for transportation of medical materiel have been developed. **(pages 34-35)**

6.3 Security plans for transporting TARU from the airport to the receive, stage, and store (RSS) site and/or health/state EOC has been developed. **(page 35)**

6.4 Procedures are in place to provide badges/identification for all personnel responding to a public health event involving medical materiel and resources. **(pages 35-36)**

6.5 RSS site-specific security plans have been developed. **(page 36)**

6.6 Standardized security planning guidance and checklists have been developed and distributed to local health departments. **(pages 36-37)**

SECTION VII-RECEIVE, STAGE AND STORE

7.1 The state's RSS strategy expedites the movement of materiel to the sites designated in the state's plan. **(page 39)**

7.2 RSS facilities reviewed and validated by CDC's DSNS program services consultant using the RSS site survey tool. **(pages 39-40)**

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7.3 MOAs are in place for reviewed and validated RSS sites. **(page 40)**

7.4 The following RSS managers/staff have been identified with backup and POC information for each RSS facility identified. **(page 41)**

7.5 RSS leaders/managers and back-ups have job action sheets and have been trained in RSS Operations. **(pages 41-42)**

7.6 Safety manager/leader and back-ups have job action sheet and have been trained in their RSS. **(page 42)**

7.7 Communications/IT support and backups have job action sheet and have been trained in their RSS function. **(pages 42-43)**

7.8 Inventory manager/leader and backups have job action sheets and have been trained in their RSS function. **(pages 43-44)**

7.9 Shipping/receiving manager/leader and backups have job action sheet and have been trained in their RSS function. **(page 44)**

7.10 Pick team manager/leaders and back-ups have job action sheet and have been trained in their RSS function. **(pages 44-45)**

7.11 Quality control managers/leaders and back-ups have job action sheet and have been trained in their RSS function. **(pages 45-46)**

7.12 Call down rosters for 24/7 operations for all RSS managers and staff/volunteers are reviewed for accuracy and tested at least quarterly. **(page 46)**

7.13 Just-in-time (JIT) training materials have been developed for each of the RSS functions to familiarize personnel working within those functions. **(page 47)**

7.14 An inventory of material handling equipment for each RSS site should be documented along with a list of materials/supplies that need to be procured and/or delivered at the time of event. **(pages 47-48)**

7.15 An inventory of office equipment for each RSS site should be documented along with a list of materials/supplies that will need to be delivered and/or procured at time of event. **(page 48)**

7.16 The state plan lists individuals who are authorized to sign for SNS materiel. **(pages 48-49)**

7.17 The state plan addresses staff/volunteer management (for example, work breaks, shift schedules, meals/snacks, lodging, family care, etc.). **(page 49)**

SECTION VIII-CONTROLLING INVENTORY

8.1 Plan for inventory management system (IMS) in place with backup. **(page 51)**

8.2 All inventory staff is trained in IMS functions. **(pages 51-52)**

8.3 Chain of custody procedures are outlined in plan including the ability to track pharmaceutical lot numbers. **(page 52)**

8.4 The state plan lists Drug Enforcement Administration (DEA) Registrants to receive materiel from DSNS requiring DEA Form 222. **(pages 52-53)**

8.5 The procedure for chain of custody involving controlled substances received from DSNS is outlined in plan. **(page 53)**

8.6 The state has registered with the DEA as a distributor. **(page 54)**

SECTION IX-REPACKAGING

9.1 Repackaging manager and back-up have job action sheets and have been trained in their function. **(page 56)**

9.2 Repackaging plan or contingent contracts have been developed. **(pages 56-57)**

9.3 JIT training materials have been developed for the repackaging function. **(page 57)**

SECTION X-DISTRIBUTION

10.1 Distribution manager and backup(s) have a job action sheet and have been trained in their function. **(page 59)**

10.2 Plan includes distribution strategy for delivery of medical materiel (such as delivery locations, routes, delivery schedule/frequency, fueling, repair, recovery, etc.). **(pages 59-60)**

10.3 Primary agency/organization has been assigned to distribute medical materiel and a written agreement is in place. **(page 60)**

10.4 Backup agency/organization has been assigned to distribute medical materiel and a written agreement is in place. **(page 61)**

10.5 Resource needs have been identified and include the necessary number and type of vehicles, drivers and support personnel. **(pages 61-62)**

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10.6 The state provides guidance for appropriate material handling equipment (MHE) for sites that are designated to receive materiel (off-loading and loading as needed such as pallet jacks, hand carts/dollies, and forklifts). **(page 62)**

10.7 JIT training materials have been developed for the distribution function such as chain of custody protocols, routing information, security/communication procedures, appropriate use of MHE, and loading and off-loading of materiel. **(pages 62-63)**

SECTION XI-DISPENSING PROPHYLAXIS

11.1 The state has developed and disseminated to their local areas specific guidelines and templates for dispensing/POD management. **(page 65)**

11.2 The state coordinated the development of volunteer registries and tracks registration at the local level or provided volunteer registry development and tracking at the state level. **(pages 65-66)**

11.3 The state can demonstrate that they have reviewed and provided annual feedback for all local and/or regional dispensing plans in the state. **(page 66)**

11.4 The state reviews local plans for appropriate numbers of dispensing sites/PODs to cover each jurisdiction's population and has provided feedback to improve the jurisdiction's coverage. **(page 67)**

11.5 The state reviews local plans to ensure adequate staffing (paid staff plus volunteers) for the identified dispensing sites/PODs and has provided feedback. **(pages 67-68)**

11.6 The state reviews and provides feedback on local plans to ensure alternate methods of dispensing are being developed to augment POD shortages and supplement the POD system. **(page 68)**

11.7 The state reviews local plans to ensure procedures are in place to provide prophylaxis to local public health responders, local first responders, and other local critical infrastructure staff. **(pages 68-69)**

11.8 The state has plans to provide prophylaxis to state-level public health responders. **(page 69)**

11.9 The state monitors local jurisdictions to ensure that yearly dispensing/POD training occurs or directly serves as the primary purpose of dispensing/POD training to the local jurisdictions. **(page 70)**

SECTION XII-HOSPITALS AND ALTERNATE CARE FACILITIES COORDINATION

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12.1 Coordination exists between the SNS coordinator and hospital preparedness coordinator to inform hospitals and alternate care facilities on how to procure emergency medical materiel. (page 72)

12.2 Persons authorized to request emergency medical materiel on behalf of the hospitals and alternate care facilities have been identified and documented. Contact information is updated quarterly. (page 72)

12.3 Procedures are documented in the state plan for hospitals and alternate care facilities to request emergency medical materiel. (page 73)

12.4 Hospitals and alternate care facilities are trained on the emergency medical materiel request procedures. (page 73)

12.5 Hospitals and alternate care facilities request procedures have been exercised. (page 74)

SECTION XIII: TRAINING, EXERCISE, AND EVALUATION

13.1 Personnel have been assigned to lead, plan, and oversee SNS related training, exercise, and evaluation. (page 76)

13.2 The state has a training plan that incorporates mass prophylaxis, medical supplies management and distribution, and other SNS-specific topics to include course objectives, schedule, and targeted audience for each (to include volunteers). (pages 76-77)

13.3 Training plan components that are specific to mass prophylaxis and/or medical supplies management and distribution is implemented. (page 77)

13.4 The state has an exercise plan developed in accordance with the HSEEP guidance that allows medical supplies management and distribution and/or mass prophylaxis plans to be tested and evaluated. (page 77)

13.5 Exercise plan components that are specific to mass prophylaxis and/or medical supplies management and distribution. (page 78)

13.6 Listing of training, exercises, after action reporting, and corrective action planning. (pages 78-79)