ESF 8 (Public Health and Medical Services) Strategic Plan

Pennsylvania Department of Health
Bureau of Emergency Preparedness and Response

February 2024

pennsylvania
DEPARTMENT OF HEALTH

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Acronyms

AAR – After-Action Report
AFN – Access and Functional Needs
APHL – Association of Public Health Laboratories
ASPR – Administration for Strategic Preparedness and Response
ASTHO – Association of State and Territorial Health Officials
CDC - Centers for Disease Control and Prevention
CERT – Community Emergency Response Team
COOP – Continuity of Operations Plan
CRCC – Commonwealth Response and Coordination Center
DOC – Department Operations Center
EEI – Essential Elements of Information
EMS – Emergency Medical Services
EOP – Emergency Operations Plan
ERHMS – Emergency Responder Health Monitoring and Surveillance
ESF - Emergency Support Function
ESF 1 – Emergency Support Function 1 - Transportation
ESF 6 – Emergency Support Function 6 – Mass Care, Emergency Assistance, Housing, and Human Services
ESF 8 – Emergency Support Function 8 – Public Health and Medical Services
FAST – Functional Assessment Service Team
FEMA – Federal Emergency Management Agency
HCC - Healthcare Coalition
HERT – Health Emergency Response Team
HFQE – Health Facility Quality Examiner
HHS – U.S. Health and Human Services
HIMS – Health Incident Management System (Juvare, 2023)
HVA – Hazard Vulnerability Analysis
IDA & DD – Intellectual Disability, Autism & Developmental Disabilities
IMT – Incident Management Team
IPP – Integrated Preparedness Plan
LHD – Local Health Department
MARC – Multi-Agency Resource Center
MCM – Medical Countermeasures
MOU – Memoranda of Understanding
MRC – Medical Reserve Corps
NEDSS – National Electronic Disease Surveillance System
NPI – Non-pharmaceutical Interventions
PA DCNR – Pennsylvania Department of Conservation and Natural Resources
PA DDAP – Pennsylvania Department of Drug and Alcohol Programs
PA DEP – Pennsylvania Department of Environmental Protection
PA DGS – Pennsylvania Department of General Services
PA DHS – Pennsylvania Department of Human Services

PA DOH – Pennsylvania Department of Health
PA DOH BCHS – Pennsylvania Department of Health, Bureau of Community Health Systems
PA DOH BEMS – Pennsylvania Department of Health, Bureau of Emergency Medical Services
PA DOH BEPR – Pennsylvania Department of Health, Bureau of Emergency Preparedness and Response
PA DOH BOE – Pennsylvania Department of Health, Bureau of Epidemiology
PA DOH BOL – Pennsylvania Department of Health, Bureau of Laboratories
PA DOH QA – Pennsylvania Department of Health, Quality Assurance Deputate
PA OHS – Pennsylvania Office of Homeland Security
PANG – Pennsylvania Air National Guard
PDA – Pennsylvania Department of Agriculture
PEMA – Pennsylvania Emergency Management Agency
PGC – Pennsylvania Game Commission
PHMC – Public Health Management Corporation
PHRAT – Public Health Risk Assessment Tool
PIO – Public Information Officer
POD – Point of Dispensing
PPE – Personal Protective Equipment
PTSD – Post-Traumatic Stress Disorder
SACP – Statewide Advisory Committee on Preparedness
SAMHSA – Substance Abuse and Mental Health Services Administration
SMAT – State Medical Assistance Team
THIRA – Threat and Hazard Identification and Risk Assessment
TRAIN PA – Pennsylvania's Learning Management System
WebEOC – Virtual Emergency Operations Center platform

A Message from PA DOH Leadership

The Pennsylvania Department of Health (PA DOH) is proud to share Pennsylvania's Emergency Support Function (ESF) 8 Public Health and Medical Services (ESF 8) Strategic Plan.

This plan will help ensure that public health is protected during emergencies, as well as in the prevention and response phases of disasters that threaten the Commonwealth of Pennsylvania.

I would like to thank the team of individuals, composed of state employees, hospital system preparedness coordinators, contractors, emergency medical services (EMS) professionals, local health department (LHD) emergency preparedness staff, leaders in the access and functional needs community, and many more for their work on this plan.

This plan offers strategic direction for Pennsylvania's ESF 8, Public Health and Medical Services, response system through 2028. The Strategic Plan considers our evolving understanding of public health emergency preparedness in terms of capabilities; the important role of preparedness programs in critical infrastructure development and healthcare coalitions in the integration of public health and healthcare systems; and the demonstration of continuous learning and quality improvement that is characteristic of the preparedness cycle of planning, training, and exercises.

Pennsylvania has made great strides in emergency preparedness and response since the early 2000s, and as we continue to prepare for the latest threats, yet we have work to do. We have built systems and relationships and responded to incidents ranging from natural disasters such as flooding and ice storms to Zika, Ebola, Mpox, and of course, COVID-19. Our efforts to communicate, collaborate, and coordinate have been strengthened, and we will continue to improve upon them.

We continue to recognize the varied threats and hazards that could affect Pennsylvanians, and we are committed to efforts that will strategically leverage resources and produce the greatest public health impact. Moreover, our work focuses on those who are most at-risk in affected communities, including supporting individuals with access and functional needs.

Thank you all for your dedication and support in this important work. We look forward to working together to build more resilient communities in Pennsylvania.

Debra L. Bogen MD

Debra L. Bogen, MD, FAAP
Acting Secretary of Health
Commonwealth of Pennsylvania

Acknowledgements

From March 6, 2023, through December 16, 2023, dedicated members of the ESF 8 community, comprised of public health, local health departments (LHDs) , emergency preparedness staff, hospital emergency preparedness coordinators, EMS, state agencies, individuals representing the access and functional needs (AFN) community, and others met and worked in domains to draft a strategic plan to guide the next five years. The diverse planning committee worked tirelessly and thoroughly to develop this document to serve as roadmap that all ESF 8 partners could use as part of their future planning efforts. The nearly 50 people involved in the ESF 8 Strategic Plan team convened in person, virtually, and via email to take the lessons learned from recent public health responses, including COVID-19, and chart a path forward in public health preparedness.

Executive Summary

The 2024-2028 ESF 8 Strategic Plan aims to serve as a cohesive, coordinated document that reflects how PA DOH, and the many public health and healthcare sector partners it works with on a regular basis, will collaborate, communicate, and innovate to move public health forward in the next five years. It is essential that public health agencies work closely with all partners, including behavioral health, environmental health, emergency management, health care providers, and many more entities.

This document is divided into six domains which align with the Centers for Disease Control and Prevention (CDC) Public Health Emergency Preparedness and Response domains of Community Resilience, Incident Management, Information Management, Medical Countermeasures and Mitigation (MCM), Surge Management, and Biosurveillance. While this document is not solely for the purposes of advancing the Public Health Emergency Preparedness program, these six domains represent the high-level delineation for the proposed activities.

Within each domain, the workgroups identified the basics of what projects lie in each area and a problem statement. Goals were identified, with the goals serving as the overarching "ideal state" for that domain to achieve over the 5-year period. Each of these goals reflects a desire to increase our overall preparedness and response posture for events that impact the public health and medical community. Each domain has multiple objectives which in turn have strategies to achieve them. Each domain has benchmarks to measure progress towards meeting the objectives.

Additional sections include a list of current assets and assets needed to support the domain work, existing resources that will be helpful as part of this process, and the lead and assisting agencies or program areas responsible for carrying out the work.

This document aims to be a guidebook for how the PA DOH will work across sectors and with varied partners to move public health preparedness and response activities ahead in a post-COVID-19 world.

Domains At-A-Glance

Capability 1: Community Resilience

Goal:
- Empower resilience throughout the whole community by means of the diverse development, preparedness and planning for disasters across the five mission areas of prevention, protection, mitigation, response, and recovery.

Objectives:

- By 2025, PA DOH BEPR will collaborate with PA DEP, PA OHS, and local, regional, and state ESF 8 partners to develop and test plans, procedures, and systems that enable healthcare facilities to withstand and recover quickly from an incident or disaster.
- By 2026, PA DOH BEPR will collaborate with local, regional, and other state partners to establish and communicate a tiered, all-hazards, whole-community and client-centered training and exercise program.
- By 2026, PA DOH BEPR and the HCCs will support and engage local, regional, and state partners in outreach to sustain, build upon, and develop new partnerships within Pennsylvania's HCCs.
- By 2027, the ESF 8 community will engage the Individuals with an Intellectual Disability, Autism, and IDA & DD and Access and Functional Needs (AFN) communities to become more resilient and better prepared for disasters. It is essential that emergency preparedness is inclusive of all populations, including the most vulnerable communities.
- By 2026, state agencies will support the sustainment and development of disaster response teams on the local, regional, and state level to assist those affected by disasters.

Capability 2: Incident Management

Goals:
- Improve systems and whole community connections to aid in the mitigation, preparedness, response, and recovery efforts from a disaster or public health emergency.
- Enhance whole community resilience and response through strategic partnerships, collaboration, and cooperation among various organizations.

Objectives:
- By 2024, PA DOH BEPR will develop information sharing and coordination protocols to provide situational awareness to the entire ESF 8 community during active incidents.
- By 2025, the ESF 8 community will develop processes to deploy assets, including personnel, supplies, and equipment equitably, efficiently, and safely in response to incidents. Safe deployment of state controlled/requested assets will include using Emergency Responder Health Monitoring and Surveillance (ERHMS), debriefings, and other ongoing monitoring and surveillance efforts to ensure health and safety for all individuals, including leadership and IMT-type staff, to incidents with a significant risk level (Level 1 - Daily Operations (including management of incidents by on-call personnel), Level 2 - Task Force Activation, Level 3 - Partial DOC Activation, Level 4 - Full DOC activation).
- By 2024, PA DOH BEPR and PHMC will expand the use of the PA DOH's HIMS for information gathering, situational awareness, asset coordination and inventory, data collection and volunteer management. (See Domain 3 Objective 1)

- By 2024, PA DOH, LHDs, PHMC, HCCs, etc. will foster whole community involvement in the mitigation, preparedness, response, and recovery efforts from a disaster or public health emergency.

Capability 3: Information Management

Goals:
- Ensure pre-incident preparedness information and relevant incident related information are available to all partners before, during, and after an incident to keep all partners informed.
- Develop and operationalize secure, sustainable, and interoperable data systems to ensure incident related data sharing can support better health outcomes.
- Develop and implement a process to share incident-related data and information to the public in a transparent, clear, honest, equitable, reliable manner, and in a way that drives appropriate public action.

Objectives:
- By June 2025, PA DOH BEPR will fully implement all modules of the new HIMS across the ESF 8 sector (see Domain 2, Objective 3).
- By June 2025, PA DOH will develop protocols and systems to standardize incident related data collection, with a focus on public health data (e.g., case data, vaccine data, etc.)
- By June 2026, PA DOH, working with partners, will develop data collection and sharing templates in a resource library to capture information for the public and other response partners for common event types (e.g., floods, power outages, etc.). This will include templates that can be used in online systems (i.e., HIMS) and offline systems.
- Beginning immediately, PA DOH will work with all partners, including communications teams, to develop processes, procedures, and templates to expedite messaging with accurate and actionable information as a result of an incident.
- By June 30, 2025, all ESF 8 partners should review and revise facility, regional, and statewide incident response plans, with a focus on incorporating lessons learned from major recent responses (e.g., COVID-19, East Palestine Train Derailment) and implementing new practices for EEI and data sharing.

Capability 4: Medical Countermeasures (MCM) and Mitigation

Goals:
- Ensure the Commonwealth is adequately trained and prepared to provide MCMs to impacted populations, including having plans, processes and systems that track countermeasures and emphasize equity in distribution and access.
- Ensure that the Commonwealth has the capacity to implement NPIs in impacted communities during a public health emergency.

Objectives:
- By 2026, key partners will collaborate and coordinate to ensure the process is in place to receive, store, and equitably distribute medical/pharmaceutical products that prevent, mitigate, and/or treat the effects of exposures to hazardous substances and infectious diseases.
- By 2025, PA DOH BEPR, in conjunction with ESF 8 partners, will use lessons learned from the COVID-19 pandemic to develop a medical distribution plan incorporating new strategies and new public health emergency sites to assist with the dispensing of MCM.
- By 2025, PA DOH will work to ensure that information regarding public health emergency sites is available to partners. In addition, PA DOH BEPR will develop a list of documentation for PA DOH BEPR and LHDs to use to ensure a common operating picture around these locations. HIMS, the current Healthcare Information System as of 2023, will be used to track this information.
- Beginning in 2024, the ESF 8 community will identify effective, evidence-based, and practical NPIs (such as washing hands, staying home when sick, social distancing, etc.) and communicate them to the public in a targeted, effective manner.
- By 2025, the ESF 8 community will develop public-private partnerships to ensure the ability to provide healthcare operations (including administration of vaccines, testing, training, and deployment of assets) in the Commonwealth during an emergency. In addition, these partnerships will assist in the ability to procure/secure PPE and other supplies, despite potential supply chain concerns, to ensure sustainable supply.

Capability 5: Surge Management

Goals:
- Develop pathways to ensure shared situational awareness around events that may require surge capacity within the ESF 8 community.
- Work with other ESFs to ensure all partners are aware of instances of surge capacity, the needs that exist, and abilities to support each other.
- Ensure that all ESF 8 community members prioritize surge management planning, with an emphasis on response capabilities.

Objectives:
- The ESF 8 community will ensure that lifesaving and sustaining services are adequate to meet the needs of impacted areas across the Commonwealth, regardless of social determinants of health, differences in socioeconomic status, individuals with limited economic mobility, and varying geographic locations.
- By 2025, PA DOH BEPR will increase exposure and awareness to other partners about the important role the ESF 8 community plays related to surge capacity and surge management.
- By 2026, the ESF 8 community will establish increased collaboration and communication with other ESFs, including ESF 1 and ESF 6.

- By 2027, PA DOH BEPR, PHMC, and the HCCs will develop a process for surge management that considers staffed beds, equipment, just-in-time training, etc., to determine the true capability of a health care provider to respond to an incident.
- PA DOH, PHMC, HCCs, and other partners will prepare for sustainment of surge capacity operations and transition to normal operations through continuity of operations (COOP) planning.

Capability 6: Biosurveillance

Goals:
- Ensure the ability to monitor, detect, and protect Pennsylvanians from emerging infectious diseases and from threats to the safety and security of the food and water supplies.
- Ensure the ability to identify and address the impact of climate change and a changing environment on human health and safety.
- Integrate an interconnected health perspective into PA DOH operations by looking at human, animal, and environmental health preparedness efforts collectively and collaboratively.
- Enhance data frameworks to ensure data are available to support the ESF 8 community's response efforts, with the ultimate goal to protect and improve the health of Pennsylvanians.

Objectives:
- By 2026, the ESF 8 community, led by PA DOH, will identify and equitably address the impact of environmental hazards, including climate change and a changing environment, on human health and safety.
- By 2026, the ESF 8 community will use an interconnected health perspective looking at human physical, behavioral, and emotional, animal health, and environmental health to strengthen its emergency planning, training, surveillance, epidemiology, and laboratory capacity, and work toward prevention and improved health outcomes.
- By 2026, the ESF 8 community will work with partners in other areas, including other state agencies to monitor, detect, and protect Pennsylvanians from emerging infectious diseases and threats to the safety and security of our environment, including our food and water supply.
- By 2027, local, regional, state, and commercial labs, will collaborate to use the latest science and advanced technology to test for hazards and contaminants and expand surge capacity.
- By 2025 the ESF 8 community, led by PA DOH, will ensure that biosurveillance information related to environmental health threats is broken into actionable, easily understood steps for the public and ESF 8 partners to take the right action at the right time.
- By 2026, the public health agencies comprising the ESF 8 community will enhance the collection, analysis, and dissemination of public health data to support evidence-based decision making to respond to existing and emerging health threats, with the goal of protecting and improving the health of Pennsylvanians. (See Domain 3 Objective 2)

Methodology of Plan Development

The ESF 8 strategic planning team that led the development of this document was comprised of a broad range of internal and external partners. Internal partners included representatives from PA DOH programs including BEPR, Bureau of EMS (PA DOH BEMS), PA DOH BOE, PA DOH Bureau of Community Health Systems (PA DOH BCHS) and PA DOH Bureau of Laboratories (PA DOH BOL). The planning team also included individuals from numerous state agencies that are close partners in public health preparedness work (DHS, DEP, DDAP, PEMA), LHD partners, the Department's current emergency preparedness contractor, HCC members, and organizations representing the AFN community. The collective of these partners are referred to as "partners" throughout this document. This large group met for two in person meetings and two virtual meetings to discuss and develop the framework of this document.

The first meeting focused on finalizing the domains, which had been discussed via email previously. The first in-person meeting, held at the Spring PA DOH BEPR Statewide Advisory Committee on Preparedness (SACP) meeting, broke people into domain groups to develop a problem statement. Once the problem statement was finalized, the groups set goal(s) for their domain that would be the ideal future state conclusion if all work is accomplished.

From there, each domain group established objectives and strategies that would help achieve the established goals. Because of the importance of these, the objectives and strategies were reviewed and discussed with the entire planning group. In addition, a virtual summer meeting allowed for additional feedback and comments on the objectives and strategies.

The next step was to establish benchmarks and outcomes for each domain that would represent midpoints and work completion for accomplishing the strategies.

The domain groups then worked to identify what assets currently exist for this work, what assets will be needed in the future, and what resources are available that will help move the work forward.

The final step of the domain work was to determine the lead agency or bureau to lead implementation of the work, as well as assisting agencies and key partners to accomplish the plan.

Each member of the planning group then had the opportunity to review a first draft of the plan, provide revisions, comments, and additions and then to subsequently review a final draft before the document was finalized.

Domain 1

Community Resilience (mitigating, preparing for, and recovering from emergencies)

Problem Statement

Disasters, deliberate attacks, outbreaks, and substance use impacts are affecting Pennsylvanians with increasing frequency and severity, often resulting in injuries, illnesses, diseases, death, and displacement from their normal way of life. These events have significant repercussions for the ESF 8 community, affecting the ability of this community to provide services to the public. Historically, individuals with AFNs are disproportionately impacted by these events, further contributing to a lack of access, opportunities, and resources. In addition, there can be staggering and lengthy financial costs in responding to and recovering from these disasters and emergencies. Individuals are increasingly isolated, making people feel disconnected, intensifying the behavioral health crisis, causing health misinformation to spread at a never-before-seen speed and scale, and making it more difficult to address unmet needs. Adverse events challenge Pennsylvania's ability to be resilient and self-sustaining. This limits success in key areas of mitigation, preparedness, response, and recovery, and affects the critical infrastructure that secures the public's health and well-being.

Goal

Empower resilience throughout the whole community by means of the diverse development, preparedness and planning for disasters across the five mission areas of prevention, protection, mitigation, response, and recovery.

Objective 1

By 2025, PA DOH BEPR will collaborate with PA DEP, PA OHS, and local, regional, and state ESF 8 partners to develop and test plans, procedures, and systems that enable healthcare facilities to withstand and recover quickly from an incident or disaster.

- **Strategy 1:** Participate in existing, multi-disciplinary planning committees (such as Pennsylvania Emergency Management Agency (PEMA)-led initiatives, among others) to work closely on potential critical infrastructure interruptions, including electricity, gas, water, wastewater, etc.
- **Strategy 2:** Support access to training, education, and exercises to ESF 8 and other partner organizations.
  - *Strategy 2A*: Risk Assessments: Support the use of risk assessment tools to gain awareness of significant risks and to use the results to inform preparedness activities, exercises, etc. Risk assessment tools used may include Hazard Vulnerability Analysis (HVA) at the facility level, Public Health Risk Assessment Tool (PHRAT) at the public health level, coalition/state ESF 8 HVAs, and Business Continuity/Business Recovery concepts such as Business Impact Analysis as available tools to evaluate gaps in resiliency in critical infrastructure.

- o *Strategy 2B*: Ensure that risk assessment information is shared with ESF 8 and emergency management partners to inform actions.
  - o *Strategy 2C*: Support access to training, education, and exercises in the areas of planning for facility resiliency and recovery of critical infrastructure.
  - o *Strategy 2D*: Support access to lessons learned, and improvement planning in the areas of plan/procedure writing and documentation regarding resiliency and critical infrastructure.
  - o *Strategy 2E:* Develop a peer review process to promote and disseminate best practices.
- Strategy 3: Convene a diverse ESF 8 workgroup to review and ensure various plans (statewide, coalition, regional/county, and local) are aligned and complementary and ensure that plans are being shared with all partners to assist in collaboration efforts.
  - o *Strategy 3A*: Use shared plans to promote exercise development with partners, including the broad ESF 8 community in exercises as feasible.
- Strategy 4: Collaborate with ESF 8 partners to identify ESF 8 facilities (such as dialysis centers, certain types of LTCFS, etc. with low/no requirement for planning around resiliency and recovery – educate those facilities on emergency management.
- Strategy 5: Increase active collaboration between preparedness/response personnel and regulatory personnel.
- Strategy 6: Continue partnerships with PA DEP, hospitals, etc. to reduce recovery times by using sustainable frameworks.

Benchmarks

- By December 31, 2024, a diverse ESF 8 work group will be created, or repurposed if a related work group exists, to serve as the guiding committee for objectives and strategies related to training, education, and exercises. This will include:
  - o Development of a comprehensive goals statement
  - o Structure of subgroups (as needed)
  - o Schedule of meetings
  - o Project plan for the duration of the ESF 8 Strategic Plan (2024-2028)
- By December 31, 2025, the ESF 8 work group will work to improve information sharing and collaboration regarding lessons learned and best practices in healthcare resiliency, as well as a mechanism for sharing that information with healthcare entities. This will include:
  - o Collaborative sessions between preparedness/response and surveyor personnel to identify trends and gaps in preparedness/response planning at facilities.
  - o Collaborative sessions between preparedness/response and surveyor personnel to ensure awareness of best practices and other resources such as HCCs and training/education opportunities.

- Collaborative sessions between preparedness/response and surveyor personnel to ensure sharing of identified gaps and potential solutions, as well as best practices and resources for preparedness to facility representatives.
- Increased visibility re: risk assessments.
- Use of sustainable frameworks in planning initiatives (such as microgrids and other initiatives).
- Development of a peer-review process to determine best practices vs. lessons learned in healthcare emergency preparedness and resilience.

Outcomes

- The ESF 8 Community will have increased awareness of training, education, and exercises through information sharing initiated by the work group.
- The ESF 8 Community will have increased awareness of lessons learned and best practices in healthcare emergency preparedness/resilience.
- By December 31, 2025, solutions and actions will be identified to address response and recovery operations for critical infrastructure.
- By December 31, 2027, 50% of all facilities with emergency preparedness planning requirements will have received education and/or finalized plans to address threats identified in their HVA.

Lead (agencies)

PA DOH (BEPR, with support from LHDO, BEMS, QA)

Assisting Agencies

PA DEP
PA OHS
PEMA
LHDs
PA DOH BEMS[1]

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[1] The PA DOH BEMS is responsible for the statewide development and coordination of a comprehensive system to prevent and reduce premature death and disability. This includes licensing EMS agencies and working with the 13 EMS Councils across Pennsylvania. In most cases where PA DOH BEMS is listed as an assisting agency; it is assumed their work will also involve working closely with the Councils.

PHMC/HCCs[2]
County EMA offices
PA DOH QA
Rural Health Redesign Center

Objective 2
By 2026, PA DOH BEPR will collaborate with local, regional, and other state partners to establish and communicate a tiered, all-hazards, whole-community and client-centered training and exercise program.

- o **Strategy 1:** Convene annual Integrated Preparedness Plan (IPP) meetings comprised of ESF 8 representatives from various agencies and organizations with the goal of synthesizing applicable risk assessments (e.g., – PHRAT, Coalition/State HVA, PEMA's Threat and Hazard Identification and Risk Assessment (THIRA)) to guide training and exercise opportunities for the ESF 8 community.
- o **Strategy 2:** PA DOH will share its new training and exercise program with all partners, communicate the changes and new parts, and encourage local and regional partners to develop and lead training and exercising that best meet their needs.
- o **Strategy 3:** PA DOH will upload all trainings to TRAIN PA, as applicable, amplify messaging about training and exercise opportunities hosted at the local, regional/coalition level, or by other partners, and encourage sharing these opportunities on the TRAIN PA platform.
- o **Strategy 4:** Ensure information about trainings and exercises is shared widely among ESF 8 partners at the local, county, coalition, and state levels to promote cross participation and support of training and exercise participation to the extent feasible.

Benchmarks
- PA DOH BEPR will host a minimum of one IPP meeting each year to use risk assessments and other documents to guide training and exercise opportunities for the ESF 8 community.
- IPP Meeting cadences will be set in advance and publicized early to representatives.
- The makeup of those invited to IPP meetings will include improved diversity and representation.

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[2] Public Health Management Corporation (PHMC) serves as the PA DOH BEPR emergency preparedness contractor, as of 2023. Among other responsibilities, they lead the six regional health care coalitions (HCCs). The HCCs are comprised of a multitude of partners, include acute care hospitals, long-term care facilities, home health, EMS, emergency management, and more. As they serve as assisting agencies, it is understood that they will be working with at least some parts, if not all the HCCs to achieve these objectives and strategies. In addition, should the contract change in the future, the new emergency preparedness contractor would be assumed to carry out the same roles.

- By December 31, 2024, PA DOH will clearly communicate its new training and exercise program to partners.
- Beginning in 2025, LHDs, healthcare partners, etc. will use the state training and exercise program to inform their activities, helping to increase collaboration.
- Improved information sharing:
  - By June 30, 2025, PA DOH will work with all ESF 8 partners to ensure they know how to use TRAIN PA, how to sign up, how courses can be uploaded, and provide general assistance to improve usability of TRAIN PA for all partners.
  - By December 31, 2025, and as new opportunities become available, public health-related and associated training opportunities (as applicable) will be uploaded to TRAIN PA to enhance ease of use.
  - PA DOH will work to improve information sharing re: exercises and learning opportunities.
  - Improved language in advertising (such as the creations and use of learning tracks or another similar concept).

Outcomes
- By December 31, 2024, the new training and exercise program for PA DOH will be shared with the IPP workgroup.
- By March 30, 2025, PA DOH BEPR will develop a process to ensure that all ESF 8 partners have a pathway to share training information with other ESF 8 partners.
- By December 31, 2025, PA DOH BEPR will develop a process to ensure public health-related/associated training opportunities are entered into TRAIN PA.
- Increased awareness and diversified participation in educational opportunities and exercise throughout the Commonwealth.

Lead (agencies)
PA DOH (BEPR, LHDO, BEMS)

Assisting Agencies
LHDs
PHMC
PEMA
PA DEP
PA DHS
Pennsylvania Department of Drug and Alcohol Programs (PA DDAP)

Objective 3

By 2026, PA DOH BEPR and the HCCs will support and engage local, regional, and state partners in outreach to sustain, build upon, and develop new partnerships within Pennsylvania's HCCs.

- **Strategy 1:** Identify opportunities to increase participation and retention of active participants within HCCs.
- **Strategy 2:** Continue targeted outreach to engage new HCC partners in active participation in Coalition activities.
- **Strategy 3:** Enhance a Common Operating picture among various bureaus and offices in PA DOH that contributes to planning and response. This will be done via evaluation, training, and, where possible, streamlining and determining best methods of information sharing to align multiple divisions of PA DOH in information sharing, common operating picture, and aligned incident preplanning, response, and recovery.
- **Strategy 4:** Provide training to PA DOH staff, including PA DOH BOE, on the concept of Regional Medical Operations Coordination Centers (RMOCCs) and State Medical Operations Coordination Centers (SMOCCs) and how these centers fit into the public health response.

Benchmarks

- Annually, collaboration will occur to maintain/increase the number of organizations signed onto the Coalition/Statewide Mutual Aid Agreement.
- Each year, efforts will occur to increase outreach activities/events among HCCs.
- By August 2024, PA DOH BEPR, working with partners, will ensure 100% of acute care facilities, 50% of skilled nursing facilities, and 50% of EMS agencies are fully trained and onboarded to the Health Incident Management System (HIMS)[3] suite of incident management tools.
  - Increased PA DOH internal common operating picture in exercises, events, and incidents.
  - Increased coordination among ESF 8 partners in exercises, events, and incidents.

Outcomes

- Increased output of diverse products from Coalitions to support all partners in ESF 8 coordination, preparedness, resiliency, response, and recovery.

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[3] PA DOH's Health Incident Management System (HIMS) is an online platform that provides incident response information sharing, data collection/dissemination, and patient tracking functions. As of the date of publication of this document, the HIMS platform is powered by the Juvare suite of healthcare modules, including eICS, EMResource, and EMTrack. However, any online platform that performs these functions in the future will fall under the HIMS title.

Lead (agencies)
PA DOH (BCHS, BEPR, BEMS, BOE, BOL)

Assisting Agencies
PHMC
EMS Councils

Objective 4
By 2027, the ESF 8 community will engage the Individuals with an Intellectual Disability, Autism, and IDA & DD and Access and Functional Needs (AFN) communities to become more resilient and better prepared for disasters. It is essential that emergency preparedness is inclusive of all populations, including the most vulnerable communities.

- **Strategy 1:** Identify and invite trusted agents for IDA & DD and AFN populations to exercise planning meetings.
- **Strategy 2:** Encourage and facilitate collaboration efforts among IDA & DD/AFN groups, health care providers, emergency management, first responders, and subject matter experts to collaborate about opportunities to assist the IDA & DD/AFN communities.
- **Strategy 3:** Develop a database of materials and resources to share with the IDA & DD/AFN community.
- **Strategy 4:** Develop a plan that increase trained Functional Assessment Service Team (FAST) membership throughout the commonwealth.
- **Strategy 5:** Provide trainings that address AFN populations to enhance the current capabilities of existing FASTs.
- **Strategy 6:** Develop protocols to ensure that public outreach and information sharing includes the IDA & DD/AFN community, to include messaging, dashboards, websites, hotlines, etc.

Benchmarks
- By December 31, 2024, PA DHS, PA DOH, and other ESF 8 partners will identify a list of statewide and regional representatives of the IDA & DD/AFN community to invite to exercise and planning meetings, with a goal of ensuring IDA & DD/AFN participation in planning and execution of exercises.
- By June 30, 2025, IDA & DD/AFN staff within the ESF 8 and ESF 6 (Mass Care, Emergency Assistance, Housing, and Human Services) community will determine the best way to collaborate with this community, whether through HCC, SACP, attending meetings of IDA & DD/AFN groups, etc.
- By May 31, 2026, PA DOH, PA DHS, and others will work to develop a database of materials and resources to share, which will be housed on a state agency website. This will help ensure increased and easier access to resources and references for the IDA & DD/AFN community related to emergency preparedness and response.

- By December 31, 2025, state agencies will develop a procedure document to ensure that public outreach and information sharing includes the IDA & DD/AFN community, to include multiple media types such as press releases, dashboards, websites, hotlines, etc.
- By December 31, 2026, there will be active participation by trusted representatives of the IDA & DD/AFN community in preparedness, resiliency, response, and recovery plans.

Outcomes
- By December 31, 2025, at least one agency/organization representing the IDA & DD/AFN community participate in each exercise and planning meeting.
- Increased participation of both trusted agents and individuals from the IDA & DD/AFN community in exercises through their attendance, injects related to the IDA & DD/AFN, and their involvement in the planning of exercises.
- By December 31, 2025, PA DOH will review communication methods, to include channels of communication, language use, etc., to ensure inclusive and accessible communication of information to the IDA & DD/AFN community.

Lead (agencies)
PA DHS

Assisting Agencies
PA DOH (BEMS, BEPR)
PHMC/HCCs
LHDs
PEMA

Objective 5
By 2026, state agencies will support the sustainment and development of disaster response teams on the local, regional, and state level to assist those affected by disasters.
- Strategy 1: Support existing local, regional, and state emergency response teams with retention and growth of volunteers via training, exercise, and promotional opportunities.
- Strategy 2: Recruit staff for an Incident Support Team within PA DOH with focus on Health Emergency Response Teams (HERT) that fill commonly needed functions (such as development of an Advance Team to provide scene surveillance, determine unmet needs, assess needed resources, and provide situational awareness to responding IMT; Registration Support Team; Point of Dispensing (POD) management; Community Resource Center support).
- Strategy 3: By 2026, PA DOH will work with legislative partners to develop strategies for supportive, streamlined liability coverage for local, regional, and state level volunteer practitioners.

Benchmarks

- By April 30, 2026, a supportive, streamlined liability coverage will be in place for local, regional, and state-level volunteer practitioners.
- By June 30, 2024, PA DOH will have 30 PA DOH Staff involved in an HERT.
- By December 31, 2024, a PA DOH HERT will exist to assist in a disaster.
- By December 31, 2025, four teams will be ready to support the ESF 8's response to an incident.
- By December 31, 2026, each team will have participated in at least two exercises as part of their team growth and development.

Outcomes

- The maintenance and/or creation of robust, internal (to PA DOH) and external (volunteer/publicly staffed) teams that will support the response to all-hazards events that need increased support to maintain ESF 8 response activities and increased operations.
- These teams will be covered by liability coverage to protect their status as volunteers.

Lead (agencies)

PA DOH

Assisting Agencies

LHDs
PHMC/HCCs

Domain 2

Incident Management (Coordinating an effective response)

Problem Statement

Disaster preparedness is a critical process that involves utilizing various tools, methods, and actions before, during, and after emergency incidents and public health crises to enhance mitigation, preparedness, response, recovery, and reconstruction efforts. Incident management focuses on having the resources (personnel, supplies, equipment), knowledge (training and exercises), and systems that will improve incident response capability. Building strong relationships with partners and engaging in collaborative training is essential to ensuring effective responses. As disasters occur, the deployment of resources such as personnel, supplies, and equipment must be equitable, efficient, and safe. Although it may not be possible to prevent disasters entirely, situational awareness through engagement with partners from diverse segments of society is a key foundation to prepare for collaboration during an incident. To further reduce the impacts of disasters, there is a need to improve the ability to gather and communicate information quickly. By strengthening disaster preparedness efforts, we can better protect people and their livelihoods during times of crisis.

Goals

- Improve systems and whole community connections to aid in the mitigation, preparedness, response, and recovery efforts from a disaster or public health emergency.
- Enhance whole community resilience and response through strategic partnerships, collaboration, and cooperation among various organizations.

Objective 1

By 2024, PA DOH BEPR will develop information sharing and coordination protocols to provide situational awareness to the entire ESF 8 community during active incidents.

- Strategy 1: By 2024, PA DOH BEPR will develop a **bidirectional** process to communicate and collaborate with other ESFs, including ESF 1 (Transportation) and ESF 6 (Mass Care), about events that may affect the ESF 8 community's ability to provide lifesaving and sustaining services to the public.
- Strategy 2: By 2026, ESF 8 will convene a work group with other ESFs to help maintain a whole community approach to disaster response.

Benchmarks

- By April 30, 2024, HIMS will be the preferred method of notification of incidents to ESF 8 partners, and interfacing with WebEOC will be in place to inform other ESFs about incidents occurring within ESF 8.
- By December 31, 2024, PA DOH BEPR, with input from ESF 8 partners, will work with PEMA to update the ESF 8 Annex to the Commonwealth's Emergency Operations Plan (CEOP).

- By December 31, 2024, PA DOH BEPR will work with PEMA to ensure that the right individuals have a role in the Commonwealth Response Coordination Center (CRCC) from an ESF 8 perspective.
- By August 31, 2025, ESF 8 will work with its partners within the ESF 8 community to develop a broad coalition of partners to serve on a work group to ensure a whole community approach to disaster response is in place.
- By January 2026, the first meeting of the whole community disaster response work group will meet.

Outcomes

- ESF 8 community will have stronger, more efficient bidirectional communication with ESF 8 partners and other ESFs through integration of HIMS into WebEOC.
- Updates to the ESF 8 Annex will include a more holistic ESF 8 perspective through lessons learned from the COVID-19 pandemic, opportunities for partners to review and provide input, etc.
- PA DOH BEPR will work with PEMA and ESF 8 partners to determine who from ESF 8 should be activated for different disasters.
- Different sectors of the ESF 8 group will be involved in CRCC activations and understand their role when activated by PEMA.
- The ESF 8 community will ensure a whole community approach to assist those affected by disaster and to provide the support they need to recover.

Lead (agencies)

PA DOH BEPR

Assisting Agencies

PEMA
PHMC/HCCs
PA DHS

Objective 2

By 2025, the ESF 8 community will develop processes to deploy assets, including personnel, supplies, and equipment equitably, efficiently, and safely in response to incidents. Safe deployment of state controlled/requested assets will include using Emergency Responder Health Monitoring and Surveillance (ERHMS), debriefings, and other ongoing monitoring and surveillance efforts to ensure health and safety for all individuals, including leadership and IMT-type staff, to incidents with a significant risk level (Level 1 - Daily Operations (including management of incidents by on-call

personnel), Level 2 - Task Force Activation, Level 3 - Partial DOC Activation, Level 4 - Full DOC activation).

- Strategy 1: Conduct both pre- and post-health assessments for deployed personnel.
- Strategy 2: Ensure mental health support is provided during deployments and during the demobilization process.

Benchmarks

- By June 30, 2024, processes will define the deployment of assets, including personnel, supplies, and equipment to incidents.
- By October 31, 2024, checklists will be in place to determine which levels of incidents necessitate ERHMS, debriefings, and ongoing monitoring and surveillance.
- By March 31, 2025, training will begin on how to protect the health and safety of deployed responders.
- By December 31, 2025, at least two trainings will have been provided on how to protect the health and safety of deployed responders on the state, regional, or local level.

Outcomes

- The health and safety of deployed responders will be prioritized through increased training about their needs for the individuals, and for those supporting them.
- Trainings will help to emphasize the importance of protecting health and safety for those deployed.

Lead (agencies)

PA DOH (BEMS, BEPR, BOE)

Objective 3

By 2024, PA DOH BEPR and PHMC will expand the use of the PA DOH's HIMS for information gathering, situational awareness, asset coordination and inventory, data collection and volunteer management. (See Domain 3 Objective 1)

- Strategy 1: Use targeted outreach to increase participation in the PA DOH HIMS.
- Strategy 2: PA DOH BEPR will develop a dashboard in the HIMS platform that provides situational awareness of incidents statewide, including between the ESF 8 and emergency management communities.

Benchmarks

- As of June 30, 2024, HIMS will be used as the primary method of compatibility and initial information sharing with ESF 8 partners.
- By June 30, 2024, PA DOH BEPR will develop a dashboard to provide situational awareness of incidents statewide.

Outcomes

- ESF 8 community will be aware of, and able to work together more nimbly on, ESF 8 incidents occurring within and outside their jurisdiction to maintain a common operating picture.
- HIMS will be the primary location for incident information for the ESF 8 community.

Lead (agencies)

PA DOH (BEMS, BEPR)

Assisting Agencies

PHMC/HCCs
EMS Councils

Objective 4

By 2024, PA DOH, LHDs, PHMC, HCCs, etc. will foster whole community involvement in the mitigation, preparedness, response, and recovery efforts from a disaster or public health emergency.

- Strategy 1: Identify and survey capabilities of potential partner groups.
- Strategy 2: Work with partners to accomplish administration of vaccines, testing, training, deployment of assets, etc.
- Strategy 3: Support training, recruitment, and development of identified partner groups.

Benchmarks

- By April 30, 2024, PA DOH BEPR, working with ESF 8 partners, will develop a survey to determine the capabilities of potential partner groups to assist in mitigation, preparedness, response, and recovery efforts.
- By June 30, 2024, the survey will be rolled out to partners, to include hospitals, pharmacies, Federally Qualified Health Centers, EMS, MRCs, SMAT, CERT, etc.
- By June 30, 2025, a training module will be developed to educate various partners about what to expect as a result of an incident.
- Continued efforts will support training, recruitment, and development of partners.

Outcomes

- A developed cadre of public health responders will help to ensure PA is prepared for the next statewide incident.
- Surveys will test the knowledge base and preparedness of these partner responders and assist in determining where additional training would be beneficial.
- Trainings will allow partner responders to remain up-to-date and prepared to assist in an incident.

Lead (agencies)

PA DOH (BEMS, BEPR, LHDO)

Assisting Agencies

LHDs
PHMC/HCCs
EMS Councils
MRC
SMAT
CERT

Domain 3
Information Management (Making sure people have information to act)

Problem Statement

During an emergency, it is essential that the most current information is available to all partners so that the decision makers may take actions to protect life and property. Incident information flow must be multi-directional and is essential and necessary before, during, and after an incident to keep all partners informed and ensure proper visibility of an incident. Information among partners and with the public should be transparent, clear, honest, equitable, and from reliable sources. Data sources should include interoperable, secure, and sustainable data systems that are essential when collected, used, and evaluated to generate better health outcomes.

Goals

- Ensure pre-incident preparedness information and relevant incident related information are available to all partners before, during, and after an incident to keep all partners informed.
- Develop and operationalize secure, sustainable, and interoperable data systems to ensure incident related data sharing can support better health outcomes.
- Develop and implement a process to share incident-related data and information to the public in a transparent, clear, honest, equitable, reliable manner, and in a way that drives appropriate public action.

Objective 1

By June 2025, PA DOH BEPR will fully implement all modules of the new HIMS across the ESF 8 sector (see Domain 2, Objective 3).

- Strategy 1: PA DOH BEPR, working with partners, will finalize a set of Essential Elements of Information (EEI) to be used for data collection across the ESF 8 community during high probability emergency situations, such as infectious disease outbreaks, weather events, acts of violence, etc.
- Strategy 2: PA DOH BEPR will promote the use of PA DOH HIMS to promote compatibility and interfacing of communication systems to ensure shared knowledge among ESF 8 partners. PA DOH HIMS will be used by the ESF 8 community as the primary mechanism for gathering and sharing EEI.
- Strategy 3: PA DOH BEPR, working with partners, will ensure 100% of acute care facilities, 50% of skilled nursing facilities, and 50% of EMS agencies are fully trained and onboarded to the HIMS suite of incident management tools.

Benchmarks

- By June 30, 2024, finalized EEI will be defined for use across ESF 8.

- As of June 30, 2024, HIMS will be used as the primary method of compatibility and information sharing with ESF 8 partners.
- By June 2025, 100% of acute care facilities, 50% of skilled nursing facilities, and 50% of EMS agencies are fully trained and onboarded to the HIMS

Outcomes
- ESF 8 community will be aware of and able to work together more nimbly on ESF 8 incidents occurring within and outside their jurisdiction to maintain common operating picture.
- HIMS will be the primary location for incident information for the ESF 8 community.

Lead (agencies)
PA DOH (BEMS, BEPR)

Assisting Agencies
PHMC/HCCs
EMS Councils

Objective 2
By June 2025, PA DOH will develop protocols and systems to standardize incident related data collection, with a focus on public health data (e.g., case data, vaccine data, etc.)
- Strategy 1: PA DOH will work with the ESF 8 community, and Commonwealth agencies on data collection processes to make data collection, use, and evaluation a central part to all incident responses, and to ensure data collection is transparent, equitable, and complete.
- Strategy 2: PA DOH will work across the ESF 8 community, including with other state agencies and community partners to identify best practices, policies, and procedures for when, how, and what limits must be on the sharing of data to ensure data access is appropriate, transparent, equitable, and complete.

Benchmarks
- By June 30, 2025, PA DOH will develop a data collection plan, using EEI, to determine what information will be collected and can be shared during an incident.
  - The plan will also identify best practices and policies as to when, how, and what data are shared, both with response partners and the public.
- By March 30, 2026, PA DOH will work with state agencies and partners on a plan on how to communicate health data in a transparent, equitable and complete manner.

Outcomes
- Incident-specific data will be collected in a transparent, equitable, and complete manner.
- Incident-specific data will be shared in a transparent, equitable, and complete manner.

Lead (agencies)
PA DOH (BEPR, BOE, Data Modernization Office, Office of Legal Counsel)

Assisting Agencies
PHMC/HCCs

Objective 3
By June 2026, PA DOH, working with partners, will develop data collection and sharing templates in a resource library to capture information for the public and other response partners for common event types (e.g., floods, power outages, etc.). This will include templates that can be used in online systems (i.e., HIMS) and offline systems.
- Strategy 1: PA DOH will develop and house a resource library for partners for common event types.
- Strategy 2: PA DOH will work with partners to develop a resource library for the public to share information to help individuals prepare for different types of disasters.

Benchmarks
- By June 30, 2026, PA DOH will develop and house a resource library, to include common event types, such as natural disasters, communicable disease, and hazardous materials incidents.
- By August 31, 2026, PA DOH will share these with partners to ensure they meet the needs of the ESF 8 community.
- By June 30, 2027, ESF 8 will develop fact sheets to share these resource libraries with the public to enhance preparation for disasters.

Outcomes
- Resource information will be kept in a library system.
- Partners will have access to online and hard-copy templates to facilitate information collection and dissemination.
- The public will be better informed and prepared for disasters.

Lead (agencies)
PA DOH (BEPR, Office of Communications)

Objective 4
Beginning immediately, PA DOH will work with all partners, including communications teams, to develop processes, procedures, and templates to expedite messaging with accurate and actionable information as a result of an incident.

- **Strategy 1**: PA DOH and the ESF 8 community will work with trusted partners during an incident, to include each other, other state agencies, etc., to determine the best practices for information sharing and maintaining situational awareness.
- **Strategy 2**: During an incident, PA DOH and the ESF 8 community will determine the best information to share with the public to ensure appropriate action is taken.

Benchmarks
- By December 31, 2025, PA DOH and ESF 8 partners to develop a library of pre-prepared incident response materials, to include communication plans, fact sheets, and templates to ensure information is available quickly during an incident.
- By June 30, 2026, PA DOH will work with partners to ensure plans identify best practices and policies as to when, how, and what information is shared publicly to ensure appropriate action.

Outcomes
- Better disaster and emergency preparedness information will be more readily and rapidly available to assist affected agencies and the public.
- Fewer lives lost due to disasters.

Lead (agencies)
PA DOH (BEPR, Office of Communications)

Assisting Agencies
PEMA
PA DDAP
PA DHS
PA Department of Agriculture (PDA)
PHMC/HCCs

Objective 5
By June 30, 2025, all ESF 8 partners should review and revise facility, regional, and statewide incident response plans, with a focus on incorporating lessons learned from major recent responses (e.g., COVID-19, East Palestine Train Derailment) and implementing new practices for EEI and data sharing.
- **Strategy 1**: PA DOH BEPR will create a mechanism for statewide sharing of key lessons learned across the ESF 8 sector and encourage information sharing across all partners.
- **Strategy 2**: PA DOH BEPR will promulgate guidance and/or draft language around utilization of EEI systems and processes for easy integration into EOP in a standardized format.

- Strategy 3: PA DOH BEPR will update the Commonwealth EOP and will provide technical assistance to other partners to assist in and encourage the development/updating of their plans and synthesis with other state/regional/local plans.

Benchmarks
- By September 30, 2024, PA DOH BEPR will develop a policy document that communicates the need to share either full After-Action Report (AAR) documents, or summaries of lessons learned, with ESF 8 partners.
- By April 30, 2025, PA DOH will develop a process to share either full AAR documents, or summaries of lessons learned, with ESF 8 partners to promote information sharing and collaboration.
- By December 31, 2024, AARs will be able to be uploaded and cataloged in HIMS for information sharing and improvement processes.
- Published EEIs, as identified above, will ensure EOPs are more uniform with the same information.
- By August 30, 2024, PA DOH BEPR's EOP will be updated, and technical assistance provided to partners as plans are updated with lessons learned from recent incidents.

Outcomes
- Issues identified during responses will be memorialized to prevent future occurrence.
- Information, such as EEIs and plans, such as EOPs, will be more standardized with common language to assist in compatibility and the ability for collaboration and assistance during an incident.
- Communication with partners will allow everyone's plans to be stronger for the next incident.
- Sharing of AARs will help ensure that the lessons learned by one organization during an exercise or event can be used by others as part of their planning processes as a point of collaboration.
- List of EEI
  - Federally required or recommended EEI
  - State developed EEI
- HIMS software

Lead (agencies)
PA DOH (BEPR)

Assisting Agencies
PEMA

Domain 4
Countermeasures and Mitigation (Getting medicines and supplies where they are needed)

Problem Statement

Communities should prepare for infectious disease incidents in a variety of ways to include individual and community-based protective actions, NPI and MCM. NPI can be an effective tool to reduce the spread of disease, although challenges exist in the rollout process. Moving forward, a greater emphasis on the importance of NPIs is necessary as a public health activity. Greater efforts are needed to expand and improve the commonwealth's capacity to obtain, exercise, distribute and dispense MCMs, PPE, and other non-medical equipment equitably, inclusive of high-risk populations.

Goals

- Ensure the Commonwealth is adequately trained and prepared to provide MCMs to impacted populations, including having plans, processes and systems that track countermeasures and emphasize equity in distribution and access.
- Ensure that the Commonwealth has the capacity to implement NPIs in impacted communities during a public health emergency.

Objective 1

By 2026, key partners will collaborate and coordinate to ensure the process is in place to receive, store, and equitably distribute medical/pharmaceutical products that prevent, mitigate, and/or treat the effects of exposures to hazardous substances and infectious diseases.

- Strategy 1: Identify potential public health emergency sites (e.g., Open and Closed PODs, Community Reception Centers, Health Resource Centers, shelters, testing sites, etc.) by jurisdiction within the six established health districts, including the LHDs.
- Strategy 2: Ensure a site survey is completed for on-site locations.
- Strategy 3: Take steps to communicate, using key partners, to recruit potential new public health emergency sites.
- Strategy 4: Develop both public facing and partner facing websites to include public health criteria, as well as contact information, for both PA DOH and LHDs.
- Strategy 5: Develop a system for sharing information on public health emergency site planning and activating the operations during a public health emergency.
- Strategy 6: Provide support for trainings and exercises specific to public health emergency sites.

Benchmarks

- By December 31, 2024, a standard operating procedures document will be created to share site expectations and requirements based on site types (Open and Closed Points of Dispensing, Community Reception Centers, Health Resource Centers, shelters, testing sites, etc.)
- By June 30, 2024, create a current list of public health emergency sites throughout the Commonwealth, to include PA DOH and LHD sites.
- By June 30, 2024, develop a universal site survey template for each site type , to be used to conduct site surveys.
- After June 30, 2024, site surveys will be completed for each public health emergency site (both open and closed PODs) by either PA DOH or LHD.
- By December 31, 2024, develop public and partner facing websites with relevant public health emergency site information.
- By December 31, 2024, the framework will be in place so that, through the use of HIMS, public health emergency site information can be shared to the ESF 8 community in a secure location.
- By December 31, 2025, PA DOH BEPR and LHDs will work together on trainings and exercises for public health emergency sites to ensure readiness for activation.

Outcomes

- By December 31, 2024, there will be a standard operating procedures document that defines site expectations and requirements for each type of public health emergency site.
- By June 30, 2024, a directory of current open and closed PODs will be developed, to include a directory with new contacts and potential partners.
- By June 30, 2024, there will be a template for each type of site to approve new sites during surveys.
- By December 31, 2025, public and partner facing websites with public health emergency site information will be established.
- By December 31, 2025, an identified process will be in place to receive, store, and equitably distribute medical/pharmaceutical products that prevent, mitigate, and/or treat the effects of exposures to hazardous substances and infectious diseases.

Lead (agencies)

PA DOH (BEMS, BEPR, BOE, LHDO, Office of Communications)

Assisting Agencies

LHDs
PHMC/HCCs

Objective 2

By 2025, PA DOH BEPR, in conjunction with ESF 8 partners, will use lessons learned from the COVID-19 pandemic to develop a medical distribution plan incorporating new strategies and new public health emergency sites to assist with the dispensing of MCM.

- Strategy 1: Review PA DOH COVID-19 AAR for necessary updates to PA DOH POD planning documents.
- Strategy 2: Add pertinent updates to PA DOH POD planning documents.
- Strategy 3: Review, approve, and add updated PA DOH POD Operations Manual as an appendix to Annex D of the EOP.
- Strategy 4: Communicate relevant parts of the PA DOH POD Operations Manual to partners.

Benchmarks

- By March 30, 2024, an AAR Review working group with representatives from across the ESF 8 community will be established to review lessons learned from the COVID-19 pandemic and determine how they relate to future POD operations.
  - o Led by PA DOH BEPR, this group will work to update PA DOH POD Planning documents, with a revised version finished by May 31, 2025.
- By December 31, 2025, the updated PA DOH POD Operations Manual, using the edits made from the AAR review working group, will be added as an appendix to Annex D of the EOP.
- Through the established working group, relevant information will be shared with key partners.

Outcomes

- By June 30, 2025, the medical distribution plan will be updated to include a new list of public health emergency sites to assist with the dispensing of MCM.
- By December 31, 2025, the medical distribution plan and POD Operations manual will be updated to reflect the transition to public health emergency sites, as well as lessons learned from the COVID-19 pandemic.

Lead (agencies)

PA DOH BEPR

Objective 3

By 2025, PA DOH will work to ensure that information regarding public health emergency sites is available to partners. In addition, PA DOH BEPR will develop a list of documentation for PA DOH BEPR and LHDs to use to ensure a common operating picture around these locations. HIMS, the current Healthcare Information System as of 2023, will be used to track this information.

- Strategy 1: Develop a strategy to communicate the medical distribution plan to key partners.

- **Strategy 2**: Work with key partners to ensure continuous training opportunities in the use of the HIMS platform to develop common operating picture regarding communication about the medical distribution plan.
- **Strategy 3**: Encourage the use of the HIMS platform to track, store, and communicate public health emergency site information.

Benchmarks
- By June 30, 2024, PA DOH BEPR will work to ensure that all partners working on MCM have access to HIMS to communicate information.
- By June 30, 2024, PA DOH BEPR will determine if other forms of communication are needed for external partners (POD operators) not part of HIMS.
- By December 31, 2024, the updated medical distribution plan will be promulgated by PA DOH.
- By January 31, 2025, through HIMS, partner-facing websites, etc., PA DOH will communicate medical distribution plan to key partners.
- By December 31, 2026, PA DOH BEPR will begin to provide training opportunities on the plan and its content.

Outcomes
- By January 31, 2025, partners will receive the updated medical distribution plan.
- By December 31, 2024, partners will be proficient in the use of HIMS for managing information regarding public health emergency sites.
- By March 30, 2026, a suite of training materials, such as slide decks, recorded training, etc., will be available to train partners about the medical distribution plan.
- By December 31, 2026, training and exercises will be occurring based on the medical distribution plan.

Lead (agencies)
PA DOH (BEMS, BEPR)

Assisting Agencies
PHMC/HCCs

Objective 4
Beginning in 2024, the ESF 8 community will identify effective, evidence-based, and practical NPIs (such as washing hands, staying home when sick, social distancing, etc.) and communicate them to the public in a targeted, effective manner.

- **Strategy 1**: Review, along with key partners, and update NPI plan Annex S of the EOP to include current guidance. This will include consideration of best practices and whether to communicate in a tiered/harm-reduction type approach, etc.
- **Strategy 2**: Collaborate with other public information campaigns, including with state agencies, health systems, etc., to communicate the importance of NPIs and their importance to public health.
- **Strategy 3**: PA DOH will work to inform the public on current NPI practices relevant to hazardous substances and infectious disease outbreaks.
- **Strategy 4**: Working with PA DOH Office of Communications, develop a communications campaign (or social media campaign) that informs people about the importance of NPI practices.
- **Strategy 5**: Communication efforts will identify processes to quickly translate materials into the five most frequently used languages statewide and work with partners to have additional translations for communities affected by an incident.

Benchmarks
- By June 30, 2024, establish a work group on NPIs, to include ESF 8 partners, such as LHDs, subject matter experts, health educators, communications staff/Public Information Officers (PIOs), etc.
- By August 31, 2024, conduct a literature review on NPI communication best practices, including the use of a tiered/harm reduction approach.
- By December 31, 2024, Annex S of the EOP will be updated with current guidance.
- Beginning in December 2024, the identified work group will engage key partners in communicating importance of NPIs to the public.
- By March 31, 2024, PA DOH BEPR will standardize a process to develop pre-prepared materials for a variety of potential disasters/issues of concern, grouped around three main areas (natural disasters, communicable disease, hazardous materials)
  - o This process will include a list of material types and what steps are needed to get materials approved at the PA DOH level.
- By June 30, 2024, PA DOH Office of Communications will standardize a process for translation of materials to include who to reach out to, expected timeframe, etc.
- By June 30, 2026, common language and talking points will be established for all partners and jurisdictions to utilize in information sharing.
- By December 31, 2024, the ESF 8 community will develop a process to engage non-ESF 8 partners (e.g., schools) in training and exercising about NPIs.

Outcomes

- By June 30, 2026, the development of a communications and social media toolkit for NPI practices to provide to partners.
- By June 30, 2026, a website will be created that houses all the NPI materials in various languages, to provide them to ESF 8 partners.
- The public will be informed about effective, evidence-based, and practical NPIs.
- Process to train new partners about how to use NPIs in their fields.
- Ability to quickly share information for any type of incident using a template for a general incident type.
- Ability to communicate to individuals in multiple languages.

Lead (agencies)

PA DOH (BEPR, BOE, Office of Communications)

Assisting Agencies

LHDs
PHMC/HCCs
Health Systems
Academia

Objective 5

By 2025, the ESF 8 community will develop public-private partnerships to ensure the ability to provide healthcare operations (including administration of vaccines, testing, training, and deployment of assets) in the Commonwealth during an emergency. In addition, these partnerships will assist in the ability to procure/secure PPE and other supplies, despite potential supply chain concerns, to ensure sustainable supply.

- Strategy 1: Identify potential partners and convene a workgroup to use best practices from the COVID-19 pandemic, across the health landscape, to develop a path to move forward.
- Strategy 2: Create a list of potential vendors and add to the approved vendor list.
- Strategy 3: Develop Memoranda of Understanding (MOU) with identified partners.

Benchmarks

- By March 31, 2024, a review of recommendations from the COVID-19 AAR will provide information and best practices learned from the COVID-19 pandemic to ensure PA DOH is readily able to support procurement of supplies in future incidents.
- By June 30, 2024, the approved vendors list will be reviewed, and gaps determined.
- Vendors will be continuously added to the approved vendor list in order to assist in ensuring supplies are available, should they be needed.

- By December 31, 2024, an MOU template will be created, working with DOH Legal Counsel, to easily get MOUs with identified partners.
- By January 31, 2025, PA DOH BEPR will begin getting MOU signed with identified partners.

Outcomes
- By March 30, 2025, healthcare operations in the Commonwealth will have the ability to procure/secure PPE and other supplies to ensure sustainable supply for a public health event.
- Health care facilities and other partners will be better prepared for the potential rapid need for PPE and other materials.

Lead (agencies)
PA DOH (BEPR, Office of Legal Counsel)

Assisting Agencies
PA DGS
PEMA
LHDs
PHMC/HCCs
PA DOH Legal
PA Department of Community and Economic Development (PA DCED)
PA DHS
Pennsylvania Pharmacy Association

Domain 5

Surge Management (Expanding medical services to handle large events)

Problem Statement

Disasters, deliberate attacks, outbreaks, and substance use impacts are affecting Pennsylvanians with seemingly increasing frequency and severity, often resulting in injuries, illnesses, diseases, death, and displacement from their normal way of life. These events have significant repercussions for the ESF 8 community, affecting the ability of this community to provide services to the public. These events could severely challenge the ability of healthcare systems to adequately care for large numbers of patients and/or victims with unusual or highly specialized medical needs which will require adequate surge capability. Addressing medical surge and resilient medical programs requires coordination and cooperation among our established HCCs to communicate, plan, equip, train, exercise, and respond to the need for surge capability. In addition, it is important to consider and build relationships with other partners (for example, ESF 1 and ESF 6) to establish their roles in supporting surge capability. Such efforts will help to effectively manage community health and medical response, as well as ensure that post-event capability is re-established or improved.

Goals

- Develop pathways to ensure shared situational awareness around events that may require surge capacity within the ESF 8 community.
- Work with other ESFs to ensure all partners are aware of instances of surge capacity, the needs that exist, and abilities to support each other.
- Ensure that all ESF 8 community members prioritize surge management planning, with an emphasis on response capabilities.

Objective 1

The ESF 8 community will ensure that lifesaving and sustaining services are adequate to meet the needs of impacted areas across the Commonwealth, regardless of social determinants of health, differences in socioeconomic status, individuals with limited economic mobility, and varying geographic locations.

Benchmarks

- By June 30, 2024, PA DOH Office of Communications will standardize a process for translation of materials to include who to reach out to, expected timeframe, etc.
- By December 31, 2024, PA DOH will finalize a process to assist individuals impacted by a disaster, through a Multi-Agency Resource Center (MARC) or other efforts.

Outcomes

- ESF 8 will work to ensure that those impacted by an incident are given the resources to recover, regardless of social determinants of health, languages spoken, differences in socioeconomic status, individuals with limited economic mobility, and varying geographic locations.

Lead (agencies)

PA DOH (BEMS, BEPR, Office of Communications)

Assisting Agencies

PEMA

Objective 2

By 2025, PA DOH BEPR will increase exposure and awareness to other partners about the important role the ESF 8 community plays related to surge capacity and surge management.

- Strategy 1: By 2024, PA DOH BEPR will develop a bidirectional process to ensure that information sharing to all partners provides situational assessment and awareness as events unfold that may affect the ESF 8 community's ability to provide lifesaving and sustaining services to the public.

Benchmarks

- As of June 30, 2024, HIMS will be used as the primary method of communication, collaboration, and initial information sharing with ESF 8 partners.
- By June 30, 2024, PA DOH BEPR will develop a dashboard to provide situational awareness of incidents statewide.

Outcomes

- ESF 8 community will be aware of and able to work together more nimbly on ESF 8 incidents occurring within and outside their jurisdiction to maintain a common operating picture.
- HIMS will be the primary location for incident information for the ESF 8 community.
- By June 2024, PA DOH BEPR will develop a dashboard to provide situational awareness of incidents statewide.

Lead (agencies)

PA DOH (BEMS, BEPR)

Assisting Agencies

PHMC/HCCs

Objective 3

By 2026, the ESF 8 community will establish increased collaboration and communication with other ESFs, including ESF 1 and ESF 6.

- Strategy 1: By 2024, PA DOH BEPR will develop a bidirectional process to communicate and collaborate with other ESFs, including ESF 1 and ESF 6, about events that may affect the ESF 8 community's ability to provide lifesaving and sustaining services to the public.
- Strategy 2: By December 31, 2025, ESF 8 will convene a work group with other ESFs to help maintain a whole community approach to disaster response.

Benchmarks

- By April 30, 2024, HIMS will be the preferred method of notification of incidents to ESF 8 partners, and interfacing with WebEOC will be in place to inform other ESFs about incidents occurring within ESF 8.
- By December 31, 2024, PA DOH, with input from ESF 8 partners, will work with PEMA to update the ESF 8 Annex to the Commonwealth's EOP.
- By December 31, 2024, PA DOH BEPR will work with PEMA to ensure that the correct individuals have a role in the CRCC from an ESF 8 perspective.
- By August 31, 2025, ESF 8 will work with its partners within the ESF 8 community to develop a broad coalition of partners to serve on a work group to ensure a whole community approach to disaster response is in place.
- By December 31, 2025, the first meeting of the whole community disaster response work group will meet.

Outcomes

- ESF 8 community will have stronger, more efficient bidirectional communication with ESF 8 partners and other ESFs through integration of HIMS, via Juvare Exchange into WebEOC.
- Updates to the ESF 8 Annex will include a more holistic ESF 8 perspective.
- PA DOH BEPR will work with PEMA, ESF 8 partners to determine who from ESF 8 should be activated for different disasters.
- Different sectors of the ESF 8 group will be involved in CRCC activations and understand their role when activated by PEMA.
- The ESF 8 community will ensure a whole community approach to assist those affected by disaster and to provide the support they need to recover.

Lead (agencies)

PA DOH (BEMS, BEPR)

Assisting Agencies

PEMA

PHMC/HCCs
PA DHS

Objective 4

By 2027, PA DOH BEPR, PHMC, and the HCCs will develop a process for surge management that considers staffed beds, equipment, just-in-time training, etc., to determine the true capability of a health care provider to respond to an incident.

- Strategy 1: By 2024, PA DOH BEPR will develop a process to ensure that information sharing provides situational awareness around events that may require surge capacity in the ESF 8 community.
- Strategy 2: By 2026, the ESF community will use the ASPR Medical Response and Surge Exercise (MRSE) tool to evaluate the true capacity of acute care specialty resources.

Lead (agencies)

PA DOH (BEMS, BEPR)

Assisting Agencies

PHMC/HCCs

Objective 5

PA DOH, PHMC, HCCs, and other partners will prepare for sustainment of surge capacity operations and transition to normal operations through continuity of operations (COOP) planning.

- Strategy 1: By December 31, 2024, the ESF 8 community will promote efforts to develop and maintain COOP plans.

Benchmarks

- By December 31, 2024, ESF 8 will work to communicate to entities within it, and its partners, about the importance of continuity of operations plans and resources available to assist in establishing such plans.
- By December 31, 2025, entities that have recently developed COOP plans will have conducted at least one training or exercise on their plan so that senior leadership, relevant staff, etc., understand its role in transitioning from normal operations to surge capacity operations.
- By March 30, 2026, partners with COOP plans will have processes in place to ensure they are regularly being reviewed and updated for additional threats and through exercising and lessons learned from real world events.

Outcomes

- COOP plans will help entities within the ESF 8 sphere be prepared for an incident that tests their capacity to respond.
- Leadership will understand continuity of operations plans and how an entity would respond during surge capacity operations.
- COOP plans will be used frequently to prepare for potential incidents and to inform responses.

Lead (agencies)

PA DOH (BEMS, BEPR)

Assisting Agencies

PHMC/HCCs
PA DHS

Domain 6

Biosurveillance (Investigating and identifying health threats)

Problem Statement

In today's interconnected world, the challenge of addressing biosurveillance is essential to protecting the health of Pennsylvanians. Increasing challenges exist in terms of emerging infectious diseases, safety and security of water and food supplies, the effects of climate change on human health and a changing environment on our communities.. As we look to the future, we can learn from recent responses and realize the need to address challenges related to laboratory capacity, surveillance capabilities, barriers to data sharing, and communicating with partners. It is essential to strengthen our emergency planning, training, surveillance, and lab capacity to detect and monitor emerging pathogens so they can be contained and recovered from faster.

Goals

- Ensure the ability to monitor, detect, and protect Pennsylvanians from emerging infectious diseases and from threats to the safety and security of the food and water supplies.
- Ensure the ability to identify and address the impact of climate change and a changing environment on human health and safety.
- Integrate an interconnected health perspective into PA DOH operations by looking at human, animal, and environmental health preparedness efforts collectively and collaboratively.
- Enhance data frameworks to ensure data are available to support the ESF 8 community's response efforts, with the ultimate goal to protect and improve the health of Pennsylvanians.

Objective 1

By 2026, the ESF 8 community, led by PA DOH, will identify and equitably address the impact of environmental hazards, including climate change and a changing environment, on human health and safety.

- Strategy 1: Establish an external task force dedicated to addressing the effects of climate change on public health, which will identify and develop strategies to mitigate and adapt to health risks associated with rising temperatures, extreme weather events, and changes in air and water quality.
- Strategy 2: Increase awareness through education and public information campaigns.
- Strategy 3: Engage in activities included in the Pennsylvania Climate Action Plan.
- Strategy 4: PA DOH will complete a climate and health risk profile for the Commonwealth, including several counties in the analysis.

Benchmarks

- By December 31, 2024, PA DOH will establish an external task force made up of individuals from ESF 8 partner organizations and environmental justice communities and organizations dedicated to addressing the effects of climate change on public health.
- By December 31, 2028, PA DOH, with input from the external task force, will identify and develop mitigation & adaptation strategies as part of a plan to address health risks associated with rising temperatures, extreme weather events, and changes in air & water quality.
- By December 31, 2025, ESF 8 partners will work together on education and public information campaigns related to climate change and public health, with a goal of at least one large campaign occurring in a region of the state on a yearly basis, using multiple communication mediums.
- By June 30, 2025, share the latest Pennsylvania Climate Action Plan with ESF 8 partners, with particular focus on areas affecting public health and potential actions for partners to take.
- Beginning in July 2025, ESF 8 partners will work to ensure that the public health community is engaged in activities included in the Pennsylvania Climate Action Plan.
- By December 31, 2025, PA DOH will take the lead, working with partners on a completed climate and health risk profile, including an analysis of several counties.

Outcomes
- More input on climate change and its effects from communities hardest hit by a changing climate.
- Increased capacity for the ESF 8 community to mitigate and adapt to health risks associated with climate change.
- Enhanced public awareness regarding climate change and its effects on health.
- Active participation in statewide climate action initiatives.
- Improved understanding of the impact of climate change on public health.
- A comprehensive analysis of climate and health risks in the Commonwealth that will lead to targeted interventions and policies.

Lead (agencies)
PA DOH (BEPR, BOE, LHDO)

Assisting Agencies
PEMA
PHMC/HCCs
LHDs
Health systems
PA DEP

Objective 2

By 2026, the ESF 8 community will use an interconnected health perspective looking at human physical, behavioral, and emotional, animal health, and environmental health to strengthen its emergency planning, training, surveillance, epidemiology, and laboratory capacity, and work toward prevention and improved health outcomes.

- **Strategy 1**: Establish a collaborative workgroup of diverse and external partners to improve surveillance for baseline and post-event behavioral health and substance use disorder-related conditions
- **Strategy 2**: Improve pre- and post-event syndromic surveillance capabilities to be aware of animal, human, and environmental health-related impacts.
- **Strategy 3**: Implement and track prevention activities and initiatives to promote community resiliency (inclusive of vulnerable populations).
- **Strategy 4**: Collaborate with external partners to increase trauma sensitive trainings to the public, workplaces, and social service organizations on identifying and supporting children, adolescents, and adults.

Benchmarks

- By December 31, 2026, PA DOH will establish a task force of diverse health and environmental partners.
- By December 31, 2025, PA DOH, working with ESF 8 partners, its internal systems, etc., will enhance pre- and post-event syndromic surveillance capabilities to more accurately and timely monitor and respond to animal and environmental health-related impacts on human health.
- The ESF 8 group will assess what prevention activities and initiatives are needed to protect public health and promote community resiliency, focusing on people who live/work in settings that put them at increased risk of becoming infected or exposed to hazards.
- By June 30, 2025, the ESF 8 community will collaborate with partners to provide trauma-sensitive training to the public, workplaces, and social service organizations, focusing on identifying and supporting individuals of all ages who have experienced trauma.

Outcomes

- A task force will help state agencies, ESF 8 partners, and others closely work together on health and environmental threats.
- Syndromic surveillance will be a key tool available to accurately and timely monitor all health-related impacts, but particularly those related to animal and environmental health.
- Increased capacity to mitigate and adapt to human health risks associated with animal and environmental factors.
- Enhanced public awareness and increased capacity to prevent and respond to health risks in the community.

- Improved understanding of the impact of environmental hazards on human health, including mental health conditions such as PTSD, depression, anxiety, and neonatal abstinence syndrome.
- The ESF 8 community and responders will be better prepared to provide compassionate, trauma-informed care to all individuals, regardless of their age, race, workplace, etc.

Lead (agencies)
PA DOH (BEPR, BOE)

Assisting Agencies
PA DHS
PEMA
PDA
PA DDAP
DCNR
PA DEP
LHDs

Objective 3

By 2026, the ESF 8 community will work with partners in other areas, including other state agencies to monitor, detect, and protect Pennsylvanians from emerging infectious diseases and threats to the safety and security of our environment, including our food and water supply.

- Strategy 1: Increased collaboration with PA DEP, PDA, and PA Department of Conservation and Natural Resources (PA DCNR) will occur through ongoing workgroups and the planning/building of a new facility housing all agencies' laboratories.
- Strategy 2: Maintain and assess a uniform system for reporting reportable diseases.
- Strategy 3: Sustain and assess bioterrorism early event detection systems.
- Strategy 4: Provide standard operations and response guidance for investigations of, or responses to, emerging infectious disease events or environmental events.
- Strategy 5: PA DOH BOE will support local environmental health assessments to identify food, water, and air quality safety concerns.

Benchmarks

- By December 31, 2024, PA DOH BOE will schedule quarterly working group meetings between the PA DEP, PDA, and PA DCNR around diseases and threats to the safety and security of our environment, including our food and water supply.
- By June 30, 2025, PA DOH will formalize a new set of reportable diseases (Chapter 27) for Pennsylvania.

- By December 31, 2025, PA DOH BOE will develop a plan to communicate the importance of all required reporters using the standardized reporting system (NEDSS) to report reportable diseases.
- Annually, ESF 8 partners will assess bioterrorism early alert systems to determine if they are meeting the needs of the communities they are intended to protect.
- By April 30, 2026, PA DOH, with input from ESF 8 partners, will develop and disseminate standard operations and response guidance for investigations or interventions of emerging infectious and environmental events.

Outcomes
- Strengthened collaboration and coordination among agencies to enhance monitoring and detection of, and protection against, emerging infectious diseases and threats to the environment, food, and water supply.
- Improved surveillance and reporting of infectious diseases, leading to early detection and timely response to emerging threats.
- Enhanced capacity to detect and respond to bioterrorism events, ensuring the safety and security of Pennsylvanians.
- Improved coordination and effectiveness of response efforts, leading to better control and mitigation of emerging infectious diseases and environmental events.
- Increased understanding of local food and water safety concerns, leading to targeted interventions and policies to improve public health outcomes.

Lead (agencies)
PA DOH (BEPR, BOE)

Assisting Agencies
PA DEP
PA DCNR
PDA
PA Game Commission
PSP
PEMA
PA DGS

Objective 4
By 2027, local, regional, state, and commercial labs, will collaborate to use the latest science and advanced technology to test for hazards and contaminants and expand surge capacity.

- **Strategy 1**: PA DOH BOL will work with legal counsel to establish mutual aid agreements with labs across the state to ensure appropriate response, investigation, and mitigation of public health incidents, including capacity and technology capability.
- **Strategy 2**: PA DOH BOL, working with ESF 8 partners through PA DOH bureaus, will create a laboratory-based coalition to better communicate and collaborate with other labs across the Commonwealth.
- **Strategy 3**: Provide opportunities for communication and collaboration for labs across the Commonwealth to increase preparedness, support in response to incidents/surge, and a common operating picture during events and incidents.

Benchmarks
- By December 31, 2024, PA DOH, working with PA DOH BOL, Legal Counsel, etc., will establish a mutual aid agreement template to work closely with other labs to increase capacity.
- By March 30, 2025, the template will be used to sign the first mutual aid agreement with a lab in Pennsylvania.
- By December 31, 2025, 10 mutual aid agreements will be signed with labs in Pennsylvania.
- By December 31, 2025, PA DOH BOL, working with the ESF 8 community, will create a coalition to help better communicate and develop cross-sector partnerships with key partners.
- Through the mutual aid agreements, lab capacity strengthened for timely detection and identification of biological agents.
- By October 31, 2025, PA DOH will develop and implement quality assurance protocols for accurate and reliable testing.

Outcomes
- Increased collaboration through meeting at least twice a year among public health agencies, healthcare providers, and environmental organizations.
- Enhanced information sharing and coordination during disease outbreaks or environmental emergencies.
- Improved data collection and reporting, leading to better surveillance and response efforts.
- Early detection and swift response to bioterrorism threats, minimizing the impact on public health and safety.
- Effective containment of bioterrorism incidents, preventing further spread and harm.
- Well-trained and prepared public health professionals capable of handling bioterrorism emergencies.
- Improved understanding of local environmental health risks and their impact on communities.
- Enhanced capacity of LHDs to assess and respond to environmental health hazards.
- Increased collaboration and knowledge exchange among LHDs through the HIMS.
- Timely and accurate identification of hazards and contaminants in various settings.

- Reliable testing results that can inform public health interventions and risk assessments.
- Enhanced ability to respond to emerging hazards and contaminants.
- Improved coordination and resource sharing with all relevant ESF 8 partners during public health emergencies.
- Increased surge capacity to handle a higher volume of testing and response activities. Strengthened laboratory networks for better surveillance and response efforts across the state.

Lead (agencies)
PA DOH (BEPR, BOE, Office of Legal Counsel)

Assisting Agencies
PDA
PA DEP
Public laboratories (Universities, private companies)
LHDs
PANG (PA Air National Guard)

Objective 5
By 2025 the ESF 8 community, led by PA DOH, will ensure that biosurveillance information related to environmental health threats is broken into actionable, easily understood steps for the public and ESF 8 partners to take the right action at the right time.

- **Strategy 1:** Identify partners such as representatives from PDA, PA DEP, PA DCNR, and Pennsylvania Game Commission (PGC) to work as allies in drafting information on the connection of the environment and health.
- **Strategy 2:** Work with PA DOH Office of Communications to lead a communications plan around outreach (public service announcements, social media, printed materials, billboards) of information to the general-public.
- **Strategy 3:** Develop a toolkit to disseminate the information across the commonwealth.
- **Strategy 4:** Launch and distribute the information/campaign across the commonwealth, working with other state agencies as allies.
- **Strategy 5:** Evaluate increased awareness of environmental health initiatives.

Benchmarks
- By December 31, 2025, a coalition of communications staff, program staff, and ESF 8 partners will be established to direct communication efforts around environment and health.
  - Representatives from PDA, PA DEP, PA DCNR, and PGC will be included.

- By June 30, 2026, PA DOH, working with others, will develop a comprehensive communications plan, including a toolkit for outreach to the public, utilizing various platforms such as public service announcements, social media, printed materials, and billboards.

Outcomes

- Improved understanding and awareness of the connection between the environment and health among the public and ESF 8 partners.
- Increased engagement and participation of the public and ESF 8 partners in taking appropriate actions based on biosurveillance information.
- Enhanced coordination and collaboration among different departments and agencies in disseminating information and addressing environmental health initiatives.
- Measurable increase in the public's awareness of environmental health initiatives, as evaluated through surveys, feedback, and data analysis.

Lead (agencies)

PA DOH BOE

Assisting Agencies

PA DCNR
PDA
PA DEP
PGC
PA DOH Office of Communications

Objective 6

By 2026, the public health agencies comprising the ESF 8 community will enhance the collection, analysis, and dissemination of public health data to support evidence-based decision making to respond to existing and emerging health threats, with the goal of protecting and improving the health of Pennsylvanians. (See Domain 3 Objective 2)

- Strategy 1: Review and monitor data from surveillance systems for identification of emerging infectious diseases and other health threats and share findings with internal and external partners.
- Strategy 2: Provide effective public health messaging tools and resources for emergency response.

Benchmarks

- By December 31, 2025, PA DOH BOE and LHDs will work to determine the best way to use surveillance systems for timely identification and reporting of emerging infectious diseases and health threats.
- By December 31, 2026, ESF 8, working with communications staff and PIOs, will have a comprehensive toolkit of public health messaging tools and resources, to include the basics on disease prevention, NPIs, the importance of vaccines, etc., for emergency response will be developed and posted on the PA DOH website.

Outcomes

- Regular monitoring and analysis of surveillance data to detect and respond to emerging health threats promptly.
- Regular sharing of surveillance findings with partners, such as public health agencies within the ESF 8 community, to facilitate coordinated response efforts.
- Regular sharing of surveillance findings with external collaborators, such as healthcare providers, policymakers, and the public, to enhance awareness and inform decision-making.
- Availability of clear, concise, and accurate public health messaging materials that can be readily disseminated during emergencies.
- Effective utilization of various communication channels, such as social media, websites, and traditional media, to reach a wide audience during emergencies.
- Increased public understanding and adherence to recommended health measures through the dissemination of targeted and tailored public health messaging.

Lead (agencies)

PA DOH (BEPR, BOE, Office of Communications)

Assisting Agencies

LHDs

Appendix 1: Strategic Planning Committee Members

Dr. Wendy Braund, Pennsylvania Department of Health
Aaron Smee, Pennsylvania Department of Health
Betsy Schroeder, Pennsylvania Department of Health
Allison Longenberger, Pennsylvania Department of Health
Eva Gordian-Rivera, Pennsylvania Department of Health
Jeff Miller, Pennsylvania Department of Health
Cheryl Branton, Pennsylvania Department of Health
Melisa Rader, Pennsylvania Department of Health
Jenn Shirk, Pennsylvania Department of Health
Aaron Rhone, Pennsylvania Department of Health
Sunny Podolak, Pennsylvania Department of Health
Jay Taylor, Pennsylvania Department of Health
Andrew Pickett, Pennsylvania Department of Health
Jeff Backer, Pennsylvania Department of Health
Nathan Huyett, Pennsylvania Department of Health
Nate Wardle, Pennsylvania Department of Health
Jason Godin, Pennsylvania Department of Health
Claudia Madrigal, Pennsylvania Department of Health
Jessica Miller, Pennsylvania Department of Health
Brian Holler, Pennsylvania Department of Health
Paul Hoffman, Pennsylvania Department of Health
Joe Gasiewski, Pennsylvania Department of Health
Joanne Roth, Pennsylvania Department of Health
Leslie McCurdy, Pennsylvania Department of Health
Kirsten Cohick, Pennsylvania Emergency Management Agency
Tricia Bowden, Pennsylvania Emergency Management Agency
Briton Lewis, Pennsylvania Department of Human Services
Doug Trahey, Pennsylvania Department of Human Services
Heather Ambrose, Pennsylvania Department of Human Services
Daniel Miller, Pennsylvania Department of Drug and Alcohol Programs
Brian Moore, Pennsylvania Department of Environmental Protection
Jacquie McNary, Pennsylvania Department of Environmental Protection
Jason Brown, Public Health Management Corporation
Pamela Drake, Public Health Management Corporation
Knox Walk, University of Pittsburgh Medical Center
Scott Mickalonis, Penn State Health
Ryan Hay, Lehigh Valley Health Network
Fallon Maggio, Bucks County Health Department
Tom Mangan, Allegheny County Health Department
Rhona Cooper, Philadelphia Department of Public Health
Mary Ellen Shiels, Allentown Health Bureau

Chelsea Bates, Erie County Health Department
Hersh Ranade, Erie County Health Department
Jeremy Reese, Pennsylvania Coroners Association
Emma Nolan, The Arc of PA
Lorpu Hunter, Multicultural Community Family Services
Shaylin Suzalis, Partnership for Inclusive Disaster Strategies
German Parodi, Partnership for Inclusive Disaster Strategies
Christopher Confalone, Eastern EMS Council
John Kloss, Eastern EMS Council

Appendix 2: Assets / Assets to Create by Domain

Domain 1, Objective 1

Current Assets	Assets Needed to be Created
Black Sky Committee	Statewide Communication distribution channel for information from Committee
ESF Work Group	Need on-going defined committee with communication and information distribution channels established
TRAIN PA	Increased awareness and access to current trainings that are available for all partners; On-going addition of relevant and practical trainings to the platform
Up to Date PHRAT/JRA to analyze potential risks and gaps	Additional Risk Assessment and Analysis Tools
SharePoint as an access point for exercise development	Training on how to use SharePoint and ability to grant access to external partners as needed
PA DOH BEPR Workforce Preparedness Section and current communication/collaboration processes	Creation of a Peer Review Process for healthcare emergency preparedness and resiliency
	Relationship building with Health Facility Quality Examiners (HFQEs) and Pennsylvania Department of Health Quality Assurance (PA DOH QA) on the role of HFQEs in emergency preparedness

Domain 1, Objective 2

Current Assets	Assets to Create
Workforce Preparedness Section within PA DOH BEPR to communicate about IPP, training, exercising, etc.	Ensure external access to SharePoint is available for IPP, other documents
IPP	PA DOH Comprehensive Training Plan • Instructor-led classroom and online/virtual trainings • Continuing education • Who is on contract already for us to access? • How will these be handled? • Project management of this plan (Asana or Teams)

Microsoft Teams to communicate (need to ensure external access)	Determine procedure document for task force participation
	• Where will funding come from?
	• What union/management staff factors need to be considered?
	• Threshold for this request to be activated?
	o Every exercise?
	o 3 to 9 months of real-world events/activations?
	o Potential of linking this to 3 Es
	▪ Evaluate Threats [testing, surveillance], Empower Individuals [vaccinations, Non-Pharmaceutical Interventions (NPI)] and Enable Care [therapeutics, healthcare continuity]
TRAIN PA (Commonwealth Learning Management System)	Health Emergency Response Team (HERT) protocol manual
Administrator training on TRAIN PA	
Current collaboration with PEMA, PA OHS, PA DHS, LHDs, EMAs, etc. for training and exercising planning	

Domain 1, Objective 3

Current Assets	Assets to Create

HCC Websites (Currently Groupsite, 2023)
    Southeast
    Northeast
    Central
    Keystone
    Southwest
    Northern Tier	

HIMS	
Healthcare Preparedness Program - https://aspr.hhs.gov/HealthCareReadiness/HPP/Pages/default.aspx - In PA, this is done via a combination of PA DOH BEPR Staff and contracted support (PHMC, 2023).	

Domain 1, Objective 4

Current Assets	Assets to Create
Meetings to draw in IDA & DD/AFN community (HCC meetings, SACP, current meetings of the DD/AFN groups, etc.)	Database of disaster-related materials and resources for members of IDA & DD/AFN communities -if necessary to broaden beyond list of available resources
List of meetings of organizations representing IDA & DD/AFN communities	Procedure document to ensure public outreach and information sharing includes IDA & DD/AFN communities
PA DOH AFN Checklist – https://disabilities.temple.edu/sites/disabilities/files/eprep-afn-checklist-interactive-2017-1221.pdf	PA DHS/Team
List of available resources for members of IDA & DD/AFN communities – https://www.health.pa.gov/topics/Documents/County%20Guides/Statewide%20Resources.pdf	Local/Regional FAST Teams
Disabilities Integration Task Force	Deployment/Tracking mechanism for activating teams
Functional Assessment Service Teas (FAST)	Legal liability coverage waiver to support local, regional, and state level volunteers
PA Behavioral Health Crisis Response Advisory Consortium	Local/Regional AFN Deployment Kits
PA DOH Office of Health Equity	AFN Just In Time Training
PA 211	

Domain 1, Objective 5

Current Assets	Assets to Create
Incident Management Teams (IMTs) to respond to incidents, such as State Medical Assistance Team (SMAT), State Medical Response Team (SMRT), EMS Strike Team, etc.	Process to create a comprehensive, updated list of every training and exercise occurring within ESF 8
HIMS	PA DOH HERT
	Legal liability coverage waiver to support local, regional, and state level volunteers
	Process to deploy teams through HIMS

Domain 2, Objective 1

Current Assets	Assets to Create
HIMS software	List of EEI
Training, educational materials, exercises, etc. on how to use HIMS	Updated ESF 8 Annex to the Commonwealth EOP
	Whole Community Disaster Response Workgroup
	Template of which sectors of ESF 8 to activate for different disaster types

Domain 2, Objective 2

Current Assets	Assets to Create
Pre-deployment health assessment checklist	Process document to standardize the deployment process
Post-deployment health assessment checklist	Checklists to determine whether event mental health monitoring is warranted to a particular incident, with exceptions possible
Courses on TRAIN PA about how to protect health and safety of deployed responders	

Domain 2, Objective 3

Current Assets	Assets to Create
HIMS software	
HIMS current incident dashboard	
Training, educational materials, exercises, etc. on how to use HIMS	

Domain 2, Objective 4

Current Assets	Assets to Create
	Create and conduct survey on whole community disaster mitigation, preparedness, response, and recovery

Current Assets	Assets to Create
	Training module to educate partners about incident response
	Process to standardize sharing of training opportunities with partners

Domain 3, Objective 1

Current Assets	Assets to Create
EEI data within Juvare/HIMS platform	Federally required or recommended EEI
HIMS software	State developed EEI
	Training, education materials, exercises, etc. on how to use Juvare

Domain 3, Objective 2

Current Assets	Assets to Create
EEI data within HIMS platform	Federally required or recommended EEI
HIMS software	State developed EEI
	Training, education materials, exercises, etc. on how to use Juvare

	Data collection plan that includes:
	• What information is collected (i.e., EEI)
	• Other data that may be collected across the ESF 8 sector
	• What can be shared during an incident type (regardless of incident type)
	• Section on best practices and policies as to when, how, and what data is shared with:
	    o Partners
	    o Public

	Health data communication plan • Plan on how to communicate health data in a transparent, equitable, and complete manner.

Domain 3, Objective 3

Current Assets	Assets to Create
HIMS location to host resource library	Resource library for common event types • Natural disaster • Infectious disease outbreak • Manmade disaster
Website to host fact sheets to inform public about resource library topics	Fact sheets to enhance public preparedness
Fact sheets to enhance public preparedness	

Domain 3, Objective 4

Current Assets	Assets to Create
Website to host fact sheets to inform public about resource library topics	Fact sheets to enhance public preparedness
Fact sheets to enhance public preparedness	Library of pre-prepared incident response materials, including: • Communications plans • Fact sheets • Template for press releases, media advisories, etc.
	Best practices document as to when, how, and what information to share publicly about an incident

Domain 3, Objective 5

Current Assets	Assets to Create
Ability to store AAR/Lessons Learned documents on HIMS	Best practices document as to when, how, and what information to share publicly about an incident
Update of the Commonwealth EOP for public health, using recent incidents	Memo for leadership developing a standard process of what to share from AARs
	Process to share AAR information
	Guidance on using EEIs as part of Emergency Operations Planning

Domain 4, Objective 1

Current Assets	Assets to Create
HIMS	Standard Operating Procedures Document
Site survey collection tool	Directory of current Open and Closed PODs
PA DOH website	List of Public Health Emergency Sites
	Templates for each public health emergency site type
	Public facing website
	Partner facing website
	Juvare Resource Module
	Process to receive, store, and equitably distribute medical/pharmaceutical products

Domain 4, Objective 2

Current Assets	Assets to Create
Medical Distribution Plan	Updated Medical Distribution Plan
Open and Closed PODs	Updated POD Operations Manual
ESF Community Representatives	AAR Review Working Group

Domain 4, Objective 3

Current Assets	Assets to Create
HIMS	Updated Medical Distribution Plan
PA DOH POD Operations Manual	Medical Distribution Plan Training Materials
	Medical Distribution Plan Exercise
	Medical Distribution Information Sharing strategy

Domain 4, Objective 4

Current Assets	Assets to Create
PA DOH Website	Communications and social media toolkit
Annex S – NPI Plan	Ability to communicate to individuals in multiple languages
NPI Best practices	NPI Workgroup
NPI Key partners	NPI Use training process

Current Assets	
NPI Guidance	

Domain 4, Objective 5

Current Assets	Assets to Create
COVID-19 AAR	Sustainable supply of PPE and other supplies
Public-Private Partnerships	Approved Vendor List
Legal Counsel	MOU Template
	Signed MOUs

Domain 5, Objective 1

Current Assets	Assets to Create
	Develop a process document to translate materials, so it can be done immediately when an incident occurs
	Develop a process document to ensure PA DOH has a standardized response to various incidents, such as setting up a MARC, Health Resource Center, etc. for various types of incidents

Domain 5, Objective 2

Current Assets	Assets to Create
HIMS software	Juvare materials
HIMS current incident dashboard	
Training, educational materials, exercises, etc., on how to use HIMS	

Domain 5, Objective 3

Current Assets	Assets to Create
HIMS software	Whole Community Disaster Response Workgroup
HIMS current incident dashboard	Updated ESF 8 Annex to the Commonwealth EOP
Training, educational materials, exercises, etc., on how to use HIMS	Template of which sectors of ESF 8 to activate for different disaster types
WebEOC	Whole Community Disaster Response Workgroup
ESF 8 Annex to Commonwealth EOP	

Domain 5, Objective 5

Current Assets	Assets to Create
COOP Trainings	Develop resources on importance of COOP planning
Provision of FEMA Continuity Trainings piloted in 2023	Process document to be shared on how to review and update COOP plans based on additional threats, exercise results, and lessons learned from real world events

Domain 6, Objective 1

Current Assets	Assets to Create
PA DOH climate and health workgroup	Updated PA Climate Action Plan
PA Climate Action Plan	Climate and Health Risk Profile
	Climate and Health Mitigation and Adaptation Plan
	Training and capacity building workshops on climate change and public health
	Education materials for schools, other partners about climate and health
	Public information campaigns about climate and health

Domain 6, Objective 2

Current Assets	Assets to Create
Chapter 27 regulations	Webinar Preparing for a Changing Climate
PA DOH BOE surveillance systems (National Electronic Disease Surveillance System (NEDSS), Health Monitor Systems, EpiCenter)	Whole person health plan • Develops a plan to support health promotion, resilience, with an interconnected health perspective (human physical health, behavioral health, and emotional health)
PA DOH BOE Epidemiology Manual for the Identification, Investigation, and Control of Infectious Diseases	Public health information campaigns
Pennsylvania Wastewater Surveillance System (PaWSS)	Prevention Strategy Indicators
	Surveillance strategy report
	Updated Chapter 27 regulations

	Memorandums of Understanding Create/update MOUs with various agencies to promote data sharing, including FBI, PA Department of Education, PDA
	Review syndromes within health monitor system, EpiCenter to assure best practices related to identification of potential bioterrorism events
	Partnerships to support trauma sensitive trainings to the public
	Task force to improve surveillance for behavioral health and substance misuse related conditions

Domain 6, Objective 3

Current Assets	Assets to Create
Chapter 27 regulations	Surveillance strategy report
PA DOH BOE surveillance systems (NEDSS, Health Monitor Systems, EpiCenter)	Roadmap for data modernization
PA DOH BOE Epidemiology Manual for the Identification, Investigation, and Control of Infectious Diseases	Toolbox for Physicians and healthcare providers
Pennsylvania Wastewater Surveillance System (PaWSS)	Workshops for: • Safe drinking water management systems • Private wells and water systems management
	Updated Chapter 27 regulations
	Memorandums of Understanding • Create/update MOUs with various agencies to promote data sharing, including FBI, PDE, PDA
	Update PA NEDSS training documents
	Review syndromes within HMS, EpiCenter to assure best practices related to ID of potential bioterrorism events
	Biosense notifications
	Maintenance and review of Epi Manual
	New Laboratory for Commonwealth of Pennsylvania agencies
	Creation of environmental safety and security workgroup

Domain 6, Objective 4

Current Assets	Assets to Create
Chapter 27 regulations	Draft Chapter 27 regulation rewrite
Association of Public Health Laboratories (APHL) Members in PA • PA DOH BOL • Allegheny County Health Department Public Health Laboratory • Philadelphia Public Health Laboratories • PDA, Bureau of Food Safety and Laboratory Services • PA DEP BOL	Mutual aid agreements • Use MOUs as templates • Create/update Mutual Aid Agreements • Template MOUs for labs to put into place
	Non-APHL member labs within PA
	Clinical laboratories
	Coalitions with laboratories to better communicate, collaborate

Domain 6, Objective 5

Current Assets	Assets to Create
	Guide for effective methods for administration of pandemic vaccines to targeted groups
	Improve tools and guidance for the prevention and control of vector-borne diseases
	Develop communications plan regarding biosurveillance
	Toolkit to disseminate information and assets
	Campaigns to share biosurveillance information
	Coalition of communications staff to direct communication around environment and health (PA DOH, PDA, PA DEP, PGC)

Domain 6, Objective 6

Current Assets	Assets to Create
Current PA DOH disease information fact sheets, communications plans, templates	New/updated PA DOH disease information fact sheets, communications plans, templates
Pennsylvania Emergency Preparedness Guide	Public health messaging tools for different diseases
Chapter 27 regulations	Surveillance strategy report
PA DOH BOE surveillance systems (NEDSS, Health Monitor Systems, EpiCenter)	Updated Chapter 27 regulations
PA DOH BOE Epidemiology Manual for the Identification, Investigation, and Control of Infectious Diseases	Memorandums of Understanding Create/update MOUs with various agencies to promote data sharing, including FBI, PDE, PDA
Pennsylvania Wastewater Surveillance System (PaWSS)	Update PA NEDSS training documents
	Review syndromes within health monitor system, EpiCenter to assure best practices related to ID of emerging issues
	Maintenance and review of Epi Manual

Appendix 3: Resources by Domain

Domain 1, Objective 1
TRAIN PA - https://pa.train.org/pa/welcome
Juvare
Resources for Emergency Health Professionals | Emergency Preparedness & Response (cdc.gov) -
https://emergency.cdc.gov/health-professionals.asp
Preparedness & Planning | CDC Emergency Preparedness & Response -
https://emergency.cdc.gov/planning/index.asp?CDC_AA_refVal=https%3A%2F%2Femergency.cdc.gov%2Fplanners-responders.asp
Strategic Toolkit for Assessing Risks- World Health Organization -
https://iris.who.int/bitstream/handle/10665/348763/9789240036086-eng.pdf
Outward facing website with state emergency preparedness program initiatives -
https://www.health.pa.gov/topics/prep/pages/preparedness.aspx
HCC preparedness information on State website - https://www.health.pa.gov/topics/prep/Pages/HCC.aspx
2017-2022 Health Care Preparedness and Response Capabilities (phe.gov) -
https://www.phe.gov/Preparedness/planning/hpp/reports/Documents/2017-2022-healthcare-pr-capablities.pdf
Hospital Preparedness Program - https://aspr.hhs.gov/HealthCareReadiness/HPP/Pages/default.aspx
EMI - Resilience | National Preparedness Directorate | Emergency Management Institute (EMI) -
https://training.fema.gov/
Hazards Vulnerability Analysis -
https://www.phe.gov/Preparedness/planning/mscc/healthcarecoalition/chapter5/Pages/hazards.aspx

Domain 1, Objective 2
North Carolina Pre-event Essential Elements of Information (EEI): https://nc.readyop.com/fs/4dG4/07da
North Carolina Post-event EEI: https://nc.readyop.com/fs/4dG5/d841
Erie County, PA EEI – general for all disasters - https://eriecountypa.gov/wp-content/uploads/2019/08/Essential-Elements-of-Information-All-Hazards.docx
Juvare materials (already/being created)
Substance Abuse and Mental Health Services Administration (SAMHSA) Data Collection Checklist -
https://www.samhsa.gov/dtac/disaster-response-template-toolkit/evaluation-data-collection
Federal Emergency Management Agency (FEMA) data sharing strategy -
https://www.fema.gov/sites/default/files/documents/fema_data-strategy-2023-2027.pdf
CDC Standards to Facilitate Data Sharing - https://www.cdc.gov/nchhstp/programintegration/sc-standards.htm
NACCHO - Rural Local Health Departments: Share Your After-Action Reports -
https://www.naccho.org/blog/articles/rural-local-health-departments-share-your-after-action-reports

Commonwealth Emergency Operations Plan (EOP) -
https://www.pema.pa.gov/Preparedness/Planning/Documents/Commonwealth-Emergency-Operations-Plan.pdf
Current PA DOH disaster information fact sheets, communications plans, templates -
https://www.health.pa.gov/topics/prep/Pages/Disasters.aspx
PA DOH Emergency Preparedness website for public-facing information -
https://www.health.pa.gov/topics/prep/pages/preparedness.aspx
Current PA DOH Communications Plans
Health Incident Management System (HIMS)

Domain 1, Objective 3
United States Health and Human Services (HHS) Administration for Strategic Preparedness and Response
(ASPR) HCC Websites & Resource links
- Hospitals & HCCs Page: https://www.phe.gov/Preparedness/news/events/NPM18/Pages/health-care-community.aspx
- ASPR's State Highlight Page (Pennsylvania):
https://aspr.hhs.gov/HealthCareReadiness/HealthCareReadinessNearYou/Pages/Pennsylvania.aspx
- ASPR TRACIE Coalition Resources: https://asprtracie.hhs.gov/hcc-resources
Juvare - www.login.juvare.com
PA HCC Website - https://www.health.pa.gov/topics/prep/Pages/HCC.aspx
HIMS Website - https://www.health.pa.gov/topics/prep/Pages/HIMS.aspx
HIMS Resource Guides
- Posted to Coalition Sites; accessible via those sites and by contacting Regional Readiness Coordinators

Domain 1, Objective 4
CDC Access and Functional Needs Toolkit -
https://www.cdc.gov/orr/readiness/00_docs/cdc_access_and_functional_needs_toolkit_march2021.pdf
PA DHS Mass Care - https://www.dhs.pa.gov/Services/MassCare/Pages/default.aspx#integration
- Disabilities Integration Taskforce Toolkit -
https://drive.google.com/drive/folders/1nOdJGRksJrJPNVfFb8wHudiVuI2WZ51M
- FAST -https://drive.google.com/drive/folders/1AmrigvmADUDGyOkeNak4j9wkb-7XJkSy
- FAST Fact Sheet - https://drive.google.com/drive/folders/1W1edOhOCG0aX_YJfHX5wi_co2k97u2SD
PA DHS, Office of Developmental Programs (ODP) -Gold Book - https://palms-awss3-repository.s3.us-west-2.amazonaws.com/MyODP_Content/Gold+Book/Gold+Book.pdf
Pennsylvania Statewide Independent Living Council - https://pasilc.org/independent-living/centers-independent-living/
Technology for Our Whole Lives - https://techowlpa.org/
California Office of Emergency Services
- Communication recommendations and considerations - https://www.caloes.ca.gov/office-of-the-director/policy-administration/access-functional-needs/communication/

- California Community Network of OAFN partner organizations - https://www.caloes.ca.gov/office-of-the-director/policy-administration/access-functional-needs/california-community-network/
- OAFN Newsletter - https://www.caloes.ca.gov/office-of-the-director/policy-administration/access-functional-needs/oafn-newsletter/
- AFN Library (clearinghouse of AFN specific materials, guidance documents, and best practices - https://www.caloes.ca.gov/office-of-the-director/policy-administration/access-functional-needs/afn-library/

San Diego County Emergency Services AFN Working Group - https://engage.sandiegocounty.gov/oesafnwg

Colorado Division of Homeland Security and Emergency Management AFN Exercise Resources - https://dhsem.colorado.gov/emergency-management/plans/access-and-functional-needs/afn-exercise-resources

CDC/ATSDR Social Vulnerability Index (SVI) - https://www.atsdr.cdc.gov/placeandhealth/svi/interactive_map.html#more

211 – https://www.211.org/

Domain 1, Objective 5

FEMA Managing Liability in CERT Programs - https://www.ready.gov/sites/default/files/2021-04/CERT_Liability_Guide%20v2.pdf

CDC Preparing Rapid Response Teams to Control Disease Outbreaks in the DRC - https://www.cdc.gov/globalhealth/healthprotection/stories/drc-rapid-response.html

NIH Challenges in Public Health Rapid Response Team Management - https://pubmed.ncbi.nlm.nih.gov/32004121/

Domain 2, Objective 1

North Carolina Pre-event EEI: https://nc.readyop.com/fs/4dG4/07da

North Carolina Post-event EEI: https://nc.readyop.com/fs/4dG5/d841

Erie County, PA EEI – general for all disasters - https://eriecountypa.gov/wp-content/uploads/2019/08/Essential-Elements-of-Information-All-Hazards.docx

CEOP - https://www.pema.pa.gov/Preparedness/Planning/Documents/Commonwealth-Emergency-Operations-Plan.pdf

A Whole Community Approach to Emergency Management: Principles, Themes, and Pathways to Action: https://www.fema.gov/sites/default/files/2020-07/whole_community_dec2011__2.pdf

CDC Foundation – Promising Examples of FEMA's Whole Community Approach to Emergency Management https://www.cdcfoundation.org/whole-community-promising-examples

A whole community approach to emergency management: Strategies and best practices of seven community programs https://stacks.cdc.gov/view/cdc/48001

Domain 2, Objective 2

ERHMS - https://www.cdc.gov/niosh/erhms/default.html

Pre-Deployment (also includes many other links, including checklists) -
https://www.cdc.gov/niosh/erhms/predeploy.html
Post-Deployment (also includes many other links, including checklists) -
https://www.cdc.gov/niosh/erhms/postdeploy.html
Disaster Responder Health and Safety Web-Based Training - https://www.train.org/pa/course/1037220
Health and Safety in Disaster Recovery - https://www.train.org/pa/course/1052231
Additional deployment related trainings -
https://www.train.org/pa/search?query=health%20and%20safety%20deployment

Domain 2, Objective 3
Juvare materials (already/being created)

Domain 2, Objective 4
Measures of Performance for Improving Health Incident Management (RAND Corporation) -
https://www.rand.org/surveys/health-incident-management.html
Incident Response Self-Assessment - https://www.mindpointgroup.com/blog/incident-response-self-assessment

Domain 3, Objective 1
North Carolina Pre-event EEI: https://nc.readyop.com/fs/4dG4/07da
North Carolina Post-event EEI: https://nc.readyop.com/fs/4dG5/d841
Erie County, PA EEI – general for all disasters – https://eriecountypa.gov/wp-content/uploads/2019/08/Essential-Elements-of-Information-All-Hazards.docx
Juvare materials (already/being created)

Domain 3, Objective 2
SAMHSA Data Collection Checklist - https://www.samhsa.gov/dtac/disaster-response-template-toolkit/evaluation-data-collection
FEMA data sharing strategy - https://www.fema.gov/sites/default/files/documents/fema_data-strategy-2023-2027.pdf
CDC Standards to Facilitate Data Sharing - https://www.cdc.gov/nchhstp/programintegration/sc-standards.htm
Current PA DOH Communications Plans
HIMS

Domain 3, Objective 3
Current PA DOH disaster information fact sheets, communications plans, templates -
https://www.health.pa.gov/topics/prep/Pages/Disasters.aspx
PA DOH Emergency Preparedness website for public-facing information -
https://www.health.pa.gov/topics/prep/pages/preparedness.aspx

Domain 3, Objective 4
Current PA DOH disaster information fact sheets, communications plans, templates -
https://www.health.pa.gov/topics/prep/Pages/Disasters.aspx
PA DOH Emergency Preparedness website for public-facing information -
https://www.health.pa.gov/topics/prep/pages/preparedness.aspx
Current PA DOH Communications Plans

Domain 3, Objective 5
NACCHO - Rural Local Health Departments: Share Your After-Action Reports -
https://www.naccho.org/blog/articles/rural-local-health-departments-share-your-after-action-reports
Commonwealth EOP - https://www.pema.pa.gov/Preparedness/Planning/Documents/Commonwealth-Emergency-Operations-Plan.pdf
AARs from previous PA DOH responses (including COVID-19, East Palestine Train Derailment, etc.)
Guidance documents from COVID-19 response
- State and Regional Medical Operations Coordination Cell plans
- Other data collection and sharing guidance
Current PA DOH Communications Plans
HIMS

Domain 4, Objective 1
Juvare Program
Site survey collection tool

Domain 4, Objective 2
Open and Closed PODs
ESF Community Representatives

Domain 5, Objective 2
Juvare materials (already/being created)

Domain 5, Objective 3
A Whole Community Approach to Emergency Management: Principles, Themes, and Pathways to Action:
https://www.fema.gov/sites/default/files/2020-07/whole_community_dec2011__2.pdf
CDC Foundation – Promising Examples of FEMA's Whole Community Approach to Emergency Management
https://www.cdcfoundation.org/whole-community-promising-examples
A whole community approach to emergency management: Strategies and best practices of seven community
programs https://stacks.cdc.gov/view/cdc/48001
Juvare materials (already/being created)

Commonwealth EOP - https://www.pema.pa.gov/Preparedness/Planning/Documents/Commonwealth-Emergency-Operations-Plan.pdf

Domain 5, Objective 4
Juvare materials (already/being created)
ASPR MRSE - https://aspr.hhs.gov/HealthCareReadiness/guidance/MRSE/Pages/default.aspx

Domain 5, Objective 5
PA DOH COOP Plan (not a public document, but can be referred to as needed)
What is COOP Brochure - https://www.fema.gov/pdf/about/org/ncp/coop_brochure.pdf
COOP Plan Template (for federal agencies) -
https://www.fema.gov/pdf/about/org/ncp/coop/continuity_plan_federal_d_a.pdf
Developing a COOP Plan (SAMHSA) - https://www.samhsa.gov/certified-community-behavioral-health-clinics/section-223/governance-oversight/continuity-operations-plan
Numerous trainings on TRAIN, including from EMI, PEMA, etc.
https://www.train.org/pa/search?query=continuity%20of%20operations
COOP Plan Evaluation Checklist (NYS EM) - https://www.dhses.ny.gov/system/files/documents/2023/06/final-continuity-of-operations-plan-checklist-june-2023.pdf

Domain 6, Objective 1
Environmental Health Indicators Map - https://www.health.pa.gov/topics/envirohealth/Pages/EHI.aspx
List of Public Health Impacts of Climate Change in PA -
https://www.health.pa.gov/topics/Documents/Environmental%20Health/Public%20Health%20Impacts%20of%20Climate%20Change%20Threats%20in%20Pennsylvania.pdf
PA Climate Resilience Network Training Program - https://www.dgs.pa.gov/greengov/Pages/Pennsylvania-Climate-Change-Mitigation-and-Resilience-Network-.aspx#:~:text=The%20GreenGov%20Council%20launched%20the,human%2Dcentered%20solutions%20for%20Pennsylvania.
PA Climate Action Plan - https://www.dep.pa.gov/Citizens/climate/Pages/PA-Climate-Action-Plan.aspx
Maryland Climate and Health Profile Report -
https://mde.maryland.gov/programs/Marylander/Documents/MCCC/Publications/Reports/MarylandClimateandHealthProfileReport.pdf
Public Health Impacts of Climate Change Threats in Pennsylvania.pdf
Environmental Public Health Tracking Program (EPHT) EPHT (pa.gov)
New project to focus on health impacts of climate change | Penn State University (psu.edu)
State Climate and Health Adaptation Plans
- Arizona - https://www.azdhs.gov/documents/preparedness/epidemiology-disease-control/extreme-weather/pubs/arizona-climate-health-adaptation-plan.pdf

- Michigan - https://www.michigan.gov/mdhhs/-/media/Project/Websites/mdhhs/Folder4/Folder6/Folder3/Folder106/Folder2/Folder206/Folder1/Folder306/ClimateHealthPlanningGuide_2020_10_2_accessible.pdf?rev=da080bc980f649409067ffb39aa74b8f&hash=FB0B1812E7853586679E4C149ED9102E
- North Carolina - https://epi.dph.ncdhhs.gov/oee/climate/ClimateAndHealthAdaptationPlan.pdf
- Wisconsin - https://www.dhs.wisconsin.gov/publications/p01447.pdf
- New York State Association of Health Officials (local) - https://www.nysacho.org/wp-content/uploads/2021/07/Climate-and-Health-Adaptation-Moving-the-Needle-at-the-Local-Level.pdf

Climate and Health Adaptation in Action - https://www.cdc.gov/climateandhealth/climate-and-health-adaptation.html

Environmental Health Indicators Map

Climate and health Risk profile

List of Public Health Impacts of Climate Change in PA

PA Climate Network Training Program

Penn State

Training and capacity building workshops

PA Climate Action Plan

Public Health Impacts of Climate Change Threats in Pennsylvania.pdf

EPHT EPHT (pa.gov)

New project to focus on health impacts of climate change | Penn State University (psu.edu)

Pennsylvania Climate Change Mitigation and Resilience Network (pa.gov)

Domain 6, Objective 2

Webinar Preparing for a Changing Climate

PA Department of General Services (PA DGS)-GreenGov Council 2023 Commonwealth Sustainability Week - YouTube

PA DGS-GreenGov Council 2023 Commonwealth Sustainability Week - YouTube

 Whole Person Health: What You Need To Know | NCCIH (nih.gov)

 Objective 3: Foster Research on Health Promotion and Restoration | NCCIH (nih.gov)

 Fact Sheets (pa.gov)

 National Prevention Strategy: America's Plan For Better Health and Wellness (hhs.gov)

Domain 6. Objective 3

Why the Public Health Data Strategy Matters | PHDS | OPHDST | CDC

CDC Data Modernization Initiative | A Roadmap of Activities and Expected Outcomes

Surveillance Strategy Report — A Stepwise Approach | CDC

DMI Communication Resources | CDC

National_Strategy_for_Biosurveillance_July_2012.pdf (archives.gov)

Public Health Surveillance Preparing for the Future (cdc.gov)

Association of State and Territorial Health Officials (ASTHO) Report- Partner Coordination Efforts to Strengthen Infection Prevention and Control Practices (astho.org)

ASTHO going-beyond-regulatory-compliance-for-lead-testing-in-drinking-water.pdf (astho.org)

Penn State Extension Safe Drinking Water Clinic (psu.edu)

Penn State Extension Rain Barrel Installation Workshop (psu.edu)

Private Wells and Water Systems Management (psu.edu)

National Notifiable Disease Surveillance System, CDC

National Syndromic Surveillance Program, CDC

Control of Communicable Disease Manual, David Heymann, Editor

National Wastewater Surveillance System, CDC

Domain 6, Objective 4
BioWatch
Laboratory Response Network

Domain 6, Objective 5
CDC-Allocating and Targeting Pandemic Influenza Vaccine (cdc.gov)

The National Public Health Framework for the Prevention and Control of Vector-Borne Diseases in Humans (cdc.gov)

Domain 6, Objective 6
Diseases and Conditions (pa.gov)

Flu.COVIDFactSheet.pdf (pa.gov)

Monkeypox.pdf (pa.gov)

3 Important Reasons For Adults to Get Vaccinated Fact Sheet (pa.gov)

Vaccination requirements - SIR8.pdf (pa.gov)

PA Emergency Preparedness Guide

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Association of State and Territorial Health Officials. (2022). *Strategic Plan 2022-2024.* Association of State and Territorial Health Officials.

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World Institute on Disabilities. (2022). *Public Health Emergency Planning Toolkit.* Association of State and Territorial Health Officials.