

Cities Readiness Initiative (CRI) Attachment B

Montana Department of Public Health & Human Services

Public Health Emergency Preparedness Cooperative Agreement & Guidance Budget Period 2024-2025

Introduction

The Cities Readiness Initiative (CRI) based deliverable requirements are separate from the PHEP Cooperative Agreement deliverables and designed to ensure that specific preparedness gaps are covered by the additional CRI funds granted to the designated jurisdictions. This document serves as Attachment B for the budget period's task order for participating CRI jurisdictions. The CRI deliverables are supplemental to ensure documentation required by the CDC's Medical Countermeasure.

Situation

Montana PHEP and CRIs are required to focus operational readiness activities **on an all-hazards approach**. All Hazards preparedness must be a collaborative effort with all programs to develop, maintain, and exercise plans to prevent, control, and mitigate the impact on the public's health and to meet all hazard preparedness goals for the general population.

CRI Background

CDC's Cities Readiness Initiative (CRI) is a federally funded program that enhances preparedness in the nation's largest population centers, where nearly 60% of the population resides. The program prepares jurisdictions to effectively respond to large public health emergencies with life-saving medicines and supplies.

State and large metropolitan public health departments use CRI funding to develop, test, and maintain emergency response plans. These plans detail how health departments will quickly receive medical countermeasures from the Strategic National Stockpile (SNS) and distribute them to local communities.

Table of Contents

Every Quarter Requirements CRI-2

CRI 1: Conduct Quarterly Meeting

First Quarter Requirements CRI-3

CRI 2: Site Activation

Second Quarter Requirements CRI-3

CRI 3: Unified Command/EOC Set-Up and Staff Notification

Third Quarter Requirements CRI-4

CRI 4: Maintain EMC Plan

Fourth Quarter Requirements CRI-5

CRI 5: Attend Training

Submitting Progress Reports

Due Dates

Jurisdictions must complete all contract deliverable work within the quarter it is due as designated in the Task Order (Section 5: Consideration, Payments, and Progress Payments) for the PHEP Cooperative Agreement. The due date for submitting a quarterly progress report is 15 days after the end of the quarter.

PHEP Progress Report Due Schedule

Quarter 1	July 1 – Sep. 30	Due Oct. 15
Quarter 2	Oct. 1 – Dec. 31	Due Jan. 15
Quarter 3	Jan. 1 – Mar. 31	Due Apr. 15
Quarter 4	Apr. 1 – June 30	Due July 15

Figure 1

Please note that the 15 days between the end of a quarter and the report due date is for gathering information and completing the report only. You MUST complete work for the quarter DURING THE ACTIVITY PERIOD. The 15-day grace period is within the next quarter, so completing deliverable requirements during that time does not qualify. See Figure 1 for the Progress Report Due Schedule.

DPHHS PHEP may withhold payment or issue only a partial payment if deliverables are submitted incomplete or beyond the 15-day grace period. (Section 4: Compensation).

Extensions

Jurisdictions may receive extensions beyond the 15-day grace period to complete the required progress report under extenuating circumstances. PHEP will grant extensions based on an ongoing emergency response that significantly interferes with your ability to complete the progress report on time. Other factors should be described in detail on the extension request form. If you believe you have a valid reason to delay submitting your progress report, you should request the extension by the [WEB FORM](#) before the end of the respective quarter, (https://pheap.formstack.com/forms/pheap_extension). The PHEP Section Supervisor will contact applicants to discuss circumstances and resolutions of each request.

The PHEP Deliverables Resource (PDR) Website

PHEP maintains the PDR website which contains documents, weblinks, and other material for completion of the deliverable requirements. It also has links to the quarterly progress reports, DPHHS plans, exercise guidance, and other reference information.

PDR web address: <https://dphhs.mt.gov/publichealth/pheap/pheap-resources/index>.

Requirements Due Every Quarter

These requirements, in addition to those listed for each quarter, are due 15 days after the end of every quarter of the budget period.

Cities Readiness Initiative

Taylor Curry, (406)444-6072, taylor.curry@mt.gov

CRI 1: Conduct Quarterly Meeting

Due Every Quarter

Yellowstone, Cascade, and Carbon County CRI representatives and DPHHS PHEP SNS Coordinator will meet quarterly to review CRI Action Plans and progress.

Guidance:

At a minimum, Carbon, Cascade, and Yellowstone Counties will meet with the SNS Coordinator, once per

quarter to discuss progress of various action items. Dates, time, and location of the quarterly meetings must be mutually agreed upon. At least one quarterly in-person meeting should be at a designated CRI location. During these meetings, CRIs will update work plans, CDC Action Plans, and address any gaps that have been identified. The work plan or action plan can contain action items and expected completion dates.

The Action Plan must include:

- Identified projects, goals, and expected completion dates.
- Identified areas needing improvement from AARs, Corrective Action Plans, and other sources.

To fulfill this deliverable:

1. Participate in required meetings to discuss gaps, goals, and trainings. Upload a short summary of the meeting to the progress report.

Requirements Due First Quarter

These requirements, in addition to those listed for every quarter are due 15 days after the end of 1st quarter – October 15.

CRI 2: Site Activation (Partner and Core Staff Call Down)

Due 1st Quarter

CRI jurisdictions will conduct quarterly partner and core staff call down drills.

Guidance:

CRI jurisdictions will conduct a call down drill to include their identified primary partners, core staff, and the state SNS Coordinator. The CRI jurisdictions will document the activation and upload their AARs as supporting documents.

To fulfill this deliverable:

- 1.) Identify primary partners and core staff.
- 2.) Complete call down drill.
- 3.) Upload AARs for each site activation to the Progress Report.

Requirements Due Second Quarter

These requirements, in addition to those listed for every quarter are due 15 days after the end of 2nd quarter – January 15.

CRI 3: Unified Command/Emergency Operations Center (EOC) Set-up and Staff Notification

Conduct a functional exercise to set up your Unified Command or EOC and notify all necessary staff.

Guidance:

CRI jurisdictions will conduct a Unified Command/EOC set-up. The setup drill provides information on operational ability to standup a site with the necessary materiel, layout, and supplies for a timely response. The CRI jurisdictions will also conduct all-staff notification call-down drills to include the DPHHS PHEP SNS

Coordinator. The staff drill must measure:

- The accuracy of staff rosters
- Timeliness of staff confirmations to the notification
- Staff ability to report for duty within a designated timeframe.
- Communications methods and processes are also measured.

Write an AAR/IP and submit it in the progress report.

To fulfill this deliverable:

- 1.) Set-up either your unified command or EOC.
- 2.) Upload an AAR/IP as a supporting document of the activations to the progress report identify all staff that would be utilized in an EMC event.

Requirements Due Third Quarter

These requirements, in addition to those listed for every quarter are due 15 days after the end of 3rd quarter – April 15.

CRI 4: Maintain Emergency Medical Countermeasures (EMC) Plan

Due 3rd Quarter

Review and update your jurisdiction's EMC Plan.

Guidance:

Update existing Emergency Medical Countermeasure (EMC) plan. The plan should address:

- Inclusion of AFN and disability service partners in the planning process.
- Identified areas of improvement as documented in AARs.
- New guidance or considerations provided by the CDC.
- All appropriate and relevant functions and planning elements in CDC Capability 8, Medical Countermeasure Dispensing.
- All appropriate and relevant functions and planning elements in CDC Capability 9, Medical Materiel Management and Distribution.
- Ensure partner organizations agree to their role, as outlined in the plan.
- Obtain signatory authority.

To fulfill this deliverable:

- 1.) Upload a letter stating that your EMC Plan is up to date. Include a summary of any changes that were made to the plan. Please confirm that your EMC plan has signatory authority in the Progress Report.
- 2.) Include a list of AFN and disability service partners you included in the process of reviewing the EMC Plan.

Requirements Due Fourth Quarter

These requirements, in addition to those listed for every quarter are due 15 days after the end of 4th quarter – July 15.

CRI 5: Attend Training

Due 4th Quarter

During the 2024-2025 budget period each CRI jurisdiction should attend a minimum of one training or conference sponsored by FEMA, CDC, NACCHO, or ASPR.

Guidance:

At least one person from each jurisdiction should attend or enroll in a training or conference that focuses on MCM, incident management, or preparedness.

We encourage you to send at least one person to the Introduction to SNS Operations Course that is provided by the Center for Domestic Preparedness in Anniston, Alabama. If necessary, PHEP can provide more details on the SNS Operations Course. CRI staff should be well versed in SNS operations, and this course is a perfect opportunity to receive the necessary training. It is a free course; travel and meals are reimbursed by FEMA. Here is the link for the Introduction to SNS Operations Course:

<https://cdp.dhs.gov/training/course/PER-310>

Other examples of acceptable training include:

- NACCHO's Preparedness Summit
- FEMA in person trainings, (Center for Domestic Preparedness/Emergency Management Institute)
- Healthcare Coalition Conference (must be active executive member of the coalition and approved to go through the coalition)
- Courses from Intermountain Center for Disaster Preparedness
- Trainings sponsored by CDC Center for Preparedness and Response, ASTHO, NAACHO, and ASPR through a Regional Healthcare Coalition (RHCC)
- Other courses you feel would enrich your capacity to respond to a disaster will need to have prior approval from the DPHHS PHEP SNS Coordinator.

To fulfill this deliverable:

- 1.) Upload certificates, sign-in sheets, or documentation of attendance to the Progress Report.

The Centers for Disease Control and Prevention (CDC) and Administration for Strategic Preparedness and Response (ASPR) provides funding for the Montana's DPHHS Public Health Preparedness office (PHEP) and Healthcare Preparedness Program (HPP). However, the views expressed in written or electronic publications, or by speakers, trainers, or other DPHHS employees do not officially reflect the policies of the U.S. Health and Human Services agency or the U.S. Government, nor does the mention of trade names, commercial practices, or organizations imply their endorsement. You may obtain information on the cost of printed publications by contacting the PHEP office at (406) 444-0910 or mtphep@mt.gov.