

**City of Carson City
Agenda Report**

Date Submitted: February 10, 2015

Agenda Date Requested: February 19, 2015

Time Requested: 10 minutes

To: Carson City Board of Supervisors

From: Health & Human Services Department (Nicki Aaker)

Subject Title: For Possible Action: Approve Carson City Health and Human Services apply for the Public Health Emergency Preparedness (PHEP) supplemental grant.

Staff Summary: The State of Nevada, Division of Public and Behavioral Health (DPBH), Public Health Preparedness (PHP) Program will be receiving \$1,605,316 from the Centers for Disease Control and Prevention (CDC) to be sub granted to local health authorities, tribal partners, and state labs within Nevada. This grant will be used to support local public health preparedness planning and operational readiness for responding to infectious diseases, such as Ebola.

Type of Action Requested:

(check one)

Resolution

Ordinance

Formal Action/Motion

Other (Specify) Information Only

Does This Action Require A Business Impact Statement: Yes No

Recommended Board Action: I move to approve Carson City Health and Human Services apply for the Public Health Emergency Preparedness (PHEP) supplemental grant.

Explanation for Recommended Board Action: Grant funds would be used for community preparedness, non-pharmaceutical interventions, and responder (worker) safety and health.

Applicable Statute, Code, Policy, Rule or Regulation: N/A

Fiscal Impact: N/A; no fiscal match is required.

Explanation of Impact: N/A

Funding Source: State of Nevada, Division of Public and Behavioral Health (DPBH), Public Health Preparedness (PHP) Program will sub grant funds from the Centers for Disease Control and Prevention (CDC).

Alternatives: To deny Carson City Health and Human Services permission to apply for the Public Health Emergency Preparedness (PHEP) supplemental sub grant through the State of Nevada, Division of Public and Behavioral Health (DPBH), Public Health Preparedness (PHP) Program.

Supporting Material: State of Nevada, Division of Public and Behavioral Health (DPBH), Public Health Preparedness (PHP) Program sub grant proposal instructions for the Centers for Disease Control and Prevention's (CDC) Ebola Supplemental Grant Funding Opportunity Announcement – CDC-RFA-TP12-12010302SUPP15.

Prepared By: Nicki Aaker, MSN, MPH, RN

Reviewed By: N. Aaker Date: 2/10/15
(Department Head)
Nicholas Manano Date: 2/10/15
(City Manager)
John J. O'Neil Date: 2/10/15
(District Attorney)
John A. Smith Date: 2/10/15
(Finance Director)

Board Action Taken:

Motion: _____ 1) _____ Aye/Nay
2) _____

(Vote Recorded By)

CDC Ebola Supplemental Grant

CDC-RFA-TP12-12010302SUPP15

\$1,605,316

Subgrant Proposal Instructions

Summary

The Centers for Disease Control and Prevention (CDC) has announced supplemental Ebola funding. Funds are intended to accelerate state, local, territorial, and tribal public health planning to prevent, prepare for, respond to, and recover from Ebola. These supplemental funds are intended to specifically support the public health sector's preparedness planning and response activities and to support public health's ability to collaborate with other necessary response partners including, but not limited, to emergency medical services (EMS), emergency management, environmental health, waste management, and the healthcare system.

Please note that this funding announcement is focused on public health. An additional grant will be coming available from the Office of the Assistant Secretary for Preparedness and Response (OASPR) focusing on hospital and healthcare Ebola preparedness.

The funding is targeted to address public health preparedness capabilities including but not limited to:

- Community Preparedness
- Public Health Surveillance and Epidemiological Investigation
- Public Health Laboratory Testing
- Non-Pharmaceutical Interventions
- Responder (Worker) Safety and Health
- Emergency Public Information and Warning/Information Sharing
- Medical Surge.

The attached Funding Opportunity Announcement lists all activities that are allowable with these funds per the capabilities that are listed above. A total of \$1,605,316 will be awarded to Nevada.

Per the CDC, each awardee is to use this Ebola supplemental funding to **focus on gaps** in the allowable activities. Please see table on Page 3.

Subgrant Proposals

The State of Nevada, Division of Public and Behavioral Health (DPBH), Public Health Preparedness (PHP) Program will be the awardee of these funds. Therefore, each agency that wishes to apply for these funds must submit a proposal to the State PHP Program. Each proposal must contain a completed "PHEP Ebola Work Plan form" with the following information for each capability they are applying for:

Work Plan

- **Problem Statement** – Define the problem or issue the jurisdiction seeks to resolve with supplemental funds during the project period. Limitations or "root causes" that have led to the current problem/issue may be included.

- Baseline Capacity – Specify the current baseline capacity in this area, such as current percentage of staff who can don/doff PPE per CDC guidelines.
- Outcomes – Define the expected outcomes that align with resolving the problem or closing the gaps. The outcomes should define what changes or improvements will occur in the public health/healthcare systems or to the community, such as awareness, knowledge, attitudes, skills, opinion, behavior, policies, or health improvement. Outcomes should be well-defined, specific, measureable, realistically achievable, and contribute to closing the gaps identified in the problem statement. Ideally, outcomes should link to planned activities, quantify the targeted change, and include an estimated timeline for achieving the change.
- Planned Activities – List the intermediate activities the jurisdiction will undertake, including tasks and estimated start and end dates, that will lead to the associated outcome and contribute to resolving the identified issue or problem.
- Proposed Outputs – List the proposed outputs that will be produced as a result of the planned activities, such as a plan, a training curriculum, or a tracking system database.

Please use attached forms for your subgrant proposal. See attached “Work Plan Development Webinar” for examples on how to complete the Work Plan.

Budget & Justification

A detailed budget with supporting justification must be provided and be related to activities that are listed in the Work Plan. No match is required.

Please use attached forms for your subgrant proposal. “PHEP Ebola Budget form” is an Excel workbook containing a tab for each Capability along with a Summary tab. Enter your budget information into capability tabs only. Do not enter data into the Summary tab. It will tabulate automatically.

Budget/Project Period

According to the CDC, the period is 18 months with an expected award date of 3/27/2015. Once the State PHP Program receives a Notice of Grant Award (NOGA) from the CDC, we will be required to apply for authority in order to start spending and subgranting the awarded funds.

Therefore, your budget/project period will be from 7/1/2015 – 9/27/2016.

Laboratory Subgrants

Subgrants will be awarded directly to the Nevada State Public Health Laboratory and to the Southern Nevada Public Health Laboratory.

Each laboratory is required to acquire and maintain at least two LRN-approved RT-PCR instruments that will replace the existing standard LRN instrument (ABI 7500 DX).

Each laboratory is to submit a proposal to the Nevada State PHP Program with the cost of this equipment, maintenance and support agreements, training costs for this equipment, and any needed supplies for these items.

Areas of Focus

The Nevada State PHP Program has identified areas of focus for each allowed capability and activity. Please use the table below to see what will be an allowable activity in subgrant proposals.

COMMUNITY PREPAREDNESS	
ALLOWABLE ACTIVITIES in Funding Opportunity Announcement	PROPOSED ACTIVITIES
Provide an updated concept of operations plan for responding to Ebola.	<ul style="list-style-type: none">State PHP and Local Health Authorities (LHAs) to collaborate in updating the Statewide Concept of Operations Plan (CONOPS) for Ebola with further details. <p>Please note – The current CONOPS Plan does not have names of identified frontline or assessment facilities.</p>
Participate in the design and approval of the jurisdiction's plan for healthcare response including the selection of hospitals to serve as Ebola treatment centers (if applicable), Ebola assessment hospitals, and Ebola frontline hospitals. This planning should integrate with the ASPR HPP program guidance for interdisciplinary consistency. Surveillance, monitoring, patient referral, and infection control activities should clearly and consistently connect with the jurisdiction's healthcare response plan.	<ul style="list-style-type: none">State PHP and LHAs to collaborate in updating the Statewide Concept of Operations Plan (CONOPS) for Ebola and other plans with further details.
Collaborate with the healthcare system to assess the jurisdiction's public health and healthcare system training needs; provide materials and facilitate training designed to improve the integration of the public health and healthcare response to EVD and other infectious diseases including infection control and surveillance activities.	<ul style="list-style-type: none">LHAs and tribal partner may apply for funding.
Partner with the state's Healthcare Acquired Infection (HAI) multidisciplinary advisory group (or similar infection control groups within the state) to develop a statewide plan for improving infection control within the healthcare system.	<ul style="list-style-type: none">State OPHIE will conduct this activity through the CDC Ebola ELC Grant. Funding will not be granted for this activity through this CDC PHP Ebola grant.
Develop a multiagency exercise (tabletop or functional) that tests coordination with the healthcare sector, EMS providers, and emergency management, such as information sharing, patient referral, and laboratory specimen collection and submission or exercises that test other potential operational gaps. Jurisdictions that have participated in an actual EVD response may use this experience to satisfy this requirement provided the jurisdiction develops an after-action report and improvement plan.	<ul style="list-style-type: none">LHA's and tribal may apply for this.State PHP to collaborate with DEM to create a specialized Area/Unified Command ICS Course and Exercise. This was a topic from the Ebola Advisory Task Force.State PHP to create a statewide "training website" for any emergency management and public health preparedness online trainings to be available to professionals. One stop shop training website.

PUBLIC HEALTH SURVEILLANCE AND EPIDEMIOLOGICAL INVESTIGATION	
<p>Sustain effective state and local monitoring programs for travelers from Ebola-impacted countries with a goal of consistently monitoring 100% of travelers. Programs should include activities that assure that persons who develop symptoms consistent with EVD are rapidly referred to the appropriate level of care for possible testing and treatment. <i>Refer to Interim U.S. Guidance for Monitoring and Movement of Persons with Potential Ebola Virus Exposure for additional information.</i></p>	<ul style="list-style-type: none"> • LHA's and tribal partner may apply for funds to sustain active monitoring and direct active monitoring activities.
<p>Develop and implement jurisdictional programs to mitigate and prevent transmission of Ebola through effective management of all persons under investigation (PUI) for EVD and those with confirmed EVD. This includes including collaborating with healthcare system partners and coalitions to establish a tiered approach for EVD patient care.</p>	
<p>PUBLIC HEALTH LABORATORY TESTING</p>	<ul style="list-style-type: none"> • LHA's and tribal may apply for funds to sustain active monitoring and direct active monitoring activities. Continue to develop policies/procedures. • State PHP and LHAs to collaborate in updating the Statewide Concept of Operations Plan (CONOPS) for Ebola with further details.
<p>24/7/365 availability of reverse transcription-polymerase chain reaction (RT-PCR) testing for EVD in designated Laboratory Response Network (LRN) facilities, according to the methods and reporting requirements promulgated by CDC or LRN.</p>	
<p>Appropriate collection and handling of hospital and other clinical laboratory specimens that require EVD testing and shipping to LRN or CDC laboratories designated for testing.</p>	<ul style="list-style-type: none"> • State OPHIE will conduct this activity through the CDC Ebola ELC Grant. Funding will not be granted for this activity through this CDC PHP Ebola grant.
<p>Acquiring and maintaining at least two (2) LRN-approved RT-PCR instruments that will replace the existing standard LRN instrument (ABI 7500 DX).</p>	<ul style="list-style-type: none"> • State PHP will subgrant funds directly to the Nevada State Public Health Laboratory and the Southern Nevada Public Health Laboratory. Funding will be to: <ul style="list-style-type: none"> ○ Purchase at least two LRN-approved RT-PCR instruments that will replace the existing standard LRN instrument (ABI 7500 DX) ○ Maintenance and support agreements ○ Training costs ○ Supply costs.
<p>Adherence to required infection control precautions and practices, specifically for handling blood-borne pathogens, when collecting and handling specimens. Support provision of EVD training, including but not limited to laboratory safety and diagnostic methods.</p>	<ul style="list-style-type: none"> • State OPHIE will conduct this activity through the CDC Ebola ELC Grant. Funding will not be granted for this activity through this CDC PHP Ebola grant.
<p>Rapidly reporting Ebola test results between the laboratory, the public health department, and healthcare facilities to support public health investigations.</p>	<ul style="list-style-type: none"> • State OPHIE will conduct this activity through the CDC Ebola ELC Grant. Funding will not be granted for this activity through this CDC PHP Ebola grant.

NON-PHARMACEUTICAL INTERVENTIONS	
Develop and implement protocols for rapid and appropriate public health actions, such as controlled movement, isolation, quarantine, or public health orders. Plans should include: 1) Alternate travel plans for individuals subject to controlled movement who are not allowed to travel by long-distance commercial conveyances, such as aircraft, ship, bus, or train; how jurisdictions will ensure permitted travel is conducted by noncommercial conveyances. 2) Whether federal public health travel restrictions (Do Not Board) will be used to enforce controlled movement. 3) Whether specific community locations will be designated for safe housing of persons subject to restricted movement and the role of public health orders and corresponding compensation and support to be provided to individuals under a public health order. 4) The role of public health in coordinating with healthcare facilities and jurisdictional authorities to ensure the separation (through isolation or quarantine) of an individual or group who is reasonably believed to be infected with Ebola from those who are not infected to prevent the possible spread to others who have not been exposed.	<ul style="list-style-type: none"> State PHP, LHAs, and tribal to develop/update Community Mitigation Plans.
Work with CDC's Division of Global Migration and Quarantine (DGMQ) to screen travelers in their states who have entered the United States via cleared flights, broken itineraries, or land border crossing and have not undergone enhanced screening at one of the five airports conducting enhanced entry screening of travelers from Ebola-affected countries. Awardees will be required to conduct an initial Check and Report Ebola (CARE) screening with such travelers over the telephone, in person, or to designate appropriate public health outreach workers in local jurisdictions.	<ul style="list-style-type: none"> Only SNHD may apply for this activity.
Support ongoing communication between the jurisdiction and its CDC quarantine station as applicable regarding coordination with identified hospitals that would support jurisdictional response to a communicable disease.	<ul style="list-style-type: none"> Only SNHD may apply for this activity.
Coordinate appropriate environmental cleaning and waste management in community settings (other than healthcare settings) where PUIs or those with probable or confirmed Ebola virus infections have been located.	<ul style="list-style-type: none"> LHAs may develop waste management strategies for a patients home, car, public transportation, etc. This is a public health focus and not healthcare setting.
RESPONDER (WORKER) SAFETY AND HEALTH	
Collaborate with healthcare coalitions and healthcare systems to assure the development of a strategy to assure adequate supplies of personal protective equipment (PPE) for healthcare workers, laboratory personnel, EMS, and environmental services staff and work with suppliers and coalitions to develop statewide plans for caching or redistribution/sharing. This strategy should be integrated with healthcare coalitions' system plans for purchasing, caching, and distributing PPE in conjunction with HPP guidance.	<ul style="list-style-type: none"> NHA already developed MOA with hospitals for PPE/resource sharing. Only NHA can apply for funding for further development. <p>(Please note – There is a Statewide Healthcare Requesting Procedure already in place for when PPE cannot be obtained through the NHA MOA. Funding will not be allowed to redevelop this plan nor create additional PPE storage warehouses or requesting procedures)</p>

<p>Purchase PPE for public health workers. Other federal funds will support PPE purchases for healthcare staff and healthcare coalitions.</p>	<ul style="list-style-type: none"> State PHP, LHAs, and tribes to purchase some PPE in order to conduct direct active monitoring and for public health first responders. This can include law enforcement. Including law enforcement was a request to the Ebola Advisory Task Force.
<p>Assist and assure that healthcare workers, laboratory personnel, and environmental services staff are trained in the proper use of PPE including safe removal to prevent self-contamination or contamination of others, and that contaminated equipment is disposed of appropriately. <i>See Guidance on Personal Protective Equipment to Be Used by Healthcare Workers during Management of Patients with Ebola Virus Disease in U.S. Hospitals, Including Procedures for Putting on (Donning) and Removing (Doffing) for more information.</i></p>	<ul style="list-style-type: none"> State, LHA's, and tribes to develop/update plans to define roles and responsibilities of first responders. State PHP to develop PPE donning/doffing training curriculum with a certified PPE specialist. HPP Ebola funding will then be used to send specialist to train in person.
<p>Collaborate with the healthcare sector to assure that clinicians are adequately trained on appropriate cleaning and disinfecting procedures to avoid cross contamination.</p>	<ul style="list-style-type: none"> State PHP to develop cleaning/disinfecting procedures with a certified decontamination specialist. HPP Ebola funding will then be used to send specialist to train in person.
<p>Assure compliance with the U.S. Department of Transportation (DOT) Hazardous Materials Regulations to transport contaminated items for off-site disposal. Establishing on-site disposal, such as autoclave capability, is also acceptable. <i>See Interim Guidance for Environmental Infection Control in Hospitals for Ebola Virus for more information.</i></p>	<ul style="list-style-type: none"> LHAs may apply for this.
<p>Collaborate with the healthcare sector to assure the safe handling of human remains that may contain Ebola virus by following decontamination measures according to <i>CDC Guidance for Safe Handling of Human Remains of Ebola Patients in U.S. Hospitals and Mortuaries.</i></p>	<ul style="list-style-type: none"> State OPHIE to collaborate with Nevada Funeral Board and healthcare sector to develop safe handling of human remains for Category A Agents. Dr. Green tasked this to State OPHIE during 1/26/15 Ebola Task Force Meeting. LHAs to conduct inventory of BIO SEAL units with local funeral homes and hospitals. Purchase body bags and/or BIO SEAL units if needed.
<p>EMERGENCY PUBLIC INFORMATION & WARNING/ INFORMATION SHARING</p>	
<p>Coordinate information sharing among public health agency staff, healthcare personnel, airport entry screening personnel, EMS providers, and the public.</p>	<ul style="list-style-type: none"> Not identified as a gap. No funding will be awarded.
<p>Develop risk communication messages, plans, and notification systems targeting the public and the healthcare sector regarding risks to the public, risk of transmission, and protective measures.</p>	<ul style="list-style-type: none"> Not identified as a gap. No funding will be awarded.

<p>MEDICAL SURGE</p> <p>Collaborate with healthcare system partners to design, develop, and implement a tiered network of hospitals within the state (or jurisdiction) capable of providing EVD patient care and a plan to refer and transport PUIs to the appropriate location. This will include state selection of hospitals to serve as Ebola treatment centers (if applicable), assessment hospitals, and frontline hospitals. <i>Refer to Interim Guidance for U.S. Hospital Preparedness for Patients under Investigation or with Confirmed Ebola Virus Disease: A Framework for a Tiered Approach for more information.</i></p>	<ul style="list-style-type: none"> • State PHP and LHAs to collaborate in updating the Statewide Concept of Operations Plan (CONOPS) for Ebola with further details.
--	---

Point of Contact

Erin Seward, MPH

Division of Public and Behavioral Health

4150 Technology Way, Suite 200

Carson City, NV 89706

775-684-4117

eseward@health.nv.gov

Subgrant Proposals

Please submit your subgrant proposals to Sue Genzler at sgenzler@health.nv.gov. These are due no later than Monday February 9, 2015 by 12:00pm (Noon). This includes a completed:

- Cover Letter
- PHEP Ebola Work Plan form
- PHEP Ebola Budget form