

# Domain 2: Investigate Health Problems and Environmental Public Health Hazards to Protect the Community

Domain 2 focuses on the investigation of suspected or identified health problems or environmental public health hazards. Included are epidemiologic identification of emerging health problems, monitoring of disease, availability of public health laboratories, containment and mitigation of outbreaks, coordinated response to emergency situations, and communication.

## DOMAIN 2 INCLUDES FOUR STANDARDS:

<b>Standard 2.1:</b>	Conduct Timely Investigations of Health Problems and Environmental Public Health Hazards
<b>Standard 2.2:</b>	Contain/Mitigate Health Problems and Environmental Public Health Hazards
<b>Standard 2.3:</b>	Ensure Access to Laboratory and Epidemiologic/Environmental Public Health Expertise and Capacity to Investigate and Contain/Mitigate Public Health Problems and Environmental Public Health Hazards
<b>Standard 2.4:</b>	Maintain a Plan with Policies and Procedures for Urgent and Non-Urgent Communications

## STANDARD 2.1: Conduct timely investigations of health problems and environmental public health hazards.

The ability to conduct timely investigations of suspected or identified health problems is necessary for the detection of the source of the problem, the description of those affected, and the prevention of the further spread of the problem. When public health or environmental public health hazards are investigated, problems can be recognized and rectified, thus preventing further spread of disease or illness.



## MEASURE 2.1.1 A, continued

b. Health problem or hazard specific protocol steps including case investigation steps and timelines, and reporting requirements

b. The protocol must contain protocol steps or procedures for the health problems or hazards that will be investigated, case investigation steps, and timelines related to those problems or hazards, and reporting requirements.

The protocols may be in separate documents, may be contained in a manual format, or may be in a single compiled document.

# STANDARD 2.1: Conduct timely investigations of health problems and environmental public health hazards.

MEASURE	PURPOSE	SIGNIFICANCE
<p><b>Measure 2.1.2 S</b></p> <p>Capacity to conduct and/or support investigations of infectious diseases simultaneously</p>	<p>The purpose of this measure is to assess the state health department's capacity to engage in more than one investigation of infectious disease health problems at the same time.</p>	<p>More than one health problem that requires an investigation may occur simultaneously. Health problems may occur simultaneously in more than one location in the state or may be contained in the jurisdiction of a single or multiple Tribal or local health departments. It is important that the state health department has the capacity to investigate or help support multiple investigations of infectious disease at the same time. The focus of this measure is on investigation of infectious diseases such as influenza, measles, food borne illnesses, or Lyme disease.</p>

REQUIRED DOCUMENTATION	GUIDANCE	NUMBER OF EXAMPLES	DATED WITHIN
<p><b>1. Procedures for the conduct of simultaneous investigations</b></p>	<p><b>1. The state health department must provide written procedures that describe how it conducts multiple, simultaneous investigations of infectious diseases.</b></p> <p>State health departments often work together with Tribal health departments and local health departments to conduct investigations; the state health department can include contractors and/or relationships with Tribal health departments, local health departments, or other state governmental departments to show the capacity to conduct simultaneous investigations.</p> <p>The state health department does not have to perform all functions of an investigation, but must have the capacity to respond when needed.</p> <p>Documentation could be, for example, response plans, internal plans, staff capacity and expertise, and resources available to the health department from other state governmental departments (for example, the Department of Agriculture or the Department of Environmental Resources).</p>	<p><b>1 comprehensive procedure or 2 examples of procedures</b></p>	<p><b>5 years</b></p>

## MEASURE 2.1.2 S, continued

<b>2. Reviews of investigation reports against procedures</b>	<b>2. The state health department must provide program audits (internal or external), programmatic evaluations, case reviews, or peer reviews of investigation reports (as compared to written procedures) developed as a result of an investigation of infectious diseases.</b> The documentation must reference the state health department's capacity to respond to outbreaks of infectious or communicable disease. The documentation could be a completed After Action Report (AAR).	<b>2 examples of simultaneous investigations</b>	<b>5 years</b>
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# STANDARD 2.1: Conduct timely investigations of health problems and environmental public health hazards.

MEASURE	PURPOSE	SIGNIFICANCE
<p><b>Measure 2.1.2 T/L</b></p> <p>Capacity to conduct an investigation of an infectious disease</p>	<p>The purpose of this measure is to assess the Tribal/local health department's capacity to implement its protocols for an investigation of infectious disease.</p>	<p>Investigations of infectious disease provide information that allows the health department to understand the best way to control a current outbreak of a disease and to prevent further spread of an outbreak. Sometimes a health problem or hazard requiring investigation occurs where local and state and/or local and Tribal jurisdictions overlap or are adjacent to one another requiring response and coordination between health departments. The focus of this measure is on investigation of infectious diseases, such as influenza, measles, food borne illnesses, or Lyme disease.</p>

REQUIRED DOCUMENTATION	GUIDANCE	NUMBER OF EXAMPLES	DATED WITHIN
<p><b>1. Reviews of investigation reports against procedures</b></p>	<p><b>1. The Tribal/local health department must provide audits (internal or external), programmatic evaluations, case reviews, or peer reviews of investigation reports (as compared to written procedures).</b> The documentation must reference the health department's capacity to respond to outbreaks of infectious disease.</p> <p>The Tribal/local health department can include contractors and/or relationships with the state health department, Tribal health departments in the state, local health departments, or other local government departments to demonstrate the capacity to conduct an investigation. The health department does not have to perform all functions of an investigation of an infectious disease, but must have formal arrangements with others who will participate and support the Tribal/local health department in its investigations.</p> <p>The documentation could be a completed After Action Report (AAR).</p>	<p><b>2 examples</b></p>	<p><b>5 years</b></p>

# STANDARD 2.1: Conduct timely investigations of health problems and environmental public health hazards.

MEASURE	PURPOSE	SIGNIFICANCE	
<p><b>Measure 2.1.3 A</b></p> <p>Capacity to conduct investigations of non-infectious health problems, environmental, and/or occupational public health hazards</p>	<p>The purpose of this measure is to assess the health department's capacity to implement protocols for an investigation of non-infectious diseases and illnesses and of environmental public health hazards.</p>	<p>Investigations of non-infectious diseases and illnesses and of environmental public health hazards allow the health department to learn how to prevent or mitigate health problems caused by non-infectious health problems and environmental public health hazards.</p>	
REQUIRED DOCUMENTATION	GUIDANCE	NUMBER OF EXAMPLES	DATED WITHIN
<p><b>1. Completed investigation of a non-infectious health problem or hazard</b></p>	<p><b>1. The health department must provide written reports of a completed investigation of a non-infectious health problem or hazard.</b> There is no specified format.</p> <p>Non-infectious health problems include: morbidity and mortality associated with emergent and non-emergent health problems that are not infectious, for example, chronic disease, injuries, and environmental public health hazards, as well as their risk factors, including socioeconomic issues. An example of a non-infectious health problem would be an increase in diagnosed diabetes cases or a geographic area with a higher than normal rate of a cancer type. An example of an environmental public health hazard could be arsenic or lead in drinking water, as opposed to an infectious public health hazard, such as a restaurant food-borne outbreak.</p> <p>If this activity is provided through a contract/MOA/MOU, then written assurance that the investigation was completed must be provided.</p> <p>Documentation could be, for example, reports of the investigation, executive summary, presentation or investigation records, including logs and notes.</p>	<p><b>2 examples</b></p>	<p><b>5 years</b></p>

## STANDARD 2.1: Conduct timely investigations of health problems and environmental public health hazards.

MEASURE	PURPOSE	SIGNIFICANCE	
<p><b>Measure 2.1.4 A</b></p> <p>Collaborative work through established governmental and community partnerships on investigations of reportable diseases, disease outbreaks, and environmental public health issues</p>	<p>The purpose of this measure is to assess the health department's working relationships that are needed to investigate reports of reportable diseases and environmental public health problems.</p>	<p>As a part of conducting investigations, the health department must partner with other governmental agencies and community partners to investigate reports on reportable diseases and environmental public health investigation.</p>	
REQUIRED DOCUMENTATION	GUIDANCE	NUMBER OF EXAMPLES	DATED WITHIN
<p><b>1. Partnerships with other governmental agencies/ departments and/or key community stakeholders that play a role in investigations or have direct jurisdiction over investigations</b></p>	<p><b>1. The department must provide contracts/MOAs/MOUs/ agreements/funding agreements that document established partnerships for the investigation of outbreaks of disease, health care associated infections, or environmental public health hazards.</b> These partnerships are with other governmental agencies/ departments and key community stakeholders, and the agreement must state or show that the partner plays a role in investigation. The agreement may state that the partner may have a direct jurisdiction over a specified type of investigation.</p>	<p><b>2 examples</b></p>	<p><b>5 years</b></p>
<p><b>2. Working with partners to conduct investigations</b></p>	<p><b>2. The department must document work with partners to conduct investigations.</b></p> <p>Documentation could be investigation reports and records, AARs, meeting minutes, presentations, and news articles</p>	<p><b>2 examples</b></p> <p>The examples must be from two different investigations of reportable diseases or environmental public health investigations</p>	<p><b>5 years</b></p>

MEASURE 2.1.4 A, continued

<b>3. Laboratory testing for notifiable/reportable diseases</b>	<b>3. The department must provide a list of public health laboratory services presently provided that includes testing for notifiable/reportable diseases.</b>	<b>1 list of public health laboratory services</b>	<b>5 years</b>
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## STANDARD 2.1: Conduct timely investigations of health problems and environmental public health hazards.

MEASURE	PURPOSE	SIGNIFICANCE	
<p><b>Measure 2.1.5 A</b></p> <p>Monitored timely reporting of notifiable/reportable diseases, lab test results, and investigation results</p>	<p>The purpose of this measure is to assess the health department's assurance of timely investigations including reporting of notifiable/reportable diseases, laboratory test results, and reporting investigation results.</p>	<p>A component of assuring timely investigations is the monitoring of reporting notifiable/reportable diseases, laboratory testing, and investigation of results as appropriate and required by law. When all steps are timely, partners can work together to stop the spread of disease.</p>	
REQUIRED DOCUMENTATION	GUIDANCE	NUMBER OF EXAMPLES	DATED WITHIN
<p><b>1. Tracking log or audit of reports of disease reporting, laboratory tests reports, and/or investigations with actual timelines noted</b></p>	<p><b>1. The health department must provide a tracking log or audit on investigations that includes reporting lab test results and investigation results.</b> The log is used to track various elements of investigations.</p> <p>Documentation could be a log or a report. The log or report must include timelines.</p>	<p><b>1 tracking log or audit of investigations conducted</b></p>	<p><b>5 years</b></p>
<p><b>2. Applicable laws</b></p>	<p><b>2. The department must provide a copy of laws relating to the reporting of notifiable/reportable diseases.</b></p> <p>State health departments must include laws for local health departments to report to the state, as well as for states reporting to CDC.</p> <p>Documentation could be, for example, a screen shot of a posting on a website or a department intranet or a pdf copy.</p>	<p><b>1 set of laws</b></p>	<p><b>The law may be older than 5 years, but the health department should document that the law has been reviewed within 5 years</b></p>

# STANDARD 2.1: Conduct timely investigations of health problems and environmental public health hazards.

MEASURE	PURPOSE	SIGNIFICANCE	
<p><b>Measure 2.1.6 S</b></p> <p>Consultation, technical assistance, and/or information provided to Tribal and local health departments in the state regarding the management of disease outbreaks and environmental public health hazards</p>	<p>The purpose of this measure is to assess the consultation, technical assistance, and information that a state health department provides to Tribal and local health departments in the state concerning the management of disease outbreaks and public health hazards.</p>	<p>The state health department’s provision of technical assistance, information, and consultation to Tribal and local health departments on epidemiological, laboratory, and environmental public health assistance improves the effectiveness of the public health response locally and state-wide. The measure includes assistance concerning identifying, analyzing, and responding to infectious disease outbreaks, as well as to environmental and occupational public health hazards.</p>	
REQUIRED DOCUMENTATION	GUIDANCE	NUMBER OF EXAMPLES	DATED WITHIN
<p><b>1. The provision of consultation, technical assistance, and/or information</b></p>	<p><b>1. The state health department must document how it provides assistance to Tribal or local departments.</b> This may be at the request of locals or can be initiated by the state. This can include communications that have gone to one or more Tribal or local health departments; meetings at the Tribal, state, or local level; and training sessions and presentations. It can also include email communication – both to individuals and to list-serves.</p> <p>State health department assistance can be for example, onsite, phone consultation, conference calls, webinars, presentations, training sessions, written guidelines, and investigation protocols and manuals.</p>	<p><b>2 examples</b></p>	<p><b>5 years</b></p>

## STANDARD 2.2: Contain/mitigate health problems and environmental public health hazards

Health departments must be able to act on information concerning health problems and environmental public health hazards that was obtained through public health investigations. Health departments must have the ability to contain or mitigate health problems and hazards. The containment or mitigation of health problems and environmental public health hazards must be coordinated with other levels of government, other government departments, and other stakeholders.

## STANDARD 2.2: Contain/mitigate health problems and environmental public health hazards.

### MEASURE

#### Measure 2.2.1 A

Protocols for containment/mitigation of public health problems and environmental public health hazards

### PURPOSE

The purpose of this measure is to assess the health department's ability to contain or mitigate health problems or environmental public health hazards. This includes disease outbreaks. This measure assesses the existence of protocols for the containment or mitigation of public health problems or public health environmental hazards.

### SIGNIFICANCE

Health departments are responsible for acting on information concerning health problems and environmental public health hazards in order to contain or lessen the negative effect on the health of the population.

Health departments require standard operations, assigned roles and responsibilities, and well thought out coordination in order to effectively address disease outbreaks. A standardized approach ensures timely response.

### REQUIRED DOCUMENTATION

**1. Protocol(s) that address containment/mitigation of public health problems and environmental public health hazards**

### GUIDANCE

**1. The health department must provide written protocols or a set of protocols for the containment/mitigation of health problems and hazards.** This includes disease-specific procedures (for example, pertussis, TB) for follow-up and reporting during outbreaks.

The protocols must address mitigation, contact management, clinical management, use of prophylaxis and emergency biologics, communication with the public health laboratory, and the process for exercising legal authority for disease control.

These protocols may be in a single document or be comprised of many separate documents.

### NUMBER OF EXAMPLES

**1 comprehensive protocol or a set of protocols**

### DATED WITHIN

**2 years**

## STANDARD 2.2: Contain/mitigate health problems and environmental public health hazards.

MEASURE	PURPOSE	SIGNIFICANCE	
<p><b>Measure 2.2.2 A</b></p> <p>A process for determining when the All Hazards Emergency Operations Plan (EOP) will be implemented</p>	<p>The purpose of this measure is to assess the health department's ability to know when their All Hazards Emergency Operations Plan (EOP) needs to be put into operation in order to address a natural disaster, terrorist event, disease outbreak or cluster, environmental public health hazard, or other emergency that threatens the population's health.</p>	<p>Protocols for a health department to determine that they need to implement their All Hazards Emergency Operations Plan are necessary to ensure that the plan is put into action when needed and that it is not put into action when it is not needed.</p>	
REQUIRED DOCUMENTATION	GUIDANCE	NUMBER OF EXAMPLES	DATED WITHIN
<p><b>1. Protocols that address infectious disease outbreaks describing processes for the review of specific situations and for determining the activation of the All Hazards Emergency Operations Plan</b></p>	<p><b>1. The health department must provide all infectious disease outbreak protocols.</b> Though these may be the same protocols from 2.2.1 A, the department must highlight the description of the process for determining when the All Hazards or Emergency Operations Plan will be implemented.</p>	<p><b>1 comprehensive protocol or a set of protocols</b></p>	<p><b>5 years</b></p>
<p><b>2. Protocols that address environmental public health issues describing processes for the review of specific situations and for determining the initiation of the All Hazards Emergency Operations Plan</b></p>	<p><b>2. The health department must provide protocols that specifically address environmental public health hazards and that describe the process for determining when the All Hazards Emergency Operations Plan will be implemented.</b></p>	<p><b>1 comprehensive protocol or a set of protocols</b></p>	<p><b>5 years</b></p>

## MEASURE 2.2.2 A, continued

**3. Cluster evaluation protocols that describe the processes for the review of specific situations that involve a closely grouped series of events or cases of disease or other health-related phenomenon with well-defined distribution patterns in relation to time or place or both, and for determining initiation of the All Hazards Emergency Operations Plan**

**3. The health department must provide protocols that include cluster evaluation protocols describing the process for determining when the All Hazards Emergency Operations Plan will be implemented.** Cluster evaluations will provide evidence of an unusual number of health events, for example, SARS, influenza, food poisoning, health care associated infections (e.g., MRSA), or unusual symptoms in a group, together in time and location.

A cluster evaluation is differentiated from an outbreak in that a single case of some infectious diseases may trigger the use of an outbreak protocol (e.g., small pox or polio).

**1 comprehensive protocol or a set of protocols**

**5 years**

## STANDARD 2.2: Contain/mitigate health problems and environmental public health hazards.

MEASURE	PURPOSE	SIGNIFICANCE	
<p><b>Measure 2.2.3 A</b> Complete After Action Reports (AAR)</p>	<p>The purpose of this measure is to assess the department's development of descriptions and analysis of performance after an emergency operation or exercise. This measure assesses the existence of After Action Reports.</p>	<p>A process for After Action Reports provides a way for the health department to assess its performance during an emergency operation for quality improvement. It identifies issues that need to be addressed and includes recommendations for corrective actions for future emergencies and disasters.</p> <p>An AAR is to be completed when an infectious disease outbreak occurs, an environmental public health risk has been identified, a natural disaster occurs, and any other event occurs that threatens the public's health. While AARs have been used for drills and exercises as part of All Hazards Plans (see 5.4.3 A), the focus of this measure is concerning the determination of when AAR methodology is applied to actual events that threaten the health of the people living in the jurisdiction of the health department.</p>	
REQUIRED DOCUMENTATION	GUIDANCE	NUMBER OF EXAMPLES	DATED WITHIN
<p><b>1. Protocol describing the processes used to determine when events rise to significance for the development and review of an AAR</b></p>	<p><b>1. The health department must provide a written description of how it determines if an event has risen to the level of significance requiring an AAR.</b> Not every event will require an AAR. For example, a food borne outbreak may have 10 positive cases before being designated as significant enough to require an AAR. The process must address infectious disease outbreaks, environmental public health hazards, natural disasters, and other threats.</p>	<p><b>1 protocol</b></p>	<p><b>5 years</b></p>

MEASURE 2.2.3 A, continued

<p><b>2. A list of all events that occurred, including outbreaks and environmental public health risks</b></p>	<p><b>2. The health department must provide a list of significant events that have occurred within the last five years.</b> The list must include all events that met and did not meet the level of significance to require an AAR. The list must include, at minimum, the event name, dates of the event, and type of event (e.g., natural disasters, such as floods or hurricanes; manmade disasters, such as a toxic chemical release or pollution; and terrorism, such as anthrax or explosions). The list must include all outbreaks, environmental public health risks, natural disasters, or other events that threaten the public's health.</p>	<p><b>1 list</b></p>	<p><b>5 years</b></p>
<p><b>3. Completed AAR for two events</b></p>	<p><b>3. The health department must provide completed AARs.</b></p> <p>An AAR documents successes, issues, and recommended changes in investigation and response procedures or other process improvements. The AARs must report what worked well, what issues arose, what improvement in protocols are indicated, and recommended improvements.</p>	<p><b>2 examples of separate events</b></p>	<p><b>5 years</b></p>

**STANDARD 2.3: Ensure access to laboratory and epidemiological/environmental public health expertise and capacity to investigate and contain/mitigate public health problems and environmental public health hazards.**

Successful investigation and mitigation of public health problems and environmental hazards will often depend on laboratory testing, epidemiologist involvement, and environmental public health expertise. These areas of expertise provide vital support to an investigation and are a part of the capacity that a department should have to respond to health problems and environmental public health hazards.

## STANDARD 2.3: Ensure access to laboratory and epidemiological/environmental public health expertise and capacity to investigate and contain/mitigate public health problems and environmental public health hazards.

### MEASURE

#### Measure 2.3.1 A

Provisions for the health department's 24/7 emergency access to epidemiological and environmental public health resources capable of providing rapid detection, investigation, and containment/mitigation of public health problems and environmental public health hazards

### PURPOSE

The purpose of this measure is to assess the department's capacity for rapid detection, investigation, and containment/mitigation of public health problems and environmental public health hazards.

### SIGNIFICANCE

Health departments need the capacity to respond to public health emergencies. The department needs to have access to epidemiological and environmental public health resources that can support the rapid detection, investigation, and mitigation of problems and hazards. This access must be available to the department 24/7.

### REQUIRED DOCUMENTATION

**1. Policies and procedures ensuring 24/7 coverage**

### GUIDANCE

**1. The health department must provide policies and procedures outlining how the health department maintains 24/7 access to support services in emergencies.** These policies and procedures may be contained in the All Hazards Emergency Operations Plan or may be separate policies and procedures. These resources may be within the department, or the department can have agreements with other agencies, individual contractors, or a combination in order to be responsive 24/7.

### NUMBER OF EXAMPLES

**1 comprehensive policies and procedures document or a set of policies and procedures**

### DATED WITHIN

**5 years**

MEASURE 2.3.1 A, continued

<p><b>2. Process to contact epidemiological and environmental public health resources</b></p>	<p><b>2. The health department must provide the call down list that is used to contact epidemiological and environmental public health resources.</b></p>	<p><b>1 call down list</b></p>	<p><b>5 years</b></p>
<p><b>3. Contracts/MOAs/MOUs/ mutual assistance agreements detailing relevant staff</b></p>	<p><b>3. The health department must provide a list and description of contracts, MOA/MOUs, or mutual assistance agreements that define access to resources to assist in 24/7 capacity for emergency response.</b></p>	<p><b>1 list</b></p>	<p><b>5 years</b></p>

## STANDARD 2.3: Ensure access to laboratory and epidemiological/environmental public health expertise and capacity to investigate and contain/mitigate public health problems and environmental public health hazards.

MEASURE	PURPOSE	SIGNIFICANCE
<p><b>Measure 2.3.2 A</b></p> <p>24/7 access to laboratory resources capable of providing rapid detection, investigation and containment of health problems and environmental public health hazards</p>	<p>The purpose of this measure is to assess the department's access to needed laboratory services to provide rapid detection, investigation, and containment/mitigation of public health problems and environmental public health hazards.</p>	<p>Emergency laboratory services are critical to recognize agents for the development of an appropriate public health rapid response. The department must have access to public health laboratory resources that can support the rapid detection, investigation, and containment of problems and hazards. This access should be available to the department 24/7.</p>

REQUIRED DOCUMENTATION	GUIDANCE	NUMBER OF EXAMPLES	DATED WITHIN
<p><b>1. Laboratory certification</b></p>	<p><b>1. The health department must provide documentation of laboratory capacity.</b> Laboratory capacity may be within the health department, may be provided by reference laboratories, or a combination of both internal and external support.</p> <p>The health department must provide documentation that the laboratory has accreditation, certification, and licensure appropriate for all the testing that it performs (i.e., CLIA License, EPA Drinking Water Certification, FDA Certification for Milk Testing, etc.)</p>	<p><b>Accreditation documentation, certification, and/or licensure appropriate for all the testing that is performed</b></p>	<p><b>5 years</b></p>

MEASURE 2.3.2 A, continued

<p><b>2. Policies and procedures ensuring 24/7 coverage</b></p>	<p><b>2. The health department must provide policies and procedures that assure 24/7 laboratory coverage.</b> These resources may be within the department, or the department can have agreements with other agencies, individual contractors, or a combination in order to be responsive 24/7. These policies and procedures may be contained in the All Hazards Emergency Operations Plan or may be separate policies and procedures.</p> <p>Documentation could be contracts, MOAs/MOUs, or mutual assistance agreements that the department has with other public and private laboratories to provide support services.</p>	<p><b>1 set of policies and procedures or policies and procedures, MOUs, or agreements</b></p>	<p><b>5 years</b></p>
<p><b>3. Protocols for the health department's handling and submitting of specimens</b></p>	<p><b>3. The department must provide protocols for the health department's handling and submitting of specimens.</b></p>	<p><b>1 comprehensive protocol or a set of protocols</b></p>	<p><b>5 years</b></p>

## STANDARD 2.3: Ensure access to laboratory and epidemiological/environmental public health expertise and capacity to investigate and contain/mitigate public health problems and environmental public health hazards.

MEASURE	PURPOSE	SIGNIFICANCE	
<p><b>Measure 2.3.3 A</b></p> <p>Access to laboratory and other support personnel and infrastructure capable of providing surge capacity</p>	<p>The purpose of this measure is to assess the department's support personnel and infrastructure capacity for providing surge capacity for rapid detection, investigation, and containment/mitigation of public health problems and environmental public health hazards.</p>	<p>Access to additional support personnel is important in the case of an emergency, such as a bio-terrorism event or disease outbreak, when response needs of the health department exceed normal capacity of health department staff.</p>	
REQUIRED DOCUMENTATION	GUIDANCE	NUMBER OF EXAMPLES	DATED WITHIN
<p><b>1. Surge capacity protocol that pre-identifies support personnel to provide surge capacity</b></p>	<p><b>1. The health department must provide the protocol, procedure, or policy that identifies support personnel who will be called on to provide surge capacity.</b> This could refer to support staff within the health department who can assist during times of response and who would be performing duties outside their routine assignments; or it could be a listing of support personnel from outside the health department who would be available to assist the department. The protocol must include access to public health laboratory services.</p>	<p><b>1 protocol</b></p>	<p><b>5 years</b></p>
<p><b>2. Access to surge capacity staffing list</b></p>	<p><b>2. The health department must provide the staffing list(s) for surge capacity that refers to both the staffing needed for a surge response and how department staff will fill those needs.</b> Included with this documentation must be a description of how staff will access this information. Access could be through various methods, including: web or intranet, central location in the facility, or distributed to those positions that have surge capacity assignments.</p> <p>The HD must also demonstrate that staff on the list have access to the list.</p> <p>Positions on the list may include, for example, nursing, health education specialist, communications, IT, logistics, veterinarian and animal caretaker, environmental health specialist, laboratory, and administrative personnel.</p> <p>This could be a part of an All Hazards/ERP or a separate protocol.</p>	<p><b>1 list or lists</b></p>	<p><b>5 years</b></p>

MEASURE 2.3.3 A, continued

<p><b>3. Availability of equipment</b></p>	<p><b>3. The health department must provide a document detailing the availability of equipment to support a surge in order to demonstrate the availability of additional infrastructure for a response.</b> For example, equipment may be used for transportation, field communications, Personal Protective Equipment (PPE), etc.</p>	<p><b>1 document</b></p>	<p><b>5 years</b></p>
<p><b>4. Training/exercise schedule for surge personnel</b></p>	<p><b>4. The health department must provide a schedule for training or exercises to prepare personnel who will serve in a surge capacity (for example, ICS or PPE training).</b> This does not have to be the sole focus of the training or exercise, but must be a component of the training.</p>	<p><b>1 schedule</b></p>	<p><b>2 years</b></p>
<p><b>5. Contracts/MOAs/MOUs/ mutual assistance agreements for additional staff capacity for surge situations</b></p>	<p><b>5. The health department must provide a list and description of contracts, MOAs/MOUs, and/or mutual assistance agreements providing additional staff and services, including laboratory services, for surge capacity.</b> Any of the contracts or agreements for this measure can consist of separate documents or a single agreement covering several aspects of support.</p>	<p><b>1 list</b></p>	<p><b>5 years</b></p>

## STANDARD 2.3: Ensure access to laboratory and epidemiological/environmental public health expertise and capacity to investigate and contain/mitigate public health problems and environmental public health hazards.

### MEASURE

#### Measure 2.3.4 A

Collaboration among Tribal, state, and local health departments to build capacity and share resources to address Tribal, state, and local efforts to provide for rapid detection, investigation, and containment/mitigation of public health problems and environmental public health hazards

### PURPOSE

The purpose of this measure is to assess coordination and collaboration between Tribal health departments, state health departments, and local health departments in order to share resources for rapid detection, investigation, and containment/mitigation of public health problems and environmental public health hazards.

### SIGNIFICANCE

Public health problems and environmental public health hazards are not always contained in the jurisdiction of the health department. Tribal, state, and local health departments have the responsibility to work together to provide rapid detection, investigation and containment/mitigation. In most public health situations requiring investigation and mitigation, the state health department and local health department must be partners in the response. Likewise, Tribal health departments network with local and state entities for mitigation, detection, and containment with contracts, memorandums of understanding or agreement, as approved by the Tribal government. Seamless coordination and communication are necessary for the most effective use of resources.

### REQUIRED DOCUMENTATION

#### 1. Shared resources and/or additional capacity

### GUIDANCE

#### 1. The health department must document Tribal, state, and local health departments working together to build capacity and share resources.

Documentation could be policies and procedures, MOUs, or other written agreement that demonstrate plans to communicate and collaborate in addressing public health problems and environmental public health hazards. Other forms of documentation could include meeting minutes that evidence discussion and decisions to work together, as well as After Action Reports that describe coordination.

### NUMBER OF EXAMPLES

2 examples

### DATED WITHIN

5 years

MEASURE 2.3.4 A, continued

<p><b>2. Joint exercises for rapid detection, investigation, and containment/mitigation of public health problems and environmental public health hazards</b></p>	<p><b>2. The health department must document joint exercises that show the Tribal, state, and local levels work together to test or implement shared resources and build capacity during the exercise.</b></p> <p>Documentation could be AARs or other records.</p>	<p><b>2 examples;</b> one example must include a Tribe, if one exists in the health department's jurisdiction.</p>	<p><b>5 years</b></p>
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## STANDARD 2.4: **Maintain a plan with policies and procedures for urgent and non-urgent communications.**

Reliable and timely communication with partners and the public is important to ensure informed and appropriate responses to public health problems and environmental public health hazards.

## STANDARD 2.4: Maintain a plan with policies and procedures for urgent and non-urgent communications.

MEASURE	PURPOSE	SIGNIFICANCE	
<p><b>Measure 2.4.1 A</b></p> <p>Written protocols for urgent 24/7 communications</p>	<p>The purpose of this measure is to assess the department’s written protocols for communications during detection, investigation, and mitigation of urgent public health problems and environmental public health hazards that may occur at any time.</p>	<p>Urgent public health problems and environmental public health hazards require a community-wide response. Accurate and timely information is necessary to ensure an appropriate and effective community response. Partners and the public need to know how to contact the health department to both report and receive information about a public health emergency or environmental public health risk.</p>	
REQUIRED DOCUMENTATION	GUIDANCE	NUMBER OF EXAMPLES	DATED WITHIN
<p><b>1. Protocol for urgent 24/7 communications</b></p>	<p><b>1. The health department must provide a communication protocol that provides a means for the department to contact health care providers, response partners, the media, and others, 24/7.</b> The protocol must include the contact information (for example, phone numbers, email addresses, and website addresses for relevant partners). The health department must have duplicative means to get in touch with partners.</p>	<p><b>1 protocol</b></p>	<p><b>14 months</b></p>
<p><b>2. Availability of information to partners (and/or the public) on how to contact the health department to report a public health emergency or environmental/occupational public health risk 24/7</b></p>	<p><b>2. The health department must document the provision of information to partners and the public about how to contact the health department to report a public health emergency, risk, problem, or environmental or occupational public health hazard.</b> Partners may include: law enforcement, schools, hospitals, veterinarians, and government agencies.</p> <p>Documentation could be a screen shot of a web page with contact information.</p>	<p><b>1 example</b></p>	<p><b>5 years</b></p>

## MEASURE 2.4.1 A, continued

<p><b>3. The method for partners and the public to contact the health department 24/7</b></p>	<p><b>3. The health department must document how partners and the public contact the health department 24/7.</b> An after-hour answering service or pager service could provide this capacity.</p> <p>Documentation could be, for example, a script or transcript of an answering service.</p>	<p><b>1 example</b></p>	<p><b>5 years</b></p>
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# STANDARD 2.4: Maintain a plan with policies and procedures for urgent and non-urgent communications.

MEASURE	PURPOSE	SIGNIFICANCE	
<p><b>Measure 2.4.2 A</b></p> <p>A system to receive and provide urgent and non-urgent health alerts and to coordinate an appropriate public health response</p>	<p>The purpose of this measure is to assess the health department's ability to receive and issue health alerts and to communicate and coordinate the appropriate public health response with health care providers, emergency responders, and communities on a 24/7 basis.</p>	<p>Speedy and accurate communications with health care providers, emergency responders, and other partners concerning health alerts facilitates their understanding of the scope of the emergency, the steps necessary to respond to it, and the protection of the community and responders. Communication allows the development of effective and coordinated responses to urgent public health problems and environmental public health hazards.</p>	
REQUIRED DOCUMENTATION	GUIDANCE	NUMBER OF EXAMPLES	DATED WITHIN
<p><b>1. A tracking system for the receipt and issuance of urgent and non-urgent health alerts</b></p>	<p><b>1. The health department must document that it has established or participates in a Health Alert Network (HAN) or similar system that receives and issues alerts 24/7.</b> A HAN usually has the capacity to issue response measures or information related to the risk, hazard or problem.</p> <p>The tracking system or Health Alert Network may be a state system in which Tribal or local health departments participate. The Tribal or local system may establish a smaller system for providers and responders within the jurisdiction of the health department. Some jurisdictions have established a Joint Information Center (JIC) with a public information officer for the health department; health departments may provide evidence of this as documentation.</p>	<p><b>1 tracking system or health alert network</b></p>	<p><b>5 years</b></p>
<p><b>2. Reports of testing 24/7 contact and phone line(s)</b></p>	<p><b>2. The health department must provide reports of testing the 24/7 contact procedure.</b> This testing must include normal work hours and after hours. Email contact, phone lines, pager, website and other contact points with the department must be tested where applicable.</p>	<p><b>2 examples</b></p>	<p><b>5 years</b></p>

## STANDARD 2.4: Maintain a plan with policies and procedures for urgent and non-urgent communications.

MEASURE	PURPOSE	SIGNIFICANCE	
<p><b>Measure 2.4.3 A</b></p> <p>Timely communication provided to the general public during public health emergencies</p>	<p>The purpose of this measure is to assess the health department's ability to provide information to the public during a public health emergency.</p>	<p>During a public health emergency, the health department functions as the expert. Speedy and accurate communications with the public during public health emergencies facilitates their understanding of the seriousness of the emergency and informs them of the actions they should and should not take in response to the public health emergency. In the absence of accurate information, false information will be created and spread. Public information also lets the public know that the public health department is working to protect the community. A key mechanism to reach the public is the media.</p>	
REQUIRED DOCUMENTATION	GUIDANCE	NUMBER OF EXAMPLES	DATED WITHIN
<p><b>1. Communications plan, procedure, or process to provide emergency information to the public</b></p>	<p><b>1. The department must demonstrate how it communicates with and provides information to the public.</b></p> <p>Documentation must provide evidence of outreach and communication methods designed specifically to communicate with the disabled, linguistically challenged, and other members of the public that require particular communication considerations.</p> <p>The measure deals with public health emergencies (for example, an outbreak of an infectious disease, a release of toxic chemicals, or the need to boil water during a flood or water main break); documentation must demonstrate processes to ensure timely communication with the public during an emergency.</p> <p>General public health educational materials are not relevant for this measure.</p> <p>The process must include a variety of means to communicate information to the public, including, for example, posting on a website, distribution of printed materials (brochures, flyers, factsheets, inserts), fax broadcast to all providers and other responders, automated call systems, digital media (e.g., Twitter) and email list-serves.</p>	<p><b>2 examples</b></p>	<p><b>5 years</b></p>

## MEASURE 2.4.3 A, continued

<b>2. Communications through the media to provide information during a public health emergency</b>	<b>2. The department must demonstrate the use of the media to communicate information to the public during a public health emergency.</b>  Documentation must provide evidence of relationships with media, organizations, and outlets for reaching the disabled, the non-English speaking public, and other members of the public that require particular communication considerations.  The measure deals with public health emergencies and the documentation must demonstrate timely communication with the media during an emergency.  General public health educational information is not relevant for this measure.  Documentation could be, for example, a press conference, media packets, press release, public service announcement, or video of a televised interview.	<b>2 examples</b>	<b>5 years</b>
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## STANDARD 2.4: Maintain a plan with policies and procedures for urgent and non-urgent communications.

MEASURE	PURPOSE	SIGNIFICANCE	
<p><b>Measure 2.4.4 S</b></p> <p>Consultation and technical assistance provided to Tribal and local health departments on the accuracy and clarity of public health information associated with a public health emergency</p>	<p>The purpose of the measure is to assess the state health department's support to Tribal and local health departments' efforts to inform the public concerning an outbreak or an environmental or other public health emergency.</p>	<p>The state health department has a role in serving as a resource to Tribal and local health departments for communication associated with outbreaks and emergencies. An important element in communication is consistent messaging from partners.</p> <p>The state has a role in crafting messages that are shared to ensure that public health information is accurate and clear. The measure specifies the assistance on information that is associated with an outbreak, an environmental event, or other emergency.</p>	
REQUIRED DOCUMENTATION	GUIDANCE	NUMBER OF EXAMPLES	DATED WITHIN
<p><b>1. Consultation, technical assistance, or guidance provided to Tribal and local health departments</b></p>	<p><b>1. The state health department must document the provision of consultation, technical assistance, or guidance provided to Tribal and local health departments.</b> The state health department does not have to demonstrate that the Tribal and local health departments use the services from the state, but consultation and technical assistance must be available if requested.</p> <p>Documentation could be, for example, minutes of meetings or conference calls. Meeting or training agenda or presentations can be provided and must include a list of Tribal or local health attendees. Assistance could also be documented by emails or list-serves sent to Tribal and local health departments.</p>	<p><b>2 examples;</b> one example must include a Tribe, if one exists in the health department's jurisdiction.</p>	<p><b>5 years</b></p>
<p><b>2. Guidelines for accurate and clear communication to the public</b></p>	<p><b>2. The state health department must provide communication guidelines, protocols, or written assistance for Tribal and local departments.</b> Guidelines must include information about developing clear and accurate public health information during an outbreak, crisis, or emergency to prepare Tribes and local health departments for such an occurrence.</p>	<p><b>1 set of guidelines</b></p>	<p><b>5 years</b></p>