

# LOCAL TECHNICAL ASSISTANCE REVIEW (TAR)

## SAMPLE ONLY REPORT

**CRI MSA OR Regional Affiliate: [Northwest Region]**

**Jurisdiction: [Prepared County]**

**Reviewer: [Michelle Peterson, KDHE]**

**Assessment Date: [01/01/2010]**

**Final Score: 64%**



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## Technical Assistant Review (TAR) Executive Summary

The [Name of Local Health Department] SNS-TAR was conducted to assess target capabilities, including Medical Supplies Management and Distribution and Mass Prophylaxis.

The purpose of this report is to analyze results, identify strengths to be maintained and built upon, identify potential areas for further improvement, and support development of corrective actions.

### Overall Score and Readiness Status

	Enter all applicable TARs conducted on county to date.			
Date	01\01\2010			
Overall Readiness	64			
Developing an SNS Plan	58			
Command and Control/ Managing SNS Operations	83			
Requesting SNS Support	100			
Tactical Communications	58			
Public Information	86			
Security	20			
Regional/Local Distribution	NA			
Controlling SNS Inventory	60			
Distribution	NA			
Dispensing Oral Medications	65			
Treatment Center Coordination	60			
Training Exercise and Evaluation	68			

### Major Strengths

The major strengths identified during this assessment are as follows:

- Public Information and Warning
- Inventory Management
- Mass Dispensing

### Primary Areas for Improvement

Throughout the assessment, several opportunities for improvement in local ability to respond to the incident were identified. The primary areas for improvement, including recommendations, are as follows:

- Security
- Developing an SNS Plan

## Section 1: Technical Assistant Review (TAR) Overview

### **TAR Details**

**Event Name**

The Prepared County SNS-TAR

**Project County**

Prepared County, KS

**CRI MSA or Region**

Northwest Region

**Submitted By:**

Michelle Peterson, KDHE

**Date Submitted:**

03/01/2010

**TAR Start Date**

01/01/2010

**TAR End Date**

01/01/2010

**Duration**

8 hours

**Location**

County Administration Building, Prepared County, Prepared, KS 55555

**Sponsor**

Kansas Department of Health and Environment

**Program**

Public Health Emergency Preparedness Grant

**Mission**

Response

**Capabilities**

- Medical Supplies Management & Distribution
- Mass Prophylaxis

### **Participating Organizations**

**Key Participants (*names, titles, organizations*)**

<b>Name</b>	<b>Title</b>	<b>Organization</b>
Kay Crown	Emergency Manager	Prepared County Emergency Management
Jake Brown	Volunteer Coordinator	Medical Reserve Corp
Carrie Kale	Regional Coordinator	Northwest Region
John Johnson	CHD Administrator	Prepared County Health Department

## Section 2: TAR Summary

### ***Purpose and Design***

The Strategic National Stockpile (SNS) Technical Assistance Review (TAR) was performed to assess the target capabilities, including Medical Supplies Management and Distribution and Mass Prophylaxis. The purpose of this report is to analyze results, identify strengths to be maintained and built upon, identify potential areas for further improvement, and support development of corrective actions.

### ***Scope and Applicability***

The SNS is a collection of large quantities of medical material, equipment, and pharmaceuticals. The mission of the Centers for Disease Control and Prevention's (CDC) Division of Strategic National Stockpile (DSNS) is to deliver critical medical assets to the site of a national emergency. The state is responsible for ensuring all localities within its borders are prepared to receive SNS assets and to provide them to the people in need. The CDC DSNS staff provides assistance to the Kansas Department of Health and Environment SNS program to achieve and maintain overall state and local readiness in critical preparedness functions through planning, exercising, evaluating, and training.

The CDC's DSNS Local Technical Assistance Review (TAR) provides a blueprint for understanding local SNS Plans. The TAR outlines 12 planning elements to be assessed for evidence of overall readiness to manage, distribute, and dispense SNS material during a public health emergency. These elements include:

1. Developing an SNS plan
2. Requesting SNS assistance
3. Managing SNS operations
4. Tactical communications
5. Public information and communications
6. Security
7. Regional/Local Distribution Sites
8. Controlling inventory
9. Distribution
10. Dispensing
11. Hospitals and alternate care facilities coordination
12. Training, exercising and evaluating

The assessment is applicable to the all jurisdictions that are responsible for sustaining all aspects of managing, receiving, storing, staging, distributing, and dispensing SNS materiel during a public health emergency. It serves as an adjunct to, not a replacement of, existing documentation and tools used for SNS planning and management. This assessment offers a base threshold for planning and identification of the minimal documentation a local is required to submit as verification of achievement for the range of scores assigned to each element outlined.

## ***Assumptions and Considerations***

All persons in the United States are at-risk during a public health emergency and this necessitates a comprehensive response plan for distributing and dispensing SNS material quickly and efficiently.

- Programmatic funding as available should be used for implementation of required State and Local SNS planning and management.
- There will be ongoing assessment of the components of the TAR. Outcomes of these assessments could prompt further revisions to the TAR tool and the Guide.
- The TAR tool and any report will comply with regulatory statutes. Statutory changes could influence revisions to existing guidelines for SNS planning and management.

## ***Reference***

For more details regarding the above information visit:

<https://www.orau.gov/snsnet/functions/tar.htm#LocalTAR>

Username: Stockpile Password: Str\*teg!c

## ***Objectives & Capabilities***

Capabilities-based planning allows for planning teams to plan objectives and outcomes through a framework of specific action items that were derived from the Target Capabilities List (TCL). The capabilities listed below form the foundation for the organization of all objectives and observations in this TAR.

### **Objectives**

- **Objective 1:** Assess the jurisdiction's ability to protect the health of the population through administration of critical interventions to prevent the development of disease among those who are exposed or potentially exposed to public health threats.
- **Objective 2:** Assess the jurisdiction's ability to activate the necessary plans, policies, and/or procedures in response to a biological threat.

### **Target Capabilities**

- See Appendix B for the Target Capabilities for each TAR section.

### **Target Capability Descriptions**

- **Medical Supplies Management & Distribution:** Medical Supplies Management and Distribution is the capability to obtain and maintain medical supplies and pharmaceuticals prior to an incident and to transport, distribute, and track these materials during an incident.
- **Mass Prophylaxis:** Mass Prophylaxis is the capability to protect the health of the population through administration of critical interventions (e.g., antibiotics, vaccinations, antiviral) to prevent the development of disease among those who are exposed or potentially exposed to public health threats. This capability includes the provision of appropriate follow-up and monitoring of adverse events, as well as risk communication messages to address the concerns of the public.

### **Section 3: Analysis of Capabilities**

This section of the report reviews the performance of the TAR capabilities and activities. In this section, observations are organized by capability and associated activities. The capabilities linked to the TAR objectives of SNS TAR are listed below, followed by corresponding activities. Each activity is followed by related observations, which include references, analysis, and recommendations.

#### ***Baseline Data for Review:***

The baseline data is noted on the first page of the TAR tool. This includes information about the size of the population, dispensing throughput measures, POD standards, types of PODs, and alternate dispensing methods. The data provide information used to describe general characteristics of local SNS programs across the nation. It is important to provide updates of any changes in the data during the interim between reviews.

*The Prepared County Public Health Department TAR was conducted on Jan. 01, 2010. Prepared County Health Department as part of a robust and wide-ranging planning team involving the following agencies: (e.g. Public Health, Law enforcement, Public works, Emergency Management and City Emergency Readiness Team (CERT)). The SNS plan is an integral part of the overall all-hazards planning and preparedness effort. Prepared County Health Department serves a population of around Fifty-Thousand. Currently Prepared County Health Department has designated 1 clinic open PODs and 6 closed PODs. To prophylax 100% of this population in 48 hours, this would require an hourly throughput of 600 people per open POD. Closed dispensing sites include: private business, nursing homes, hospital, priority prophylaxis. Drive through clinic will also be offered at the Community Bank. 10,000 people (20 %) will be served by closed PODs. Prepared County Health Department have site-specific plans including a MOU for conducting 4 open PODs and 6 number of alternate POD site, which would serve around Fifty-Thousand people. Prepared County Public Health Department has conducted planning for priority prophylaxis groups which will be conducted at the Fire Station.*

*It is estimated that 1000 staff and volunteers will be required to fully man all dispensing in Prepared County. Prepared County Health Departments has currently approximately 800 identified via multiple staffing streams to staff open PODs. The Prepared County Health Department SNS Plan is comprehensive, functional, sustainable, and measurable. Prepared County should continue efforts towards recruiting additional volunteer staff. The Prepared County Health Department is in the beginning stages of planning with other private businesses for closed PODs. Areas for improvement and maintenance are included in the individual sections as indicated.*

## ***TAR Section 1: Developing a Plan with Strategic National Stockpile Elements (3%)***

### **TAR Section 1 Analysis:**

Overall Section Score: 58

#### **Strengths**

1. Planning
  - a. Local SNS planning elements are incorporated in the local all-hazards plan and are NIMS-compliant.
  - b. Local SNS planning elements are updated annually based on deficiencies revealed during federal and/or state SNS Program Technical Assistance Reviews and state/local trainings and exercises.
  - c. State and local policies and procedures to support local mass prophylaxis operations and/or medical supplies management and distribution are referenced in plan

#### **Areas of Improvement**

1. Planning

#### **Recommendations:**

1. 1.3 The planning/advisory group includes less than 50% of representatives from the applicable agencies and institutions listed above and meeting documentation is available for review.
2. 1.4 Local planners have no verifiable documentation that local agencies and/or other organizations have acknowledged their roles/responsibilities in SNS planning elements.
3. 1.6 None of the legal issues listed above have been reviewed, identified, and addressed in the plan.
  - a. 1.6a K.S.A and MD SOG Section I: Medical Material Management, Storage and Handling- Standing Orders
  - b. 1.6b K.S.A
  - c. 1.7c K.S.A
  - d. 1.8d Liability Protection
  - e. 1.9e Human Resource Policies
  - f. 1.9f Human Resource Policies

## ***TAR Section 2: Management of the Strategic National Stockpile (10%)***

### **TAR Section 2 Analysis:**

Overall Section Score: 83

#### **Strengths**

1. At the local level and dependent upon the placement of the activities in the local's NIMS-compliant organizational structure, the following functions have personnel (primary and back-up) identified with documented contact information.
2. Local SNS Coordinator identified with back-up and POC information.
3. The local jurisdiction has a plan to annually test and exercise notification and activation of volunteers below the local level positions identified in item 2.2.
4. SNS functions are integrated within the local Incident Command System (ICS) structure and are NIMS compliant.

#### **Areas of Improvement**

1. Contact Lists
2. Exercises

#### **Recommendations:**

1. 2.3 Written call-down lists exist for all listed above and are updated less than quarterly.
2. 2.4 Call-down exercises are conducted less than quarterly.

***TAR Section 3: Requesting SNS (3%)***

**TAR Section 3 Analysis:**

Overall Section Score: 100

**Strengths**

1. All request procedures well documented.

**Areas of Improvement**

None

**Recommendations:**

None

## ***TAR Section 4: Communications Plan (3%)***

### **TAR Section 4 Analysis:**

Overall Section Score: 58

#### **Strengths**

1. County has made efforts in many areas of tactical communications maintenance.

#### **Areas of Improvement**

1. Call Lists
2. Training
3. Exercises

#### **Recommendations:**

1. 4.1 There is no written documentation substantiating that communication/IT support call-down lists are reviewed and updated quarterly.
2. 4.5 The local jurisdiction provides documentation that reflects communication networks have been tested and exercised within the preceding 12 months but not quarterly.
3. 4.6 The local jurisdiction is unable to document that designated personnel have been trained.

## ***TAR Section 5: Public Information and Communication (PIC) (7%)***

### **TAR Section 5 Analysis:**

Overall Section Score:86

#### **Strengths**

1. Risk communications material well developed.

#### **Areas of Improvement**

1. Training
2. Planning

#### **Recommendations:**

3. 5.1 Only primary attended the KDHE BPHP Mass Antibiotic Dispensing Public Information and Communication Course. Secondary needs trained.
4. 5.7 Local plans for information needs of at-risk populations except to complete document mechanisms to translate information for non-English speaking, hearing impaired, visually impaired, or functionally illiterate individuals

## ***TAR Section 6: Security (10%)***

### **TAR Section 6 Analysis:**

Overall Section Score: 20

#### **Strengths**

1. None

#### **Areas of Improvement**

1. Partnerships
2. Planning

#### **Recommendations:**

1. 6.1 Local security support agencies are not identified and oriented
2. 6.2 Security plans for transportation of medical materiel have not been developed.
3. 6.3 Security Plans have not been developed for dispensing site(s) and/or Local Distribution Site(s) (if applicable)
4. 6.4 Badging procedures are not in place for all personnel responding to a public health event involving medical materiel and resources.
5. 6.5 Site-specific security plans have not been developed for dispensing sites and/or regional distribution sites (if applicable).

***TAR Section 7: Local Distribution Site (14%) (If applicable)***

**TAR Section 7 Analysis:**

- NOT APPLICABLE

## ***TAR Section 8: Controlling Inventory (3%)***

### **TAR Section 8 Analysis:**

Overall Section Score: 60

#### **Strengths**

1. Chain of custody procedure is outlined in plan, including the ability to track pharmaceutical lot numbers.
2. Procedure for chain of custody involving controlled substances received from DSNS is outlined in plan.

#### **Areas of Improvement**

1. Training
2. Planning

#### **Recommendations**

3. 8.1 The local jurisdiction has only one functional inventory management system in place.
4. 8.4 Inventory management staff are identified but not trained in IMS functions.
5. 8.5 The local jurisdiction has identified and documented only one DEA Registrant to issue DEA Form 222.

***TAR Section 9: Distribution (10%) (if applicable)***

**TAR Section 9 Analysis:**

- NOT APPLICABLE

## ***TAR Section 10: Dispensing Prophylaxis (24%)***

### **TAR Section 10 Analysis:**

Overall Section Score: 65

#### **Strengths**

1. Site specific plans developed
2. Job action sheets created
3. Volunteer recruitment

#### **Areas of Improvement**

1. Planning
2. Staffing

#### **Recommendations:**

3. 10.1 Number of regimens that can be dispensed and adverse events not yet addressed in plan.
4. 10.4 The local mass prophylaxis/dispensing plan does not include established criteria, authorization, and procedures to alter clinical dispensing model to increase client throughput.
5. 10.6 Plan does not include special procedures for prophylaxis of homebound individuals.
6. 10.8 The plan does not specify how the following items will be made available at every dispensing/POD site before dispensing starts
7. 10.10 Personnel is not available to staff 100% of dispensing/POD sites.
8. 10.11 Volunteer/staff database is not maintained and current

***TAR Section 11: Hospitals and Alternate Care Facilities Coordination  
(3%)***

**TAR Section 11 Analysis:**

Overall Section Score: 60

**Strengths**

1. Agency has developed strong relationship with local hospital.

**Areas of Improvement**

1. Training
2. Exercises

**Recommendations:**

1. 1.4 Train hospitals on requesting procedures. (Document)
2. 11.5 Work with hospitals to conduct exercise. (Document)

***TAR Section 12: Training, Exercise, and Evaluation (10%)***

**TAR Section 12 Analysis:**

Overall Section Score: 68

**Strengths**

1. Continue to develop and complete three year training and exercise strategy for SNS

**Areas of Improvement**

1. Training
2. Exercises

**Recommendations:**

1. Ensure all documentation for all training and exercises are fully documented.

## **Section 4: Conclusion**

Enter 1-3 paragraphs of overall strengths and improvements. Can either be in bullet or written form.

## Appendix A: Acronyms

**Table A.1: Acronyms**

<b>Acronym</b>	<b>Meaning</b>
BT/PHP	Bioterrorism/Public Health Preparedness
CDC	Centers for Disease Control & Prevention
CRI	Cities Readiness Initiative
DSNS	Division of the Strategic National Stockpile
HSEEP	Homeland Security Exercise & Evaluation Program
HRSA	Health Resources & Services Administration
KDHE	Kansas Department of Health & Environment
LDS	Local Distribution Site
MOA	Memorandum of Agreement
MOU	Memorandum of Understanding
MSA	Metropolitan Statistical Area
PIC	Public Information & Communication
POC	Point(s) of Contact
POD	Point of Distribution
PSC	Project Series Consultant
RSS	Receipt, Staging, and Storage
SEOC	State Emergency Operations Center
SNS	Strategic National Stockpile
TAR	Technical Assistance Review

## Appendix B: Target Capabilities Table

Table B.1: Target Capabilities per TAR Section

TARGET CAPABILITIES (As identified in the LTAR Users Guide, January 2010)			
TAR Section	Mass Prophylaxis	Medical Supplies Mgmt & Distribution	None Identified
1.1	X		
1.2	X		
1.3			X
1.4			X
1.5			X
1.6			X
2.1			X
2.2			X
2.3			X
2.4			X
2.5			X
2.6			X
3.1			X
3.2			X
3.3			X
3.4			X
3.5	X		
4.1	X		
4.2			X
4.3			X
4.4	X		
4.5			X
4.6	X		
5.1	X		
5.2	X		
5.3	X		
5.4	X		
5.5			X
5.6			X
5.7	X		
6.1	X		
6.2	X		
6.3			X
6.4	X		
6.5	X		
7.1	X		
7.2			X
7.3			X
7.4			X
7.5			X
7.6			X
7.7			X
7.8			X
7.9			X
7.10			X
7.11			X

TARGET CAPABILITIES (As identified in the LTAR Users Guide, January 2010)			
TAR Section	Mass Prophylaxis	Medical Supplies Mgmt & Distribution	None Identified
7.12			X
7.13			X
7.14			X
7.15			X
7.16			X
7.17			X
8.1			X
8.2			X
8.3			X
8.4			X
8.5			X
9.1		X	
9.2		X	
9.3		X	
9.4		X	
9.5		X	
9.6		X	
9.7		X	
10.1	X		
10.2			X
10.3			X
10.4			X
10.5			X
10.6			X
10.7			X
10.8			X
10.9			X
10.10			X
10.11			X
10.12			X
10.13			X
11.1	X		
11.2	X		
11.3	X		
11.4	X		
11.5	X		
12.1			X
12.2			X
12.3			X
12.4			X
12.5			X
12.6			X