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Knox County Health Department

Crosswalk between Public Health Accreditation Board Accreditation and Centers for Disease Control and Prevention Medical Countermeasure Operational Readiness Review

Introduction:

This tool is a crosswalk between the **Public Health Accreditation Board (PHAB) Accreditation Standards and Measures Version 1.5** and the **Centers for Disease Control and Prevention (CDC) Medical Countermeasure Operational Readiness Review (MCM ORR) for Budget Period 4**. The contents of this crosswalk are specific to these documents and may not apply to subsequent versions. This document was also intended for use by local health departments, and may not apply as well to state or tribal health departments. It was designed to help preparedness planners save time by identifying a source of potential documents that could be used for accreditation or MCM ORR.

It has two potential uses:

1. For health departments that have completed the MCM ORR to use to identify potential documents for accreditation.
2. For accredited health department or health departments who have already identified documents for accreditation to use to identify potential documents to complete the MCM ORR.

How to Use the Crosswalk:

The crosswalk is organized by accreditation standard and measures. The PHAB Standard appears in the far left column with PHAB Measures under that standard appearing in the next column to the right, and the Required Documentation for the Measure in the next column to the right. The next column to the right identifies the applicable Capability and Function in the MCM ORR, and the specific Measure in the MCM ORR is listed in the next column to the right. The column to the far right provides any notes or differences that may restrict whether a document could be applied to both programs.

To identify a document for accreditation, find the standard and measure you are trying to meet on the left and follow the crosswalk to the right to identify the corresponding MCM ORR measure. Retrieve the document submitted for that MCM ORR measure and compare it to the notes/differences in the crosswalk and the requirements and guidance listed in the Accreditation Standards and Measures. Determine whether or not you would like to use that document to meet the PHAB measure.

To identify a document for the MCM ORR, find a PHAB standard and measure you have already identified a document for on the left and follow the crosswalk to the right to see the corresponding MCM ORR measures. Take the document and compare it to the notes/difference in the crosswalk and the requirements and guidance listed for the MCM ORR Measure. Determine whether or not you would like to use that document to meet the MCM ORR measure.

For some PHAB measures the MCM ORR Capability and Function is listed as "Various". These PHAB measures could be applied to numerous different MCM ORR measures under certain circumstances. The circumstances as well as some specification to which MCM ORR measure the PHAB measure can be applied to are listed in the Notes/Differences column.

Disclaimer:

This crosswalk was developed by the Knox County Health Department, and is not recognized by the Public Health Accreditation Board or the Centers for Disease Control and Prevention as an official tool. Use of this crosswalk in no way guarantees or implies that documents selected through its use will be accepted by an PHAB Accreditation Site Visitor or MCM ORR Site Visitor.



PHAB Standard	PHAB Measure(s)	PHAB Required Documentation	MCM ORR Capability & Function	MCM ORR Measure	Notes/Differences
1.1: Participate in or lead a collaborative process resulting in a comprehensive community health assessment.	1.1.1 T/L: Tribal/local partnership that develops a comprehensive community health assessment of the population served by the health department	1. Participation of representatives from a variety of sectors of the Tribal or local community	Capability 1 Function 1	Planning a. MCM planning elements include the following based on risk assessment: 1) definition of risk; 2) mapped locations of at-risk populations in accordance with JRA; 3) evidence of community involvement; 4) assessment of loss or disruption of essential services (i.e. water, sanitation, healthcare services and public health agency infrastructure).	Measure meets 3) evidence of community involvement, if the CHA is used to inform MCM planning.
	1.1.2 T/L: A Tribal/local community health assessment	1. A Tribal or local community health assessment that includes: c. Description of health issues and specific descriptions of population groups with particular health issues and inequities. d. Description of factors that contribute to specific populations' health challenges.	Capability 1 Function 1	Planning a. MCM planning elements include the following based on risk assessment: 1) definition of risk; 2) mapped locations of at-risk populations in accordance with JRA; 3) evidence of community involvement; 4) assessment of loss or disruption of essential services (i.e. water, sanitation, healthcare services and public health agency infrastructure).	If CHA is used to inform MCM planning this measure can meet 1) definition of risk, if the descriptions are used to define risk to the population, and 2) mapped locations of at-risk populations in accordance with JRA, if the description of population groups includes mapping.
1.4: Provide and use the results of health data analysis to develop recommendations regarding public health policies, processes, programs, or interventions.	1.4.1 A: Data used to recommend and inform public health policy, processes, programs, and/or interventions	1. The use of data to inform public health policy, processes, programs, and/or interventions	Capability 1 Function 1	Planning a. MCM planning elements include the following based on risk assessment: 1) definition of risk; 2) mapped locations of at-risk populations in accordance with JRA; 3) evidence of community involvement; 4) assessment of loss or disruption of essential services (i.e. water, sanitation, healthcare services and public health agency infrastructure).	Can be used if data is used to inform MCM planning and meets the requirement set in the ORR measure



PHAB Standard	PHAB Measure(s)	PHAB Required Documentation	MCM ORR Capability & Function	MCM ORR Measure	Notes/Differences
2.2: Contain/ mitigate health problems and environmental public health hazards	2.2.1 A: Protocol(s) that address containment/mitigation of public health problems and environmental public health hazards	1. Protocol(s) that address containment/mitigation of public health problems and environmental public health hazards	Various		This PHAB measure can be used to meet most ORR planning measures with the caveat that MCM activities are contained within a comprehensive protocol or set of protocols, and meet the requirements of each measure. While most applicable to Capability 8, it could be extended to the other capabilities under the idea that they support MCM dispensing and would be a part of dispensing protocols.
	2.2.2 A: A process for determining when the All Hazards Emergency Operations Plan (EOP) will be implemented	1. Protocols that addresses infectious disease outbreaks describing processes for the review of specific situations and for determining the activation of the EOP.	Capability 3 Function 1	Planning a. Plans describe strategies to coordinate with appropriate epidemiology, laboratory, medical, chemical, biological, and radiological subject matter experts (SMEs) to inform MCM decision-making. Plans should include the following elements: 1) analyze data, 2) assess emergency conditions, and 3) determine the activation levels based on the complexity of the event or incident required to support an MCM response.	Can be used if plan is used to inform MCM planning and meets the requirement set in the ORR measure



PHAB Standard	PHAB Measure(s)	PHAB Required Documentation	MCM ORR Capability & Function	MCM ORR Measure	Notes/Differences
		1. Protocols that addresses infectious disease outbreaks describing processes for the review of specific situations and for determining the activation of the EOP.	Capability 3 Function 1	Planning b Plans document a process depicting what/when actions would be initiated for 1) pre-event indicators, 2) notifications, 3) activations, 4) logistics, 5) operations, 6) sustained operations, or 7) demobilization.	Can be used if plan is used to inform MCM planning and meets the requirement set in the ORR measure
		2. Protocols that address environmental public health issues describing processes for the review of specific situations and for determining the initiation of the EOP.	Capability 3 Function 1	Planning a. Plans describe strategies to coordinate with appropriate epidemiology, laboratory, medical, chemical, biological, and radiological subject matter experts (SMEs) to inform MCM decision-making. Plans should include the following elements: 1) analyze data, 2) assess emergency conditions, and 3) determine the activation levels based on the complexity of the event or incident required to support an MCM response.	Can be used if plan is used to inform MCM planning and meets the requirement set in the ORR measure
		2. Protocols that address environmental public health issues describing processes for the review of specific situations and for determining the initiation of the EOP.	Capability 3 Function 1	Planning b. Plans document a process depicting what/when actions would be initiated for 1) pre-event indicators, 2) notifications, 3) activations, 4) logistics, 5) operations, 6) sustained operations, or 7) demobilization.	Can be used if plan is used to inform MCM planning and meets the requirement set in the ORR measure



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	2.2.3 A: Complete after action reports (AAR)	3. Completed AAR for two events	Various		This PHAB measure can be used to meet most Operational measures within the ORR with the caveat that the AAR pertains to MCM activities, and meets the specific requirements of each ORR measure. To meet the PHAB measure the AAR must be from a real event.
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	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	1. Policies and procedures ensuring 24/7 coverage	Capability 3 Function 1	Planning a. Plans describe strategies to coordinate with appropriate epidemiology, laboratory, medical, chemical, biological, and radiological subject matter experts (SMEs) to inform MCM decision-making. Plans should include the following elements: 1) analyze data, 2) assess emergency conditions, and 3) determine the activation levels based on the complexity of the event or incident required to support an MCM response.	Can be used if plans to coordinate with SMEs include 24/7 coverage to reach the SMEs
		3. Contracts/MOAs/MOUs/mutual assistance agreements detailing relevant staff	Capability 1 Function 2	Planning a. Plans address partner engagement and document written acknowledgment of response roles for the following partners: 1) private sector, 2) local, 3) state, and 4) regional.	Can be used if partner MCM roles are documented in contracts/ MOAs/MOUs/mutual assistance agreements, to meet ORR measure contracts/MOAs/MOUs/ mutual assistance agreements must be from organization from different jurisdiction levels ex. State and Regional



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	<p>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</p>	<p>1. Shared resources and/or additional capacity</p>	<p>Capability 1 Function 2</p>	<p>Planning a. Plans address partner engagement and document written acknowledgment of response roles for the following partners: 1) private sector, 2) local, 3) state, and 4) regional.</p>	<p>To meet ORR measure must have examples from different jurisdiction levels ex. State and Regional</p>
<p>2. Joint exercises for rapid detection, investigation, and containment/mitigation of public health problems and environmental public health hazards</p>		<p>Capability 1 Function 2</p>	<p>Operational a. Jurisdiction can provide evidence of how the roles and responsibilities of these partners have been used within the last five years.</p>	<p>Can be used if jurisdiction partners participated in an exercise with a scenario involving a public health or environmental health hazard within the last 5 years</p>	
		<p>Capability 3 Function 1</p>	<p>Operational a. Participation of appropriate subject matter experts to inform MCM decision-making has been exercised within the last five years.</p>	<p>Can be used if have exercised with partners within 5 years and if partners included epidemiology and/or environmental health subject matter experts</p>	
		<p>Various</p>		<p>While this PHAB measure is most applicable to the ORR measures listed above it can be applied to most ORR Operational measures with the caveat that the AAR is from an exercise/event that involved response partners, and that is meets the specific requirements of the ORR measure.</p>	



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<p>2.4: Maintain a plan with policies and procedures for urgent and non-urgent communications.</p>	<p>2.4.1 A: Written protocols for urgent 24/7 communications</p>	<p>1. Protocol for urgent 24/7 communications</p>	<p>Capability 6 Function 1</p>	<p>Planning a. Plans include procedures that 1) identify all stakeholders who would be involved in an MCM incident (including public health, medical, law enforcement and other disciplines), 2) outline communications pathways between and among these stakeholders and 3) show evidence that current contact list is exist that include multiple contact mechanisms/ devices for identified stakeholders.</p>	
	<p>2.4.3 A: Timely communication provided to the general public during public health emergencies</p>	<p>1. Communications plan, procedure, or process to provide emergency information to the public</p>	<p>Capability 4 Function 5</p>	<p>Planning a. Plans include procedures for 1) information verification; 2) message development, approval, and clearance; and 3) message dissemination to the public, as they relate to an MCM mission.</p>	
		<p>2. Communications through the media to provide information during a public health emergency</p>	<p>Capability 4 Function 5</p>	<p>Operational a. The jurisdiction can provide evidence of participation in an exercise or real incident within the last five years in which public messages that incorporate MCM elements are created and disseminated.</p>	<p>To meet PHAB measure must be from a real incident and to meet ORR measure messages must incorporate MCM elements</p>
			<p>Capability 4 Function 5</p>	<p>Operational b. The jurisdiction can provide evidence of participation in an exercise or real incident within the last five years where MCM materials were translated or adapted for applicable at-risk populations.</p>	<p>To meet PHAB measure must be from a real incident and to meet ORR measure messages must incorporate MCM elements and have been translated or targeted towards at-risk populations</p>



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<p>3.2: Provide information on public health issues and public health functions through multiple methods to a variety of audiences.</p>	<p>3.2.3 A: Communication procedures to provide information outside the health department</p>	<p>1. Procedures for communications that include: a. Dissemination of accurate, timely, and appropriate information for different audiences</p>	<p>Capability 4 Function 3</p>	<p>Planning a. Plans include procedures for 1) media notification (including an updated contact list) and credentialing; 2) press advisories and briefings; and 3) media monitoring and validation (including social media).</p>	<p>Can be used to meet parts 2) press advisories and briefings; and 3) media monitoring and validation (including social media), of the ORR measure.</p>
			<p>Capability 4 Function 4</p>	<p>Planning a. Plans include methods for the public to contact the health department with MCM-related questions and concerns through 1) phone (i.e., call centers and/or help desks), 2) social media, 3) web chat, 4) e-mail, or 5) other communication platforms.</p>	<p>Can be used under the idea that each method would reach a different audience. i.e. the audience who uses social media could be difference from the audience more that would use a call center</p>
		<p>1. Procedures for communications that include: c. A contact list of media and key stakeholders</p>	<p>Capability 4 Function 3</p>	<p>Planning a. Plans include procedures for 1) media notification (including an updated contact list) and credentialing; 2) press advisories and briefings; and 3) media monitoring and validation (including social media).</p>	<p>Can be used to meet part 1) media notification (including an updated contact list) and credentialing of the ORR measure</p>
		<p>1. Procedures for communications that include: d. A designated staff position as the public information officer</p>	<p>Capability 4 Function 1</p>	<p>Planning a. Plans document public information and communication primary and back-up personnel who are trained in MCM responsibilities and current contact lists exists for these individuals.</p>	<p>To meet PHAB measure must document which staff position is assigned as public information officer, and include the duties of the PIO. Can be used together with Capability 4 Function 3 Planning b. to meet measure.</p>



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			Capability 4 Function 3	Planning b. Public health public information officer (PIO) responsibilities are documented in the job aid for the PIO or other MCM-designated staff and include the following elements: 1) coordinating information with the lead PIO and/or joint information center (JIC); 2) serving as the point-of-contact for the media, and 3) controlling public information messages and materials.	To meet PHAB measure job aid must include which staff position is assigned as public information officer. Can be used together with Capability 4 Function 1 Planning a. to meet measure.
		2. Implementation of communications procedures	Capability 4 Function 5	Operational a. The jurisdiction can provide evidence of participation in an exercise or real incident within the last five years in which public messages that incorporate MCM elements are created and disseminated.	To meet PHAB measure must be from a real incident and to meet ORR measure messages must incorporate MCM elements
	3.2.4 A: Risk communication plan	1. Risk communication plan.	Capability 3 Function 1	Planning c. Plans identify the redundant communication platforms that are in place to ensure communications remain available should primary communication systems become unavailable	Can be used for MCM ORR measure if risk communication plan includes redundant communication pathways. To use for PHAB measure must be part of a larger document that also meets the rest of the PHAB measure requirements
			Capability 4 Function 1	Planning a. Plans document public information and communication primary and back-up personnel who are trained in MCM responsibilities and current contact lists exists for these individuals.	Can be used for MCM ORR measure if risk communication plan designates primary and secondary PIO. To use for PHAB measure must be part of a larger document that also meets the rest of the PHAB measure requirements



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			Capability 4 Function 3	Planning a. Plans include procedures for 1) media notification (including an updated contact list) and credentialing; 2) press advisories and briefings; and 3) media monitoring and validation (including social media).	To use for PHAB measure must be part of a larger document that also meets the rest of the PHAB measure requirements
			Capability 4 Function 3	Planning b. Public health public information officer (PIO) responsibilities are documented in the job aid for the PIO or other MCM-designated staff and include the following elements: 1) coordinating information with the lead PIO and/or joint information center (JIC); 2) serving as the point-of-contact for the media, and 3) controlling public information messages and materials.	To use for PHAB measure must be part of a larger document that also meets the rest of the PHAB measure requirements
			Capability 6 Function 2	Planning a. Plans document minimum requirements for information sharing during an MCM incident, including 1) when information should be shared, 2) who is authorized to receive and/or share information, 3) what types of information can be shared, 4) information use and rerelease parameters, and 5) protection of information (including legal considerations).	For PHAB Measure plan must include certain protocols that address how information is shared, see guidance in the measure for more details. Plan may be a standalone plan, a part of a larger plan or series of protocols.



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	3.2.6 A: Accessible, accurate, actionable, and current information provided in culturally sensitive and linguistically appropriate formats for target populations served by the health department	2. Interpretation, translation, or other specific communication services	Capability 4 Function 5	Planning b. Plans include a process for the pre-incident and real-time translation of information specific to an MCM response to address the following populations of the jurisdiction: 1) non-English speaking, 2) hearing impaired, 3) visually impaired, and 4) limited language proficiency populations.	
		3. Assistive staff or technology devices	Capability 4 Function 5	Planning b. Plans include a process for the pre-incident and real-time translation of information specific to an MCM response to address the following populations of the jurisdiction: 1) non-English speaking, 2) hearing impaired, 3) visually impaired, and 4) limited language proficiency populations.	
		4. Public health materials that are culturally appropriate, in other languages, at low reading level, and/or address a specific population that may have difficulty with the receipt or understanding of public health communications	Capability 4 Function 5	Planning b. Plans include a process for the pre-incident and real-time translation of information specific to an MCM response to address the following populations of the jurisdiction: 1) non-English speaking, 2) hearing impaired, 3) visually impaired, and 4) limited language proficiency populations.	



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4.1: Engage with the public health system and the community in identifying and addressing health problems through collaborative processes	4.1.1 A: Establishment and/or active participation in a comprehensive community health partnership and/or coalition; or active participation in several partnerships or coalitions to address specific public health issues or populations	1. Collaborative partnerships with others to address public health issues.	Capability 1 Function 3	Planning a. Plan addresses engagement with community partners, to include medical and mental/behavioral health agencies to promote an understanding and connection to MCM activities.	To meet the ORR measures MCM activities must either be one of the issues addressed in a broad community partnership or there must be a partnership dedicated to MCM activities that is being participated in.
		2. Partners organizations or representation	Capability 1 Function 3	Planning a. Plan addresses engagement with community partners, to include medical and mental/behavioral health agencies to promote an understanding and connection to MCM activities.	This ORR measure is met by a list of organizations participating in the partnership from measure 4.1.1 A 1
			Capability 8 Function 1	Planning c. Guidance/plans identify healthcare partners that would participate in MCM activities and includes: 1) list of current healthcare partners with appropriate contact information, 2) MOUs (or other signed written agreements) with these organizations, 3) procedures for how these healthcare partners will participate in MCM activities (including asset request procedures), and 4) planning guidance for those partners participating in closed PODs.	Can be used to meet 1) list of current healthcare partners with appropriate contact information, if MCM activities are addressed as part of the partnership, if the partnership includes healthcare partners, and the list includes current contact information for those healthcare partners.
5.4: Maintain an All Hazards Emergency Operations Plan	5.4.1 A: Process for the development and maintenance of an All Hazards Emergency	1. Collaborative planning with other governmental agencies	Capability 1 Function 2	Planning a. Plans address partner engagement and document written acknowledgment of response roles for the following partners: 1) private sector, 2) local, 3) state, and 4) regional.	To meet measures must show partners acknowledgement of response roles and across different jurisdiction levels ex. State and Regional regional.



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	Operations Plan (EOP)	2. Collaborative testing of the All Hazards EOP: a. Description of a real emergency or exercise; b. Debriefing or After-Action Report (AAR)	Various		This PHAB measure can be used to meet most Operational measures within the ORR with the caveat that the AAR pertains to MCM activities, and meets the specific requirements of each ORR measure.
		3. Collaborative revision of the All Hazards EOP that includes: c) coordination with emergency response partners,	Capability 1 Function 2	Planning a. Plans address partner engagement and document written acknowledgment of response roles for the following partners: 1) private sector, 2) local, 3) state, and 4) regional.	To meet measures must show partners acknowledgement of response roles and across different jurisdiction levels ex. State and Regional
			Capability 1 Function 3	Planning a. Plan addresses engagement with community partners, to include medical and mental/behavioral health agencies to promote an understanding and connection to MCM activities.	To meet measures documents must show that MCM activities are included in preparedness meetings
5.4.2 A: Public health emergency operations plan (EOP)		1. EOP, as defined by Tribal, state, or national guidelines that includes: b) roles and responsibilities of the health department and its partners,	Capability 1 Function 2	Planning a. Plans address partner engagement and document written acknowledgment of response roles for the following partners: 1) private sector, 2) local, 3) state, and 4) regional.	To meet measures must show partners acknowledgement of response roles and across different jurisdiction levels ex. State and Regional
		1. EOP, as defined by Tribal, state, or national guidelines that includes: d. Continuity of operations	Capability 3 Function 4	Planning a. Plans address continuity strategies in the event that primary systems are unavailable during an MCM response, including: 1) activation triggers, 2) loss of facilities (RSS, RDS, PODs, etc.), 3) loss of personnel, 4) orders of succession, and 5) devolution	



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		2. Testing the public health EOP, through the use of drills and exercises: a) process for exercising and evaluating the public health EOP	Capability 3 Function 5	Planning c. Plans identify processes for 1) developing a multi-year training and exercise plan (MYTEP), 2) conducting a hot wash and 3) implementing IPs that incorporate MCM activities.	Requires that MCM activities be a part of the public health EOP
		2. Testing the public health EOP, through the use of drills and exercises: b) after-action report (AAR).	Various		This PHAB measure can be used to meet most Operational measures within the ORR with the caveat that the AAR pertains to MCM activities, and meets the specific requirements of each ORR measure.
11.1: Develop and maintain an operational infrastructure to support the performance of public health functions.	11.1.3 A: Policies regarding confidentiality, including applicable HIPAA requirements	1. Confidentiality policies	Capability 6 Function 2	Planning a. Plans document minimum requirements for information sharing during an MCM incident, including 1) when information should be shared, 2) who is authorized to receive and/or share information, 3) what types of information can be shared, 4) information use and rerelease parameters, and 5) protection of information (including legal considerations).	Can be used for PHAB measure if confidentiality policy is specifically stated in MCM plan. Can be used for ORR measure under the idea that confidentiality policies would apply to all situations including MCM incidents and meets the ORR measure requirements
	11.1.4 A: Policies, processes, programs, and interventions provided that are socially, culturally, and linguistically appropriate to specific populations with higher health risks and poorer health outcomes.	2. Processes, programs, or interventions provided in a culturally or linguistically competent manner	Capability 4 Function 5	Planning b. Plans include a process for the pre-incident and real-time translation of information specific to an MCM response to address the following populations of the jurisdiction: 1) non-English speaking, 2) hearing impaired, 3) visually impaired, and 4) limited language proficiency populations.	



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	11.1.6 A: Information management function that supports the health department's mission and workforce by providing infrastructure for data storage, protection, and management; and data analysis and reporting	3. Maintenance of confidentiality of data	Capability 6 Function 2	Planning a. Plans document minimum requirements for information sharing during an MCM incident, including 1) when information should be shared, 2) who is authorized to receive and/or share information, 3) what types of information can be shared, 4) information use and rerelease parameters, and 5) protection of information (including legal considerations).	Can be used for PHAB measure if confidentiality policy is specifically stated in MCM plan. Can be used for ORR measure under the idea that confidentiality policies would apply to all situations including MCM incidents and meets the ORR measure requirements

References

Public Health Accreditation Board Standards and Measures Version 1.5 (December 2013). Public Health Accreditation Board (PHAB). Accessed online at: <http://www.phaboard.org/wp-content/uploads/SM-Version-1.5-Board-adopted-FINAL-01-24-2014.docx.pdf>

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