

# Project Metrics

Demographic Information	
<b>Period of Performance</b>	August 9, 2007 - August 8, 2008
<b>Report Type</b>	End of Year
<b>Name of Partnership</b>	Alaska Healthcare Facility Partnership
<b>Name of Entity Reporting On behalf of the Partnership</b>	
<b>Address</b>	
<b>Contact Person</b>	Sally Abbott, ANP
<b>Contact Phone</b>	907-334-2274
<b>Contact Email</b>	sally.abbott@alaska.gov

## Partnership Project Budget Information

Period of Performance	
Start	End
Sep-07	Sep-08

Budget Categories		Budget Status			
Function or Activity		Proposed	Unobligated	Obligated	Spent
a.	Personnel	38,577		38,577	-
b.	Fringe Benefits	19,873	-	19,873	-
c.	Travel	5,000	-	5,000	-
d.	Equipment	-	-	-	-
e.	Supplies	-	-	-	-
f.	Contractual	671,867		661,075	10,792
g.	Construction	-			-
h.	Other	-			-
i.	Total Direct Charges (Sub Total: a-h)	735,317	-	724,525	10,792
j.	Indirect Charges	7,014		7,014	
k.	Total (Sum: i and j)	742,331	-	731,539	10,792

Please describe any "Other" Charges	
Other:	

Project Progress Input Sheet

Proposed Activity Period		Work	Awardee Input					Awardee Evaluation			
Start	End	Awardee Goal	Budget Category	Related Program Goals	Related PAHPA Goals	Progress to Date	Project Challenges	Percent Complete (%)	Awardee Evaluation Strategy	Awardee Evaluation Progress	Awardee Evaluation Challenges
		Objective: The purpose of this project is to increase Alaska's pediatric medical surge capacity by enhancing the pediatric medical surge in the Municipality of Anchorage.									
9/1/2007	8/8/2008	Activity: Increase the emergency hospital capacity of Anchorage pediatric hospitals by 100% with normal standards of care	Contractual	Surge Capacity Yes Exercises Yes Situational Awareness Yes Mutual Aid Agreements Yes Relationship Building Yes NIMS Compliance Yes ESAR-VHP No	Integration Yes Developing Plans Yes At-Risk Individuals Yes Coordination Yes Vital HPH Services Yes	Background work on current resources, needed curriculum, pediatric supplies and equipment are all in progress. Workgroups include Curriculum, Equipment, Exercise, Ethics and Community and include all members of the All Alaska Pediatric Partnership and some new partners such as American Red Cross and Anchorage School District.	Changes in leadership/staffing at several hospitals have proved to be a challenge with this project. Diverse opinions come from various groups that their work is most important. It has been difficult to maintain focus at times and also difficult to maintain representation at meetings.	100%	Full Scale Exercise planned for June 26th to evaluate ability of Anchorage hospitals to surge with normal and altered standards of care. Full scale exercise completed 26 June in Anchorage. 130 children sent through 3 Anchorage hospitals using normal and altered standards of care.	After Action Reports completed for each hospital and for the project goals. They are being sent with this report.	Exercises are scheduled for late in the grant period. Challenges in getting all hospitals to play but we are making progress. Each hospital developed separate goals for the exercise and it was difficult to unify the exercise. MEPP had separate evaluators on site and completed its own evaluation of the ex.
9/1/2007	8/8/2008	Activity: Increase the emergency hospital capacity of Anchorage pediatric hospitals by 200% with altered standards of care and using the other three hospitals in Anchorage.	Contractual	Surge Capacity Yes Exercises Yes Situational Awareness Yes Mutual Aid Agreements Yes Relationship Building Yes NIMS Compliance Yes ESAR-VHP No	Integration Yes Developing Plans Yes At-Risk Individuals Yes Coordination Yes Vital HPH Services Yes	Ethics workgroup has been identifying standards of care in regard to use of scarce resources, employing adult models from Utah, New York City and Toronto workgroups. Strong focus on adapting the Sequential Organ Failure Assessment score to children. Our military hospital is examining the process to bring non-dependent children on base for care; the other non-pediatric hospital is examining what training they believe staff will need to provide safe care to children.	Changes in leadership/staffing at several hospitals have proved to be a challenge with this project. A few mentions of liability concerns have arisen from discussions with non-pediatric providers and we recognize a need to address that issue in future workgroups but particularly at the state level. Hospitals have a difficult time envisioning a need for this type of medical surge.	100%	Full Scale Exercise planned for June 26th to evaluate ability of hospitals to surge with normal and altered standards of care. Non-pediatric hospitals will admit children with respiratory complaints from wildfire. There will be transfer of patients to a local military hospital. Full scale exercise completed 26 June in Anchorage. 130 children sent through 4 Anchorage hospitals using normal and altered standards of care.	Exercise with rural hospital and medical technical support team is currently being planned for July. Scenario is being developed and we are working with Samuel Simmonds Hospital in Barrow on the exercise. One additional hospital is using a pediatric scenario to test their ability to care for an increased number of children. Exercise completed with medical team of 5 were sent with supplies to Barrow within 48 hours of request.	Exercises are scheduled for late in the grant period. Each hospital played differently during EX: some sent children through ER while others nationalized ER and sent children directly to inpatient areas. All used same scenario of respiratory symptoms.
		Activity:		Surge Capacity Exercises Situational Awareness Mutual Aid Agreements Relationship Building NIMS Compliance ESAR-VHP	Integration Developing Plans At-Risk Individuals Coordination Vital HPH Services						
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Project Progress Input Sheet

			Relationship Building		Vital HPH Services						
			NIMS Compliance								
			ESAR-VHP								
			Surge Capacity		Integration						
			Exercises		Developing Plans						
			Situational Awareness		At-Risk Individuals						
			Mutual Aid Agreements		Coordination						
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			ESAR-VHP								
		Activity:									

Project Progress Input Sheet

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Start	End	Awardee Goal	Budget Category	Related Program Goals	Related PAHPA Goals	Progress to Date	Project Challenges	Percent Complete (%)	Awardee Evaluation Strategy	Awardee Evaluation Progress	Awardee Evaluation Challenges
		<b>Objective: Increase the emergency hospital capacity of Anchorage pediatric hospitals by 100% with normal standards of care and by 200% with altered standards of care and using the other three hospitals in Anchorage.</b>									
9/1/2007	4/30/2008	<b>Activity: Identify specific goals of project</b>	Contractual	Surge Capacity <b>Yes</b> Exercises <b>Yes</b> Situational Awareness <b>Yes</b> Mutual Aid Agreements <b>Yes</b> Relationship Building <b>Yes</b> NIMS Compliance <b>No</b> ESAR-VHP <b>Yes</b>	Integration <b>Yes</b> Developing Plans <b>Yes</b> At-Risk Individuals <b>Yes</b> Coordination <b>Yes</b> Vital HPH Services <b>Yes</b>	Goals for the project have been revised & sent to PO after Site Visit Report. Revised goals now include Community support through an emergency call center for parents, pediatric supply stockpiling and creation of resource website. There was also a change in the number of exercises. There will be an Anchorage full scale exercise with the city hospitals and a rural hospital exercise that will send a Medical support team to the rural community of Barrow to assist providers to keep patients there.	Goals focus both on Anchorage and rural hospitals but not all are members of the All Alaska Pediatric Partnership. Project creep was a real possibility and we needed to maintain focus of the specific objectives as outlined. Many members of the Steering Committee had agenda for their own agency that were not always consistent with the project. Some flexibility was important to gain support for overall objectives.	100%	Goal selected were consistent with reaching overall objective of increased pediatric medical surge capacity in Anchorage and support of rural facilities.	Steering Committee agreed with specific goals and project moved forward.	Identifying measurable and realistic goals and obtaining consensus with the entire Steering Committee.
9/1/2007	4/30/2008	<b>Activity: Identify members of Pediatric Preparedness Steering Committee</b>	Contractual	Surge Capacity <b>Yes</b> Exercises <b>Yes</b> Situational Awareness <b>Yes</b> Mutual Aid Agreements <b>Yes</b> Relationship Building <b>Yes</b> NIMS Compliance <b>No</b> ESAR-VHP <b>No</b>	Integration <b>Yes</b> Developing Plans <b>Yes</b> At-Risk Individuals <b>Yes</b> Coordination <b>Yes</b> Vital HPH Services <b>Yes</b>	Several members were added to Steering Committee to represent all members of the All Alaska Pediatric Partnership and other important partners. Added members include American Red Cross, Alaska Nurse Alert Network, and Anchorage School District.	Staff turnover; institutional commitment and leadership involvement were challenging. Due to time constraints when project was proposed, it was not possible to elicit support from all facilities prior to submission of grant application. After receiving the grant, we needed to educate several member hospitals and organizations about the goals and elicit additional support from clinicians. Drafting budget that was workable and equitable to all the partners based on the level of participation.	100%	All members of the All Alaska Pediatric Partnership are represented on the Steering Committee.	All members of the All Alaska Pediatric Partnership are represented on the Steering Committee.	n/a at this time.
9/1/2007	4/30/2008	<b>Activity: Identify pediatric resources that should be included in statewide inventory. Include staff and stuff</b>	Contractual	Surge Capacity <b>Yes</b> Exercises <b>Yes</b> Situational Awareness <b>Yes</b> Mutual Aid Agreements <b>Yes</b> Relationship Building <b>Yes</b> NIMS Compliance <b>No</b> ESAR-VHP <b>Yes</b>	Integration <b>Yes</b> Developing Plans <b>Yes</b> At-Risk Individuals <b>Yes</b> Coordination <b>Yes</b> Vital HPH Services <b>Yes</b>	Workgroup includes MDs, RTs, and supply chain staff. Equipment & supply list was almost complete by April 30. Main focus on durable equipment such as vents, including ventilators and portable, transportable vents. Group will purchase vents that are in state vent stockpile to assure consistency. Also considering oxygen concentrators, CO2 monitors, pulse oximeters and Go Kits that could be ready to go to rural community with Medical Support Team. Staff resources centered in Anchorage.	Reaching consensus with diverse thoughts and opinions among hospitals and Steering Committee members. Working out details on storage, maintenance and upkeep of equipment; MOU with hospitals as they receive the supplies. Resolution obtained by focus on project objective and whether item under consideration helped move the project toward the goal of increased pediatric medical capacity.	100%	Full scale Anchorage city-wide exercise planned for June 26, 2008.	Exercise in development.	Difference in levels of commitment from hospitals to project goals.
9/1/2007	5/15/2008	<b>Activity: Inventory pediatric resources: include pediatric physicians and nurses; those who have completed special training</b>	Contractual	Surge Capacity <b>Yes</b> Exercises <b>Yes</b> Situational Awareness <b>Yes</b> Mutual Aid Agreements <b>Yes</b> Relationship Building <b>Yes</b> NIMS Compliance <b>No</b> ESAR-VHP <b>Yes</b>	Integration <b>Yes</b> Developing Plans <b>Yes</b> At-Risk Individuals <b>Yes</b> Coordination <b>Yes</b> Vital HPH Services <b>Yes</b>	This activity involves Curriculum Workgroup, looking at existing courses for both non-PEPP and non-ER healthcare workers. Looking at PALS, PEARs, PDLs, PEPP, Decision that PEPP is the preferred curriculum.	Inventory was easier with members of All Alaska Pediatric Partnership than with other facilities. Many hospitals are extremely short-staffed and unable to participate in survey.	81%-99%	Steering Committee will have inventory of pediatric physicians and nurses. Training directed to Alaska Nurse Alert members, school nurses, and retired nurses.	We do have listing of who has general pediatric care and number of beds available in those facilities. There is no formal listing at this point but an inventory is planned by the conclusion of the project. Roster available of those who have completed training. Inventory of pediatric healthcare workers was not completed prior to end of project.	This has been difficult due to the large scope of the project and the large workload on a small number of Steering Committee members. We will continue to work toward completing a formal, rather than informal inventory.
9/1/2007	5/30/2008	<b>Activity: Identify needed pediatric equipment</b>	Contractual	Surge Capacity <b>Yes</b> Exercises <b>Yes</b> Situational Awareness <b>Yes</b> Mutual Aid Agreements <b>Yes</b> Relationship Building <b>Yes</b> NIMS Compliance <b>No</b> ESAR-VHP <b>No</b>	Integration <b>Yes</b> Developing Plans <b>Yes</b> At-Risk Individuals <b>Yes</b> Coordination <b>Yes</b> Vital HPH Services <b>Yes</b>	Specific equipment mentioned above under resources. Also talking to Alaska Native Tribal Health Consortium warehouse on plans for medication stock. Warehouse currently ships all needs to tribal clinics and hospitals and is a partner with Alaska DSHS in SWS planning.	This workgroup has had multiple meetings and discussions on what equipment is needed both in the pediatric and non-pediatric facilities as well as for the "go-kits" that will be used to support rural hospitals. Partner agreement on appropriate equipment. Additional work is needed on MOU when equipment is purchased.	100%	Pediatric equipment is purchased and available for use in pediatric medical surge.	None at this time.	None at this time. Working with the (2) pediatric hospitals to assure that equipment is in working order and not outdated.
9/1/2007	4/30/2008	<b>Activity: Survey pediatric medical and nursing stakeholders to determine appropriate curriculum</b>	Contractual	Surge Capacity <b>Yes</b> Exercises <b>Yes</b> Situational Awareness <b>Yes</b> Mutual Aid Agreements <b>Yes</b> Relationship Building <b>Yes</b> NIMS Compliance <b>No</b> ESAR-VHP <b>No</b>	Integration <b>Yes</b> Developing Plans <b>Yes</b> At-Risk Individuals <b>Yes</b> Coordination <b>Yes</b> Vital HPH Services <b>Yes</b>	Survey of pediatric stakeholders is complete and included physicians, clinical nurses, nurse educators and school nurses. Wide range of resources posted on M2P2 website for reference. Reviews include PALS, PEARs, PEPP, PDLs and other modules. Behavioral health module being developed by North Star (member of Steering Committee).	Staff time and commitment; reaching consensus with diverse thoughts & opinions. Workgroup felt it was important to consider the target audience and how training will be used before making a decision.	100%	Full scale Anchorage city-wide exercise planned for June 26, 2008. Plans to use curriculum as preparation to exercise test effectiveness for non-pediatric providers during medical surge event.	Curriculum has been selected. Training CDs and manuals are at the printer and should be available by early December. All materials will be free and will offer CEUs. Curriculum Workgroup has remained active and under the auspices of the existing All Alaska Pediatric Partnership.	None at this time.
9/1/2007	4/30/2008	<b>Activity: Survey existing curriculum</b>	Contractual	Surge Capacity <b>Yes</b> Exercises <b>Yes</b> Situational Awareness <b>Yes</b> Mutual Aid Agreements <b>No</b> Relationship Building <b>Yes</b> NIMS Compliance <b>No</b> ESAR-VHP <b>No</b>	Integration <b>Yes</b> Developing Plans <b>Yes</b> At-Risk Individuals <b>Yes</b> Coordination <b>Yes</b> Vital HPH Services <b>Yes</b>	Survey of existing pediatric curriculum is complete. As mentioned above, workgroup considered PALS, PEARs, PDLs, PEPP as basis of training modules and chose PEPP. Survey also included current available PEPP instructors in state and there are several who currently teach course to EMS personnel. Survey also helped to identify gaps, such as behavioral health that MEPP needs to address.	Staff time and commitment; determining availability or familiarity of curriculum with target audience.	100%	Survey of Workgroup for inclusion is complete.	This activity is completed.	None at this time.
9/1/2007	6/15/2008	<b>Activity: Identify physician and nursing candidates for training Anchorage and statewide</b>	Contractual	Surge Capacity <b>Yes</b> Exercises <b>Yes</b> Situational Awareness <b>Yes</b> Mutual Aid Agreements <b>Yes</b> Relationship Building <b>Yes</b> NIMS Compliance <b>No</b> ESAR-VHP <b>Yes</b>	Integration <b>Yes</b> Developing Plans <b>Yes</b> At-Risk Individuals <b>Yes</b> Coordination <b>Yes</b> Vital HPH Services <b>Yes</b>	Appropriate candidates for training are being identified. More focus on nurses currently than on physicians. School nurses were identified as a major target audience and plans are to offer training with them. Information on the project was presented to Pediatric Grand Rounds for Anchorage pediatricians and was well-received. No additional volunteers for training were identified. Focus right now on Anchorage area; will extend out to rural personnel at later time.	Easier to identify nurses than physicians for this project. Steering Committee decided that adequate nursing care was more critical right now and will focus on that group for a grant period.	100%	Nurse candidates for training confined to Anchorage for initial focus. Initial candidates have been identified. Pilot training sessions were conducted; changes made based on feedback.	Initial groups of nurses have been identified and will be recruited to attend training.	None at this time. Need to continue to exercise with nurses that have been trained to test effectiveness in pediatric medical surge situations.

Project Progress Input Sheet

	<p>Activity: Develop training curriculum</p>	<p>Contractual</p>	<table border="1"> <tr><td>Surge Capacity</td><td>Yes</td><td>Integration</td><td>Yes</td></tr> <tr><td>Exercises</td><td>Yes</td><td>Developing Plans</td><td>Yes</td></tr> <tr><td>Situational Awareness</td><td>Yes</td><td>At-Risk Individuals</td><td>Yes</td></tr> <tr><td>Mutual Aid Agreements</td><td>Yes</td><td>Coordination</td><td>Yes</td></tr> <tr><td>Relationship Building</td><td>Yes</td><td>Vital HPH Services</td><td></td></tr> <tr><td>NIMS Compliance</td><td>No</td><td></td><td></td></tr> <tr><td>ESAR-VHP</td><td>No</td><td></td><td></td></tr> </table>	Surge Capacity	Yes	Integration	Yes	Exercises	Yes	Developing Plans	Yes	Situational Awareness	Yes	At-Risk Individuals	Yes	Mutual Aid Agreements	Yes	Coordination	Yes	Relationship Building	Yes	Vital HPH Services		NIMS Compliance	No			ESAR-VHP	No			<p>Members of Curriculum Workgroup continue to develop appropriate curriculum. Modules in development: Pediatric Care for ICU nurses; Treating Children in Crisis; Developmental Communication; JumpSTART Triage; Pediatric HT30 Vent Training. Each about 1 hour long with CEUs that can be tracked.</p>	<p>Time &amp; need for consistent participation. Added option to develop training manuals and instruction on CD rom for training. Working on getting CEUs for all training through the Alaska Nurses Association.</p>	<p>100% Training curriculum will be completed and modules will be rolled out to nursing candidates.</p>	<p>Training curriculum is still in progress. Curriculum finalized. Training CDs and manuals are at the printer and should be available by early December. All materials will be free and will offer CEUs. Curriculum Workgroup has remained active and under the auspices of the existing All Alaska Pediatric Partnership. We are looking to continue support with HPP funds to sustain progress made during this project.</p>	<p>None at this time.</p>
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5/30/2008	6/15/2008	<b>Activity: Pilot test curriculum in Anchorage</b>	Contractual	<table border="1"> <tr><td>Surge Capacity</td><td>Yes</td><td>Integration</td><td>Yes</td></tr> <tr><td>Exercises</td><td>Yes</td><td>Developing Plans</td><td>Yes</td></tr> <tr><td>Situational Awareness</td><td>Yes</td><td>At-Risk Individuals</td><td>Yes</td></tr> <tr><td>Mutual Aid Agreements</td><td>Yes</td><td>Coordination</td><td>Yes</td></tr> <tr><td>Relationship Building</td><td>Yes</td><td>Vital HPH Services</td><td>Yes</td></tr> <tr><td>NIMS Compliance</td><td>Yes</td><td></td><td></td></tr> <tr><td>ESAR-VHP</td><td>No</td><td></td><td></td></tr> </table>	Surge Capacity	Yes	Integration	Yes	Exercises	Yes	Developing Plans	Yes	Situational Awareness	Yes	At-Risk Individuals	Yes	Mutual Aid Agreements	Yes	Coordination	Yes	Relationship Building	Yes	Vital HPH Services	Yes	NIMS Compliance	Yes			ESAR-VHP	No			Yes	Yes	Yes	Yes	100%	Feedback from participants and completion of evaluation tool.	n/a There was limited pilot testing prior to the June 26 exercise.	There might not be time to evaluate the curriculum during the June Anchorage city hospital exercise as originally planned due to time constraints. There was no consistent approach by participating hospitals about using curriculum prior to exercise. Focus of training has been mainly on non-hospital personnel.		
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9/1/2007	4/30/2008	<b>Activity: Begin planning of a TTX exercise to evaluate project</b>	Contractual	<table border="1"> <tr><td>Surge Capacity</td><td>Yes</td><td>Integration</td><td>Yes</td></tr> <tr><td>Exercises</td><td>Yes</td><td>Developing Plans</td><td>Yes</td></tr> <tr><td>Situational Awareness</td><td>Yes</td><td>At-Risk Individuals</td><td>Yes</td></tr> <tr><td>Mutual Aid Agreements</td><td>Yes</td><td>Coordination</td><td>Yes</td></tr> <tr><td>Relationship Building</td><td>Yes</td><td>Vital HPH Services</td><td>Yes</td></tr> <tr><td>NIMS Compliance</td><td>Yes</td><td></td><td></td></tr> <tr><td>ESAR-VHP</td><td>No</td><td></td><td></td></tr> </table>	Surge Capacity	Yes	Integration	Yes	Exercises	Yes	Developing Plans	Yes	Situational Awareness	Yes	At-Risk Individuals	Yes	Mutual Aid Agreements	Yes	Coordination	Yes	Relationship Building	Yes	Vital HPH Services	Yes	NIMS Compliance	Yes			ESAR-VHP	No			Yes	Yes	Yes	Yes	96-20%	TTX is being developed. Goal has been met at this time. TTX for Anchorage hospitals was eliminated from the project; there was a TTX prior to the Rural Medical Surge Ex.	Goal has been met at this time. TTX is being developed by Exercise team, with Representatives from each hospital as well as Municipality of Anchorage DHS and Anchorage Office of Emergency Management.	None at this time.		
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9/1/2007	8-Aug-08	<b>Activity: Identification of triggers to activate medical surge plans</b>	Contractual	<table border="1"> <tr><td>Surge Capacity</td><td>Yes</td><td>Integration</td><td>Yes</td></tr> <tr><td>Exercises</td><td>Yes</td><td>Developing Plans</td><td>Yes</td></tr> <tr><td>Situational Awareness</td><td>Yes</td><td>At-Risk Individuals</td><td>Yes</td></tr> <tr><td>Mutual Aid Agreements</td><td>Yes</td><td>Coordination</td><td>Yes</td></tr> <tr><td>Relationship Building</td><td>Yes</td><td>Vital HPH Services</td><td>Yes</td></tr> <tr><td>NIMS Compliance</td><td>Yes</td><td></td><td></td></tr> <tr><td>ESAR-VHP</td><td>No</td><td></td><td></td></tr> </table>	Surge Capacity	Yes	Integration	Yes	Exercises	Yes	Developing Plans	Yes	Situational Awareness	Yes	At-Risk Individuals	Yes	Mutual Aid Agreements	Yes	Coordination	Yes	Relationship Building	Yes	Vital HPH Services	Yes	NIMS Compliance	Yes			ESAR-VHP	No			Yes	Yes	Yes	Yes	41%-60%	Triggers for slow moving events are always challenging. We are looking to quantify and write into our plans some initial triggers and test them during the upcoming RSV season.	Triggers will be included in the surge plan that is a deliverable for this project. They will be tested in real life response or in another exercise for pediatric medical surge. Identifying triggers remains difficult. We conducted a pre-season RSV meeting to establish criteria for notification to DHS. (RSV is non-reportable). Hospital clinicians will notify Anchorage DHS and State DHS when they get calls from rural facilities about early indicators of increased number of children with RSV.	None at this time in the project.	Lack of real objective criteria in slow moving response situation. We continue to work on this as part in partnership with hospitals, clinics, and other partners during outreach visits.	
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ESAR-VHP	No																																									
9/1/2007	6/15/2008	<b>Activity: Complete design of a TTX exercise to evaluate project</b>	Contractual	<table border="1"> <tr><td>Surge Capacity</td><td>Yes</td><td>Integration</td><td>Yes</td></tr> <tr><td>Exercises</td><td>Yes</td><td>Developing Plans</td><td>Yes</td></tr> <tr><td>Situational Awareness</td><td>Yes</td><td>At-Risk Individuals</td><td>Yes</td></tr> <tr><td>Mutual Aid Agreements</td><td>Yes</td><td>Coordination</td><td>Yes</td></tr> <tr><td>Relationship Building</td><td>Yes</td><td>Vital HPH Services</td><td>Yes</td></tr> <tr><td>NIMS Compliance</td><td>Yes</td><td></td><td></td></tr> <tr><td>ESAR-VHP</td><td>No</td><td></td><td></td></tr> </table>	Surge Capacity	Yes	Integration	Yes	Exercises	Yes	Developing Plans	Yes	Situational Awareness	Yes	At-Risk Individuals	Yes	Mutual Aid Agreements	Yes	Coordination	Yes	Relationship Building	Yes	Vital HPH Services	Yes	NIMS Compliance	Yes			ESAR-VHP	No			Yes	Yes	Yes	Yes	96-20%	Design of first exercise is Anchorage city-wide exercise and is almost complete. Scenario will be a Hillside wildfire while school is in session. Children will complain of shortness of breath and smoke inhalation. Total patients are 100 among 3 city hospitals. Hospitals are locating volunteers and will transfer patients from pediatric specialty hospital to military facility and non-pediatric facility (altered standard of care). They will also request additional resources, e.g. vents.	3 hospitals designing exercise objectives for project and each institution. Difficulty in obtaining sufficient number of children volunteers with parents during exercise. Some older children we play that they are younger than real age. There was a loss of key planner at 1 hospital that caused a problem in that facility. Initial plans to partner with Anchorage School District in May wildfire exercise but the school district could not provide any volunteers for the hospitals.	Exercise design will be completed after April 30. TTX for Anchorage hospitals was eliminated from the project; there was a TTX prior to the Rural Medical Surge Ex.	None at this time in the project.	None at this time. Samuel Simmonds Hospital not able to join TTX Director of Nursing stuck in airport without cell phone.
Surge Capacity	Yes	Integration	Yes																																							
Exercises	Yes	Developing Plans	Yes																																							
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ESAR-VHP	No																																									
9/1/2007	6/30/2008	<b>Activity: Purchase necessary pediatric equipment</b>	Contractual	<table border="1"> <tr><td>Surge Capacity</td><td>Yes</td><td>Integration</td><td>Yes</td></tr> <tr><td>Exercises</td><td>Yes</td><td>Developing Plans</td><td>Yes</td></tr> <tr><td>Situational Awareness</td><td>Yes</td><td>At-Risk Individuals</td><td>Yes</td></tr> <tr><td>Mutual Aid Agreements</td><td>Yes</td><td>Coordination</td><td>Yes</td></tr> <tr><td>Relationship Building</td><td>Yes</td><td>Vital HPH Services</td><td>Yes</td></tr> <tr><td>NIMS Compliance</td><td>No</td><td></td><td></td></tr> <tr><td>ESAR-VHP</td><td>No</td><td></td><td></td></tr> </table>	Surge Capacity	Yes	Integration	Yes	Exercises	Yes	Developing Plans	Yes	Situational Awareness	Yes	At-Risk Individuals	Yes	Mutual Aid Agreements	Yes	Coordination	Yes	Relationship Building	Yes	Vital HPH Services	Yes	NIMS Compliance	No			ESAR-VHP	No			Yes	Yes	Yes	Yes	100%	Partners have identified supplies & equipment as of April 30. Focus has been on ventilators and oscillators, pulse oximeters, and portable oxygen concentrators. Anticipate purchase by June 30.	There was an initial delay in identifying a fiscal agent that could act on behalf of the All Alaska Pediatric Partnership. Once that was resolved, the state system for Grants and Contracts has proven cumbersome and less than user friendly. We had multiple delays in getting funding to the partners and they forgone on without payment for quite some time. Those glitches have been fixed and the partners will be able to make purchase very soon.	Equipment purchased, inventoried and stored. Completed. Equipment list will be sent with this report.	No equipment has been purchased by April 30. There are 6 "Go-Kit" bags stored in Providence Hospital in Anchorage. We are currently planning how to implement periodic drills for pediatric clinicians so that they can maintain proficiency.	None at this time. Supplies have not yet been used in a real life event.
Surge Capacity	Yes	Integration	Yes																																							
Exercises	Yes	Developing Plans	Yes																																							
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9/1/2007	6/15/2008	<b>Activity: Complete training</b>	Contractual	<table border="1"> <tr><td>Surge Capacity</td><td>Yes</td><td>Integration</td><td>Yes</td></tr> <tr><td>Exercises</td><td>Yes</td><td>Developing Plans</td><td>Yes</td></tr> <tr><td>Situational Awareness</td><td>No</td><td>At-Risk Individuals</td><td>Yes</td></tr> <tr><td>Mutual Aid Agreements</td><td>Yes</td><td>Coordination</td><td>Yes</td></tr> <tr><td>Relationship Building</td><td>Yes</td><td>Vital HPH Services</td><td>Yes</td></tr> <tr><td>NIMS Compliance</td><td>No</td><td></td><td></td></tr> <tr><td>ESAR-VHP</td><td>Yes</td><td></td><td></td></tr> </table>	Surge Capacity	Yes	Integration	Yes	Exercises	Yes	Developing Plans	Yes	Situational Awareness	No	At-Risk Individuals	Yes	Mutual Aid Agreements	Yes	Coordination	Yes	Relationship Building	Yes	Vital HPH Services	Yes	NIMS Compliance	No			ESAR-VHP	Yes			Yes	Yes	Yes	Yes	100%	Training still under development. Training curriculum is still under development at 30 April. Once completed, they will be pilot tested and then a full training plan outlined. There is a very active group of nurses working on this activity and they are focusing on non-pediatric and non-emergency trained healthcare providers, particularly nurses. Workgroup sees the training working for both hospital and community-based personnel.	Selection of appropriate curriculum has proven to be a difficult process. There are multiple training courses that were reviewed by the workgroup and they took time to select the one they felt worked best. Challenge will be to build sustainability for the training after completion of the grant. We are looking at the HPP grant to see if we can continue the training using those funds.	Training modules will be used for educating non peds and non ER staff.	There are now over 300 nurses in the ANAS and we continue to work to add more. ANAS has worked to specify skill sets and pediatric is one skill set that is already identified.	Training must be completed by August 8 but would continue past the end of the grant.
Surge Capacity	Yes	Integration	Yes																																							
Exercises	Yes	Developing Plans	Yes																																							
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5/30/2008	6/30/2008	<b>Activity: Identification of technical support members</b>	Contractual	<table border="1"> <tr><td>Surge Capacity</td><td>Yes</td><td>Integration</td><td>Yes</td></tr> <tr><td>Exercises</td><td>Yes</td><td>Developing Plans</td><td>Yes</td></tr> <tr><td>Situational Awareness</td><td>Yes</td><td>At-Risk Individuals</td><td>Yes</td></tr> <tr><td>Mutual Aid Agreements</td><td>Yes</td><td>Coordination</td><td>Yes</td></tr> <tr><td>Relationship Building</td><td>Yes</td><td>Vital HPH Services</td><td>Yes</td></tr> <tr><td>NIMS Compliance</td><td>Yes</td><td></td><td></td></tr> <tr><td>ESAR-VHP</td><td>Yes</td><td></td><td></td></tr> </table>	Surge Capacity	Yes	Integration	Yes	Exercises	Yes	Developing Plans	Yes	Situational Awareness	Yes	At-Risk Individuals	Yes	Mutual Aid Agreements	Yes	Coordination	Yes	Relationship Building	Yes	Vital HPH Services	Yes	NIMS Compliance	Yes			ESAR-VHP	Yes			Yes	Yes	Yes	Yes	100%	Not yet started. Will be completed prior to 8 August.	None at this time.	Full scale exercise in July will send technical team to rural community. Goal is to have team on the ground within 24 hours of request and will include emergency credentialing of physician by receiving hospital. During exercise, Barrow hospital made request for specific staff, including pediatric ICU nurse and physician, RT, Epi field nurse and team coordinator.	None at this time in the project.	None at this time. Continued drilling and exercises are necessary to assure that process becomes part of regular hospital "culture". Need to identify team coordinator & develop JAS.
Surge Capacity	Yes	Integration	Yes																																							
Exercises	Yes	Developing Plans	Yes																																							
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6/15/2008	8/8/2008	<b>Activity: Registration of technical support nurses with Alaska Nurse Alert System</b>	Contractual	<table border="1"> <tr><td>Surge Capacity</td><td>Yes</td><td>Integration</td><td>Yes</td></tr> <tr><td>Exercises</td><td>No</td><td>Developing Plans</td><td>Yes</td></tr> <tr><td>Situational Awareness</td><td>Yes</td><td>At-Risk Individuals</td><td>Yes</td></tr> <tr><td>Mutual Aid Agreements</td><td>Yes</td><td>Coordination</td><td>Yes</td></tr> <tr><td>Relationship Building</td><td>Yes</td><td>Vital HPH Services</td><td>Yes</td></tr> <tr><td>NIMS Compliance</td><td>No</td><td></td><td></td></tr> <tr><td>ESAR-VHP</td><td>Yes</td><td></td><td></td></tr> </table>	Surge Capacity	Yes	Integration	Yes	Exercises	No	Developing Plans	Yes	Situational Awareness	Yes	At-Risk Individuals	Yes	Mutual Aid Agreements	Yes	Coordination	Yes	Relationship Building	Yes	Vital HPH Services	Yes	NIMS Compliance	No			ESAR-VHP	Yes			Yes	Yes	Yes	Yes	41%-60%	Active recruitment of nurses for Alaska Nurse Alert System (ANAS) continues both in Anchorage and other communities. Once project training begins, we will strongly encourage participants to register with ANAS. Coordinator for ANAS is a key member of the Steering Committee. Alaska continues to work on ESAR VHP and ANAS has been one database with volunteer healthcare professionals that we have developed.	Single recruiter with limited time/funds has limited the recruitment effort. There is no funding for additional staff at this time but we can make sure that all training for this project and other educational programs have information about ANAS and the Medical Board database as well.	Increase in number of registrations with ANAS with pediatric skills. Effort is continuing; there has been a small increase in number of nurses with training in ANAS.	There are now over 300 nurses in the ANAS and we continue to work to add more. ANAS has worked to specify skill sets and pediatric is one skill set that is already identified.	None at this time.
Surge Capacity	Yes	Integration	Yes																																							
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Surge Capacity	Yes	Integration	Yes																																							
Exercises	Yes	Developing Plans	Yes																																							
Situational Awareness	Yes	At-Risk Individuals	Yes																																							

Project Progress Input Sheet

		<b>Activity: Coordination of technical support physicians</b>	Contractual	Mutual Aid Agreements <input checked="" type="checkbox"/> Yes Relationship Building <input checked="" type="checkbox"/> Yes NIMS Compliance <input checked="" type="checkbox"/> Yes ESAR-VHP <input checked="" type="checkbox"/> Yes	Coordination <input checked="" type="checkbox"/> Yes Vital HPH Services <input checked="" type="checkbox"/> Yes				technical medical support team.		continued drills and exercises.
5/15/2008	7/15/2008	<b>Activity: Evaluation of project with functional exercise on pediatric surge</b>	Contractual	Surge Capacity <input checked="" type="checkbox"/> Yes Exercises <input checked="" type="checkbox"/> Yes Situational Awareness <input checked="" type="checkbox"/> Yes Mutual Aid Agreements <input checked="" type="checkbox"/> Yes Relationship Building <input checked="" type="checkbox"/> Yes NIMS Compliance <input checked="" type="checkbox"/> Yes ESAR-VHP <input checked="" type="checkbox"/> Yes	Integration <input checked="" type="checkbox"/> Yes Developing Plans <input checked="" type="checkbox"/> Yes At-Risk Individuals <input checked="" type="checkbox"/> Yes Coordination <input checked="" type="checkbox"/> Yes Vital HPH Services <input checked="" type="checkbox"/> Yes	In progress. Will be completed prior to 8 August. Exercise design not yet started by April 30. Plans for a TableTop Exercise for Anchorage with rural hospital was eliminated from the workplan.	Exercise team is working on both the Anchorage city-wide exercise and the rural hospital exercise and they are only 3 weeks apart. Plans for Anchorage hospitals to participate in rural exercise through TTX was eliminated and focus solely on rural hospital for July exercise.	100%	AAR will be completed following EX. Exercise completed 11-17 July. HPP Project Officer attended as observer in Anchorage. AAR is attached to this report.	None at this time in the project.	None at this time. Need to address items in AAR-IP.

Project Progress Input Sheet

Proposed Activity Period		Work	Awardee Input						Awardee Evaluation				
Start	End	Awardee Goal	Budget Category	Related Program Goals		Related PAHPA Goals		Progress to Date	Project Challenges	Percent Complete (%)	Awardee Evaluation Strategy	Awardee Evaluation Progress	Awardee Evaluation Challenges
		<b>Objective: Increase the emergency hospital capacity of Anchorage pediatric hospitals by 100% with normal standards of care and by 200% with altered standards of care and using the other three hospitals in Anchorage.</b>											
5/15/2008	8/8/2008	Activity: Completion of AAR	Contractual	Surge Capacity	Yes	Integration	Yes	N/A exercises are scheduled for June and July	Time and compliance with HSEEP requirements	100%	HSEEP Templates for AAR and Corrective Actions	n/a Completed	n/a None
				Exercises	Yes	Developing Plans	Yes						
				Situational Awareness	Yes	At-Risk Individuals	Yes						
				Mutual Aid Agreements	Yes	Coordination	Yes						
				Relationship Building	Yes	Vital HPH Services	Yes						
				NIMS Compliance	No								
				ESAR-VHP	Yes								
9/1/2007	8/8/2008	Activity: Improved internal pediatric surge plans for AAPP hospitals	Contractual	Surge Capacity	Yes	Integration	Yes	N/A exercises are scheduled for June and July	Once exercise is complete and AAR is written, there will need to be a review of the findings that are shared with the hospitals. DHSS will need to revise plans as part of DHSS EOP.	41%-60%	Continued exercising new plans during drills and real response	n/a at this time Exercise and AAR have been completed and reviewed with hospitals. We continue to improve our partnerships with healthcare facilities. One AAR item involves improved coordination among the Anchorage hospitals and we have included plans for a medical coordination center in our HPP workplan for this year.	There is competition for types and focus of major exercises. It might not be possible to repeat a pediatric exercise to test revised plans. In all likelihood, there will be real life events in the future that will test our pediatric surge plans. Experts are predicting increased RSV this year as a result of high fuel prices. Multiple families are living in very small homes. We have started
				Exercises	Yes	Developing Plans	Yes						
				Situational Awareness	Yes	At-Risk Individuals	Yes						
				Mutual Aid Agreements	Yes	Coordination	Yes						
				Relationship Building	Yes	Vital HPH Services	Yes						
				NIMS Compliance	No								
				ESAR-VHP	Yes								
9/1/2007	8/8/2008	Activity: Compliance with all NIMS requirements	Other	Surge Capacity	No	Integration	Yes	All healthcare facilities funded by this grant are also funded by the HPP. NIMS compliance activities are a component of that grant and are not a focus of the HPP grant. All facilities are in progress with achieving full NIMS compliance.	n/a	81%-99%	Self reporting of healthcare facilities to DHSS via survey and during site visits.	Will survey healthcare facilities for HPP requirements for Year End report.	For many small facilities, staff time is difficult to arrange. In addition, in rural Alaska there is tremendous turnover in personnel. NIMS compliance is a moving target for many facilities. They continue to strive for full NIMS compliance.
				Exercises	No	Developing Plans	Yes						
				Situational Awareness	No	At-Risk Individuals	No						
				Mutual Aid Agreements	Yes	Coordination	Yes						
				Relationship Building	Yes	Vital HPH Services	No						
				NIMS Compliance	Yes								
				ESAR-VHP	No								
		Activity:		Surge Capacity		Integration							
				Exercises		Developing Plans							
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		Activity:		Surge Capacity		Integration							
				Exercises		Developing Plans							
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Project Progress Input Sheet

				Surge Capacity		Integration							
		Activity:		Exercises		Developing Plans							
				Situational Awareness		At-Risk Individuals							
				Mutual Aid Agreements		Coordination							
				Relationship Building		Vital HPH Services							
				NIMS Compliance									
				ESAR-VHP									
				Surge Capacity		Integration							
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		Surge Capacity	Exercises	Situational Awareness	Mutual Aid Agreements	Relationship Building	NIMS Compliance	ESAR-VHP	Integration	Developing Plans	At-Risk Individuals	Coordination	Vital HPH Services
Objective 1	Activity: Identify specific goals of project	Yes	Yes	Yes	Yes	Yes	No	Yes	Yes	Yes	Yes	Yes	Yes
	Activity: Identify members of Pediatric Preparedness Steering Committee	Yes	Yes	Yes	Yes	Yes	No	No	Yes	Yes	Yes	Yes	Yes
	Activity: Identify pediatric resources that should be included in statewide inventory. Include staff and stuff	Yes	Yes	Yes	Yes	Yes	No	Yes	Yes	Yes	Yes	Yes	Yes
	Activity: Inventory pediatric resources: include pediatric physicians and nurses; those who have completed special training	Yes	Yes	Yes	Yes	Yes	No	Yes	Yes	Yes	Yes	Yes	Yes
	Activity: Identify needed pediatric equipment	Yes	Yes	Yes	Yes	Yes	No	No	Yes	Yes	Yes	Yes	Yes
	Activity: Survey pediatric medical and nursing stakeholders to determine appropriate curriculum	Yes	Yes	Yes	Yes	Yes	No	No	Yes	Yes	Yes	Yes	Yes
	Activity: Survey existing curriculum	Yes	Yes	Yes	No	Yes	No	No	Yes	Yes	Yes	Yes	Yes
	Activity: Identify physician and nursing candidates for training Anchorage and statewide	Yes	Yes	Yes	Yes	Yes	No	Yes	Yes	Yes	Yes	Yes	Yes
	Activity: Develop training curriculum	Yes	Yes	Yes	Yes	Yes	No	No	Yes	Yes	Yes	Yes	0
Activity: Review curriculum with stakeholders	Yes	No	Yes	No	Yes	No	No	Yes	Yes	Yes	Yes	Yes	
Objective 1a	Activity: Pilot test curriculum in Anchorage	Yes	Yes	Yes	Yes	Yes	Yes	No	Yes	Yes	Yes	Yes	Yes
	Activity: Begin planning of a TTX exercise to evaluate project	Yes	Yes	Yes	Yes	Yes	Yes	No	Yes	Yes	Yes	Yes	Yes
	Activity: Identification of triggers to activate medical surge plans	Yes	Yes	Yes	Yes	Yes	Yes	No	Yes	Yes	Yes	Yes	Yes
	Activity: Complete design of a TTX exercise to evaluate project	Yes	Yes	Yes	Yes	Yes	Yes	No	Yes	Yes	Yes	Yes	Yes
	Activity: Purchase necessary pediatric equipment	Yes	Yes	Yes	Yes	Yes	No	No	Yes	Yes	Yes	Yes	Yes
	Activity: Complete training	Yes	Yes	No	Yes	Yes	No	Yes	Yes	Yes	Yes	Yes	Yes
	Activity: Identification of technical support members	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
	Activity: Registration of technical support nurses with Alaska Nurse Alert System	Yes	No	Yes	Yes	Yes	No	Yes	Yes	Yes	Yes	Yes	Yes
	Activity: Coordination of technical support physicians	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
Activity: Evaluation of project with functional exercise on pediatric surge	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	
Obj 1b	Activity: Completion of AAR	Yes	Yes	Yes	Yes	Yes	No	Yes	Yes	Yes	Yes	Yes	Yes
	Activity: Improved internal pediatric surge plans for AAPP hospitals	Yes	Yes	Yes	Yes	Yes	No	Yes	Yes	Yes	Yes	Yes	Yes
	Activity: Compliance with all NIMS requirements	No	No	No	Yes	Yes	Yes	No	Yes	Yes	No	Yes	No