
Example of a Self-Determined Tribal Nation

One state has allocated a portion of their PHEP funds to be used by a Native Tribal Health Organization to coordinate plans and planning processes between the State, federal preparedness partners and the Native health system; to support the participation of Native health system personnel in state and federal bioterrorism exercises; to ensure the optimal utilization of resources, such as the Federal Health Care Access Network, to distribute and obtain information; to ensure that the state, federal and tribal health care systems work in a seamless manner when planning for, or responding to, bioterrorist incidents; to coordinate with state Division of Public Health in communication needs assessments, development of communication plans, and production of communication strategies and messages for Native populations throughout the state; to support bioterrorism preparedness training for Native health facilities and organizations throughout the State; and to contract for use of tribal warehouse capacity and services (planning, training, exercise support) to support SNS planning. The funding supports a full time emergency medical planner, a full time preparedness coordinator, program manager, travel for the Native Tribal Health Organization program staff to statewide meetings in support of planning, training and exercise events with rural participants, training deliverables (books, brochures, etc.).

Example of an Indian Health Services (IHS) supported Tribal Nation

In another state, each tribe submits a budget which includes the scope of work that incorporates the deliverables enumerated below. Expenditure reports are submitted on a monthly basis and annual and semi-annual written reports are required. The duration of the contract is annual and dependent on the end date of the budget.

1. Deliverable: Maintain a Tribal Public Health Preparedness Coordinator.

2. Deliverable: Participate in the quarterly Public Health Preparedness Committee/Workgroup meetings in the region where the Tribal Community is located. Participation is encouraged in the Strategic National Stockpile (SNS) Multi-Disciplinary Workgroup quarterly meetings. Document participation in the SNS Multi-Disciplinary Workgroup meetings in the semi annual and annual reports.

3. Develop, revise, and submit a Tribal Public Health Emergency Preparedness and Response plan in collaboration with the State Department of Health and/or the Inter Tribal Councils and/or specific tribes. If applicable, the plan should include provisions that address the identification of special needs population, population at risk and continuity of operations. If applicable to your jurisdiction, work towards the development/establishment of mutual aid agreements with local jurisdictions. Report progress and include a summary of participation with State Health Departments and/or tribes or other partners in the development of the plan in both the semi annual and annual report. Submit the final plan by the end of the fiscal year.

4. Deliverable: Maintain and ensure that Tribal Public Health Preparedness personnel, Public Health Emergency Preparedness and Response plan, and Tribal volunteers support the public health response functions and are in compliance with the National Incident Management System (NIMS) requirements.

5. Deliverable: Maintain participation in the monthly Tribal/State Public Health Preparedness conference calls. Provide agenda items to discuss as necessary. Provide a summary of attendance of complete conference call in the semi annual and annual reports.

6. Deliverable: Develop a plan or identify and establish a Tribal Volunteer Group(s) such as Community Emergency Response Team (CERT) within your Tribal community that would respond and be mobilized to a public health emergency or exercise. Ensure that identified volunteer individuals are in compliance with National Incident Management
Systems (NIMS) requirements. It is essential to identify the ability and capacity of Tribal Public Health jurisdictions by identifying individuals to expand the human resource response capacity on a Tribal level to prepare for and respond to public health emergencies. Collaboration with Tribal school districts, Education Department, Community Response Teams, community based organizations and neighboring jurisdictions is essential to recruit volunteers. Report progress in both the semi annual and annual reports.

7. Deliverable: Encourage participation in public health preparedness or response exercises relating to mass antiviral, vaccine, and antibiotics dispensing that focuses on collaboration with State, local, county and/or Indian Health Service public health partners. Provide documentation of individuals that attend meetings, conferences, workshops in preparation for SNS/RSS table top exercises.

8. Deliverable: Encourage participation and awareness in State -coordinated workgroups for MEDSIS enhancements to Tribal communities (if applicable) and Electronic Laboratory Reporting (ELR) capabilities. Encourage participations in Disease Surveillance, Outbreak Investigation, or any Epidemiology specific trainings, workshops, or conferences provided by Centers for Public Health Preparedness, Inter Tribal Council or any other State Health Department -recognized training session. Report attendance in both the semi annual and annual reports.