

APPENDIX A

EMERGENCY MANAGEMENT DEPARTMENT MASTER WORKPLAN

MAY 23, 2018

EMERGENCY MANGEMENT DEPARTMENT

Emergency Management Department Master Workplan 2018

Priority 1: Improve Systemwide Resiliency					
Goal 1: Create a healthier, safer more secure, and more resilient Riverside County					
Objective 1.1: Establish metrics for measuring health, safety, security and resiliency for those people who live, work, and visit Riverside County by 2021					
Action	Completion Criteria	KPI / Metric	Target Date	Owner	Comments
A1.1.1: Meeting with PH epidemiologist to discuss establishing KPIs / metrics		% Completed			Not assigned
Objective 1.2: Optimize the ability for County Departments and partners to maintain essential functions and participate in countywide emergency and disaster responses, and recovery efforts by 2021					
Action Items	Completion Criteria	KPI / Metric	Target Date	Owner	Comments
A1.2.2: Update Intra-Departmental EMC membership / POC list	Membership list updated	N/A	5/16/18	Brian	Committee members and POC need to be identified before sending a letter to all County Department heads outlining goals, deliverables and participation expectations. Membership is on the next meeting's agenda 5/16/18. BM 5/10/18.
A1.2.3: Complete City/partner/ Tribal Gov. assessments and development of initial workplans	All Cities have been surveyed and workplans are in place	Percentage of Cities that have work	6/30/18	Ops Mark	Contract Cities (21): Banning 100%, Beaumont 50%, Calimesa 0%, Canyon Lake 0%, Coachella 100%, Desert Hot Springs 100%, Eastvale 0%, Indian Wells 100%, Indio 100%, Lake Elsinore 100%, La Quinta 100%, Menifee 100%, Moreno Valley 0%, Norco 100%, Palm Desert 100%, Perris 100%, Rancho Mirage 100%, Jurupa Valley 100%, San Jacinto, 100% Temecula 100%, Wildomar 100%. Non-Contract Cities (7): Blythe 0%, Hemet 100%, Murrieta 100%, Corona 0%, Riverside 50%, Palm Springs 0%, Cathedral City 0% Tribes: Agua Caliente Tribe 0%, Augustine Tribe 0%, Cabazon Tribe 0%, Cahuilla Tribe 0%, Colorado River Tribe 0%, Morongo Tribe 50%, Pechanga Tribe 0%, Ramona Tribe 0%, Santa Rosa Tribe 0%, Soboba Tribe 0%, Torres Martinez Tribe 0%. BM 5/15/18.
A1.2.4: Complete meetings with Cities/Tribal Gov. to review assessments and initial workplans	Initial meetings with all cities completed	Percentage of Cities that have met with EMD	5/1/18	Admin & Ops Bruce, Victoria & Mark	Contract Cities (21): Banning 0%, Beaumont 100%, Calimesa 0%, Canyon Lake 100%, Coachella 100%, Desert Hot Springs 100%, Eastvale 100%, Indian Wells 100%, Indio 100%, Lake Elsinore 100%, La Quinta 100%, Menifee 0%, Moreno Valley 0%, Norco 0%, Palm Desert

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					100%, Perris 0%, Rancho Mirage 0%, Jurupa Valley 0%, San Jacinto, 100% Temecula 100%, Wildomar 100% Non-Contract Cities (7): Blythe 0%, Hemet 0%, Murrieta 0%, Corona 0%, Riverside 0%, Palm Springs 0%, Cathedral City 0% Tribes: Agua Caliente Tribe 0%, Augustine Tribe 0%, Cabazon Tribe 0%, Cahuilla Tribe 0%, Colorado River Tribe 0%, Morongo Tribe 0%, Pechanga Tribe 0%, Ramona Tribe 0%, Santa Rosa Tribe 0%, Soboba Tribe 0%, Torres Martinez Tribe 0%. BM 5/15/18.
A1.2.5: Complete workplans with cities/Tribal Gov.	Workplans completed	Percentage of Cities that have completed work plans	6/28/19	Ops Mark	Contract Cities (21): Banning 100%, Beaumont 100%, Calimesa 100%, Canyon Lake 100%, Coachella 100%, Desert Hot Springs 100%, Eastvale 100%, Indian Wells 100%, Indio 100%, Lake Elsinore 100%, La Quinta 100%, Menifee 100%, Moreno Valley 0%, Norco 100%, Palm Desert 100%, Perris 100%, Rancho Mirage 100%, Jurupa Valley 100%, San Jacinto 100%, Temecula 100%, Wildomar 100%. BM 5/15/18. Non-Contract Cities (7): Blythe 0%, Hemet 100%, Murrieta 100%, Corona 0%, Riverside 0%, Palm Springs 100%, Cathedral City 0%. BM 5/15/18. Tribes: Agua Caliente Tribe 0%, Augustine Tribe 0%, Cabazon Tribe 0%, Cahuilla Tribe 0%, Colorado River Tribe 0%, Morongo Tribe 100%, Pechanga Tribe 0%, Ramona Tribe 0%, Santa Rosa Tribe 0%, Soboba Tribe 0%, Torres Martinez Tribe 0%. BM 5/15/18.
A1.2.6: Review workplans/needs assessment for common needs across the OA (e.g. training, exercises, equipment)	Review is complete, common needs have been identified and discussed in management team meeting	Identify Common Needs	8/1/18	All team leads	
A1.2.7: Develop a document and a process that establishes timelines and schedules for progress checks and updates to city/partner workplans	Implementation of progress checks that includes letters to city managers with follow-up meetings as needed	Identify Process's to establish relationships of	TBD	Ops Mark	100% Complete <ul style="list-style-type: none"> Present status of the Assessments and Workplans by jurisdictions at the March 8, 2018 meeting. 0% complete Develop a schedule for follow-up meetings with each jurisdiction. 10% Complete

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		operations workplan			
A1.2.8: Upload city/partner workplans for common access, updating and version control	Workplans are posted for access by EMD staff and city partners	N/A	TBD	TBD	
Objective 1.3: Further develop and define the functions and capabilities of volunteer programs such as: Community Emergency Response Teams (CERT)s, Disaster Corp, Disaster Response Teams (DRT), Medical Reserve Corps (MRC), Pharmacy Emergency Response Team (PERT), and Radio Amateur Civil Emergency Service (RACES) by 2021.					
Action	Completion Criteria	KPI / Metric	Target Date	Owner	Comments
A1.3.1: Develop and implement a Countywide CERT workgroup	Establishment of Countywide CERT workgroup	N/A	Next RCEMA meeting	Prep Ramon	Present at OAPC – establishment of a sub-committee for CERT RCEMA Meeting Agenda to set 20 minutes for the committee. RL 3/29/18 Item Approved RL 5/7/18
A1.3.2: Develop and implement a Countywide schedule of CERT training and drills	The calendar has been posted on the EMD website (or?) and is updated regularly	Number of CERT classes held Countywide annually. Number of CERT classes conducted by EMD annually. Number of CERT rained individuals participating in annual drills.	6/30/18	Prep Ramon	Discussion with RCIT on best approach to post multi calendars on EMD Website. RL 3/29/18 No Updates RL 5/7/18
A1.3.3: Develop a Countywide CERT training and sustainability resource guide	Completed resource guide uploaded to the	N/A	12/30/18	Prep Ramon	Discussion at RCEMA March meeting in March. Jennifer will draft a resource guide to present at the next RCEMA meeting. 0% completed. RL 3/29/18

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	EMD website and updated regularly.				May 10 th Meeting – Jennifer will present a draft Code of Conduct Policy/Manual (Concept Plan) to initiate purpose and intent behind the policy/manual. RL 5/7/18
A1.3.4: Develop and train Disaster Response Teams (DRT) in the unincorporated areas of the County that are self-stained and received guidance from ESCs.	Teams are self-sustained, in place and prepared for response in identified areas.	Number of individuals participating in DRTs.	8/30/18	Prep & Ops Ramon & Mark	DRTs are being developed in Temescal Valley and Lakeland Village. TV DRT is gaining steady momentum, with regular meetings and CERT training most recently February 11-12, 2018. Consistent turnout for development of the LV DRT has been a challenge. b) Held policy and procedure training for group in Temescal Valley. c) By 6/30/18: Manual on How to Establish DRT will be developed by Jennifer and Dana, based on best practices learned with Temescal and Lakeland. Manual will be used as a guide for District ESCs. d) Expand Pilot Program to District 4 by 10/30/18 80% Complete. RL 3/29/18 Moved the Target Date from 6/30 to 8/30/18. Policy manual is close to completion. 85% Complete. RL 5/7/18
A1.3.5: Develop RACES program policies that define program objectives, volunteer roles, responsibilities and rules to which they must comply	Policies are in place and all RACES volunteers have been trained	Number of participants in the RACES program annually	TBD	Prep & Ops Ramon & Mark	Meeting being scheduled for Management Team to discuss. Clarifying with Jennifer is this is the same as the Volunteer Program Policy Manual. 0% Complete. RL 3/29/18 Meeting held April 26 with EMD staff to discuss RACES items, including a RACES workplan that outlines Project Priorities. 5% Complete. RL 5/7/18
Objective 1.4: Structure and resource EMD’s field emergency response program to effectively achieve EMD’s mission and priorities by 2021					
Action	Completion Criteria	KPI / Metric	Target Date	Owner	Comments
A1.4.1: Identify intent of program, develop operational roles, priorities and responsibilities	Written into program guide	Number of Field Responses by Quarter	TBD	Mark, Ramon Trevor	A matrix is being developed to determine resources and services provide for historical responses. 10% complete

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A1.4.2: Develop and implement written policies and procedures	Policy and Procedure Manual is complete and implemented	Number of Policies completed to meet program requirements	TBD	Mark, Ramon Trevor	Develop a draft of the policy manual table of contents: Standard Response Protocols, Uniform Policy - Drafted Incident Alerts and Mass Notification Procedures, Standard Equipment – Personal/Vehicle, Vehicle Maintenance, EMMA Request Procedures – Drafted, MHOAC Procedures. Meeting scheduled. 5% completed. RL 3/29/18 No Updates. RL 5/7/18
A1.4.3: Develop a field operations guide	Guide is completed and implemented	N/A	9/30/18	Mark, Ramon Trevor	Meeting being scheduled for Management Team to meet and discuss 0% Complete No Updates. RL 5/7/18
A1.4.4: Develop a training program for new employees and continuing education	Training curriculum is completed, trainers are identified and continuing education calendar is in place annually	Number and hours of CE annually	TBD	Mark, Ramon Trevor	Currently identifying training curriculum separate from DO Curriculum. Referring to LMS Competencies Program from PH. RL 3/29/18 Meeting scheduled to review identified training as core requirements for new employees. 10% Complete RL 5/7/18

Objective 1.5: Develop and conduct the annual Riverside County Preparedness Summit

Action	Completion Criteria	KPI / Metric	Target Date	Owner	Comments
A1.5.1: Develop and conduct the annual Riverside County Preparedness Summit	Conducted in Spring	Feedback from attendees		Admin Donna	The 2018 summit 100% complete. Planning for 2019 summit is underway. No updates DM 5/7/18

Objective 1.6: Develop and implement Memorandum of Agreements (MOA) with Regions I and VI Operational Area (OA) partners for emergency management mutual aid assistance by 2021.

Action	Completion Criteria	KPI / Metric	Target Date	Owner	Comments
A1.6.1: Create and execute Region I and VI MOAs for emergency management mutual aid/assistance.	MOAs have been signed by both parties	N/A	Ongoing	Admin Donna	Currently working with surrounding OAs. The SBC/RivCo EMMA is 100% complete. No updates DM 5/7/18

Objective 1.7: Develop and implement an updated Region VI Medical Health Agreement for mutual aid assistance by 10/31/2018

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Action	Completion Criteria	KPI / Metric	Target Date	Owner	Comments
A1.7.1: Create and execute a Region VI MOAs for emergency management mutual aid/assistance.	Agreement has been signed off by BOS	NA	10/31/18	Admin Donna	A draft Region VI Cooperative Agreement for mutual aid/assistance has been created. The draft is in review by Region VI OAs. Four OA's have agreed to the language. 75% Complete. No updates DM 5/7/18

Objective 1.8: Continue development of the Continuous Quality Improvement (CQI) plan in support of clinical programs that optimize patient outcomes

Action	Completion Criteria	KPI / Metric	Target Date	Owner	Comments
A1.8.1: Develop and implement EMS System Clinical and Operational Performance Evaluation (SCOPE) dashboard.	Monitoring EMS system and Specialty care programs with monthly updated dashboards	N/A	On-going	REMSA Trevor Shanna	SK 4/2/18
A1.8.2: Re-institute the HEMS CQI as part of the EMS Quality Improvement Plan (EMSQIP).	Monthly monitoring of HEMS system	N/A	On-going	REMSA Shanna	March 7- visit Monte Vista to evaluate SD HEMS process- done. Need to discuss how Riv Co can implement this process. SK 4/2/18
A1.8.3: Update the EMSQIP and send to EMSA for approval	SCQIP report approved by EMSA	N/A	10/31/18	REMSA Shanna	State rewrite 2019. SK 4/2/18
A1.8.4: Submit Core measure to EMSA			On-going	REMSA Shanna	Lisa working on measures for Riverside county. SK 4/2/18

Objective 1.9: Continue to develop, initiate, and support clinical research projects

Action	Completion Criteria	KPI / Metric	Target Date	Owner	Comments
A1.9.1: Develop and initiate a field trial for prehospital use of Ketamine for analgesia	Appropriate administration of Ketamine in PH for pain	100% CQI of all Ketamine administrations in the PH setting	10/2019	REMSA Shanna	Trial study begins April 1, 2018 20%- received conditions of participation from 4 providers. SK 4/2/18

Objective 1.10: Continue evaluation of EMS system resource utilization and development of initiatives that optimize system efficiency

Action	Completion Criteria	KPI / Metric	Target Date	Owner	Comments
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A1.10.1: Continue implementation of Emergency Medical Dispatch (EMD) programs and medical priority resource response				EMSA Dan	SK 4/2/18
A1.10.2: Monitor, analyze and report on ambulance contract compliance			On-going	Trevor	SK 4/2/18

Objective 1.11: Develop and implement an Advanced Life Support (ALS) Inter-facility transport programs by 4/1/2019

Action	Completion Criteria	KPI / Metric	Target Date	Owner	Comments
A1.11.1: Develop updated draft of ALS program	Pending policy		2018	REMSA Trevor	Need to complete agreements with Cathedral City and IFPD Cat City approved by BOS 4/18/17 item 3.12. RP 4/17/18

Objective 1.12: Update the EMS System Strategic Plan and REMSA's EMS Plan by 10/31/18

A1.12.1: Update the EMS Plan with Trauma Plan and SQUIP	Submission to EMSA by deadline	N/A	10/31/18	REMSA Bruce Trevor	BM 4/23/18
A1.12.2: Update the EMS System Strategic Plan		N/A	10/31/18	REMSA Trevor	BM 4/23/18

Objective 1.13: Develop and implement updated policies and protocols for Tactical EMS (TEMS) programs in compliance with new EMSA Guidelines by 10/31/18

Action	Completion Criteria	KPI / Metric	Target Date	Owner	Comments
A1.13.1: Implement TEMS program policies / protocols for Riverside county	LEMSA compliance with EMSA Tactical care guidelines	Successful implementation of TEMS with education and protocol development for providers	10/31/18	REMSA Shanna Dan	Additional tourniquets for tactical medicine taken to TAC Feb 2018- approved 4/9- letters to go out Draft policy/ program SK 4/2/18

Objective 1.14: Work with RUHS Behavioral Health and EMS system partners to evaluate and develop solutions to improve EMS system operating efficiencies and services for behavioral health patients by 2021

Action Item	Completion Criteria	KPI / Metric	Target Date	Owner	Comments
A1.14.1: Meeting with ETS on 4/5/18				REMSA Shanna	SK 4/2/18

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				Dan	
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Objective 1.15: Continue to work with system partners to refine data reporting and implement initiatives to reduce Ambulance Patient Offload Delays (APOD)s at hospitals by 2021

Action	Completion Criteria	KPI / Metric	Target Date	Owner	Comments
A1.15.1: APOD Analysis and reports		Decreased APODs	Ongoing	REMSA Trevor Dan	SK 4/2/18

Objective 1.16: Develop and support cooperative education and training initiatives utilizing CQI program outputs and the most current best EMS practices

Action	Completion Criteria	KPI / Metric	Target Date	Owner	Comments
A1.16.1: Update REMSA policies/ protocols with current best practices	Updated policies	Review EMS best practices and discuss at quarterly CQILT meetings	Ongoing	REMSA Shanna	SK 4/2/18
A1.16.2: Utilize REMSA advisory committees and workgroups to develop policy/protocol improvements and training recommendations based upon retrospective and concurrent CQI program findings	On-going	N/A	Ongoing	REMSA Shanna	Evaluate policy changes at June 2018 CQILT SK 4/2/18

Goal 2: Ensure we have the resources needed to accomplish our mission, vision, and strategic priorities

Objective 2.1: Relocate EMD's headquarters to a campus capable of supporting all EMD's functions to include a fully functional primary EOC by 4/1/20

Action	Completion Criteria	KPI / Metric	Target Date	Owner	Comments
A2.1.1: EOC and Office Move		N/A	4/1/20	Admin Bruce Victoria	A suitable site with an existing building has been identified and remains on the capital improvements priority list. An essential services building assessment has been completed and the existing building meets the requirements. EMD will work with EDA on a space plan. EDA will work with the EO on funding for the location including all upgrades and TIs. (approx. \$8 million).

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Objective 2.2: Create a process for identifying and addressing proposed legislative and regulatory changes to the emergency management program by 1/31/2019

Action	Completion Criteria	KPI / Metric	Target Date	Owner	Comments
				Admin Bruce	Required for EMAP Accreditation (Standard 3.5.2) BM 4/23/18

Objective 2.3: Develop a resource management system that addresses hazards identified in the HIRA with procedures to identify, locate, acquire, store, maintain, test, distribute and account for resources used in emergency and disaster operations by 6/30/19

Action	Completion Criteria	KPI / Metric	Target Date	Owner	Comments
A2.3.1: Research for a turnkey resource management system that meets EMAP Accreditation Standards	System in place and operational	N/A	6/30/19	Prep Ramon	<p>EMAP Accreditation Needs: Resource management system that addresses Objective 2.3 and EMAP Standard 4.6.2: The resource management system procedures further address (1) mobilizing resources prior to during an emergency; (2) dispatching resources prior to and during an emergency; and (3) demobilizing or recalling resources during or after an emergency. BM 4/23/18</p> <p>RFP for an Inventory Management System will be initiated in FY 18/19. Department to identify available funds (approximately \$250,000 initial implementation and \$15,000 annual maintenance fees).</p> <p>RL 5/7/18</p>

Priority 2: Improve Information Management Capabilities

Goal 3: Goal: Continuously improve EMD's communications and information management capabilities through interagency cooperation, effective use of technology, establishment of effective process controls and necessary redundancies

Objective 3.1: Develop a whitepaper outlining existing and desired EMD intelligence management capabilities including TLO program, integration with TEWG and JTTF, TICP and information flow protocols by 2019

Action	Completion Criteria	KPI / Metric	Target Date	Owner	Comments

Objective 3.2: Integrate Medical Health Communications into EMD plans and update communications equipment by 4/1/2020

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Action	Completion Criteria	KPI / Metric	Target Date	Owner	Comments
Objective 3.3: Continue to develop and refine a web-based crisis management system that uses ICS as the method for OA EM information management and the coordination of significant incidents					
Action	Completion Criteria	KPI / Metric	Target Date	Owner	Comments
Objective 3.4: Evaluate the use of a standardized OA GIS information collection and dissemination platform by 6/30/18					
Action	Completion Criteria	KPI / Metric	Target Date	Owner	Comments
Objective 3.5: Continue development of REMSIS to include integration of the ePCR platform, data, and CQI reporting registries, real time early warning surveillance systems, and emergency medical communications systems					
Action	Completion Criteria	KPI / Metric	Target Date	Owner	Comments
A3.5.1: Develop and implement STEMI and Stroke registries that provide for integrated data collection, analysis and reporting	Implementation of registries to specialty care centers	Consistent data collection across all specialty care centers	12/18	REMSA Shanna	Purchased for FY 18/19. SK 4/2/18
A3.5.2: Evaluate and benchmark patient outcomes utilizing a cardiac arrest registry with full system participation	Providers complete patient outcomes in the cardiac arrest registry	Compliance from providers	4/18	REMSA Shanna	Submission for 2017 is completed. SK 4/2/18
A3.5.3: Continue refinement of an online credentialing system to improve the credentialing processes and the enforcement and disciplinary programs			Ongoing		
Objective 3.6: Continue development of tools for alerting the public to approaching hazards and dissemination of evacuation information					
Action	Completion Criteria	KPI / Metric	Target Date	Owner	Comments

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<p>A3.6.1: Update the Emergency Alert System Plan to meet EMAP Accreditation needs.</p>					<p>EMAP Accreditation Needs:</p> <ul style="list-style-type: none"> • A plan to disseminate emergency alerts and warning to the public potentially impacted by an actual or impending emergency and to communicate with populations within the jurisdiction • The plan has been designed for hazards identified in Standard 4.1.1 (HIRA) and Program’s potential operating environments • Alert and warning systems include redundancy to provide alternative means of warning in case of failure in primary systems • The plan addresses dissemination of alerts and warnings to vulnerable populations (Standard 4.7.3). BM 4/20/18
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Objective 3.7: Complete an assessment of the RACES radio infrastructure and develop recommendations for improvement by 6/30/2019

Action	Completion Criteria	KPI / Metric	Target Date	Owner	Comments
				Ops Mark	

Objective 3.8: Develop an Operational Area (OA) Plan to communicate internally and externally with stakeholders and emergency personnel by 2021

Action	Completion Criteria	KPI / Metric	Target Date	Owner	Comments
				REMSA Dan	<p>RFP is underway to address this objective</p> <p>EMAP Accreditation Needs:</p> <p>Achieve Objective 3.8 and EMAP Standards 4.7.1, 4.7.2, 4.7.3, 4.7.4, 4.7.5 and 4.7.6</p> <ul style="list-style-type: none"> • System interoperability has been addressed and system has been designed for all the hazards identified in Standard 4.1.1 (HIRA) • Notification systems support all components of the emergency operations and recovery plans, and includes redundancies to provide alternate means of notification in case of failure in primary systems • Method and schedule for evaluation, maintenance, and revision of the Plan and the procedures identified in Standard 4.7.5 (Standard 4.7.6). BM 4/20/18

Priority 3: Become the Emergency Management Organization Employer of Choice

Goal 4: Improve employee engagement and development

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Objective 4.1: Formulate a team consisting of representatives from each of EMD's divisions to give recommendations on improving employee engagement and development by 6/29/18

Action	Completion Criteria	KPI / Metric	Target Date	Owner	Comments
A4.1.1: Each division is to assign a representative for an employee engagement workgroup	Group established to address employee engagement	N/A	6/29/18	Admin Brian	The first meeting of engagement workgroup was on 4/10/18. Once the committee is established they will recommend actions and metrics to improve and measure employee engagement. BM 4/16/18
A4.1.2: Develop and recommend metrics for measuring employee engagement	Metrics approved by management	% completed 10%	6/29/18	Admin Brian	The group has been established and is currently researching and reviewing. BM 5/3/18
A4.1.3: Recommend activities to improve employee engagement	Activities have been approved and implemented	% completed 10%	6/29/18	Admin Brian	The group has been established and is currently researching and reviewing. BM 5/3/18

Objective 4.2: Develop and establish a plan / program to address recommendations for improving employee engagement and development by July 31, 2018

Action	Completion Criteria	KPI / Metric	Target Date	Owner	Comments
A4.2.1: Develop an easy to use employee evaluation program that provides for timely and frequent appraisals focusing on employee development and relates their work to Strategic Plan goals and objectives		% completed 10%	1/31/19	Amin Brian	A draft of EMD's Employee Evaluation Policy is currently under review. The County will be switching to Workday performance appraisal program in the last quarter of 2018. EMD plans on using this program. BM 5/3/18

Objective 4.3: Establish training, policies and procedures that optimize the safety and security of EMD personnel by 9/30/2018

Action	Completion Criteria	KPI / Metric	Target Date	Owner	Comments
A4.3.1: Determine what policies and training programs can be implemented now that would optimize the safety and security of EMD personnel					Not assigned
A4.3.2: Determine what engineering controls can be					

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implemented now that would optimize the safety and security of EMD personnel					
A4.3.3: Determine what engineering controls can be implemented for our new facility that would optimize the safety and security of EMD personnel					

Priority 4: Improve Administrative and Operational Efficiencies

Goal 5 Develop, implement, adopt, and update plans, standards, policies, processes, and procedures to improve administrative and operational efficiencies

Objective 5.1: Complete the EMD Strategic Plan by 06/29/18

Action	Completion Criteria	KPI / Metric	Target Date	Owner	Comments
A5.1.1: Develop goals, objectives and metrics	Completed Plan	% Completed 75%	6/29/18	Admin Brian	The strategic plan has been integrated with EMD's master workplan, EMAP Accreditation needs and posted on SharePoint. The master workplan needs further refinement to include metrics and timelines. Once this has been done a draft of the Strategic Plan can be completed. BM 5/3/18
A5.1.2: Evaluate & revise EMD's advisory / stakeholder committee structure	Changes made in advisory committee structure for improved efficiencies	% Completed 75%	6/29/18	Admin Brian	Further changes in the advisory structure will be reflected in Ordinance 533. BM 5/3/18

Objective 5.2: Achieve EMAP Accreditation by 7/1/21

Action	Completion Criteria	KPI / Metric	Target Date	Owner	Comments
A5.2.2: Develop a multiyear systemwide strategic plan with involvement from stakeholders		% Completed 0%	7/1/21	Admin Brian	EMAP Accreditation Needs: <ul style="list-style-type: none"> Multi-year Strategic Plan, developed with input from the stakeholders that includes the following: <ol style="list-style-type: none"> An exclusive policy or vision statement for EM; Identify mission goals, objectives and milestones for the Emergency Management Program; A method for Plan implementation; and

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(4) A method for scheduled for evaluation, maintenance and revision. **BM 4/20/18**
Update of Ordinance 533 is pending once this has been completed a subcommittee will be established for this project. BM 5/3/18

Objective 5.3: Update all EMD's plans as needed and create a comprehensive list that identifies the date of implementation, maintenance and review requirements, and schedules for required updates by 6/30/19

Action	Completion Criteria	KPI / Metric	Target Date	Owner	Comments
A5.3.1: Revising list of all EMD's plans to include implementation dates, maintenance and review requirements and schedules for updates.	List is complete	N/A	6/30/18	Prep Ramon	90% complete. RL 3/29/18 No Updates RL 5/7/18
A5.3.2: Revise EOP and annexes to include new activation levels, introduction to ESF Concept, and matrix of County Department list with ESF Assigned	Plan completed and approved by the BOS.	N/A	6/30/18	Prep Ramon Ops	Present to next Interdepartmental EM meeting and discuss next steps to incorporate Plan revisions. 50% Complete. RL 3/29/18 No Updates RL 5/7/18 EMAP Accreditation Needs: <ul style="list-style-type: none"> • Risk assessment & consequence analysis for impacts on the following: Public; responders; continuity of operations; property, facilities and infrastructure; environment; economic condition of the jurisdiction; and public confidence in the jurisdiction's governance. (Standard 4.1.2) • Schedule for evaluation maintenance and revision of HIRA identified in Standard 4.1.1 (Standard 4.1.3) • Schedule for EOP evaluation, maintenance and revision (Standard 4.4.2 (7)) • Department responsibilities and functions chart on pages 62 to 68 of the EOP does not match up with EMAP's 29 specific areas of responsibility for performing functions in response to an emergency /disaster (Standard 4.4.3) • Add procedures to the PIO Annex that addresses 7 items in Standard 4.11.1

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					<ul style="list-style-type: none"> • Conduct outreach activities that address the hazards identified in HIRA for the public including at-risk populations (Standard 4.11.4) • Have a method and schedule for evaluation, maintenance, and revision of the plan and procedures identified in Standards 4.11.1, 4.11.2 and 4.11.3 (Standard 4.11.5). BM 4/20/18
A5.3.3: Update the LHMP	LHMP complete and approved	N/A	12/2018	Prep Ramon Ops	<p>The updated draft LHMP is complete and has been submitted to the Feds and State for approval. Waiting for call from CalOES. An email as follow up was sent on 3/29/18. 80% Complete. RL 3/29/18</p> <p>Received revisions/comments from CalOES 5/2/18 - LHMP team is working to have all revisions completed by May 31st (43 Jurisdictions and the County Plan). 85% Complete. RL 5/7/18</p> <p>EMAP Accreditation Needs:</p> <ul style="list-style-type: none"> • Implementation of migration projects and set priorities based upon loss reduction (1) Natural and human-caused hazards identified in Standard 4.1.1 and the risks and consequences of those hazards; (2) developed through formal planning processes involving stakeholder; and (3) establishes interim and long-term strategies, actions goals and objectives (Standard 4.2.1) • Mitigation Plan that ranks projects based upon the greatest opportunity for loss reduction and documents how specific actions contribute to overall risk reduction (Standard 4.2.2) • Develop a process to monitor overall progress of mitigation activities and documents completed initiatives and their resulting reduction of limitation of the hazard’s impact (Standard 4.2.3) • How the scope of the mitigation program addresses: (1) technical assistance in implementation applicable mitigation codes and ordinances; (2) ongoing opportunities and tracks repetitive loss; and (3) participates in applicable jurisdictional, inter-jurisdictional and multijurisdictional mitigation efforts (Standard 4.2.4) • Mitigation project Plan’s schedule for evaluation, maintenance and revision (Standard 4.2.5). BM 4/20/18

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A5.3.4: Incorporate edits into Mass Care & Sheltering Plan	Complete Mass Care and Shelter Plan		6/30/18	Prep Ramon	Plan needs to include the concept of a County Mass Care Shelter without the assistance of ARC. Meeting with PH to address Shelter Nurse identified need to purchase medical cart with supplies – estimate cost of \$3,000 per cart X 11 carts (to match number of MC Trailers) 75% Complete. RL 3/29/18 Draft Plan under Revision by RL. 80% Complete. RL 5/7/18
A5.3.5: Submit Debris Management Plan to BOS for Approval	Debris Management Plan approved by BOS	N/A	1/1/18	Ops BFD Mark Renee	The draft plan has been completed and submitted to CalOES pending their review. The State and Federal Government will consider the plan approved during the review process. <u>On BOS Agenda May 1, 2018.</u> 80% Complete. RP 4/17/18
A5.3.6: All EOC Plan documents have been assembled into an organized document	Approval of the EOC Plan with its associated documents	N/A	TBD	Ops Mark Diana	Diana and the workgroup have developed EOC documents and tools that will be organized into a single plan document EMAP Accreditation Needs: Establish a method for scheduled exercises to test activation and deactivation of primary and alternate EOCs (Standard 4.8.3). BM 4/20/18
A5.3.7: Complete the County/OA Disaster Recovery Plan	Completion of County/OA Disaster Recovery Plan	N/A	TBD	Prep Ramon	Requires further Clarification. 0% Complete RL 5/7/18
A5.3.8: Update the MHOAC Plan to align it with the State Guidelines and integrate it with the RDMHC Program		N/A	6/30/18	Prep & REMSA Ramon Dan	Associated MH EOP and MH DOC plans need to be updated to reflect changes with a completion date 6/30/18. RL 3/29/18 EMAP Accreditation Needs: Processes in place to coordinate prevention activities to monitor the identified threats and hazards, and adjust the level of prevention activity commensurate with the risk. Prevention is based on: (1) hazard information obtained from Standard 4.1.1; (2) intelligence activities; (3) threat assessments; (4) alert networks and surveillance programs; and (5) other sources of information obtained from internal and external stakeholders (Standard 4.3.1). BM 4/20/18 No Updates RL 6/30/18
A5.3.9: Establish workgroup with stakeholders to complete MPMP	Workgroup established and	N/A	4/1/17	REMSA Dan	SK 4/2/18

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	having meetings to address MPMP				
A5.3.10: Develop, implement and an all-hazards MPMP exercise inclusive of the capabilities of Med/Health COMM to support the MHOAC program.	Completed MPMP integrated into REMSA's P&P Manual	N/A	4/1/19	Dan	MCI tabletop March 12, 2018 MCI Full scale exercise first week of August. SK 4/2/18
A5.3.11: Complete the I-15 Freeway Closure Plan	Completed I-15 Freeway Closure Plan	N/A	9/30/18	Ops Mark	Jerry is re-writing a few components of the current draft, as well the insert of GIS graphics into the document Once completed, it will be sent out to area partners (e.g. Cities, CHP, Caltrans, Co. Transportation, etc.) 80% completed
A5.3.12: Complete the EMS Specialty care realignment Plan to align Stroke and STEMI programs with State regulations	Plan is approved by EMSA and REMSA's P&P Manual is updated	N/A	12/31/18	REMSA Shanna	33% complete. Regulations are pending the State approval process. SK 4/2/18

Objective 5.4: Develop and complete EMD's Policy Manual by 9/30/2018

Action	Completion Criteria	KPI / Metric	Target Date	Owner	Comments
A5.4.1: Create an EMD Policy Manual that includes all EMD's policies available online	An online policy manual with all EMD's policies		9/30/18	Admin Victoria	
A5.4.2: Create a policy for a grant and project review process to determine a project's needs prior to its final approval	Policy competed and in the policy manual		9/30/18	Admin Victoria	

Priority 5: Maintain Fiscal Discipline as We Manage Costs and Maximize Revenue Opportunities

Goal 6: Maintain our budget commitments by submitting balanced budgets while achieving EMD's mission, vision, and strategic priorities

Objective 6.1: BFD will establish reports and processes to assist EMD and its divisions in achieving and maintain budget commitments

Action	Completion Criteria	KPI / Metric	Target Date	Owner	Comments
A6.1.1: BFD will provide monthly fiscal reports to each division before the end of each following month	On-going reports submitted to each division	N/A		BFD Nadine	

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A6.1.2: Monthly reports will be submitted from each division providing BFD with any changes having an impact on the budget/s	On-going reports submitted by each division using a tool showing actual verses approved budget/s	N/A		BFD Nadine	
A6.1.3: BFD will ensure for a process for timely invoicing	On-going Implementation of an approved process	N/A		BFD Nadine	
A6.1.4: BFD will ensure for a process for timely payments for accounts payable	On-going Implementation of an approved process	N/A		BFD Nadine	

Objective 6.2: EMD will submit structurally balanced budgets annually

Action	Completion Criteria	KPI / Metric	Target Date	Owner	Comments
A6.2.1: Submit a structurally balanced annual budget	Budget is submitted and approved	N/A	Budget calendar	Admin Bruce Victoria	

Goal 7: Maximize funding and establish revenue opportunities for financial support required to achieve our mission, vision and strategic priorities

Objective 7.1: Redesign the city contracting model and funding methodology by 6/30/2018

Action	Completion Criteria	KPI / Metric	Target Date	Owner	Comments
A7.1.1: Hold internal meeting to discuss city contracting model	Agreements updated approved and implemented	N/A	3/6/18	Admin & Ops Bruce Victoria Mark	Current Allocation Models, Per Capita Models (Level Three & Two City Allocation and Level 2 City Allocation b) Other potential funding resources 10% Complete
A7.1.2: Develop EMD services costs model to be included in a comprehensive fee ordinance for recovery for all EMD's services	Fee ordinance approved by BOS	N/A		Bruce Victoria Mark	0% Complete

Objective 7.2: Develop OA agreements master SEMS/EM agreements by 12/31/2019

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Action	Completion Criteria	KPI / Metric	Target Date	Owner	Comments
A7.2.1: Hold internal meeting to discuss plan of action	Agreements are in place with every city and tribe	Number of cities and tribes with approved agreements	TBD	Bruce Victoria Renee	
Objective 7.3: Maximize grant funding for EMD					
Action	Completion Criteria	KPI / Metric	Target Date	Owner	Comments
				Victoria Ramon	

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