



Application

08205 - FY19 Bay Area UASI

08645 - Bay Area Mass Prophylaxis Regional Exercise Project

UASI Grant Program

Status: Under Review

Submitted Date: 10/12/2018 12:25 PM

Project Lead

Name:* Ms. Kim Cox
Salutation First Name Middle Name Last Name

Title: Emergency Services Manager

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Work Address: 597 Center Ave.
Suite 200A

***** Martinez California 94553
City State/Province Postal Code/Zip

Phone:* 925-313-6648
Phone Ext.

What Program Area are you interested in?

Organization Information

Organization Name: Contra Costa Health Services

Organization Type: Government

Organization Website: www.cchealth.org

Address: 597 Center Ave.
Suite 200A

* Martinez California 94553
City State/Province Postal Code/Zip

Phone:* 925-313-6648
Ext.

Fax: 925-313-6465

If you are unsure of your agency's DUNS number please contact your finance department.

DUNS Number 071687883

Funding Categories

Please select the appropriate funding category for your project: Regional

Please describe how your project will benefit three or more hubs in an equitable manner?

The Bay Area Mass Prophylaxis Working Group (BAMPWG) proposes to conduct a Bay Area regional full scale exercise in fall 2020 to test Public Health and Medical Emergency Preparedness capabilities relative to the mass distribution of medical countermeasures (antibiotic mass prophylaxis) in response to an anthrax bioterrorism attack in the Bay Area. This project will engage all 13 Bay Area Health jurisdictions that encompass all 4 UASI Hubs and include regional exercise objectives.

This field is limited to 500 characters.

Project Description

Select a goal: Goal 5: Health and Medical

Select a Core Capability: Public Health, Healthcare, and EMS

Select a nexus to terrorism: This project will enhance regional capacity to: Mitigate Effects of Terrorist Attacks, Respond to Terrorist Attacks, Recover from Terrorist Attacks

Select all that apply

Describe the nexus to terrorism in detail:

Bay Area counties have prepared for a widespread weaponized anthrax release. CDC guidelines require antibiotics to be dispensed to the entire population of over 7 million people within 48 hours. BAMPWG has coordinated mass prophylaxis response at both the Operational Area and regional levels.

300 Characters Maximum

Project Summary- Provide a brief description of your project: For planning projects include a final deliverable.

This project will exercise at a regional level, each OAs Medical Countermeasure Dispensing plan including emergency operations, resource allocation, logistics, resource requesting, and emergency public information and messaging. Each OA will set up at least one Point of Dispensing site (POD) per million people and test different medication screening modalities including paper, web, and mobile app based. UASI will manage this project on behalf of BAMPWG by providing all administrative and fiscal oversight. BAMPWG members will participate fully in all programmatic activities and grant deliverables. A contractor will be hired to facilitate all aspects of HSEEP exercise planning, implementation and evaluation including the development of AARs.

This field is limited to 750 characters.

For equipment projects, please provide an inventory of the requested item currently used in the county:

NA

Compliance Requirements

Sole Source Approval

This project will require Sole Source Approval

Sole Source Request Form

Environmental and Historic Preservation Request

Required for:

This project will require an Environmental & Historic Preservation Form

Environmental and Historic Preservation Screening Form

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Watercraft Projects

If project includes purchase of watercraft or watercraft equipment

the California Office of Emergency Services (CalOES) has a separate request form to complete.

This project will require a Watercraft Request Form

Watercraft Request Form

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Aviation Projects

If project includes the purchase of aircraft or aviation equipment

the California Office of Emergency Services (CalOES) has a separate request form to complete.

This project will require an Aviation Request Form

Aviation Request Form

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Establish/ Enhance Emergency Operations Center (EOC)

If project includes establishing or enhancing an Emergency Operations Center

the California Office of Emergency Services (CalOES) has a separate request form to complete.

This project will require an Emergency Operations Center Request Form

Establish/ Enhance Emergency Operations Center Request Form

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Performance bonds

Required for:

This project will require a Performance Bond

Personnel Declaration

If project includes hiring personnel, this field is required.

This project will require grant funded personnel (no supplanting)

Project Timeline

Project Dates*	11/01/2019	12/31/2020
	Project Start Date	Project End Date

Milestones

Milestone	Please Describe	Estimated Completion Date
(EXERCISE) RFP Release		11/01/2019
(EXERCISE) Obtain Quotes		12/02/2019
(EXERCISE) Contract Award		02/03/2020
(EXERCISE) Conduct Exercise		11/19/2020
(EXERCISE) After Action Report		12/15/2020
(EXERCISE) Project Completion		12/31/2020

Equipment

Select a category

Select a category of FEMA Authorized Equipment	Select the appropriate AEL #	Quantity	Price Each	Total
			\$0.00	\$0.00

Planning

Category	Planning Total
Planning	\$0.00

Organization

Category	Organization Total
Organizations	\$0.00

Equipment

Category	Equipment Total
Equipment	\$0.00

Training

Category	Training Total
Training	\$0.00

Exercise

Category	Exercises Total
Exercise	\$200,000.00

Total

Total Project Cost	\$200,000.00
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Technical Assistance Program

For more information on the Bay Area UASI Technical Assistance Program click [HERE](#) to register.

Would you like an UASI project manager to contact you regarding our Technical Assistance Program? Yes