

**Optional Work Plan Template**  
Public Health Crisis Response Cooperative Agreement  
**CDC-RFA-TP22-2201**

## **Guidance**

Applicants are required to submit a work plan outlining planned activities and expected outcomes related to public health emergency response functions as described in the Public Health Crisis Response Cooperative Agreement Notice of Funding Opportunity (CDC-RFA-TP22-2201).

**Planning Scenario:** To create this initial application, applicants are asked to develop work plans around an emerging infectious disease outbreak. Applicants may submit work plans developed in 2020 for COVID-19.

**General Work Plan Guidance:** Applicants must submit a high-level work plan that reflects the strategies, activities, outcomes, evaluation, and performance measures described in the NOFO. Work plan activities must address domains described in Component A and Component B.

Using the logic model, applicants should review their existing public health emergency management program capabilities and capacities and identify areas that would be most likely require surge support.

**Component A Work Plan:** Should be developed to address initial response activities including: EOC activation, staffing contracts, needs assessment, accelerated planning, and call center activation. These activities should lead to measurable outputs that are linked to response activities and projected outcomes. Applicants are expected to aggregate and document activities that support sub-recipients (e.g., state to local/tribal).

Domains specific to Component A:

- Domain 1: Strengthen Incident Management for Early Crisis Response
- Domain 2: Strengthen Community Resilience

**Component B Work Plan:** The work plan for Component B should be developed for the remaining four domains outlined below that will support the longer-term response. Applicants should consider the budget required to plan for a significant increase in public health infrastructure and/or staff that would be required to address the emerging infectious disease scenario. Applicants must include a high-level object class budget for crisis-specific response activities and each of the four logic model domains listed below.

Domains specific to Component B:

- Domain 3: Strengthen Information Management
- Domain 4: Strengthen Countermeasures and Mitigation
- Domain 5: Strengthen Surge Management
- Domain 6: Strengthen Biosurveillance

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## **Instructions**

Please provide the following information for recipient activities within each of the six (6) domains as noted in this supplemental guidance. An example is provided for Domain 1.

1. **Problem Statement:** Define the problem or issue your jurisdiction seeks to resolve with supplemental funds during the project period. Please include limitations or “root causes” that have led to the current problem/issue.
2. **Baseline Capacity:** Specify the current baseline capacity in this area, such as current percentage of staff who can don/doff PPE per CDC guidelines.
3. **Outcomes:** Define the expected outcomes that align with resolving the problem or closing the gaps. The outcomes should define what changes or improvements will occur to the public health/healthcare systems or to the community such as awareness, knowledge, attitudes, skills, opinion, behavior, policies, and health improvement. Ideally, outcomes should link to planned activities, quantify the targeted change, and include an estimated timeline for achieving the change. Awardees may insert as many outcomes as needed.
4. **Planned Activities:** List the intermediate activities awardees will undertake, including tasks and estimated start and end dates that will lead to the associated outcome and contribute to resolving the identified issue or problems. Awardees may insert as many planned activities as needed.
5. **Proposed Outputs:** List the proposed outputs that will be produced as a result of the planned activities, such as a plan, a training curriculum, or a tracking system database.

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<b>Applicant:</b>	My Department of Health (MyDOH)
<b>Submitted By:</b>	PHEP Director (Name) and Grant Manager (Name)
<b>Date:</b>	February 14, 2022

**SAMPLE Work Plan** *(example provided for one domain; please follow pattern for each)*

**Component A, Domain 1: Strengthen Incident Management for Early Crisis Response**

For additional guidance, please refer to CDC-RFA-TP22-2201.

<b>Recipient Component A, Domain 1 Problem Statement (Please limit to 500 words)</b>
<p>MyDOH maintains a strong ability to activate and utilize its Incident Command System (ICS), Emergency Operations Plan (EOP) and supporting plans, as well as its Department Operations Center (DOC). Because much of the infrastructure of the DOC was developed during and/or immediately following the Department’s response to the 2009-2010 H1N1 Pandemic, much of the technology requires upgrade. Some examples of the technologies that need updating include but are not limited to: the development of network wide shared drive; additional and/or new batteries for the cache of 800 MHz radios; upgraded laptops (with increased processor capability) for the DOC Manager and IM; and upgraded projectors and screens for all rooms in the DOC. Additionally, staff require additional training to continue to effectively respond to incidents. Training on updated Operations Plans, CONOPS, and recovery plans is a consistent need.</p>
<b>Recipient Component A, Domain 1 Baseline Capacity (Please limit to 500 words)</b>
<p>It was noted in previous responses that, when outside of the MyDOH buildings and network, access to shared drives (where plans are stored) was unavailable, which was a barrier to accessing necessary plans, job action sheets, SOPs, and other pertinent documentation. Inquiry with the Division of Information Technology revealed that the type of space where the shared drive and limited CEPR staff file backup exists is not accessible outside of the network and a significant upgrade is required to the server to allow for access and more comprehensive backup.</p> <p>MyDOH maintains a robust cache of 800 MHz radios for internal staff and for communication with external partners, including all hospitals, health centers, critical care centers, hospice centers, and nursing homes at high risk of loss of communications and/or evacuation, which are on the same system and follow MyDOH’s protocols. These radios are used regularly by MyDOH staff for small-scale operations, training, and exercises and for large-scale real-world events requiring the activation of ICS. During previous responses it was noted that the original batteries for the in-house cache are failing and need replacement in order to ensure effective operation.</p> <p>The computer utilized by the DOC Manager during ICS activations requires significant processor capability because it can pull data from all the databases throughout the Department into its full-program Geographic Information System (GIS) capability and project that data in geospatial form through a Crestron to screens inside the DOC and to other rooms used for emergency operations (e.g., the Emergency Information Line, the Health Information Center). Similarly, video and other types of presentations can be projected. The current computer that provides these services is failing, as it has been used regularly since it was first installed more than seven years ago and requires replacement.</p>
<b>Outcomes (Please limit to 500 characters)</b>
<p>Enhanced MyDOH DOC equipment and communication systems provide capability to rapidly mobilize the staff and partners for coordinated response activities and support. Consistent information technology and communication platforms with response partners and stakeholders for coordinated data and messaging</p>

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exchange are available. Immediate availability of equipment inventory supplies to assurance fluid communications with responders.
<b>Planned Activities for Outcomes (250-character limit each, please add rows as needed)</b>
MyDOH will purchase a new blade server to allow for backup of all files of all EPR staff and partitioning that allows remote access to these files and the EPR shared drive and any event-specific shared drives.
MyDOH will purchase and deploy 75 new batteries to support its radio cache.
MyDOH will purchase a new DOC manager computer.
MyDOH will purchase a new projector with wireless input functionality for the DOC.
<b>Proposed Outputs Associated to Outcomes (250-character limit each; please add rows as needed)</b>
Improved access to emergency plans and files for CEPR staff and other emergency responders.
Secure backup to CEPR staff and emergency response files.
Maintenance of primary radio communication capability.
Improved capability and ease of use of projecting data inside the DOC and to other rooms supporting emergency operations.

**Component A, Domain 2: Strengthen Community Resilience**

For additional guidance, please refer to CDC-RFA-TP22-2201.

<b>Recipient Component A, Domain 2 Problem Statement (Please limit to 500 characters)</b>
<b>Recipient Component A, Domain 2 Baseline Capacity (Please limit to 500 characters)</b>
<b>Outcomes (Please limit to 500 characters)</b>
<b>Planned Activities for Outcomes (250-character limit each, please add rows as needed)</b>
<b>Proposed Outputs Associated to Outcomes (250-character limit each; please add rows as needed)</b>

**Component B, Domain 3: Strengthen Information Management**

For additional guidance, please refer to CDC-RFA-TP22-2201.

<b>Recipient Component B, Domain 1 Problem Statement (Please limit to 500 characters)</b>
<b>Recipient Component B, Domain 1 Baseline Capacity (Please limit to 500 characters)</b>
<b>Outcomes (Please limit to 500 characters)</b>
<b>Planned Activities for Outcomes (250-character limit each, please add rows as needed)</b>
<b>Proposed Outputs Associated to Outcomes (250-character limit each; please add rows as needed)</b>

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**Component B, Domain 4: Strengthen Countermeasures and Mitigation**

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<b>Recipient Component B, Domain 2 Problem Statement (Please limit to 500 characters)</b>
<b>Recipient Component B, Domain 2 Baseline Capacity (Please limit to 500 characters)</b>
<b>Outcomes (Please limit to 500 characters)</b>
<b>Planned Activities for Outcomes (250-character limit each, please add rows as needed)</b>
<b>Proposed Outputs Associated to Outcomes (250character limit each; please add rows as needed)</b>

**Component B, Domain 5: Strengthen Surge Management**

For additional guidance, please refer to CDC-RFA-TP22-2201.

<b>Recipient Component B, Domain 3 Problem Statement (Please limit to 500 characters)</b>
<b>Recipient Component B, Domain 3 Baseline Capacity (Please limit to 500 characters)</b>
<b>Outcomes (Please limit to 500 characters)</b>
<b>Planned Activities for Outcomes (250-character limit each, please add rows as needed)</b>
<b>Proposed Outputs Associated to Outcomes (250-character limit each; please add rows as needed)</b>

**Component B, Domain 6: Strengthen Biosurveillance**

For additional guidance, please refer to CDC-RFA-TP22-2201.

<b>Recipient Component B, Domain 4 Problem Statement (Please limit to 500 characters)</b>
<b>Recipient Component B, Domain 4 Baseline Capacity (Please limit to 500 characters)</b>
<b>Outcomes (Please limit to 500 characters)</b>
<b>Planned Activities for Outcomes (250-character limit each, please add rows as needed)</b>
<b>Proposed Outputs Associated to Outcomes (250-character limit each; please add rows as needed)</b>