

**DSLRL**

# FRIDAY UPDATE

January 7, 2022



CDC's Public Health Emergency Preparedness (PHEP) program is a critical source of funding, guidance, and technical assistance for state, local, and territorial public health departments to strengthen their public health preparedness capabilities and improve their response readiness. The Division of State and Local Readiness (DSLRL) Friday Update provides information and resources for PHEP recipients and other preparedness planners. Please share the newsletter with your colleagues.

For more information, visit the [CDC State and Local Readiness website](https://www.cdc.gov/stateandlocalreadiness/) or contact us at [preparedness@cdc.gov](mailto:preparedness@cdc.gov).

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## January 12 PHEP Connects Webinar Highlights Equity, Law, and Public Health Authority

CDC's next PHEP Connects webinar is scheduled for **1 p.m. EST on Wednesday, January 12**. This webinar will preview the Public Health Law Academy's training, "Public Health Threats and the U.S. Constitution: What Responders Need to Know About Equity, Law, and Public Health Authority." While public health law plays a central role in keeping Americans safe and healthy in times of crisis, it is also important to consider the rights of individuals affected by emergencies as outlined in the U.S. Constitution during a public health response. Gregory Sunshine from CDC's Public Health Law Program and Sabrina Adler of Law for ChangeLab Solutions will provide an overview of the laws that affect how government can respond to health crises in ways that advance, rather than hinder, health equity. The speakers will also introduce the constitutional principles and doctrines that protect individual civil liberties.

### Participant Information

Dial-In: (669) 254-5252 (Audio only)

Meeting ID: 161 241 1865

Passcode: 569595

Web Link: <https://www.zoomgov.com/j/1612411865>



## CDC Completes PERFORMS Migration to Edge

CDC completed the migration of PERFORMS from Internet Explorer to Microsoft Edge. Recipients should now use the Edge browser to access PERFORMS. Recipients can direct questions to [PERFORMSSupport@cdc.gov](mailto:PERFORMSSupport@cdc.gov).



## COVID-19 Response Activities

### **Crisis Response Workforce Development Funding Reports Due January 21**

The first COVID-19 Public Health Workforce Supplemental Funding fiscal and progress reports are due **Friday, January 21**. Recipients should submit status updates in REDCap on fiscal commitments made during the previous six months, as well as status updates on meeting hiring goals and diversity, equity, and inclusion (DEI) metrics. Recipients should report on activities conducted from July 1, 2021, through December 31, 2021. For more information, please contact [preparedness@cdc.gov](mailto:preparedness@cdc.gov).

### **CDC to Reschedule January 7 Crisis Response NOFO Informational Call**

CDC is rescheduling the informational call tentatively scheduled for January 7 to discuss the 2022 notice of funding opportunity (NOFO) for the Public Health Crisis Response Cooperative Agreement. The NOFO is still undergoing clearance and has not yet been posted on [www.grants.gov](http://www.grants.gov). CDC will notify jurisdictions when the NOFO has been released and will provide details then regarding the informational call.

### **Several Federal Government Resources Now Available to Support Testing**

CDC, the HHS Office of the Assistant Secretary for Preparedness and Response (ASPR), and the HHS Testing and Diagnostics Workgroup (TDWG) are working together to offer the following information and programs to partners interested in federal government support for COVID-19 testing.

- **CDC's Operation Expanded Testing (OpET)**  
This program supports no-cost, school-based testing for K-12 students and congregate settings in communities that have been disproportionately affected by the pandemic. Contact OpET at [eocevent586@cdc.gov](mailto:eocevent586@cdc.gov).
- **CDC's Increased Community Access to Testing Team (ICATT)**  
This program supports no-cost testing in pharmacies and other specific locations in communities that have been disproportionately affected by the pandemic. Contact ICATT at [eocevent586@cdc.gov](mailto:eocevent586@cdc.gov).
- **Temporary Surge Testing**  
To respond to demands for large volume testing, CDC's ICATT program can also help states implement temporary surge testing sites. States can submit requests for surge testing sites by simultaneously contacting the ICATT program at [eocevent586@cdc.gov](mailto:eocevent586@cdc.gov) and by submitting a Resource Request Form (RRF) to the Federal Emergency Management Agency (FEMA). The RRF is available online at [FEMA WebEOC](https://www.fema.gov/web/eoc) and is accessible to state emergency management officials. Requests for surge testing sites through this program are only accepted through state health departments. Local health departments should coordinate with their state health department to apply. CDC staff will work with requestors to discuss site requirements during the RRF application process.
- **Availability of Laboratory and Testing Supplies**  
The federal government currently distributes swabs and viral transport media (VTM) directly to health departments. No other testing supplies are available directly from the federal government at this time. Jurisdictions can request swabs or VTM by contacting CDC at [eocevent588@cdc.gov](mailto:eocevent588@cdc.gov). These requests should **not** use the FEMA/RRF system. CDC and ASPR staff may be able to advise on supply availability in the commercial market and the use of state [Epidemiology and Laboratory Capacity \(ELC\) cooperative agreement](#) funds for procurement of laboratory or testing supplies. Inquiries can be sent to [eocevent588@cdc.gov](mailto:eocevent588@cdc.gov).
- **Availability of Over-the-Counter (OTC) COVID-19 Tests**  
CDC and ASPR currently are not distributing OTC COVID-19 tests directly to state health departments. There is an ongoing distribution program of 50 million OTC COVID-19 tests to community health

centers and federally qualified health centers (FHQCs), food banks, and rural health clinics. Email [eocevent588@cdc.gov](mailto:eocevent588@cdc.gov) with inquiries about this federal distribution of OTC COVID-19 tests.

### Stay Up to Date with Vaccines

To align with standard language CDC uses about other vaccinations, CDC will now use the phrase “up to date” when talking about COVID-19 vaccination. CDC recommends that individuals stay “up to date” by receiving any additional doses they are eligible for, according to CDC’s recommendations, to ensure they have optimal protection against COVID-19. The technical definition of “fully vaccinated” – two doses of an mRNA vaccine or one dose of the J&J vaccine – has not changed. Individuals are considered fully vaccinated once they have received their primary series. For more information, please visit [Stay Up to Date with Your Vaccines](#).

### CDC Expands Booster Shot Eligibility

CDC has endorsed the Advisory Committee on Immunization Practices’ (ACIP) recommendation to expand the eligibility of COVID-19 booster doses to 12- to 15-year olds. CDC now recommends that adolescents ages 12 years to 17 years should receive a booster shot five months after their initial Pfizer-BioNTech vaccination series. Data show that COVID-19 boosters help broaden and strengthen protection against Omicron and other SARS-CoV-2 variants. ACIP reviewed the available safety data following the administration of more than 25 million vaccine doses in adolescents. At this time, only the Pfizer-BioNTech COVID-19 vaccine is authorized and recommended for adolescents ages 12 years to 17 years.

CDC also has updated its recommendation for when many people can receive a booster shot, shortening the interval from six months to five months for people who received the Pfizer-BioNTech COVID-19 Vaccine. This means that people can now receive an mRNA booster shot five months after completing their Pfizer-BioNTech primary series. The booster interval recommendation for people who received the J&J vaccine (two months) or the Moderna vaccine (six months) has not changed. Additionally, consistent with [prior recommendation for adults](#), CDC is recommending that moderately or severely immunocompromised 5- to 11-year-olds receive an additional primary dose of vaccine 28 days after their second shot. At this time, only the Pfizer-BioNTech COVID-19 vaccine is authorized and recommended for children ages 5 years to 11 years.



## What's on the Calendar

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## Preparedness and Response Resources

Family Health Centers of San Diego, the ECHO (Extension for Community Healthcare Outcomes) Institute, University of Washington, and University of Colorado have collaborated to provide a CDC-funded monthly learning series. The aim of the [ECHO webinar series](#) program is to rapidly disseminate post-acute Sequelae of COVID-19 and Myalgic Encephalomyelitis/Chronic Fatigue Syndrome findings and emerging best practices. This series will begin at **1 p.m. EST on Thursday, January 13**, and continue on the second Thursday of each month through June 9, 2022. This series will offer presentations by subject matter experts, examples of emerging best practices and models of care, and a facilitated question-and-answer session. Continuing education credits will be available to participants. For questions, please contact [LCecho@salud.unm.edu](mailto:LCecho@salud.unm.edu).

## SNS Formulary Update Webcast Now Available Online

A recording of the “Strategic National Stockpile (SNS) Formulary Update” webcast is now available on TRAIN.org. The formulary update provides public health partners and stakeholders with an overview of the nation’s repository of emergency medical countermeasures (MCMs), including pharmaceuticals, medical supplies, equipment, and devices for lifesaving care currently available in the SNS as of December 2021. This informational webinar will help participants better understand the increasing number of SNS-held products by threat and product type and how these products can supplement MCMs needed by states, tribal nations, territories, and the largest metropolitan areas during public health emergencies.

The webinar is for all federal, state, local, tribal, and territorial public health and emergency response partners that represent public health and emergency response stakeholders. The webinar is provisionally available for 45 days as a password-protected course on TRAIN.org. To register for this webinar via [CDC TRAIN](#), interested participants must have a TRAIN account, which is available via <http://train.org>. To search and register for this webinar, enter the entire webinar title, “**Strategic National Stockpile (SNS) Formulary**,” or the course ID number, **1101179**. Please use launch code Form22 to view the webinar.

Questions regarding TRAIN registration should be directed to [dsnstrain@cdc.gov](mailto:dsnstrain@cdc.gov).



## Public Health Associate Program Accepting Host Site Applications

CDC’s [Public Health Associate Program \(PHAP\)](#) is now accepting host site applications **through February 18**. PHAP, managed by CDC’s Center for State, Tribal, Local, and Territorial Support, is a two-year, competitive, paid, on-the-job training program for early-career public health professionals. Since 2007, the PHAP program has hired more than 1,650 associates, and according to a 2019 survey, 95% of host sites recommended participation.

CDC encourages state, tribal, local, and territorial public health departments, nongovernmental organizations, public health institutes and associations, academic institutions, and community-based organizations to apply to be host sites for associates from October 2022 to October 2024. Questions and feedback should be directed to [phap@cdc.gov](mailto:phap@cdc.gov).

## CSTE Offers Concurrent Disaster Preparedness Funding Opportunity

The Council of State and Territorial Epidemiologists (CSTE) has announced a [funding opportunity](#) for state, tribal, local, and territorial (STLT) public health agencies to participate in a tabletop exercise simulating concurrent disaster response. Requests for proposals to participate in the exercise are due **Friday, January 21**. The tabletop exercise will be jointly conducted by CSTE and CDC and is expected to be held between April and June 2022. This opportunity is designed to assist STLT public health agencies in assessing their preparedness and response capacity and capability for concurrent disasters. The objectives of this funding opportunity are to:

- Participate in a pilot tabletop exercise simulating concurrent disaster response.
- Participate in key informant interviews to describe anticipated gaps and needs related to concurrent disasters.
- Develop jurisdiction-specific after-action reports and improvement plans based on the tabletop exercise.
- (optional) Pilot test a digital planning and response toolkit.

This project is a collaborative partnership among CSTE, CDC’s National Center of Environmental Health, Agency for Toxic Substances and Disease Registry (NCEH/ATSDR), and the National Environmental Health

Association. The focus of the project is to develop resources for STLT jurisdictions to strengthen their environmental health emergency capabilities for concurrent disasters.



## Online Resources

### CDC MMWR Reports

- [Morbidity and Mortality Weekly Report, Early Release January 7](#)
- [Effectiveness of BNT162b2 \(Pfizer-BioNTech\) mRNA Vaccination Against Multisystem Inflammatory Syndrome in Children Among Persons Aged 12–18 Years — United States, July–December 2021](#)
- [Risk for Newly Diagnosed Diabetes >30 Days After SARS-CoV-2 Infection Among Persons Aged <18 years — United States, March 1, 2020–June 28, 2021](#)
- [Suicidal Thoughts and Behaviors Among Adults Aged ≥18 Years — United States, 2015–2019](#)
- [Alcohol Consumption and Binge Drinking During Pregnancy Among Adults Aged 18–49 Years — United States, 2018–2020](#)
- [Comparative Effectiveness and Antibody Responses to Moderna and Pfizer-BioNTech COVID-19 Vaccines among Hospitalized Veterans — Five Veterans Affairs Medical Centers, United States, February 1–September 30, 2021](#)
- [Characteristics and Clinical Outcomes of Children and Adolescents Aged <18 Years Hospitalized with COVID-19 — Six Hospitals, United States, July–August 2021](#)
- [Interim Estimate of Vaccine Effectiveness of BNT162b2 \(Pfizer-BioNTech\) Vaccine in Preventing SARS-CoV-2 Infection Among Adolescents Aged 12–17 Years — Arizona, July–December 2021](#)

### COVID-19 Guidance and Resources

- **NEW** [MMWR Weekly COVID-19 Briefing](#)
- **NEW** [Receipt of COVID-19 Vaccine During Pregnancy and Preterm or Small-for-Gestational-Age at Birth — Eight Integrated Health Care Organizations, United States, December 15, 2020–July 22, 2021](#)
- **NEW** [CDC Recommends Pfizer Booster at 5 Months, Additional Primary Dose for Certain Immunocompromised Children](#)
- **UPDATED** [Operational Considerations for the Identification of Healthcare Workers and Inpatients with Suspected COVID-19 in non-U.S. Healthcare Settings](#)
- **UPDATED** [CDC COVID-19 Data Tracker](#)
- **UPDATED** [Overall US COVID-19 Vaccine Distribution and Administration Update](#)

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### CDC Wants to Hear from PHEP Recipients

CDC wants to hear how PHEP jurisdictions are preparing for and responding to incidents, emergencies, and disasters, whether it's the COVID-19 pandemic, recent weather events, or other public health emergencies. Recipients can highlight their experiences in emergency preparedness, response, or recovery by emailing the State and Local Readiness mailbox at [preparedness@cdc.gov](mailto:preparedness@cdc.gov).

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