

**DSLRL**

# FRIDAY UPDATE

March 25, 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](#) or contact us at [preparedness@cdc.gov](mailto:preparedness@cdc.gov).

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## PHEP ORR Friday Feature: Completing the Vaccination for Critical Workforce Groups and Disproportionately Impacted Populations (VAC) Form



On February 22, CDC released the updated PHEP Operational Readiness Review (ORR) guidance to the 62 PHEP recipients. The guidance contains two new forms for reporting COVID-19 response activities, the Pandemic COVID-19 Incident Response (RSP) and the Vaccination for Critical Workforce Groups and Disproportionately Impacted Populations (VAC). This week's ORR Friday Feature will provide an overview of the VAC form.

In the fall of 2020, CDC issued [COVID-19 Vaccination Program Interim Operational Guidance for Jurisdiction Operations](#), which outlined how state, local, tribal, and territorial jurisdictions and their partners should plan and operationalize a COVID-19 vaccine campaign in response to the pandemic. The guidance recommends that these public health plans consider a phased approach to vaccination including, identification of critical populations, provider recruitment and enrollment, capacity to administer, and vaccine storage and handling. Recipients will use the VAC form to satisfy the PHEP program exercise requirement to conduct a functional exercise for critical workforce group vaccinations.

The first question on the VAC form (VAC1) addresses the critical workforce and potentially disproportionately impacted population groups the jurisdiction prioritized for vaccination, recognizing that COVID-19 priorities

### GENERAL POPULATION

- Adults >65 years old
- Adults 19-64 years old with high risk condition
- Children 3-18 years old with high risk condition
- Children 3-18 years old without high risk condition
- Congregate care settings
- Healthy adults 19-64 years old
- Household contacts of infants <6 months old
- Infants and toddlers 6-35 months old
- Pregnant women

were fluid and based on jurisdictional assessments of their population demographics. The VAC1 answer choices are based on the categories described in the interim guidance for allocating and targeting vaccine for a pandemic influenza scenario. These answer choices are arranged by four groupings indicated by text in all capital letters GENERAL POPULATIONS, HEALTHCARE AND COMMUNITY SUPPORT SERVICE, HOMELAND AND NATIONAL SECURITY, and OTHER CRITICAL INFRASTRUCTURE. Subtypes under each grouping are listed in alphabetical order.

In many instances, jurisdictions initially targeted enrollment of adults 65 years and older and people with high-risk conditions. In that case, recipients must select two subcategories under "GENERAL POPULATION" as shown in the graphic. If a

population that was planned for is not listed, select “other, specify” at the end of the dropdown list and enter the specific population information.

Recipients will be expected to enter the role the PHEP program had in supporting the vaccination campaign for most of the remainder of the form as defined below:

- **Lead role:** Primary responsibility for funding and preparedness planning and/or response activities
- **Support role:** Shared funding and collaboration for preparedness planning and/or response activities
- **No role:** No direct involvement in preparedness funding, planning, or response activities

Responses require supporting evidence for the reviewer to substantiate the accuracy of the answer and verify the selected role, if any, the PHEP program played in supporting the vaccination rollout in their jurisdiction. It is anticipated that PHEP staff worked alongside immunization and vaccine task forces or equivalent groups to coordinate campaigns and vaccine administration in each jurisdiction.

The last section of the form addresses how well vaccination related activities (shipment, transport, etc.) were performed using the same scale as the RSP form: Performed without challenges; Performed adequately (with some challenges); Performed with major challenges; Unable to perform; and Not applicable. In addition, recipients will be expected to enter text describing the strength, area for improvement, and root cause analysis for the vaccination effort. Again, supporting evidence is required to allow the reviewer to substantiate the accuracy of the response.

As a reminder, recipients must self-report ORR data by **June 30, 2022**, through PORTS. In addition to completing the required ORR questions, recipients are encouraged to upload as much supporting evidence as available to substantiate their responses by June 30, 2022. By **October 31, 2022**, recipients must upload any additional supporting evidence necessary to substantiate their final responses. Information on the RSP form can be found in the [February 25 PHEP ORR Friday Feature](#) and questions about the VAC form can be sent to [EAB@cdc.gov](mailto:EAB@cdc.gov).

### **PORTS Training Sessions Now Underway**

PHEP ORR Reporting and Tracking System (PORTS) training sessions are now underway, with two remaining sessions scheduled for March 28 and March 30. PHEP recipients will use the PORTS online data collection system to submit program evaluation data to CDC. The virtual, instructor-led technical training will familiarize recipients with how to enter data, upload evidence, and submit data to CDC for review. CDC offered four different sessions covering the same content to accommodate time zones and schedules. Recipients who have not already attended a training session can still [register](#) for one of the following training dates, but must have a [TRAIN account](#) to register.

- **Monday, March 28** | 6 p.m. to 9 p.m. EDT
- **Wednesday, March 30** | 10 a.m. to 1 p.m. EDT

While local health departments are welcome to join the training, these sessions are specifically targeted to the 62 PHEP recipients: 50 states, four directly funded localities, and eight territories and freely associated states. CDC strongly encourages training participants to review the introductory materials provided with the registration information to familiarize themselves with PORTS and the ORR module. This advance preparation should take no longer than 15 minutes to complete.

If reasonable accommodations are needed to participate in the training, PORTS training attendees should email [dslrtraining@cdc.gov](mailto:dslrtraining@cdc.gov). Any questions about this technical training should also be directed to [dslrtraining@cdc.gov](mailto:dslrtraining@cdc.gov).



## **COVID-19 Response Activities**

## CDC Mental Health Survey Closes Today, March 25

CDC's 2022 mental health survey is currently open to all U.S. public health workers who have been responding to the COVID-19 pandemic. All survey responses are anonymous, and no personal identifiers will be collected. Participation is completely voluntary, and participants may withdraw from the survey at any time. The [survey](#) can be taken on a computer, tablet, or cellular device. **The survey link will close at 11:59 p.m. EDT today, March 25.**

The survey is intended for full-time and part-time employees, contractors, fellows, and others who worked in state, tribal, local, and territorial public health departments in 2021 and will look at demographics, job categories, and questions to assess symptoms of anxiety, depression, and post-traumatic stress disorder (PTSD). As CDC continues to measure and understand the impact of the COVID-19 pandemic on public health workers' mental health, the agency can better mobilize resources for additional psycho-social support.

For more information on CDC's mental health study, contact the survey team at [sttmhproject@cdc.gov](mailto:sttmhproject@cdc.gov).

## CDC Releases New COVID-19 Quarantine and Isolation Calculator

CDC's new [COVID-19 Quarantine and Isolation \(Q&I\) Calculator](#) takes the stress out of figuring when, and for how long, people with COVID-19 and close contacts need to stay home, get tested, and wear a well-fitting mask. Developed in response to requests from partners and the public, the calculator provides important information about what precautions people with COVID-19 and their [close contacts](#) can take to protect loved ones and slow the spread of COVID-19 in their communities.

This online, mobile-friendly calculator allows users to easily follow CDC's [quarantine and isolation](#) guidance and get customizable information to address their unique situations. It can be used by individuals, health care providers, businesses, and organizations that are managing COVID-19 cases and close contact exposures. CDC encourages health departments and partners to promote the Q&I calculator widely. Health departments and health systems can add the Q&I calculator to their websites by embedding the syndicated content code <https://tools.cdc.gov/medialibrary/index.aspx#/media/id/636190>.

The Q&I calculator is **not** for people with COVID-19 who are moderately or severely ill or those with weakened immune systems (immunocompromised) as they should talk to their doctors about when to end isolation. Health care providers can learn more about ending isolation for these populations by referring to the [Ending Isolation and Precautions for People with COVID-19: Interim Guidance](#) webpage.

In addition, this tool does not apply to cases and close contacts identified in certain settings. Parents with children in K-12 schools or early care and education (ECE) programs should consult the program administrator for specific isolation and quarantine guidance in their school or ECE setting. For information about isolation and quarantine in high-risk congregate settings and health care settings, refer to [COVID-19 Community, Work, and School](#).

## Updated COVID-19 Resources Now Available

CDC has updated the following COVID-19 resources.

- [Clinical Care Quick Reference for COVID-19](#) highlights key COVID-19 clinical care information for health care professionals and provides selected links to full guidance and research.
- CDC's [FAQ: COVID-19 Data and Surveillance](#) answers commonly asked questions about CDC's COVID-19 data and surveillance across the country, as well as collecting and sharing data with the public.



## What's on the Calendar

- **March 28** – PORTS Training

- **March 30** – PORTS Training



## Preparedness and Response Resources

### ASTHO Hosts March 30 Webinar on Toxic Stress

The Association of State and Territorial Health Officials (ASTHO) will host a virtual webinar conference from **4 p.m. to 5:15 p.m. EDT on Wednesday, March 30**. The webinar, “What We’ve Learned about Toxic Stress: The Importance of Self-Care Rituals in the Workplace,” provides public health leaders with an advanced understanding of the pandemic’s generational altering impact. The webinar will explore how to integrate this knowledge into best practices going forward to improve all public health initiatives. [Register](#) for the upcoming webinar.



## News You Can Use

### CDC Announces Launch of Clean Air in Buildings Challenge

As part of the White House [National COVID-19 Preparedness Plan](#), the Environmental Protection Agency (EPA), in collaboration with CDC, the Department of Energy, and other federal agencies, recently launched the [Clean Air in Buildings Challenge](#). The goal of this effort is to improve ventilation and reduce the spread of COVID-19 in buildings. The EPA has developed [four recommendations](#) for leaders and building owners and operators to assess their indoor air quality and make ventilation and air filtration improvements to help keep occupants safe.

### 2022 National Healthcare Coalition Preparedness Conference Abstracts Due April 13

The [abstract submission](#) period is open for the 2022 National Healthcare Coalition Preparedness Conference (NHCCP), which is scheduled for November 29 - December 1 in Anaheim, Calif. The submission deadline is **Wednesday, April 13**. NHCCP is seeking presentations that align with the conference theme, “The Ripple Effect: Leveraging Local Successes for National Impact.” Learn more on the [2022 National Healthcare Coalition Preparedness Conference](#) webpage.



## Online Resources

### CDC MMWR Reports

- [Morbidity and Mortality Weekly Report, March 25](#)
- [Use of At-Home COVID-19 Tests — United States, August 23, 2021–March 12, 2022](#)
- [Effectiveness of mRNA Vaccination in Preventing COVID-19–Associated Invasive Mechanical Ventilation and Death — United States, March 2021–January 2022](#)
- [Tuberculosis — United States, 2021](#)
- [Lessons Learned from Programmatic Gains in HIV Service Delivery During the COVID-19 Pandemic — 41 PEPFAR-Supported Countries, 2020](#)

- [Health Needs and Use of Services Among Children with Developmental Disabilities — United States, 2014–2018](#)
- [Effectiveness of mRNA Vaccination in Preventing COVID-19–Associated Invasive Mechanical Ventilation and Death — United States, March 2021–January 2022](#)
- [COVID-19–Associated Hospitalizations Among Adults During SARS-CoV-2 Delta and Omicron Variant Predominance, by Race/Ethnicity and Vaccination Status — COVID-NET, 14 States, July 2021–January 2022](#)
- [Erratum: Vol. 71, No. 10](#)
- [QuickStats: Percentage of Adults Aged ≥18 Years Who Have Difficulty Hearing Even When Using a Hearing Aid, by Age Group — National Health Interview Survey, United States, 2020](#)

## COVID-19 Guidance and Resources

- **NEW** [COVID-19 Quarantine and Isolation \(Q&I\) Calculator](#)
- **UPDATED** [COVID-19 Quarantine and Isolation](#)
- **UPDATED** [Clinical Care Quick Reference for COVID-19](#)
- **UPDATED** [Recommendations for People with COVID-19](#)
- **UPDATED** [Recommendations for COVID-19 Close Contacts](#)
- **UPDATED** [FAQ: COVID-19 Data and Surveillance](#)
- **UPDATED** [COVID Data Tracker](#)

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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).

## Christine Kosmos, RN, BSN, MS

Director, Division of State and Local Readiness  
 Center for Preparedness and Response  
 Centers for Disease Control and Prevention

