

Division of State and Local Readiness Friday Update

April 2, 2021



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.

Subscribe here for the

DSLRL FRIDAY UPDATE 

In This Issue

Upcoming Deadlines

- **April 23** – CDC CPR Director Position Application Deadline

PHEP Cooperative Agreement Updates

- OMB Approves PHEP BP3 Spending Plan

COVID-19 Response Activities

- CDC Releases Vaccine Channel Portfolio by Jurisdiction
- Federal Allocation Provided to Support Vaccination in Dialysis Clinics
- CDC Provides New COVID-19 Resources

What's on the Calendar

- **April 21** – PHEP Connects Webinar: Special Session on PHEP ORR
- **April 22** – [RealOpt© Training](#)

Tools and Resource

- Partners Offer April Webinars on COVID-19 Vaccination and Reaching People with Disabilities

News You Can Use

- Updated SAFECOM Guidance Now Available
- PHR Solicits Supplemental Issue on Innovative Approaches to COVID-19 Case Investigation and Contact Tracing

Online Resources



- **April 23** – CDC CPR Director Position Application Deadline
Physician – [RF-602: https://www.usajobs.gov/GetJob/ViewDetails/596265900](https://www.usajobs.gov/GetJob/ViewDetails/596265900)
Health Scientist – [RF-601: https://www.usajobs.gov/GetJob/ViewDetails/596265400](https://www.usajobs.gov/GetJob/ViewDetails/596265400)



OMB Approves PHEP BP3 Spending Plan

The Office of Management and Budget has approved CDC's proposed plan for allocating the \$20 million increase in fiscal year (FY) 2021 PHEP funding for Budget Period 3 (BP3). CDC is finalizing the BP3 funding allocations based on the approved plan and will provide recipients with their final funding numbers by the end of April.

The enacted level for the FY 2021 PHEP budget line is \$695 million, an increase of \$20 million over the FY 2020 enacted budget. CDC plans to use the additional funding to enhance its support of state, local and territorial (SLT) health departments, including increasing base or core funding for the 62 PHEP recipients.

In addition, CDC will increase PHEP funding for the Cities Readiness Initiative (CRI) by \$10.8 million to support preparedness activities across all 15 Public Health Emergency Preparedness and Response Capabilities in 72 of the nation's largest population centers where approximately 60% of the U.S. population resides. CDC awards CRI funding to 50 states and the four directly funded localities, which supports more than 400 local planning jurisdictions within the 72 population centers.

CDC also will significantly expand and enhance its Career Epidemiology Field Officer (CEFO) program to create a national network of preparedness field staff. This national CEFO network will support the emergency preparedness and response activities of every state, territory, and locality directly funded by the PHEP cooperative agreement.

CDC currently has 33 CEFOs that support 21 states, Chicago, and New York City. Two regional CEFOs support the U.S.-affiliated Pacific Islands and the Caribbean territories. Currently, PHEP recipients must request and fund placement of CEFOs using the direct assistance mechanism. Beginning in July 2021, CDC will provide centralized PHEP funding to support one existing CEFO in each state or city. Those jurisdictions will recoup their direct assistance funds in their BP3 funding awards. Concurrently, CDC will assess the interest and begin the process of developing CEFO assignments in the remaining 29 states, Los Angeles County, and Washington, D.C. When fully implemented, the national network will include 56 CEFOs directly funded by CDC.

CDC will conduct informational meetings with PHEP directors to discuss the field staff expansion. The first meeting is tentatively scheduled for **Monday, April 12**. Jurisdictions that do not currently have a CEFO and would like to learn more about the opportunity to do so should contact their PHEP project officers. Questions can also be directed to preparedness@cdc.gov.



CDC Releases Vaccine Channel Portfolio by Jurisdiction

On Friday, April 2, CDC released a new "[Vaccine Channel Portfolio by Jurisdiction](#)" report. This report provides an overview of the multiple channels being used to ensure all Americans have access to COVID-19 vaccine.

This new report will display the following information by jurisdiction.

- **Vaccines Delivered** (grouped into three categories)
 - Jurisdiction: Doses delivered to jurisdictions based on the allotment provided by the federal government. This figure excludes additional doses transferred to jurisdictions by the Federal Emergency Management Agency (FEMA) for use at Community Vaccination Center (CVC) pilot sites or in mobile clinics.
 - Federal Programs: Doses delivered to programs that receive their own vaccine allocations from the federal government, including:
 - Federal Retail Pharmacy Program
 - Health Resources and Services Administration's (HRSA) Federally Qualified Community Health Center Program
 - FEMA CVC Pilot Site and Mobile Vaccination Program
 - U.S. Department of Health and Human Services (HHS)/National Institutes of Health (NIH) Program
 - Federal Dialysis Center Program
 - Federal Entities: Doses delivered to federal entities that receive their own vaccine allocations, including Bureau of Prisons, Department of Defense, Indian Health Service, and Veterans Health Administration.
- **Vaccines Administered** (grouped into two categories)
 - Jurisdictions and Federal Programs
 - Federal Entities
- **Unadjusted Administration Ratio:** The percentage of doses delivered to a jurisdiction that have been administered as of the date reported. This ratio is reported 1) at the overall level and 2) only for jurisdictions and federal programs.

- **Adjusted Administration Ratio:** The percentage of doses delivered to a jurisdiction that have been administered, using a cumulative seven-day rolling average for both administrations and deliveries and a three-day lag for doses delivered. This ratio is reported 1) at the overall level and 2) only for jurisdictions and federal programs.

Federal Allocation Provided to Support Vaccination in Dialysis Clinics

To help ensure access to COVID-19 vaccines, the federal government is partnering with dialysis clinics nationwide that participate in the Medicare End-Stage Renal Disease Program to provide critical COVID-19 vaccination services for patients receiving dialysis and healthcare personnel in outpatient dialysis clinics. This effort is intended to help ensure vaccinations for this group of patients who are at high-risk, disproportionately affected by COVID-19, and can suffer severe consequences if infected.

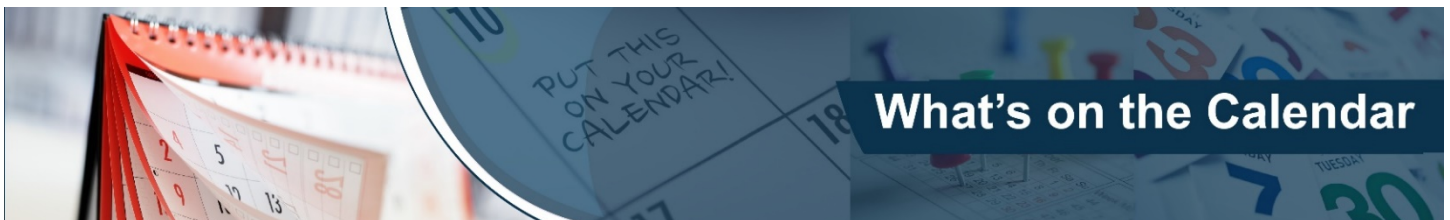
Two large dialysis partner organizations, DaVita Inc. and Fresenius Medical Care North America, have enrolled as COVID-19 vaccination providers to increase access to COVID-19 vaccines across dialysis clinics nationwide. Together, they operate approximately 83% of dialysis clinics in the United States. This partnership will also support the delivery of vaccines to other smaller clinics not owned by DaVita or Fresenius. DaVita and Fresenius are registered under a network administrator agreement and will support the delivery of vaccine doses to smaller dialysis organizations and independent providers that join these networks. In consultation with CDC, dialysis partners developed a strategy to equitably distribute vaccine across dialysis clinics. CDC will monitor distribution of vaccine to help ensure fair access.

The federal COVID-19 vaccine allocation provided for this effort is separate from jurisdictions' weekly allocations. Additional information public health jurisdictions should know about this vaccination effort is available [here](#).

CDC Provides New COVID-19 Resources

CDC has released new COVID-19 resources now available on the CDC COVID-19 website. The resources include a new version of the personal protective equipment (PPE) burn rate calculator, as well as information on a new COVID-19 vaccine webinar series.

- The updated [PPE Burn Rate Calculator](#) has more options for users to enter and view PPE data and increased capability to meet the needs of large companies and facilities with complex inventory needs.
- CDC is offering an online series of [webinars](#) addressing COVID-19 vaccination topics. These interactive, web-based training modules offer real-world perspectives on different COVID-19 vaccine issues. Topics range from routine clinical and vaccine safety information to guidance for on-site clinic vaccination activities and having conversations with vaccine recipients. Each webinar lasts 15 to 20 minutes and includes self-test practice questions and lists additional resources related to the topic discussed.



- **April 21** – PHEP Connects Webinar: Special Session on PHEP ORR
- **April 22** – [RealOpt© Training](#)



Tools and Resources

Partners Offer April Webinars on COVID-19 Vaccination and Reaching People with Disabilities

The Association of University Centers on Disabilities (AUCD), Association of State and Territorial Health Officials (ASTHO), and National Association of County and City Health Officials (NACCHO) will host two webinars in April discussing promising practices on how states are reaching people with disabilities. Registration is required to access the webinars. Continuing education credit will not be offered. Webinars will be [recorded and accessible](#) for later viewing. Communication Access Realtime Translation (CART) and American Sign Language (ASL) interpreting will be provided. For additional disability accommodations, email jtuell@aucd.org. Following are participant details.

Participant Information

- 1 p.m. to 2 p.m. EDT on Wednesday, April 7

[Communication: Promising Practices for Reducing COVID-19 Vaccine Hesitancy and Disseminating Accessible Messages](#)

- 1 p.m. to 2 p.m. EDT on Thursday, April 8

[Prioritization: Promising Practices for Educating Others About the Importance of Disability Prioritizing in State Vaccination Plans](#)



News You Can Use

Updated SAFECOM Guidance Now Available

The U.S. Department of Homeland Security's Cybersecurity and Infrastructure Security Agency (CISA) has released the 2021 [SAFECOM Guidance on Emergency Communications Grants](#). The SAFECOM guidance is updated annually to provide current information on emergency communications policies, eligible costs and activities, best practices, and technical standards for state, local, tribal, and territorial grant recipients investing federal funds in emergency communications programs. The guidance aligns with the National Emergency Communications Plan (NECP), which emphasizes the need to enhance governance structures, plans, and protocols that enable the emergency response community to communicate requisite information under all circumstances. Jurisdictions that use federal preparedness grant funds to support emergency communications activities must comply with the current SAFECOM guidance, which provides:

- Recommendations for planning, coordinating, and implementing projects;
- Information on emergency communications activities that can be funded through federal grants;
- Best practices, policies, and technical standards that help to improve interoperability; and
- Resources to help grant recipients comply with technical standards and grant requirements.

For additional information, visit <https://www.cisa.gov/safecom/about-safecom>.

PHR Solicits Supplemental Issue on Innovative Approaches to COVID-19 Case Investigation and Contact Tracing

The [Public Health Reports \(PHR\)](#), in collaboration with the State, Tribal, Local, and Territorial (STLT) Task Force of CDC's COVID-19 Response, plans to publish a supplemental issue, "Innovative Approaches to COVID-19 Case Investigation and Contact Tracing." PHR, the official journal of the Office of the U.S. Surgeon General and the U.S. Public Health Service, is a peer-reviewed journal of public health research and practice.

PHR is soliciting manuscripts that focus on how health departments, tribal nations, and partners have:

- Implemented exposure notification (e.g., deidentified information shared between mobile devices).
- Used digital tools and technology for case and contact management (e.g., mobile applications or daily text messaging for symptom tracking or monitoring).
- Adapted processes for improving outreach to groups disproportionately affected by COVID-19.
- Addressed interoperability challenges across different medical, laboratory, public health, and other systems.
- Modified public health surveillance systems to accommodate the influx of SARS-CoV-2 test results.
- Developed informatics solutions to support the delivery of case investigation or contact tracing.
- Created innovative strategies for contact tracing in special settings (e.g., schools or workplaces).
- Reprioritized workflow and redirected staff to accommodate the changing needs of the COVID-19 response.
- Trained and incorporated new partners to augment COVID-19 case investigation and contact tracing.
- Evaluated the effectiveness of these innovative case investigation or contact tracing strategies.

Manuscripts must be submitted by July 1, through the [PHR electronic submission system](#). Those interested in submitting manuscripts can contact Maryam B. Haddad (mhaddad@cdc.gov) regarding this call for manuscripts, and Andrey Kuzmichev (Andrey.Kuzmichev@hhs.gov) for general questions regarding PHR.



CDC MMWR Reports

- [Morbidity and Mortality Weekly Report, April 2](#)
- [Provisional Mortality Data — United States, 2020](#)
- [Death Certificate–Based ICD-10 Diagnosis Codes for COVID-19 Mortality Surveillance — United States, January–December 2020](#)
- [Willingness to Receive a COVID-19 Vaccination Among Incarcerated or Detained Persons in Correctional and Detention Facilities — Four States, September–December 2020](#)
- [Community-Associated Outbreak of COVID-19 in a Correctional Facility — Utah, September 2020–January 2021](#)
- [Rapid Spread of SARS-CoV-2 in a State Prison after Introduction by Newly Transferred Incarcerated Persons — Wisconsin, August 14–October 22, 2020](#)

- [Counties with High COVID-19 Incidence and Relatively Large Racial and Ethnic Minority Populations — United States, April 1–December 22, 2020](#)
- [Symptoms of Anxiety or Depressive Disorder and Use of Mental Health Care Among Adults During the COVID-19 Pandemic — United States, August 2020–February 2021](#)
- [Interim Estimates of Vaccine Effectiveness of BNT162b2 and mRNA-1273 COVID-19 Vaccines in Preventing SARS-CoV-2 Infection Among Health Care Personnel, First Responders, and Other Essential and Frontline Workers — Eight U.S. Locations, December 2020–March 2021](#)

COVID-19 Guidance and Resources

- **UPDATED** [Cases in the U.S.](#)
- **UPDATED** [Guidance for Adult Day Services Centers](#)
- **UPDATED** [Variant Proportions in the U.S.](#)

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.

Christine Kosmos, RN, BSN, MS

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



Centers for Disease Control and Prevention

1600 Clifton Rd Atlanta, GA 30329 1-800-CDC-INFO (800-232-4636) TTY: 888-232-6348

[Questions or Problems](#) | [Unsubscribe](#)