Form Approved

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## **COVID-19 Pandemic Response (RSP)**

## RSP1.a-d COVID-19 Pandemic Response: Community Resilience

- a. Transportation assets supported the needs of with AFN or DIPs
- b. Equity officer (or equivalent) staffed during the response
- c. Mental/behavioral health services provided to the community,
- d. Notifications about available health services provided during the response

RSP1.e COVID-19 Pandemic Response: Community Resilience Strength

RSP1.f COVID-19 Pandemic Response: Community Resilience Area for Improvement

RSP1.g COVID-19 Pandemic Response: Community Resilience Root Cause Analysis

RSP2.a-e COVID-19 Pandemic Response: Incident Management

- a. public health EOC supported the response
- b. ICS structure maintained,
- c. Additional personnel, materiel, or assets secured,
- d. administrative preparedness,
- e. COOP plan implemented.

RSP2.f COVID-19 Pandemic Response: Incident Management Strength

RSP2.g COVID-19 Pandemic Response: Incident Management Area for Improvement

RSP2.h COVID-19 Pandemic Response: Incident Management Root Cause Analysis

Public reporting burden of this collection of information is estimated to average 143 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. An agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a currently valid OMB control number. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to CDC/ATSDR Information Collection Review Office, 1600 Clifton Road NE, MS D-74, Atlanta, Georgia 30333; ATTN: PRA (0920-1352).

## RSP3.a-d COVID-19 Pandemic Response: Information Management

- a. PIO used during the response,
- b. JIC established,
- c. Community partners engaged in developing and sharing information,
- d. Public and media inquiries routinely addressed

RSP3.e COVID-19 Pandemic Response: Information Management Strength

RSP3.f COVID-19 Pandemic Response: Information Management Area for Improvement

RSP3.g COVID-19 Pandemic Response: Information Management Root Cause Analysis

## RSP4.a-o COVID-19 Pandemic Response: Countermeasures and Mitigation

- a. Federal MCM assets requested,
- b. MCM dispensed through PODs or DVCs,
- c. Security protocols at PODs or DVCs applied,
- d. Emergency use authorization (EUA) protocols followed,
- e. Cold chain management followed,
- f. MCM distribution followed transportation plans,
- g. RSS facilities stored MCM,
- h. Security protocols at RSS applied,
- i. NPIs used,
- j. Physical health of public health responders screened,
- k. Physical health of public health responders monitored,
- I. Mental/behavioral health of public health responders screened,
- m. Mental/behavioral health of public health responders monitored, and
- n. Just-in-time training to public health responders provided.

RSP4.o COVID-19 Pandemic Response: Countermeasures and Mitigation Strength

RSP4.p COVID-19 Pandemic Response: Countermeasures and Mitigation Area for Improvement

RSP4.q COVID-19 Pandemic Response: Countermeasures and Mitigation Root Cause Analysis

RSP5.a-m COVID-19 Pandemic Response: Surge Management

- a. Interim sites used for human remains
- b. Vital statistics shared COVID-19 mortality data

- c. EDRS used for mortality tracking,
- d. Mortality reporting was timely,
- e. Death certificates timely issued,
- f. Air flow and ventilation monitored at congregate sites
- g. Mental/behavioral health routinely monitored for persons under quarantine and isolation orders
- h. Accommodations for persons with AFN at vaccination sites
- i. Prevention outreach directed at disproportionality impacted populations (DIPs)
- j. Surge staff supported clinical operations
- k. Crisis Standards of Care (CSC) triggered
- I. Health care and public health exchanged timely information
- m. Volunteers were managed

RSP5.n COVID-19 Pandemic Response: Surge Management Strength

RSP5.o COVID-19 Pandemic Response: Surge Management Area for Improvement

RSP5.p COVID-19 Pandemic Response: Surge Management Root Cause Analysis

RSP6.a-f COVID-19 Pandemic Response: Biosurveillance

- a. Laboratory information management system (LIMS) used,
- b. Testing prioritization for the pandemic strain implemented,
- c. Laboratory COOP or surge plans followed,
- d. Procedures for confidential, sensitive, and restricted data storage maintained,
- e. Standards for rapid exchange of secure information between stakeholders followed,
- f. Timely surveillance, investigations, and mitigation actions followed.

RSP6.g COVID-19 Pandemic Response: Biosurveillance Strength

RSP6.h COVID-19 Pandemic Response: Biosurveillance Area for Improvement

RSP6.i COVID-19 Pandemic Response: Biosurveillance Root Cause Analysis