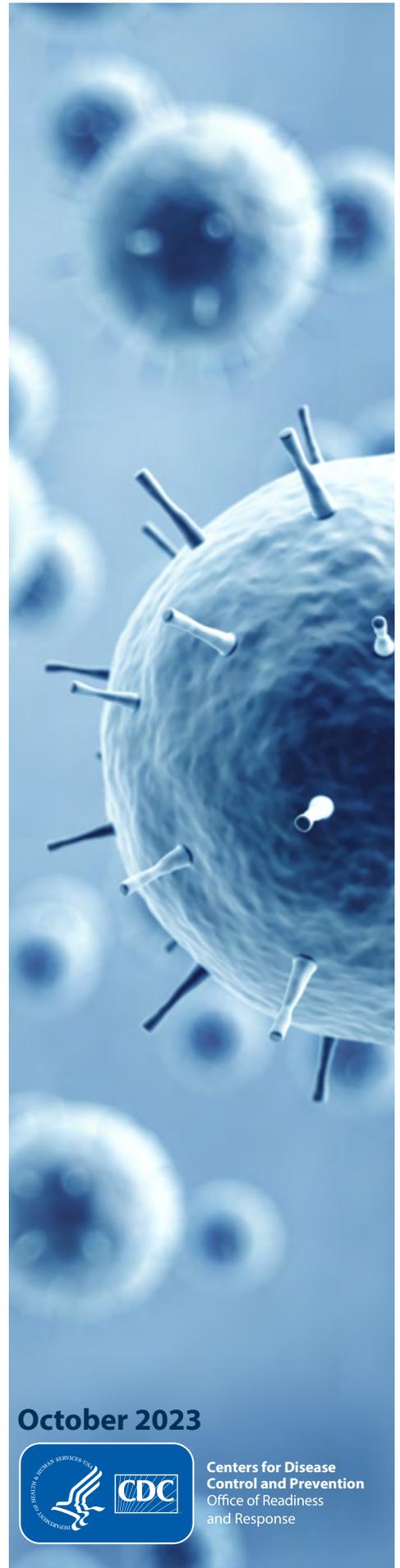


# Response Readiness in the Time of COVID-19

**The PHEP  
Program's  
Role and Impact**



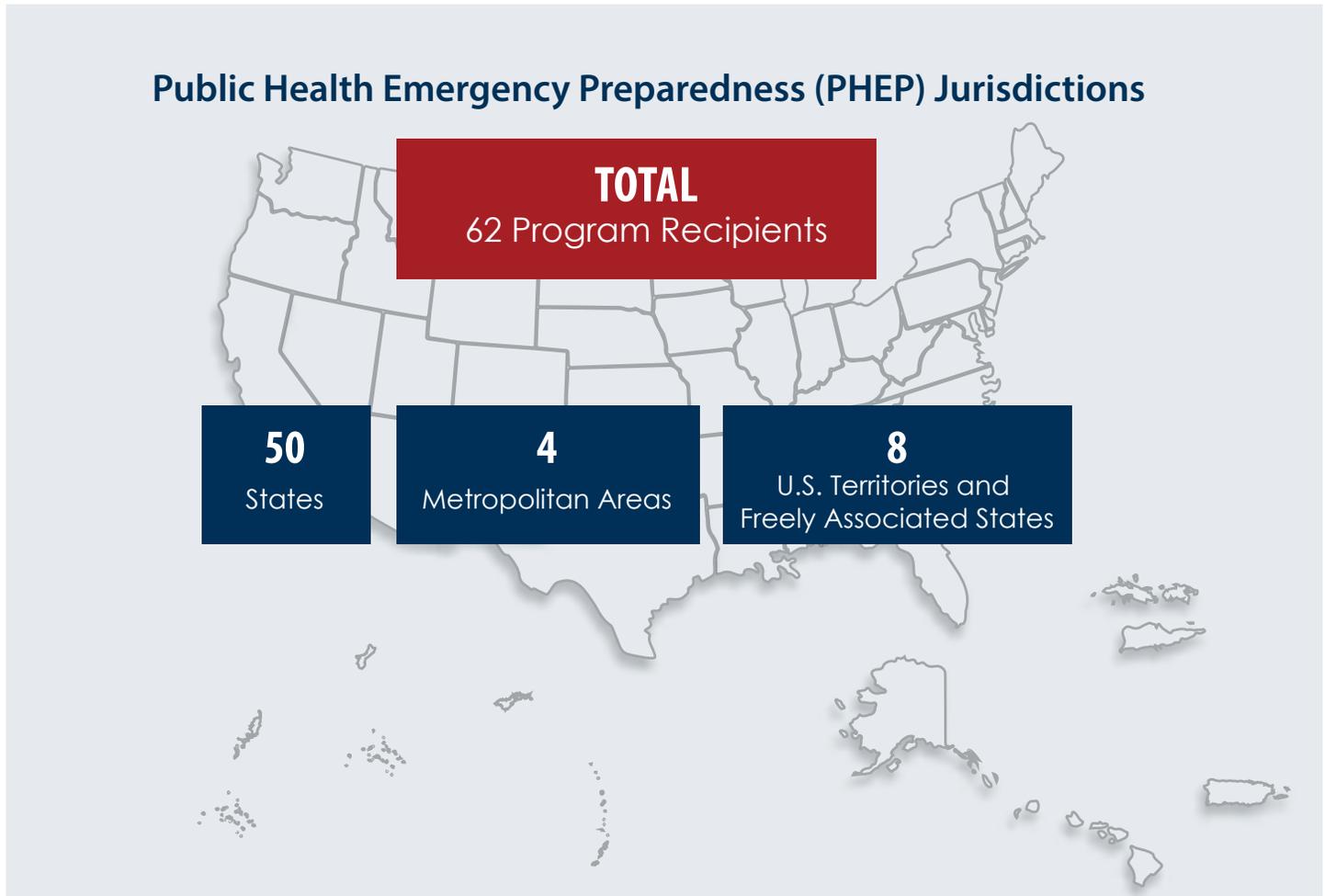
**October 2023**



**Centers for Disease  
Control and Prevention**  
Office of Readiness  
and Response

# Introduction

CDC's Public Health Emergency Preparedness (PHEP) program is a critical source of funding, guidance, and technical assistance for jurisdictional public health agencies to strengthen their public health preparedness capabilities and improve their response readiness. The PHEP program helps communities nationwide prepare for, respond to, and recover from public health threats and save lives when a public health emergency occurs.



## How do PHEP program recipients plan, organize, and prepare for public health emergencies?

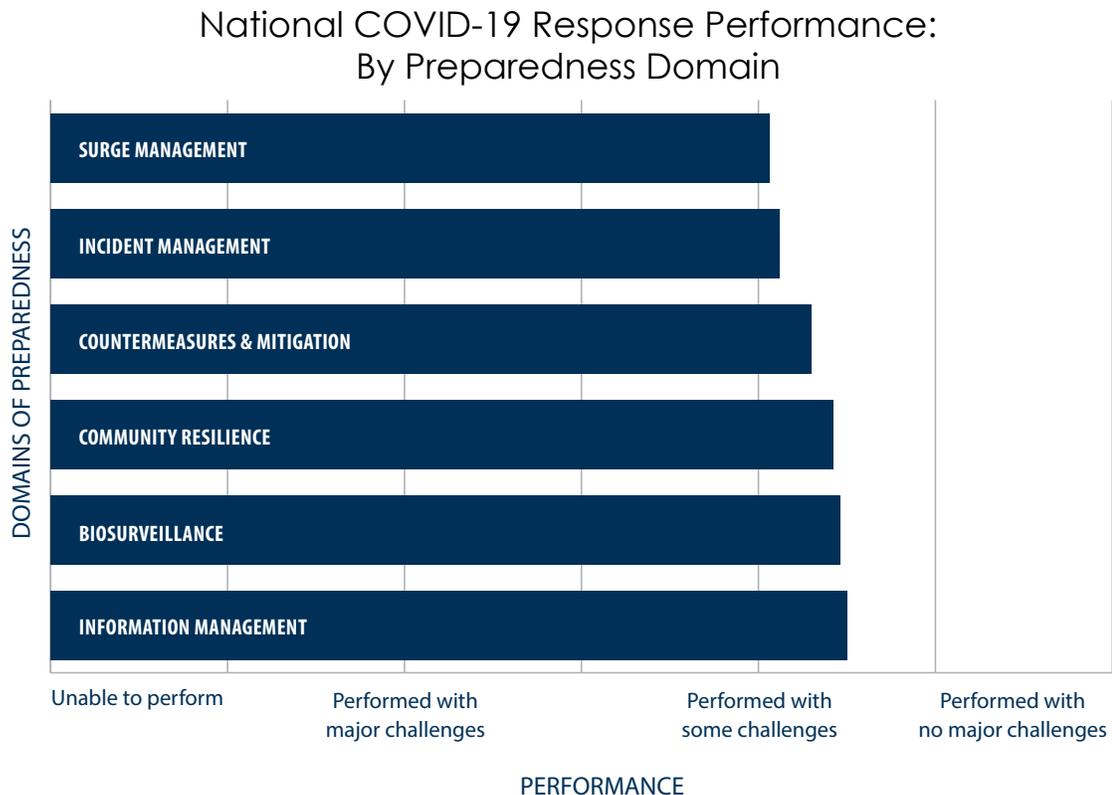
The [Public Health Emergency Preparedness and Response Capabilities: National Standards for State, Local, Tribal and Territorial Public Health](#) serve as a vital framework for jurisdictional public health agencies to operationalize and evaluate emergency responses and exercises. The 15 capability standards describe the components necessary to advance jurisdictional public health preparedness and response capacity.

## How did PHEP Contribute to the Nation's COVID-19 Response?

The COVID-19 pandemic created a unique opportunity for CDC to assess public health's readiness to respond to a national emergency. CDC's PHEP COVID-19 evaluation reviewed select activities conducted between July 2021 and June 2022 to assess how they contributed to the national COVID-19 pandemic response.

## What does this performance report tell me?

This report highlights PHEP recipients' reported performance based on national capability [standards](#) applied during the COVID-19 pandemic, as well as performance of vaccine roll-out activities and partner collaboration. The following figure summarizes PHEP recipients' performance assessment by capability domains.



## PHEP COVID-19 Response Highlights



**Capability Standards**

On average, recipients performed adequately across all six domains (some with major challenges, some without).

More than half of the response activities were identified as strengths. A response activity was identified as a strength when 85% of recipients reported performing the activity at least adequately.

On average, jurisdictions performed at least adequately across 13 of the 15 national preparedness standards.



**Vaccine Activities**

All PHEP recipients had some support role in the initial vaccine management and administration activities.

Overall, 73% of PHEP recipients had some lead role in the initial vaccine management and administration activities.

Activities included prioritizing populations during limited supply; managing vaccine supply, shipment, transportation, and overseeing storage and cold-chain management.



**Partnerships**

All recipients met the PHEP annual exercise requirement by actively engaging with at least one partner during the response that supported access and functional needs (AFN) populations.

All jurisdictions also reported active engagement with emergency management agencies and health care coalition partners during the response meeting the PHEP five-year functional exercise requirement to actively engage with these partners.

# Strengths

PHEP recipients demonstrated several strengths in their COVID-19 response, allowing them to successfully establish and implement strategies for medical countermeasure distribution and dispensing and vaccine management and distribution.



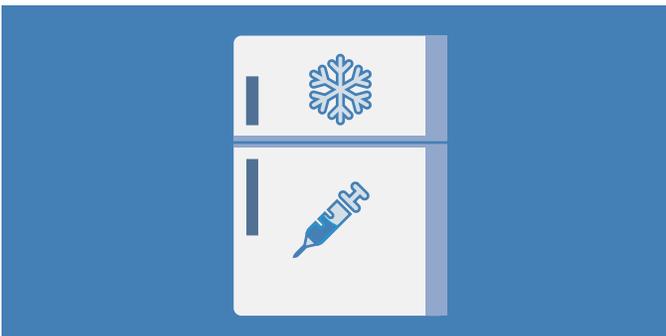
## Information Management

PHEP recipients attributed success to strong working relationships with government, community, and private partners. Partners engaged in the development and sharing of information through centralized reporting systems, joint information centers, and tailored messaging to audiences.



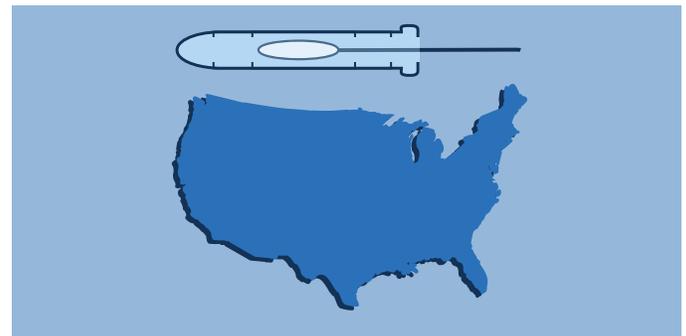
## Medical Countermeasure Dispensing

PHEP recipients bolstered vaccination administrators by rotating staff from other agencies; reallocating staff resources to support areas of need at local and tribal health departments; and using the National Guard to lead mass vaccination events and coordinate delivery, shipment, and administration of vaccines with traditional and nontraditional partners.



## Cold Chain Management

PHEP recipients adapted preparedness plans to include cold chain management training for local health departments and health care coalitions. Jurisdictions also leveraged subject matter experts to provide input on vaccine storage, handling, and administration.



## Biosurveillance

PHEP recipients supported initial statewide testing for suspected exposures, developing robust contact tracing systems and procuring equipment for enhanced laboratory testing.

# Areas for Improvement

On average, jurisdictions performed *at least adequately* across 13 of the 15 national preparedness standards and conducted response activities without any major challenges. However, two capabilities were identified as being performed, on average, *less than adequately*:



**Responder Safety and Health:** The long duration of the COVID-19 pandemic response created issues with staff recruitment, retention, and rotations. Specifically, recipients noted a lack of mental and behavioral health support and resources for frontline responders.



**Medical Surge:** Recipients had challenges sustaining emergency operations coordination due to personnel and resource shortages.

While PHEP recipients reported, on average, adequately performing response activities, several factors including the uncertainty and duration of the pandemic had a devastating impact on the public health workforce.

To combat future public health emergencies, PHEP recipients must improve readiness, response, and recovery capacity by efficiently meeting public health surge management needs. PHEP recipients will also need to enhance public health's workforce capacity through increased recruitment and retention of personnel and enhanced mental and behavioral support for staff.

## Advancing Response Readiness

To address these and other lessons learned from COVID-19 pandemic, CDC has developed a new Public Health Response Readiness Framework that will guide the PHEP program over the next five years. Designed to meet the challenges of future public health threats and advance public health response, the framework intends to direct the focus and resources of PHEP recipients toward the most critical components of response readiness. Grounded in the 15 preparedness capabilities, the framework focuses on 10 essential response priorities to help recipients determine what specific response actions are needed to ensure response readiness in the future. This next generation of the PHEP program will better equip both CDC and PHEP jurisdictions to protect and enhance the health and response readiness of communities nationwide.

### Public Health Response Readiness Framework

2024-2028 PHEP Program Priorities - Defines Excellence in Response Operations

