

DSLRL

FRIDAY UPDATE

November 8, 2024

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



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- **November 18** – [Recipient Work Plan Reporting Tool Training](#) (9 a.m. to 10:30 a.m. EST)
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Upcoming Deadlines

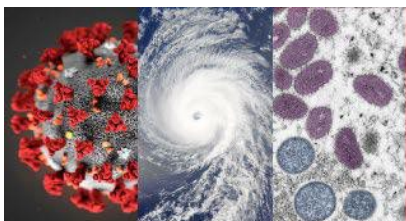
- **November 22** – PHEP DA Personnel Requests



PHEP Cooperative Agreement Updates

Direct Assistance Personnel Requests Due November 22

Friday, November 22, is the deadline for PHEP recipients to submit direct assistance (DA) personnel requests to CDC. Recipients must contact their project officers to obtain the DA personnel request forms. The November 1 DSLR Friday Update indicated that CDC planned to update the request form to reflect the PHEP program’s new focus on the 10 Response Readiness Framework (RRF) priority areas. Since then, CDC has determined that it will continue to use the current DA personnel request form. Recipients will use this form to renew current DA personnel assignments and to request additional personnel, such as Preparedness Field Assignees (PFAs) or Career Epidemiology Field Officers (CEFOs). As a reminder, CDC centrally funds one CEFO and one PFA per state and directly funded locality, and three regional CEFOs for the Caribbean and Pacific jurisdictions.



Emergency Response Activities

Next CDC Response All-STLT Update Call to Be Held November 12

The next CDC Response All-STLT Update Call will be held at **1 p.m. EST on Tuesday, November 12**. Hear from subject matter experts who will provide updates on CDC's emergency response-related activities, including:

- CDC 2024 Highly Pathogenic Influenza A(H5N1) Response Update
- CDC Marburg/Lassa Fever Response Update
- CDC Dengue and Oropouche Response Update
- CDC Mpox Response Update

A portion of the time will also be allotted to answer participants' questions regarding the presented topics. A replay of the webinar will be offered at 3 p.m. EST on Wednesday, November 13.

Participant Information

Dial-In: (646) 828-7666 (Audio Only)

Meeting ID: 161 016 7208

Passcode: 46217352

Access Link: <https://cdc.zoomgov.com/j/1610167208?pwd=Y1h2QWp5SFJDZlhnU2NoeDZrT21JUT09>

The cadence of this call has changed to two times a month. To subscribe to the listserv to continue to receive updated invitations for the CDC All-STLT Update Call and the replay, please email eocevent375@cdc.gov.



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Preparedness and Response Resources

November 14 COCA Call to Discuss Influenza Prevention and Treatment in Children

CDC will conduct a Clinician Outreach and Communication Activity (COCA) call from **2 p.m. to 3 p.m. EST on Thursday, November 14**. During this COCA call, presenters will provide an overview of influenza prevention and treatment recommendations for the 2024-2025 season from the American Academy of Pediatrics (AAP) and CDC.

Materials for the call will be available on the [COCA Call webpage](#) in the "Call Materials" section. The presentation slides will be available the day of the call, and the call recording will be posted a few hours after the live event ends. Continuing education credits will be offered for this COCA call.

Participant Information

Dial-In: (646) 828-7666 (Audio Only)

Meeting ID: 161 973 2315

Passcode: 254767

Access Link: <https://www.zoomgov.com/j/1619732315>

CDC's Text Illness Monitoring System to Close in April 2025

CDC's contract that has provided approximately 20 state health departments and additional local health departments with access to a text illness monitoring (TIM) system will expire on April 14, 2025, and will no longer be available through CDC for jurisdictional use after this date. This system is separate from any text-based illness monitoring system that CDC is developing for the Marburg Response.

Although this system has been helpful for jurisdictions through several responses, including Zika, measles, influenza A/H5N1, mpox, and COVID-19, there are limits to its utility. Many jurisdictions are successfully employing text-based illness monitoring systems other than the legacy TIM system. While the current system will be available for use by states and jurisdictions through April 14, 2025, no new enhancements or features will be added to the system. However, CDC will continue to work with jurisdictions and the vendor to address any identified problems with the current system's operation. In addition, for the duration of the legacy TIM system contract, CDC has procured additional licenses for jurisdictional users, given that limited user licenses were a recent challenge.

CDC is exploring the use of One CDC Data Platform (1CDP) to support future text illness monitoring capabilities and plans to deploy text illness monitoring capabilities for the Marburg response as a pilot project. For more information on 1CDP, please contact onecdcplatform@cdc.gov. In addition, in the coming fall and winter season, CDC will engage state epidemiologists and other key staff from the jurisdictions who have been directly involved in monitoring efforts to inform potential development of 1CDP text illness monitoring beyond current response use cases.

Jurisdictions may be able to use other CDC funding, such as the PHEP cooperative agreement, the Public Health Infrastructure Grant, and the Epidemiology and Laboratory Capacity Program, to procure and implement alternative monitoring systems. For more information on potentially using existing funds, jurisdictions should contact their project officers for these programs.

For questions or concerns about the current system, jurisdictions can contact timsupport@cdc.gov. Jurisdictions with questions regarding alternative monitoring systems can contact their health department liaison officers in DSLR or email eocevent375@cdc.gov. CDC will provide interested jurisdictions the current text monitoring requirements so they can explore alternatives.



News You Can Use

ASPR Launches Public Health Cybersecurity Readiness Survey

ASPR's Office of Critical Infrastructure Protection has launched the [Public Health Cybersecurity Readiness Survey](#). This initiative aims to assess the cybersecurity preparedness of state, tribal, local, and territorial (STLT) public health agencies, their readiness to address cyber threats, and their specific needs for support. This voluntary research survey, developed through a collaboration between public and private sectors, presents a unique opportunity to evaluate the current state of readiness within this subsector and to identify avenues for enhancing its resilience against evolving cyber threats. Insights gathered will help shape strategies to enhance resilience against cyber threats, guide grant funding recommendations, and inform key policies within the public health sector.

The anonymous survey closes December 2.

CDC Celebrates FluSurv-NET's 20th Anniversary

[CDC recently marked the 20th anniversary of FluSurv-NET](#), the Influenza Hospitalization Surveillance Network, which has been essential in tracking influenza-associated hospitalizations across the United States. Established in response to rising pediatric flu deaths in the 2003-2004 season, FluSurv-NET has evolved into a crucial resource for assessing the impact of influenza on various populations.

Throughout its two decades, FluSurv-NET has provided vital data on flu hospitalizations, helping to calculate hospitalization rates and assess seasonal severity. For the 2023-2024 season, the CDC estimates between 34 million to 75 million flu cases and up to 100,000 deaths.

Contributing to flu research through 60 high-impact publications since 2020, FluSurv-NET was one of the first platforms to publish data showing that flu vaccination helps reduce serious flu illness in hospitalized people who had been vaccinated. Additionally, FluSurv-NET has highlighted health disparities, showing higher hospitalization rates among Hispanic, Black, American Indian, and Alaska Native populations.

FluSurv-NET's adaptability was evident during the COVID-19 pandemic when it supported monitoring for COVID-19-associated hospitalizations. Covering more than 30 million people—about 9% of the U.S. population—FluSurv-NET remains a vital tool in the fight against influenza.



Online Resources

CDC MMWR Reports

- [Morbidity and Mortality Weekly Report, November 8](#)
- [Progress Toward Global Dracunculiasis \(Guinea Worm Disease\) Eradication, January 2023–June 2024](#)
- [Personal Protective Equipment Use by Dairy Farm Workers Exposed to Cows Infected with Highly Pathogenic Avian Influenza A\(H5N1\) Viruses — Colorado, 2024](#)
- [Serologic Evidence of Recent Infection with Highly Pathogenic Avian Influenza A\(H5\) Virus Among Dairy Workers — Michigan and Colorado, June–August 2024](#)
- [Notes from the Field: Ketamine Detection and Involvement in Drug Overdose Deaths — United States, July 2019–June 2023](#)
- [QuickStats: Percentage of Children and Adolescents Aged 12–17 Years Who Participated in 60 Minutes of Physical Activity Most Days or Every Day, by Daily Hours of Screen Time Use — United States, July 2021–December 2023](#)

CDC Online Resources

- **UPDATED** [Measles Cases and Outbreaks](#)
- **UPDATED** [COVID Data Tracker](#)
- **UPDATED** [Weekly U.S. Influenza Surveillance Report](#)
- **UPDATED** [RSV VaxView](#)
- **NEW** [H5 Bird Flu: Current Situation](#)

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