
Purpose
This guidance aids recipients in meeting the requirements in the COVID-19 Crisis Response Cooperative Agreement – Components A and B Supplemental Funding Interim Guidance dated March 15, 2020. Specifically, the requirements are:

- To develop a COVID-19 community intervention implementation plan consistent with CDC guidance on prevention, management, and recovery from COVID-19 that describes how the jurisdictions will achieve mitigation goals.
- To provide a summary of the community intervention implementation plan in GrantSolutions within 60 days of the Notice of Award (recipient level activity only).

Background
The goal for implementing community interventions during a COVID-19 outbreak is to:

- Minimize potential spread and reduce morbidity and mortality of COVID-19 in communities.
- Plan and adapt for disruption caused by community spread and implement interventions to prevent further spread.
- Ensure healthcare system response is an integrated part of community interventions.
- Ensure integration of community mitigation interventions with health system preparedness and response plans and interventions.
- Ensure the implementation of community mitigation interventions is coordinated across systems (e.g., local, state, federal public health) and sectors (e.g., education, healthcare, community, business, corrections).

This guidance includes consideration of actions taken at the community level, but higher levels of government often have the resources to better support the local jurisdictions and reduce the burden on response staff and budgets.

Frequently asked questions from recipients include:

- What should I include in a community intervention implementation plan?
- What should I include in my summary?

This guidance includes information that addresses both questions.

What Should I Include in a Community Intervention Plan?
This is a list of considerations for what a community intervention implementation plan may include. It provides guidance, though not strict requirements, as recipients develop plans that support community interventions that align with their jurisdiction’s whole-of-government response.

It is not intended that health departments or communities take on every one of these considerations in
their community intervention plan. It does not automatically assign the health department to this role. Planners should determine, **Does the Community Intervention Plan consider the following issues?**

- Adjusting interventions based on epidemiology, surveillance, healthcare, and public health capacity to help mitigate adverse effects or unintended consequences (e.g., failure of a key business when the threat of transmission in the community is low).
- Developing and tracking short-, medium-, and long-term outcomes of the plan.
- Communicating findings to key stakeholders throughout the period of performance.
- Consolidating and making available a list of laws, regulations, and rules that support the execution of the response in the jurisdiction as well as providing access to legal counsel.
- Engaging departments, agencies, and associations at the state level to develop supplemental guidance for their constituents in the state (e.g., departments of education and corrections, child-care organizations, state patrol, state hospital associations, Better Business Bureau).
- Highlighting partnerships with businesses and support agencies in the state that can assist with the response at the local level.
- Developing a method to access input from members of the public regarding their understanding of the reasons for the interventions, their perceptions, and the impact the interventions are having on their mental and economic health.
- Providing language translation of key guidance and messages to use in web sites, radio spots, and other media to support public health and safety.
- Providing access to case managers and workers that support programs which may provide services in need during the response. These could include programs that:
  - Provide training and technical assistance to the health facilities to include healthcare associated infections (HAI) coordinators and those who have recently worked with long-term care facilities to train on new Centers for Medicare and Medicaid Services (CMS) rules.
  - Provide access to assistance programs (e.g., Supplemental Nutrition Assistance Program (SNAP), Medicaid, Child Services, charitable food system, unemployment).
- Providing information regarding the support available from call centers both at the national and state levels and determining a method to collect information regarding concerns in the community.
- Providing details on caches of supplies and equipment available to support interventions (e.g., trailers, computers, disinfectants).
- Engaging public health, healthcare, emergency managers, legal counsel and law enforcement personnel to discuss the triggers and actions for initiating isolation and quarantine orders and for relaxing the orders.
- Assessing in their state and communities who they are planning to work with and what and where are the greatest needs including which groups of individuals at higher risk of severe illness or who may need extra assistance.
Note that plans should include the work done with agencies, organizations, and businesses that support populations at higher risk for severe illness from COVID-19. Highlighting what can be done to protect these populations can reduce the surge of patients on the healthcare system who would require a higher level of acute care. Essential service providers, caregivers and volunteers who work with these populations should know how to provide services without jeopardizing the health and safety of those populations.

Where to Find Additional Resources

CDC has developed and shared material related to community interventions in the COVID-19 Schools, Workplaces & Community Locations website. The section on “Community Mitigation Plans” includes:

- The CDC Community Mitigation Framework
- Plans currently published by select states and counties

These documents serve as good templates for a plan. Rather than duplicate information that is already contained in these documents, jurisdictions may adapt the framework and various plans to fit the needs of their population and address the requirements in the COVID-19 Response Cooperative Agreement. The sections on the website for each setting contain guidance specific to those settings and other actions related to these settings including but not limited to:

- At Home (individual and family actions)
  - Identify how pertinent information related to the spread in the community and actions necessary such as social distancing is communicated to the public.
  - Inform the public about and provide access to call centers or tools to help determine if they should see a health professional or get tested (e.g., CDCs Coronavirus Self Checker).

- At K-12 Schools, Child Care Programs: Identify the support available for families that cannot access a computer or internet to support distance learning or services available to provide healthy meals during closures. Determine support to child-care programs that remain open to care for healthcare workers children and other essential service providers.

- At Work and Essential Food and Medicine Provisions: Provide the public with information sources they can access to determine which businesses are closed or are open with service changes.

- Community and Faith-Based Organizations: Provide training (e.g., infection control, disinfecting surfaces) to members who provide support services (services, meals, checking in) to individuals at higher risk of severe illness or other vulnerable populations.

What Should I include in my Summary?

The COVID-19 Response Cooperative Agreement includes a requirement for recipients to submit a summary of the community intervention implementation plan in GrantSolutions as a grant note with the subject line “COVID-19 [Jurisdiction] Community Intervention Plan” within 60 days of the Notice of Award. Recipients need not submit the entire plan but should provide an overview of actions taken to
support the implementation of interventions at the community level. If the plan is not yet complete, then the summary should include what actions the jurisdiction is still working on. Other information to include:

- Any legal or regulatory actions taken related to community interventions.
- Tailored guidance or products developed and disseminated.
- Key partners engaged in planning and execution, especially those supporting essential workers, populations at higher risk of severe illness from COVID-19, and other potentially vulnerable populations (e.g., people experiencing homelessness).
- Any promising practices or specific challenges worth sharing.

The summary needs to be at least one page long but will likely need to be longer to adequately cover the information requested.

CDC continually updates guidance as the science related to the COVID-19 response changes. The community intervention plan should be a living document, and partners in the community should know how to access the plan and know when changes are made. Communication among key leaders, public health and healthcare advisors, and members of the community is necessary for an effective response and recovery.

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i COVID-19 Crisis Response Cooperative Agreement is found at https://www.cdc.gov/cpr/readiness/00_docs/CDC-RFA-TP18-1802_Sup-Guid-COVID-19-Crisis-CoAg_Supplemental.pdf.


iii CDCs information related to those who may be at higher risk of severe illness is found at https://www.cdc.gov/coronavirus/2019-ncov/need-extra-precautions/index.html.


vi CDCs Coronavirus Self Checker is found at https://www.cdc.gov/coronavirus/2019-ncov/symptoms-testing/testing.html.