

Welcome!

We will start shortly.



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from CORI.

cori.centerforhealthsecurity.org/



CORI Community of Practice Summer Series: Creating A Culture of Continuous Improvement in Outbreak Response

A Collaborative Partnership between the Center for Outbreak Response Innovation (CORI) and State and Local Health Departments

Community of Practice Meeting

Agenda

- Introductions
 - Series Overview
 - Partner Project Spotlight: TN Department of Health
 - CORI Project Spotlight: New RedCap Template
 - Discussion
 - Next Steps
-

Community of Practice Meeting

Logistics:

- Please enter any question in the chat for the duration of the meeting
 - Cameras may remain on to encourage collaboration
 - This session will be recorded and distributed to partners
 - *Please remain muted unless talking*
-

Introductions



**Caitlin Rivers, PhD
Director**



**Crystal Watson, DrPH
Deputy Director**



**Alison Kelly
Chief of Staff**



**Eric Toner, MD
Senior Scholar**



**Lucia Millen, MPH
Associate Scholar**



**Sut Soneja, PhD
Associate Scientist**



**Elizabeth Cambell, PhD
Assistant Scientist**



**Denise Cardo
Contributing Scholar**



**Haley Farrie, MPH
Senior Analyst**



**Ameaka Fatima,
PharmD, MPH
Senior Analyst**



**Hannah Goodtree, MPH
Analyst**



**Sarah Gillani, MPH
Analyst**



**Oluremilekun Oyefolu,
MD, MPH
Post Doctoral Fellow**



**Sarah S. Firestone,
Research Program
Manager**



**Amanda Hart
Senior Program
Coordinator**



**Athena White
Communications
Manager**



**Sharell Bryant,
Program Operations
Coordinator**



**Tommy O'Keefe, DBA(c),
Financial Manager**

Series Overview

Purpose & Goals

The Community of Practice (CoP) Summer Series is designed to enhance the collective capacity of health departments to respond to outbreaks swiftly and effectively using modeling, analytics, and decision support tools.

Facilitate real-time sharing of best practices and lessons-learned for modeling, analytics and outbreak response decision-making.

Promote the development of an expanded network of state, tribal, local, and territorial health departments and collaborative problem-solving for complex outbreak scenarios.

Enhance the dissemination of resources and tools across jurisdictions.

Improve overall preparedness and response capabilities among participating health departments.

Develop a culture of continuous improvement for outbreak response by sharing lessons learned and actionable solutions

Topic Areas

Outbreak response tools
(e.g., RedCap Projects,
dashboards, and response
template protocols, press
releases, and more.)

Modeling and analytic tools
(e.g., models and analyses
developed by other health
departments, infectious
disease modelers, etc.)

Decision support tools (e.g.,
risk assessments, guidance
documents)

Quality improvement
principles

Audience

The CoP will primarily serve epidemiologists, data analysts, outbreak response teams, emergency preparedness personnel, and decision-makers from local, state, and territorial health departments. *The CoP is limited to existing CORI health department partners at this time to serve as a pilot for a potentially larger CoP for health department outbreak response in the future.*

Roles

CORI

- Develop, coordinate, and facilitate all meetings, as well as any outputs generated as a result of the CoP.
- Work with partners to develop the evidence-base for the use of modeling in outbreak responses.
- Facilitate collection and distribution of tools and resources.
- Facilitate specific collaborative projects to focus on common outbreak processes or challenges, as driven by partner interests and needs.

Members

- Note: CoP members are encouraged to participate in the following ways, depending on their availability and interests
- Share operational challenges during outbreak responses and resources needed to enhance outbreak preparedness and response, modeling, and analytics.
- Share lessons learned from their responses and tools they have developed and found helpful.
- Provide feedback on outbreak response guidelines, protocols, and tools being developed by their peers.

Activities and Structure

Four interactive summer sessions (60 minutes each) on the topic areas requested by partners

News and Updates: Briefings on emerging outbreaks and response strategies through the CORI digest and risk assessments for critical diseases.

Resource Library: A centralized repository for guidelines, protocols, and tools.

Collaborative Projects: Joint initiatives to address common challenges

Summer Schedule

Summer Series Theme: *Data Collection, Analysis, and Visualization Tools for Decision-making*

- **Key Topics & Presenters**

- RedCap for Outbreak Response: TN Department of Health & CORI
- Surveillance Indicator Dashboard: Carnegie Mellon University DELPHI Group
- Measles Outbreak Simulation Dashboard: University of Texas at Austin
- Presenters: Minnesota Department of Health & University of Minnesota

- **Dates**

- Friday, April 25 12:00- 1:00
- Friday, June 6th 12:00-1:00
- Friday, July 18th 12:00-1:00
- Friday, August 15th 12:00-1:00

Partner Presentations



REDCap for Measles Response:

Development Tricks & Deployment Takeaways

April 25, 2025



Project Development

Sarah Winders

Vaccine Preventable Diseases Deputy Director
Tennessee Department of Health

REDCap Project Overview



Each record is either
a case or a contact

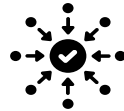
*can move from
contact → case*



Staff from the state &
local health departments
have access



External code for
IIS matching and
upload of results



Captures all info in
one place

*immunization history,
contact tracing, lab, clinical,
epi classifications*



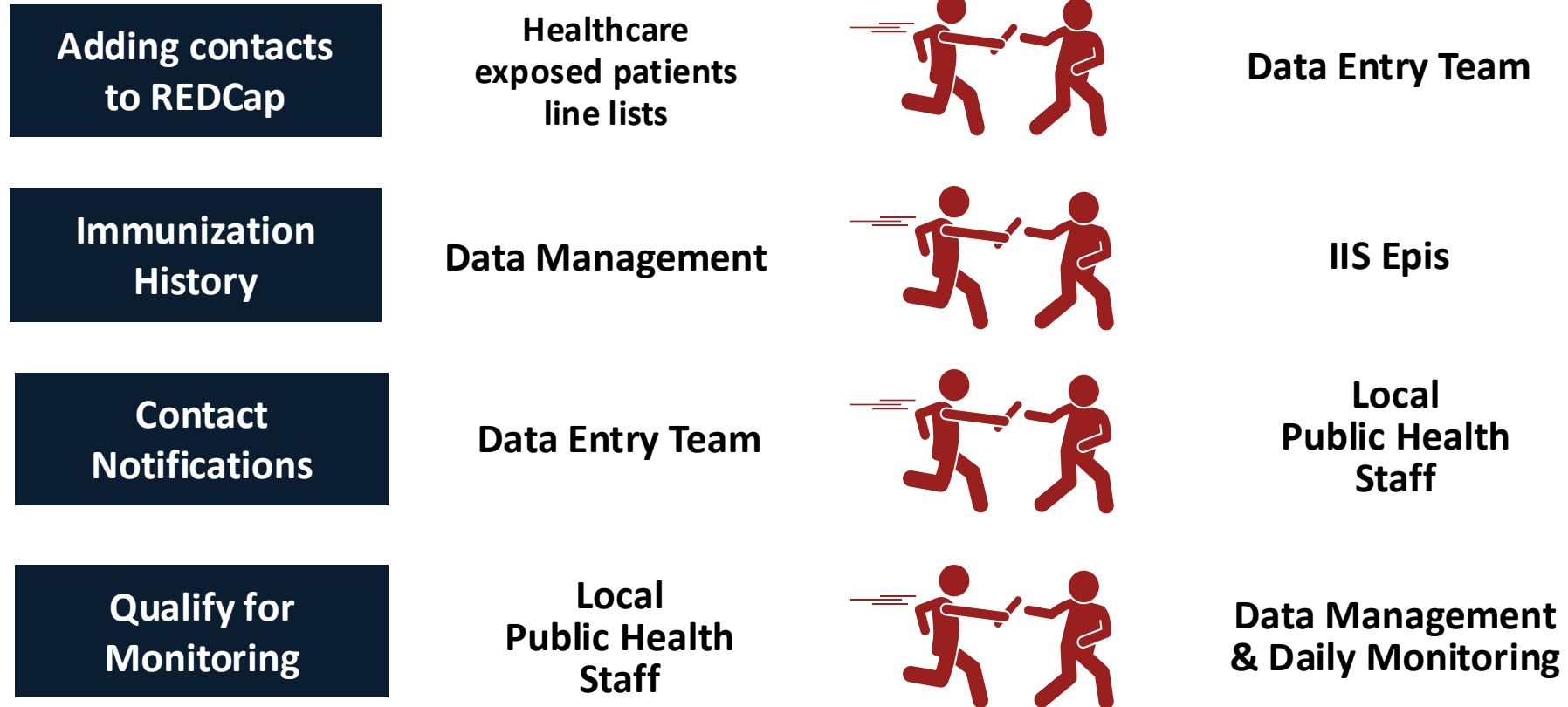
Survey for active
daily monitoring

*self-completed survey
or PH phone call*

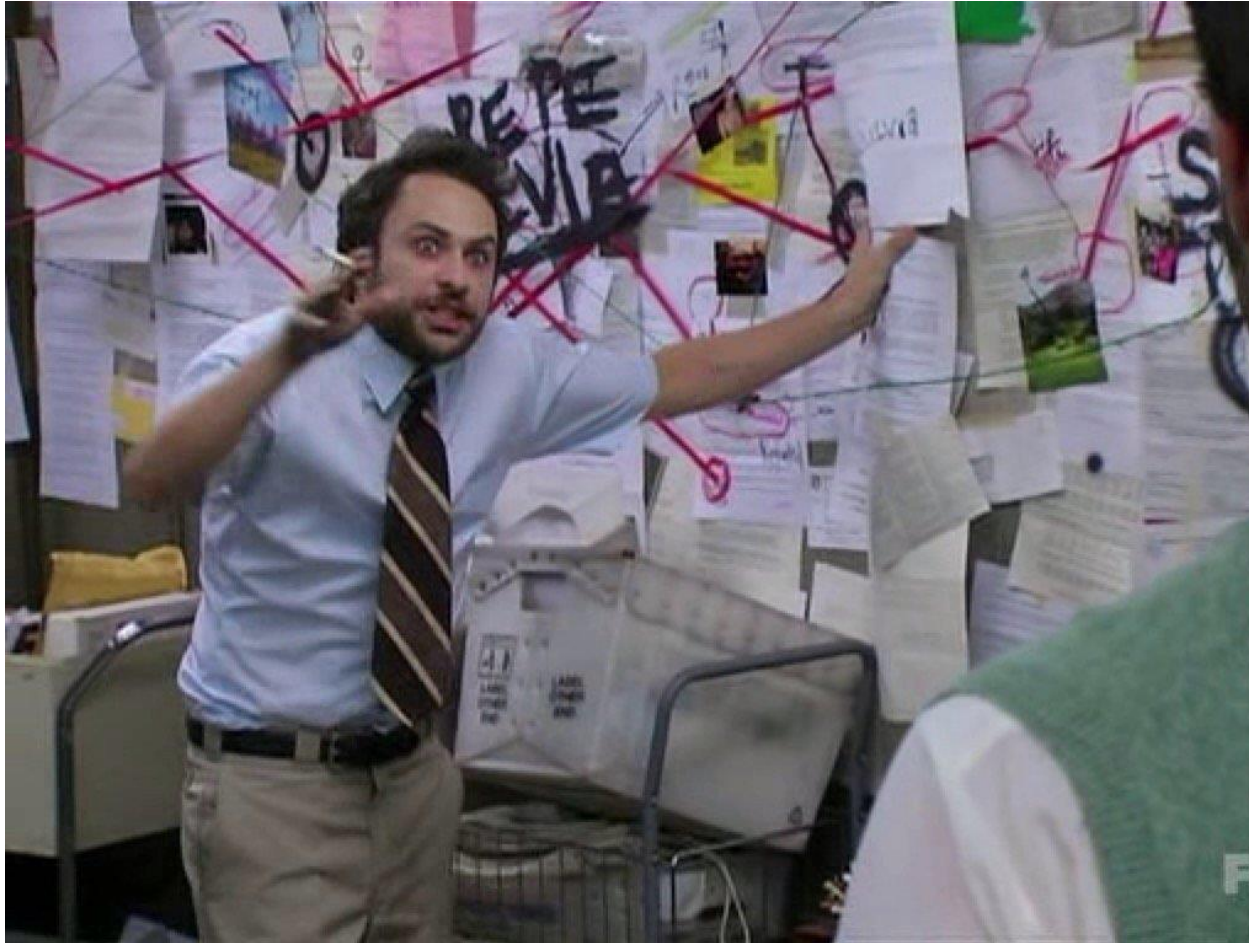


Data connected
to Tableau
for visualizations &
dashboard for website

Dynamic Response – A Relay Race



BTS – Project Development



Cases & Contacts

Case Example

Investigation Classification for REDCap Branching Logic



For purposes of REDCap branching logic, which type of investigation will be held for this individual?

  Case ▼



Contact Example

Investigation Classification for REDCap Branching Logic

For purposes of REDCap branching logic, which type of investigation will be held for this individual?

  Contact ▼



Exposed to a(n)...

  ☒ TN Case ☐ Out of State Case

[reset](#)

Did this patient change from a **contact** to a **case** at any point?

If yes, remember to change the previous question to "Case" so that all REDCap forms become available to enter data.

  ☐ Yes ☒ No

[reset](#)

Cases & Contacts

Contact → Case Example

Investigation Classification for REDCap Branching Logic

For purposes of REDCap branching logic, which type of investigation will be held for this individual?

☐ Contact

Exposed to a(n)...

☒ TN Case ☐ Out of State Case [reset](#)

Did this patient change from a contact to a case at any point?

If yes, remember to change the previous question to "Case" so that all REDCap forms become available to enter data.

☒ Yes ☐ No [reset](#)

When did this change occur?

M-D-Y

What information prompted the change?

Link Contacts to Cases

Epi-linked to a known case?	<input checked="" type="radio"/> Yes <input type="radio"/> No	reset
Linked to	TEST PATIENT TEST (1995-09-07) Record ID: ▼	

Note:

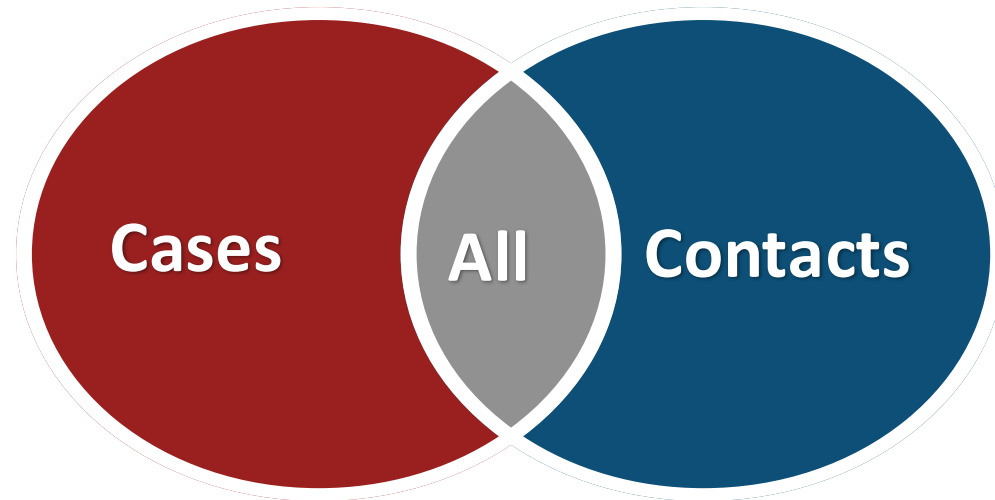
this dropdown is a SQL field, which usually needs coded by a REDCap administrator

sql




```
SELECT a.record, CONCAT_WS(' | ', CONCAT_WS(' ', max(if(a.field_name = 'firstname', a.value, NULL)), max(if(a.field_name = 'lastname', a.value, NULL)), CONCAT('(', max(if(a.field_name = 'dob', a.value, NULL)), ')'), CONCAT('Record ID: ', max(if(a.field_name = 'record_id', a.value, NULL))), max(if(a.field_name = 'address_tn_region', a.value, NULL)), max(if(a.field_name = 'pt_case_status', a.value, NULL))) ) as value FROM redcap_data a WHERE a.project_id=3019 AND a.event_id=7968 GROUP BY a.record ORDER BY value;
```


Form Display Logic

Initial Reporting Source
Demographics & Contact Info
Immunization History
Initial Symptom Info
Measles Complications
Contact Tracing
Lab Tests
Exposure, Prior Immunity & PEP
Quarantine/Furlough Algorithm
Daily Monitoring Survey
Upload Documents
Final Case Classification



Calculated Fields

Exposure Period <i>starting at 21 days prior to rash onset</i>	
Date	Locations Visited
1st Day: 02-24-2025 	<div>Enter details of all public venues and transportation, and include time of day for each</div> <div>Expand</div>
2nd Day: 02-25-2025 	<div>Enter details of all public venues and transportation, and include time of day for each</div> <div>Expand</div>
3rd Day: 02-26-2025 	<div>Enter details of all public venues and transportation, and include time of day for each</div> <div>Expand</div>

Action Tags / Field Annotation (optional)

@CALCDATE([casecontact_interv_arm_1][rash_onset],-21,'d')

Learn about [@ Action Tags](#) or [using Field Annotation](#)

Calculated Fields / Branching Logic

Step 1

Active Monitoring Flag

(Calculated Field, Hidden)

1 – Qualifies for monitoring
0 – Does NOT qualify

Logic Editor

Use the text box below to compose your logic, calculation, action tags, etc. If you need more space, click the Fullscreen Mode button to enlarge the text box. When you are finished, click the 'Update' button to minimize the Editor window. Learn how to use [Smart Variables](#) [Special Functions](#) [Action Tags](#) or open the [Codebook](#)

```
IF ( ([healthcare_yn]=1 and [healthcare_priorimm_yn]='0')
OR
([healthcare_yn]='0' and [nonhealthcare_priorimm_yn]='0')
OR
([healthcare_yn]='0' and [nonhealthcare_priorimm_yn]='0'
and
([pep_yn]=0 or [pep_type] = 2 or [pep_type] = 3)
),1,0)
```

Step 2

Multiple Versions of Algorithm Table

(Branching Logic based on
Calculated Field)

REDCap Record ID 623

Does this person need to furlough or quarantine?
Link to TDH's full guidelines: [2024 Guidelines for Measles Quarantine/Isolation/Furlough](#)

YES - This person must be furloughed from work from Day 5 through Day 21 after last exposure.

Reasoning: healthcare worker with no documented evidence of prior immunity and did not receive IG PEP

Exposure Date	Initial Interview	Furlough & Daily Monitoring	Resume Normal Activities
04-01-2025	04-05-2025	04-06-2025 through 04-22-2025	04-23-2025

Calculated Fields / Branching Logic

Example 2

Does this person need to furlough or quarantine?

Link to TDH's full guidelines: [2024 Guidelines for Measles Quarantine/Isolation/Furlough](#)

YES - This person must quarantine
through Day 28 after last exposure.

Reasoning: non-healthcare worker with no documented evidence of prior immunity and recieved IG PEP

Exposure Date	Initial Interview	Quarantine & Daily Monitoring	Resume Normal Activities
04-01-2025	04-05-2025	04-06-2025 through 04-29-2025	04-30-2025

Calculated Fields / Branching Logic

Example 3

Does this person need to furlough or quarantine?

Link to TDH's full guidelines: [2024 Guidelines for Measles Quarantine/Isolation/Furlough](#)

No restrictions needed for this person.

Reasoning: non-healthcare worker with either:
documented MMR x2, +rubeola IgG, or born before 1957

Vaccine History – IIS Match

Example 1

Automatic TennIIS Data Pull
Vaccination History

TennIIS Vaccination History

TennIIS Match Type

Exact: Name, DOB, Address

Vacc Hx Available?

Measles Vaccination History Found

Patient SIIS ID: 6069350

Name

DOB

Address

Dose	Vaccination Date	Description
1	05-14-1993	MMR
2	03-22-2000	MMR
3	_____	_____

Vaccine History – IIS Match

Example 2

Automatic TennIIS Data Pull Vaccination History

TennIIS Vaccination History

This is a possible TennIIS patient match, please confirm vaccination history.

TennIIS Match Type

Possible: Name, DOB

Vacc Hx Available?

Measles Vaccination History Found

Patient SIIS ID: 2845249

Name

DOB

Address

Dose	Vaccination Date	Description
1	01-18-2000	MMR
2	09-02-2003	MMR
3	_____	_____

Vaccine History – IIS Match

Example 3

Automatic TennIIS Data Pull
Vaccination History

A patient match was not found in TennIIS. Please gather vaccination history.

Example 4

Automatic TennIIS Data Pull
Vaccination History

TennIIS has not yet been checked for a patient match.

Vaccine History – Manual Data Entry

Manual Source Checking Vaccination History	
Has this person received a measles-containing vaccine?	<div><div>H</div><div><input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> Unknown</div><div>reset</div></div>
Total Number of Doses Received	<div><div>H</div><div><input type="text" value="2"/></div></div>
Dose 1 Date	<div><div>H</div><div><div><input type="text" value="04-02-2001"/><div><div>31</div></div></div><div>Today</div><div>M-D-Y</div></div></div>
Dose 2 Date	<div><div>H</div><div><div><input type="text" value="06-01-2005"/><div><div>31</div></div></div><div>Today</div><div>M-D-Y</div></div></div>
Data Sources Used for Immunization History	<div><div>H</div><div><div><input type="checkbox"/> Immunization Registry (TennIIS)</div><div><input type="checkbox"/> Medical Records</div><div><input checked="" type="checkbox"/> Patient Provided Copy of Vaccine Record</div></div></div>
REMINDER: verbal attestation does not qualify	

Branching Logic

Valid proof of immunity
Healthcare workers

Evidence of Prior Immunity
Based On Healthcare Worker Status
(Helpful Tip: Refer back to Immunization History if needed)

Is this person a healthcare worker OR do they work in a healthcare setting (ex. janitorial, admin, facility staff)? ☒ Yes ☐ No reset

* must provide value

Does this person have evidence of prior immunity against measles?
If the patient reports prior immunization but cannot provide proof/documentation, please select "No" for now so that they can be appropriately monitored until documentation is provided!

☒ Yes ☐ No reset

* must provide value

If yes, select type:

☐ Documentation of 2 MMR vaccines
☐ Documented positive Rubeola IgG reset

* must provide value

Branching Logic

Valid proof of immunity
Non-healthcare workers

Evidence of Prior Immunity
Based On Healthcare Worker Status
(Helpful Tip: Refer back to Immunization History if needed)

Is this person a healthcare worker OR do they work in a healthcare setting (ex. janitorial, admin, facility staff)? ☐ Yes ☒ No reset

* must provide value

Does this person have evidence of prior immunity against measles?
If the patient reports prior immunization but cannot provide proof/documentation, please select "No" for now so that they can be appropriately monitored until documentation is provided! ☒ Yes ☐ No reset

* must provide value

If yes, select type: reset

* must provide value

- ☐ Documentation of 1 MMR vaccine
- ☐ Documentation of 2 MMR vaccines
- ☐ Documented positive Rubeola IgG
- ☐ Born before 1957
- ☐ Lab confirmation of prior measles infection

Daily Monitoring Survey

Text Consent:

Since this individual meets criteria for active/daily monitoring...

Do they consent to receive daily texts containing a link to a survey to complete which will ask if they have experienced any new symptoms?

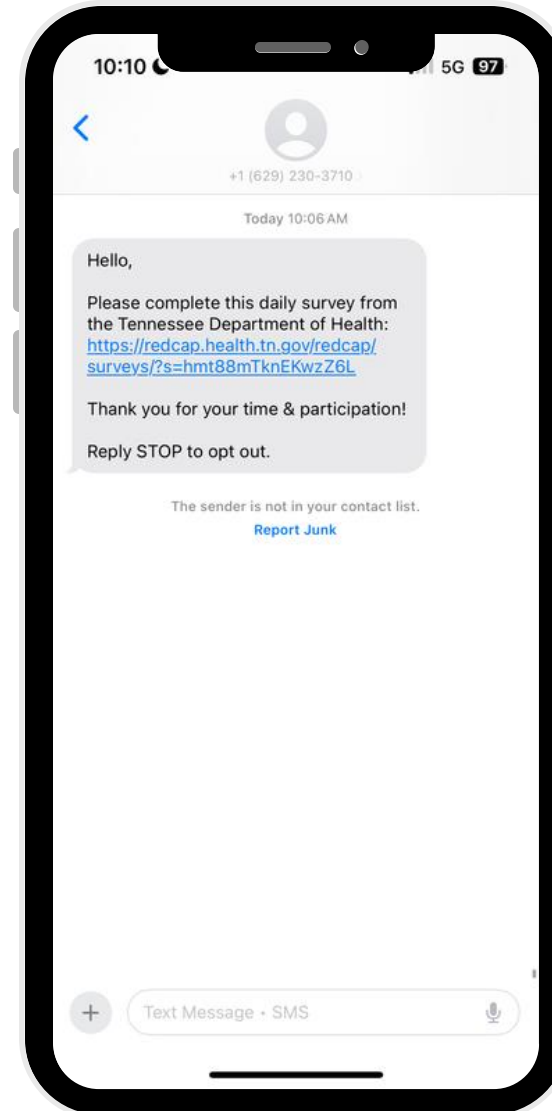
Texts will be sent at 10:00AM Central each day of their monitoring period, and a reminder text will be sent at 3:00PM if they have not responded.

If yes, please make sure the phone number on the Demographics page is up-to-date.

For reference, this is the phone number they can expect to receive these texts from: (629)-230-3710

- ☒ Yes, they are agreeable to a texted daily survey
- ☐ No, they prefer a daily phone call check-in
- ☐ No, they have requested to not be contacted again

reset



Daily Monitoring Survey

1. Click on survey link in text message
2. Survey opens in browser
3. Respondent – self or parent/guardian
4. Date of birth verification
5. Symptoms – yes/no
6. Date/time stamp
7. Submit

The image shows a smartphone screen displaying a web browser with the URL `redcap.health.tn.gov`. The page is the "Daily Symptom Monitoring Survey" from the Tennessee Department of Health. It includes instructions about the survey's purpose and a reminder to provide immunization records. At the bottom, there are two buttons for selecting the respondent: "Self (TEST PATIENT)" and "Parent/Guardian of TEST PATIENT", with a "reset" link and navigation icons.

10:10 5G 96

Messages

redcap.health.tn.gov

TN Department of Health

Daily Symptom Monitoring Survey

This survey is for daily symptom monitoring.

If you do not respond to this survey by 3:00 PM CDT, a reminder may be sent or someone from your health department may contact you to check in.

Reminder: If you are able to locate immunization records or other proof of prior immunity, please provide those documents to public health when you're able and daily text surveys may stop.

Who is completing this symptom monitoring survey?

* must provide value

Self (TEST PATIENT)

Parent/Guardian of TEST PATIENT

reset

< >

Daily Monitoring Survey

1. Click on survey link in text message
2. Survey opens in browser
3. Respondent – self or parent/guardian
4. **Date of birth verification**
5. Symptoms – yes/no
6. Date/time stamp
7. Submit

10:11 Messages redcap.health.tn.gov 5G 96

Who is completing this symptom monitoring survey?

* must provide value

Self (TEST PATIENT)

Parent/Guardian of TEST PATIENT

reset

For verification purposes, please enter your date of birth

09-07-1995 MDY

Thank you for confirming your date of birth.
You may now proceed with the daily symptom monitoring survey below.

Symptom Monitoring

Have you experienced any of the following symptoms in the last 24 hours?

Fever

* must provide value

Yes

No

reset

Daily Monitoring Survey

1. Click on survey link in text message
2. Survey opens in browser
3. Respondent – self or parent/guardian
4. Date of birth verification
5. **Symptoms – yes/no**
6. Date/time stamp
7. Submit

9:28
Messages redcap.health.tn.gov

Symptom Monitoring

Have you experienced any of the following symptoms in the last 24 hours?

Fever
* must provide value

Yes

No

reset

Cough
* must provide value

Yes

No

reset

Runny or stuffy nose
* must provide value

Yes

No

reset

Red or itchy eyes
* must provide value

Yes

Daily Monitoring Survey

1. Click on survey link in text message
2. Survey opens in browser
3. Respondent – self or parent/guardian
4. Date of birth verification
5. Symptoms – yes/no
6. **Date/time stamp**
7. Submit

9:28
Messages redcap.health.tn.gov

Red or itchy eyes
* must provide value

Yes

No

reset

Rash
* must provide value

Yes

No

reset

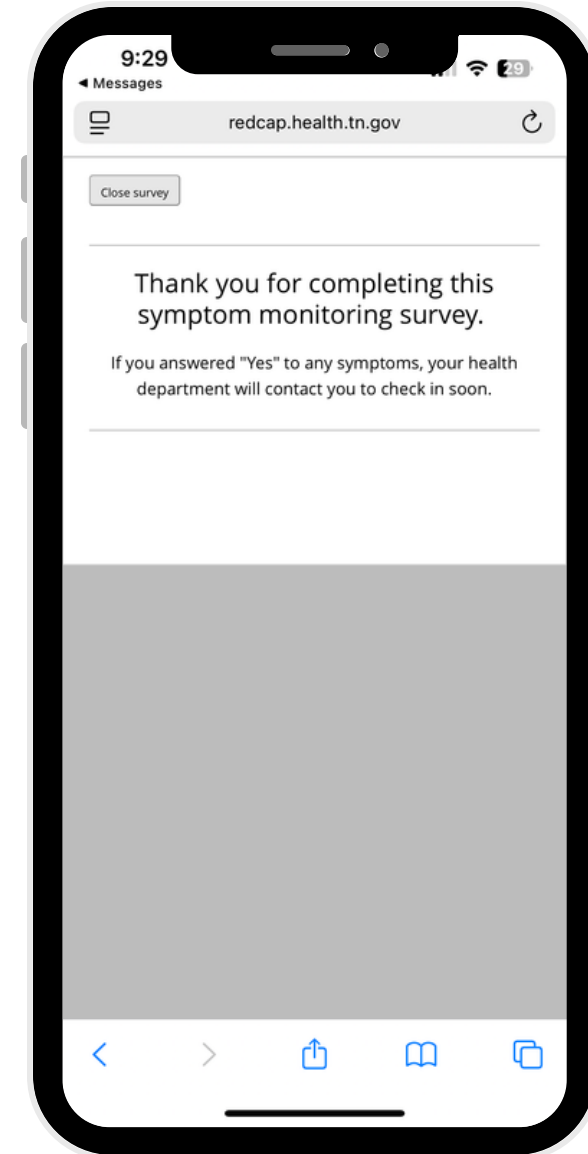
Current Time of Survey Completion
* must provide value

Now M-D-Y H:M

Submit

Daily Monitoring Survey

1. Click on survey link in text message
2. Survey opens in browser
3. Respondent – self or parent/guardian
4. Date of birth verification
5. Symptoms – yes/no
6. Date/time stamp
7. **Submit**



Alerts for Symptomatic Respondents

To: amanda.hartley@tn.gov;ep.response@tn.gov;sarah.winders@tn.gov

Subject **REDCAP ALERT** Measles Daily Monitoring Survey Respondent REPORTED SYMPTOMS [secure email]

Message: **ALERT: The following individual has completed their texted survey and reported experiencing symptoms on their daily monitoring survey**

Note for Weekend Coverage Staff Monitoring EP.response@tn.gov inbox:

- Ensure the region/metro is aware & will be following up with the patient via phone call to confirm symptoms and gather further details
- If testing will be pursued for this patient, specimen collection can be completed Monday
- Action Item: Please reply to this email and CC Sarah Winders & Amanda Hartley with updates (no need to enter data into REDCap over the weekend)

REDCap ID: [record_id]
Name: [lastname], [firstname]
Region: [address_tn_region]

Survey Info:

Who completed the survey: [survey_person]
Time Completed: [surveytime]

Fever	[fever]
Cough	[cough]
Conjunctivitis	[conjunctivitis]
Coryza	[coryza]
Rash	[rash]



Lessons from Deployment

Kimberly Garret

Regional Immunization Nurse
Mid Cumberland Regional Health Department

Pros:

-Face sheet shows number of attempts made to reach contacts

Search [Table not displaying properly](#) [?]

Event Name	Initial Notification/Interview with Patient Complete	Contact Attempt #1 Notes	Contact Attempt #2 Notes	Contact Attempt #3 Notes	Needs Accurant Search
	Yes				Yes
Case/Contact interview (Arm I: Add Case or Contact)	Unchecked	LM to call back. KGARRETT RN 3-21-25	left message. KG 3-22	Accurant request. Text message sent for callback. 3/23/25. JTRN	Checked
Case/Contact interview (Arm I: Add Case or Contact)	Unchecked	left vm 3/21 @ 1557 W. Jones, RN	Left VM. 3-22 KG	03/23/25-Accurant request. Text message sent for callback. JTRN	Unchecked
Case/Contact interview (Arm I: Add Case or Contact)	Unchecked	called 3/21@1635. Mailbox full - unable to leave message. W. Jones, RN	3/22 Went straight to VM and mailbox is full. KG	reached back out to #259, as this contact accompanied #259 to ED. #259 relayed information to this contact. Advised that we will send letter to address on file to #259, which she has agreed to give to this contact.	Unchecked
Case/Contact interview (Arm I: Add Case or Contact)	Unchecked	left vm 3/21 @ 1630.	left VM 3/22. KG	reached back out to #259, as this contact accompanied #259 to ED. #259 relayed information to this contact. Advised that we will send letter to address on file to #259, which she has agreed to give to this contact.	Unchecked
Case/Contact interview (Arm I: Add Case or Contact)	Unchecked	3-22 Attempted to call and kept ringing not able to leave message. KG	reached back out to #259, as this contact accompanied #259 to ED. #259 relayed information to this contact on 3/21/25. Advised that we will send letter to address on file to #259, which she has agreed to give to this contact.	will send letter 3/24.	Unchecked
Case/Contact interview (Arm I: Add Case or Contact)	Unchecked	Attempted to call and just kept ringing unable to leave VM. KG 3-22	reached back out to #259, as this contact accompanied #259 to ED. #259 relayed information to this contact. Advised that we will send letter to address on file to #259, which she has agreed to give to this contact.	will send letter 3/24.	Unchecked
Case/Contact interview (Arm I: Add Case or Contact)	Unchecked	3/22/2025 11:43 left	3/23/25 - text sent @ 1349. W.	Text sent 3/24/25 ACB	Unchecked

Pros:

- Quickly able to filter out checked and unchecked contacts
- User friendly
- Easily upload immunization records, titers and medical records

2) ALL Contacts
3) ALL Cases
4) ----- REGION / METRO LISTS -----
5) Working List of Contacts for MCR
6) CO's Working List of Contacts for MCR
7) Contacts for MCR (ALL)
8) MCR Contacts - Initial Call Complete
9) Contacts for NDR
10) Contacts for SCR
11) Contacts for WTR
12) Contacts for ETR
13) Contacts for CHR
14) Contacts for JMR
15) Contacts for KKR
16) Contacts for MSR
17) Contacts for NER
18) Contacts for SER
19) Contacts for SUL
20) Contacts for UCR
21) ----- TRACKING INITIAL NOTIFICATIONS -----
22) Completed Initial Notification
23) Incomplete Initial Notification (all)
24) Incomplete Init. Not. (no attempts)
25) Incomplete Init. Not. (1+ attempts)
26) Contacts Vax Records

Cons:

- September 2024 project didn't have the attempts made columns on the face sheet, that was resolved for the recent case.



Thank you!

RedCap Template Spotlight

Available REDCap Tools

- Case Investigation Form
 - Contact Monitoring Form
 - Compatible Power Bi Dashboard
- Developed using CDC case investigation and contact monitoring guidance
 - Publicly available and adaptable to local needs

Features

- Integrated script
- Pre-configured templates
- Standardized data fields
- Call logs
- Batch upload
- Automated email notifications
- Dashboard for real-time data visualization

Note to Interviewer:

- During the interview, fill in the introductory script and the questions/sections in **bold/shaded** throughout the form.
- Say the scripted text that is in italics throughout the form to introduce the different sections.
- Use Mr., Mrs., or Ms. Last Name; preferable not to use their first name
- If they are still a suspect case pending results, do not say they have measles when leaving a message or on the phone
- If the patient is not the interviewee, replace 'your' with the patient's name throughout the interview

Introductory Script: Measles Investigation

Hello, my name is [Insert name]. I am calling from the [Insert Health Department]. May I please speak to [Insert name of patient or parent]? I am calling because (PICK ONE: 1. you were identified as someone who may have had contact with measles at [location]; 2. you are suspected of having measles; or 3. you have tested positive for measles). We would like to ask you a few questions about your recent whereabouts and contacts, recent symptoms, and medical history. We would also like to ask about people you have had contact with to better understand the possible spread of the virus to others in your family and community.

We hope that your answers will help identify those with measles and stop the spread of the virus to keep everyone in the community safe. We estimate that these questions will take 20 minutes to answer. Your participation is voluntary. You do not have to answer any questions that make you uncomfortable, and you can stop at any time. The personal identifiable information you share with me today will be kept confidential and will not be shared outside of [Insert Health Department].

Would you like to continue with the questions?

INVESTIGATION BEGINS

We will now begin the interview with some general questions.

Discussion

Partner Discussion

Topic areas:

- Audience poll questions (QR Code)
 - Link here: <https://PollEv.com/surveys/s5vJfXnf0Ibh38tgt8JbY/respond>
- Questions for presenters



Next Steps

Next steps

- **Short Feedback Survey**
 - Link here: https://jh.qualtrics.com/jfe/form/SV_erLt7DpMyQ6DHUy
 - Survey will close EOD
- **Follow-up Email**
 - Meeting recording
 - Slides
 - Template files from TN Department of Health
 - Poll Results
- **Upcoming CoP Dates (all times EST)**
 - Friday, June 6th 12:00-1:00
 - Friday, July 18th 12:00-1:00
 - Friday, August 15th 12:00-1:00



Thank you.



Sign up here for
updates and
alerts from
CORI.

cori.centerforhealthsecurity.org/