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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **1. Incident Name:** 2020-0178 COVID-19 | | **2. Operational Period:** | Date From: | | | | 3/2/2020 | Date To: | 3/9/2020 |
| Time From: | | | | 0900 | Time To: | 0900 |
| **3. Assignment Identifier:** | | | **4. [Section] Personnel:** | | | | | **Contact Info:** | |
| Branch: |  | | Section Chief: | |  | | |  | |
| Group: |  | | Branch Director | |  | | |  | |
| Unit: |  | | Lab | |  | | |  | |
| Staging Area: |  | | Lab | |  | | |  | |
| **5. Resources Assigned:** | | | | | | | | | |
| Resource | Leader | | | # Staff | | Contact | | Notes and Reporting Instructions | |
|  |  | | |  | |  | | This could include who the state staff are working with at the local level | |
|  |  | | |  | |  | |  | |
|  |  | | |  | |  | |  | |
|  |  | | |  | |  | |  | |
| **6. Work Assignments:**  **For Locals to Use:**   1. Identify contact tracing staffing needs, in coordination with CBOs, within [amount of time]. 2. Coordinate and establish process for information sharing with state, local and relevant partners.   **For State Staff:**   1. Provide technical assistance for local COVID-19 response, including public information and warning, contact tracing, testing sites, resource requests, points of dispensing and medical countermeasures. | | | | | | | | | |
| **7. Special Instructions:**  **Safety:** | | | | | | | | | |
| **8. Communications** (radio and/or phone contact numbers needed for this assignment)**:**  Name/Function Primary Contact: indicate cell/radio (frequency/system/channel) | | | | | | | | | |
| **9. Prepared by:** Position/Title: | | | | | | | | | |
| *Signature: o* | | | *Date/Time:* | | | | | | |