# BP5 Design a deliverable to address gaps

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| **Sub-recipient name** | CHCANYS |
| **Deliverable number and name** | C1.H. Design a deliverable to address gaps |
| **Submit deliverable to** | **dohmhcore@health.nyc.gov** |

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| **Submit what you propose to do.** | C1.H. Design a deliverable to address gaps **| DUE DATE:** Oct 31, 2023 | **Submit to:** [dohmhcore@health.nyc.gov](mailto:dohmhcore@health.nyc.gov) | |
| **Question** | **Your response (section expands as you type)** |
| **Please provide the name of your project and as well as a brief description.** |  |
| **Rationale: What source(s) provided you with your rationale for this project (e.g.,** **strategic plan, and/or recent (e.g., BP4) risk assessment finding(s), COVID-19 and pandemic response planning, HVA and/or exercise AAR/IPs, feedback from health centers, etc.)?** |  |
| **What are your project’s goals? (Click** [**here**](https://www.programinfosite.com/nycdohmhmeetings/files/2023/09/Evaluation-Guide-for-NYCHCC-EM-Program-20230908.pdf) **for how to write goals. See page 6.)** |  |
| **What are your project’s objectives? (Click** [**here**](https://www.programinfosite.com/nycdohmhmeetings/files/2023/09/Evaluation-Guide-for-NYCHCC-EM-Program-20230908.pdf) **for how to write SMART objectives. See page 6.)** |  |
| **What are your project’s timeline and key action steps (meetings, stakeholder engagement, etc.)?** |  |

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| **Submit this final report.** | C1.H. Design a deliverable to address gaps **| DUE DATE:** June 3, 2024 | **Submit to:** [dohmhcore@health.nyc.gov](mailto:dohmhcore@health.nyc.gov) | |
| **Question** | **Your response** |
| **For each SMART objective from your project proposal, list and describe the outcomes and their impact. What did each outcome mean?** |  |
| **List the stakeholders’ (facilities and community organizations) that participated and their response to the project.** |  |
| **Given your outcomes of your project, what next steps do you propose to take?** |  |