

# **Division of Global Health Protection (DGHP) Monitoring and Evaluation – FY 2026 JG-26-0113 Partner-level Indicators**

## **Overview**

Below is a menu of DGHP M&E Partner-Level Indicators that span one technical area:

### (1) Surveillance and Epidemiology

A comprehensive indicator menu inclusive of detailed descriptions of each indicator will be provided at time of award. DGHP partner-level indicators should be incorporated into the recipient's Evaluation & Performance Measurement Plan (EPMP). The indicators shown below may change before award or in future years.

# Partner-level Indicators

## 1. Surveillance and Epidemiology

### 1.1. Strengthen Early Warning Surveillance for timely detection, notification, and response to public health threats

- 1.1.1. % of supported surveillance systems demonstrating improved capability to detect potential outbreaks
- 1.1.2. % of supported surveillance systems demonstrating improved capability to notify potential outbreaks
- 1.1.3. % of all key fields (e.g. date/time, location, source, verification status, risk level) that are consistently captured for Event-Based Surveillance/Indicator-Based Surveillance data with a goal of 70% completeness
- 1.1.4. % of events or alerts that were processed within the recommended/required timeframe (e.g. 7 days for detection, 24 hours for verification, risk assessment, and alert, 7 days for initial response) with a goal of achieving 80%
- 1.1.5. % of signals or events that pass through each Event-Based Surveillance step (triage, verification, risk assessment, and alert)
- 1.1.6. Number of countries or regions that have developed or strengthened an integrated disease surveillance approach
- 1.1.7. % of program planning and evaluation activities that utilize integrated disease surveillance data in the decision-making process

## **1.2. Develop/enhance electronic tools and interoperable systems to improve data linkages, response, and use**

- 1.2.1. % of supported surveillance and laboratory linkages demonstrating improved capacity to confirm emerging and priority pathogens
- 1.2.2. % of supported surveillance systems integrated with emergency operational system data
- 1.2.3. % of systems that meet interoperability standards by country
- 1.2.4. Number of countries supported with the development of new interoperability standards or protocols
- 1.2.5. Number of national or regional laboratory information systems integrated with public health surveillance systems
- 1.2.6. % of countries that have institutionalized data protection, cybersecurity and privacy protocols, and legal frameworks
- 1.2.7. % of program planning and evaluation activities that utilize integrated real-time IBS/EBS/laboratory data pipelines in the decision-making process

## **1.3. Improve the use of surveillance data for action**

- 1.3.1. Number of operational plans for routine monitoring and evaluation of surveillance systems developed or adapted
- 1.3.2. % of findings identified through routine monitoring and evaluation that result in actionable changes to the surveillance system
- 1.3.3. Number of use cases developed to support application of surveillance data for the control of public health threats
- 1.3.4. % of surveillance reports with improved adherence to established reporting standards and inclusion of all defined minimum data elements by country

- 1.3.5. Number of countries with newly established or enhanced alert thresholds
- 1.3.6. % of reported outbreaks identified based on alert thresholds for detection and notification
- 1.3.7. Average score achieved by participants on assessments conducted after training sessions, measuring their understanding of material presented

Performance reports will be based on which Notice of Funding Opportunity (NOFO) activities and outcomes are identified in the logic model. Performance reports will be submitted to CDC in accordance with the requirements listed under this NOFO and overall performance will be reviewed on regular technical calls as well as through joint strategic review meetings.