CATEGORY A COVID-19

CIO PROJECT PLANS

FY 2019 CIO Project Plan

CDC-RFA-OT18-1802
Strengthening Public Health Systems and Services through National Partnerships to Improve and Protect the Nation's Health

GENERAL INFORMATION			
1	**Project title (please do not use all caps; 15 words maximum):*** **Increasing Local Public Health Emergency Domestic Response Capacity to 2019 Novel Coronavirus**	2	**CIO:***
		3	**Division:*** **Office:**
4	**CIO point of contact (POC) name:*** **CIO POC email address:*** **CIO POC phone number:***		
5	**Select the target population category to receive capacity-building assistance (CBA):*** **Category A ☒ Category B ☐ Category C ☐** **Category A: Governmental Public Health Departments** – This category is focused on meeting the priority organizational-level CBA needs of one of the following health department types: state, tribal, local, or territorial. Organizational level includes, but is not limited to, business processes, system design, strategic planning, resource management, agency leadership, and governance. **Category B: Workforce Segments Across Governmental Public Health Departments** – This category is focused on meeting the priority CBA needs of one workforce segment across two or more health department types (state, tribal, local, or territorial). Workforce segments can include, but are not limited to, epidemiologists, chronic disease specialists, public health lawyers, environmentalists, informaticians, and nutritionists. **Category C: Nongovernmental Public Health Components** – This category is focused on meeting the priority CBA needs of one type of nongovernmental component of the public health system. Nongovernmental components represent, but are not limited to, community-based organizations, community health centers, primary care providers, governors, hospitals, economists, legislators, education organizations, social action organizations, and public safety agencies.		
6	**Description of the target population:* (25 words maximum)** **Note: Proposals should not build capacity for CDC or other federal agencies** The specific priority subpopulation that will benefit is local public health department officials and their staff		

PROJECT FUNDING OT18-1802 Period of Performance Length: August 1, 2018 – July 31, 2023 Budget Period Length: September1, 2019 –July 31, 2020			
7	**Proposed Project Funding:*11** **$_____(Whole Numbers Only)**		
8	**Expected Length of Project (Check one):*** ☐ **The CIO will award new funding each budget period for the remainder of the period of performance.** ☐ **The CIO will award new funding each budget period for at least two consecutive years.**		

☒ **The CIO will fund the project for one year.**

CBA PROGRAM APPROACH – NOFO LOGIC MODEL

Select the program strategies and the program outcomes the project should work toward for the length of the project

9

CBA Program Strategies (Check one or more):*

☒ **Public Health Systems Infrastructure:** Activities to improve operational capacity, such as policies and plans, administration and management, and quality improvement
☐ **Leadership and Workforce Development:** Activities to improve leadership and workforce competencies, recruitment, and retention
☐ **Data and Information Systems:** Activities to improve collection, management, interpretation, and dissemination of data to guide decision-making
☐ **Communication and Information Technology**: Activities to improve use of communication and information technology to affect health decisions and actions
☒ **Partnerships:** Activities to improve establishment and maintenance of results-driven partnerships
☐ **Laws and Policies:** Activities to improve the ability to interpret and inform laws, including statutes and regulations, and policies that affect health
☐ **Programs and Services:** Activities to improve the identification of best practices and the implementation of evidence-based/informed programs and services

10

Crisis Response Approaches (Check one or more)*

☒ **Strengthen Incident Management for Early Crisis Response**
☒ **Strengthen Jurisdictional Recovery**
☒ **Strengthen Biosurveillance**
☒ **Strengthen Information Management**
☒ **Strengthen Countermeasures and Mitigation**
☒ **Strengthen Surge Management**
☒ **Strengthen Communications**

11

CBA Program Outcomes (Check one or more):*

Public Health Systems Infrastructure:
Short-term
☒ Improved operational capacity to evaluate, manage, and improve public health systems
Intermediate
☐ Increased capability of public health systems to achieve nationally established standards
Leadership and Workforce Development:
Short-term
☐ Improved leadership capacity to identify and prioritize public health needs
☐ Strengthened core and discipline-specific public health competencies among the workforce to improve job performance
Intermediate
☐ Increased leadership decision-making to address public health needs strategically and systematically
☐ Strengthened capability of public health workforce to deliver essential public health services
Data and Information Systems:
Short-term
☐ Improved capacity of data and information systems to conduct public health monitoring and surveillance
Intermediate
☐ Increased capability to use data to inform decision-making and support evidence-based practices and policies
Communication and Information Technology:
Short-term
☐ Improved communication and information technology capacity to inform the public efficiently and effectively
Intermediate
☐ Strengthened capability to use communication and information technology to affect health decisions and actions
Partnerships:
Short-term
☒ Improved capacity to establish and maintain partnerships within and across sectors to create a shared vision of health

Intermediate

☐ Strengthened capability to respond to public health priorities collaboratively and strategically

Laws and Policies:

Short-term

☐ Increased capacity to evaluate laws and policies to affect health

Intermediate

☐ Strengthened capability to systematically apply and use laws and policies to improve health

Programs and Services:

Short-term

☐ Improved capacity to identify, prioritize, and customize relevant programs and services to address public health needs

Intermediate

☐ Increased capability to implement evidence-based/informed public health programs, policies, and services to address public health needs

PROJECT DETAILS

State the purpose of the project and provide project details for the length of the budget period (11 months).

- For the selected program strategies, describe proposed activities and provide sample process measures to track progress implementing the activities. Describe the expected outputs (resources, tools, products, etc.) and outcomes (changes to occur), and provide sample outcome measures to track progress achieving the outcomes.
- Complete the activities, process measures, outputs, budget period outcomes, and outcome measures column for each program strategy selected.

12	**Project Purpose (150 words maximum):***	The goal of this funding is to ensure the optimal response to prevention and control of novel coronavirus through the efforts of non-governmental organizations (NGOs). NGOs are uniquely positioned to strengthen response efforts, whether through mobilizing their own constituents or by providing technical assistance to public sector health departments. Non-governmental organizations have contributed to the quality, efficiency and speed of the 2019 novel coronavirus response, and are important collaborators with CDC and STLT partners. This project aims to build capacity of local health officials along with other local health department leaders: senior deputies, state legislative liaisons, Chief Financial Officers (CFOs), informatics directors, human resources and workforce development directors, environmental health directors, public health preparedness directors, strategic national stockpile coordinators, accreditation coordinators, local health department liaisons, chief legal counsel, and infectious disease directors.

Program Strategies	Activities	Process Measures	Outputs	Budget Period Outcomes	Outcome Measures
Public Health Systems Infrastructure	**Support technical assistance and training to strengthen local COVID-19 response systems and capabilities; with a potential focus on non-pharmaceutical interventions, legal authorities, traveler movement and monitoring, housing for individuals temporarily**	**Convene members and host calls and webinars with local health departments to share information, discuss promising practices, identify needs, and tools/resources** **Communicate and coordinate guidance and recommendations with public health officials, partners, and**	**Tools provided through organizational communication channels for members** **Evidence of technical assistance support provided to local public health agencies** **Develop an after-action report and**	**Strengthened local health department response capabilities to establish and maintain response systems to COVID-19** **Identified strengths and gaps to improve future response posture**	**Disseminated technical, logistical, clinical information with technical assistance support as COVID-19 recommendations emerge and change** **Strengthened processes and procedures in responding to public health emergencies**

		displaced, and wrap around services Support bi-directional information exchange between the CDC, state and local public health agencies Update organization specific ConOps plans based on response lessons learned Track and evaluate successes and barriers that impact COVID-19 response operations	stakeholders to support decision-making Identify and prioritize health departments requiring technical assistance support for COVID-19 response Create and revise existing response SOPs and processes per the gaps identified in after-action reports Review internal (organizational) and external (CDC, LHD etc.) strengths and barriers impacting response operations and report to CDC	update processes as appropriate Submit report to CDC identifying and assessing policy strengths and barriers to effective COVID-19 response		
	Leadership and Workforce Development					
	Data and Information Systems					
	Communication and Information Technology					
	Partnerships	Continue coordination with key public health non-profit partners and stakeholders Sustain collaboration with the State Coordination Task	Activate and scale-up organizational emergency response structure, devoting resources to CDC's State Coordination Task Force (SCTF) and other CDC	Assign dedicated resources to SCTF and other CDC working groups as needed Report pertinent response information compiled by the	Collaborated with COVID-19 partners to provide multidisciplinary response interventions Improved organizational or CDC guidance	Established and strengthened diverse public health partnerships with key constituency groups such as health department officials,

		Force, such as partner call participation and CDC guidance feedback and input Identify respective stakeholders to gather lessons learned and coordinate CDC tools/guidance	working groups as needed Convene local public health leaders to assist with guidance and resource development	organization to the CDC	inclusive of the local public health perspective	epidemiologists and laboratorians Coordinated implementation of evidence-based COVID-19 programs, policies and services
	Laws and Policies					
	Programs and Services					

ORGANIZATIONAL CAPACITY AND PROGRAM EXPERIENCE

13 Recipient Organizational Capacity (200 words maximum):*

The organization must have capacity to connect and communicate with local health departments and local public health officials.

14 Recipient Program Experience (200 words maximum):*

The organization must have a track record of communicating and implementing effective intervention to strengthen the response posture of local health departments

COLLABORATIVE WORK

15 Expectations for Collaboration, as applicable (200 words maximum):

The organization must establish and maintain at least one liaison to CDC's State Coordination Taskforce throughout the emergency response and work collaboratively with other response partners as appropriate.

16 Expected Subcontractual Work and Recommended Criteria for Selecting Subcontractors, as applicable (200 words maximum):

17 Will the proposed CBA benefit governmental public health agencies?

☒ Yes
☐ No

If yes, briefly describe how (200 words maximum):

	NGOs are uniquely positioned to strengthen response efforts, whether through mobilizing their own constituents or by providing technical assistance to public sector health departments.
BUDGET INSTRUCTIONS	
18	**General Instructions for Use of Funds, as applicable (100 words maximum):** **Funds will be used to cover personnel and benefit costs, travel expenses, supplies and consultant fees needed to cover work described above.**
CIO CERTIFICATION*	
19	**By submitting this project plan, I certify that my CIO currently does not maintain a comparable NOFO related to CBA. I understand it is my CIO's responsibility to pursue Office of Management and Budget (OMB) and Paperwork Reduction Act (PRA) clearance for this project. I will discuss the project with my Associate Director for Science (ADS) and initiate the appropriate clearance prior to funding.**

FY 2019 CIO Project Plan

CDC-RFA-OT18-1802
Strengthening Public Health Systems and Services through National Partnerships to Improve and Protect the Nation's Health

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12	**Project Purpose (150 words maximum):***	The goal of this funding is to ensure the optimal response to prevention and control of 2019 novel coronavirus (COVID-19) through the efforts of non-governmental organizations (NGOs). NGOs have contributed to the quality, efficiency and speed of the COVID-19 response, and are important collaborators with CDC and STLT partners. This project aims to build capacity of state health departments to respond to COVID-19 needs within their jurisdiction. Activities will target CBA needs of state health officials and leaders including senior deputies, state legislative liaisons, Chief Financial Officers (CFOs), informatics directors, human resources and workforce development directors, environmental health directors, public health preparedness directors, strategic national stockpile coordinators, accreditation coordinators, local health department liaisons, chief legal counsel, and infectious disease directors.

	Program Strategies	**Activities**	**Process Measures**	**Outputs**	**Budget Period Outcomes**	**Outcome Measures**
	Public Health Systems Infrastructure	**Support technical assistance and training to strengthen state COVID-19 response systems and capabilities; potential areas of focus include non-pharmaceutical interventions, legal authorities, traveler movement and monitoring, housing for individuals temporarily displaced, and**	**Convene members and host calls and webinars with state and territorial health departments to share information, discuss promising practices, identify needs, and tools/resources** **Communicate and coordinate guidance and recommendations with public health officials, partners, and**	**Tools provided through organizational communication channels for members** **Evidence of technical assistance support provided to US states, territories AND freely associated states** **Develop an after-action report and**	**Strengthened state and territorial public health jurisdiction, response capabilities to establish and maintain response systems to COVID-19** **Identified strengths and gaps to improve future response posture**	**Disseminated technical, logistical, clinical information with technical assistance support as COVID-19 recommendations emerge and change** **Strengthened processes and procedures in responding to public health emergencies**

		wrap around services **Support bi-directional information exchange between the CDC, state and local public health agencies** **Partner with a national laboratory organization to advance the development of testing methods, technologies, informatics systems, and training to assure quality laboratory testing** **Support technical assistance to the US states, territories and freely associated states to address COVID-19 response needs, including logistics and procurement support** **Update organization specific ConOps plans based on response lessons learned** **Track and evaluate successes and barriers that impact COVID-19 response operations**	**stakeholders to support decision-making** **Identify and prioritize health departments requiring technical assistance support for COVID-19 response** **Create and revise existing response SOPs and processes per the gaps identified in after-action reports** **Review internal (organizational) and external (CDC, health departments, laboratory etc.) strengths and barriers impacting response operations and report to CDC**	**update processes as appropriate** **Submit report to CDC identifying and assessing policy strengths and barriers to effective COVID-19 response**		

	Leadership and Workforce Development					
	Data and Information Systems					
	Communication and Information Technology					
	Partnerships	**-Continue coordination with key public health non-profit partners and stakeholders** **-Sustain collaboration with the State Coordination Task Force, such as partner call participation and CDC guidance feedback and input** **Collaborate with health partners to support the US Laboratory Response Network in response to disease outbreaks, natural disasters, and other health threats** **Identify respective stakeholders to gather lessons learned and coordinate CDC tools/guidance**	**Activate and scale-up organizational emergency response structure, devoting resources to CDC's State Coordination Task Force (SCTF) and other CDC working groups as needed** **Convene state, territorial and laboratorian public health leaders to assist with guidance and resource development**	**Assign dedicated resources to SCTF and other CDC working groups as needed** **Report pertinent response information compiled by the organization to the CDC**	**Collaborated with COVID-19 partners to provide multidisciplinary response interventions** **Improved organizational or CDC guidance inclusive of state, territorial, and laboratory perspective**	**Established and strengthened diverse public health partnerships with key constituency groups such as health department officials, epidemiologists and laboratorians** **Coordinated implementation of evidence-based COVID-19 programs, policies and services**
	Laws and Policies					

	Programs and Services					

ORGANIZATIONAL CAPACITY AND PROGRAM EXPERIENCE

13 **Recipient Organizational Capacity (200 words maximum):***

The organization must have capacity to connect and communicate with state health departments, state public health officials and state laboratorians.

14 **Recipient Program Experience (200 words maximum):***

The organization must have a track record of communicating and implementing effective intervention to strengthen the response posture of state and laboratorian public health departments.

COLLABORATIVE WORK

15 **Expectations for Collaboration, as applicable (200 words maximum):**

The organization must establish and maintain at least one liaison to CDC's State Coordination Taskforce throughout the emergency response and work collaboratively with other response partners as appropriate.

16 **Expected Subcontractual Work and Recommended Criteria for Selecting Subcontractors, as applicable (200 words maximum):**

Subcontracting may be necessary to address the COVID-19 response needs of state public health laboratorians

17 **Will the proposed CBA benefit governmental public health agencies?**

☒ **Yes**
☐ **No**

If yes, briefly describe how (200 words maximum):
NGOs are uniquely positioned to strengthen response efforts, whether through mobilizing their own constituents or by providing technical assistance to public sector health departments.

BUDGET INSTRUCTIONS

18 **General Instructions for Use of Funds, as applicable (100 words maximum):**

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FY 2019 CIO Project Plan

CDC-RFA-OT18-1802
Strengthening Public Health Systems and Services through National Partnerships to Improve and Protect the Nation's Health

GENERAL INFORMATION			
1	**Project title (please do not use all caps; 15 words maximum):*** Strengthening Local Health Departments' Public Health Emergency Response Capacity to COVID-19 Through Health Officials	2	**CIO:**
		3	**Division:** **Office:**
4	**CIO point of contact (POC) name:*** **CIO POC email address:*** **CIO POC phone number:***		
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6	**Description of the target population:* (25 words maximum)** **Note: Proposals should not build capacity for CDC or other federal agencies** Local health departments' health officials and other relevant leadership		
PROJECT FUNDING OT18-1802 Period of Performance Length: August 1, 2018 – July 31, 2023 Budget Period Length:			
7	**Proposed Project Funding:*** **$_____(Whole Numbers Only)**		
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☐ **Data and Information Systems:** Activities to improve collection, management, interpretation, and dissemination of data to guide decision-making

☒ **Communication and Information Technology**: Activities to improve use of communication and information technology to affect health decisions and actions

☒ **Partnerships:** Activities to improve establishment and maintenance of results-driven partnerships

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11

CBA Program Outcomes (Check one or more):*

Public Health Systems Infrastructure:

Short-term

☐ Improved operational capacity to evaluate, manage, and improve public health systems

Intermediate

☐ Increased capability of public health systems to achieve nationally established standards

Leadership and Workforce Development:

Short-term

☒ Improved leadership capacity to identify and prioritize public health needs

☐ Strengthened core and discipline-specific public health competencies among the workforce to improve job performance

Intermediate

☒ Increased leadership decision-making to address public health needs strategically and systematically

☐ Strengthened capability of public health workforce to deliver essential public health services

Data and Information Systems:

Short-term

☐ Improved capacity of data and information systems to conduct public health monitoring and surveillance

Intermediate

☐ Increased capability to use data to inform decision-making and support evidence-based practices and policies

Communication and Information Technology:

Short-term

☒ Improved communication and information technology capacity to inform the public efficiently and effectively

Intermediate

☐ Strengthened capability to use communication and information technology to affect health decisions and actions

Partnerships:

Short-term

☒ Improved capacity to establish and maintain partnerships within and across sectors to create a shared vision of health

Intermediate

☐ Strengthened capability to respond to public health priorities collaboratively and strategically

Laws and Policies:

Short-term

☐ Increased capacity to evaluate laws and policies to affect health

Intermediate

☐ Strengthened capability to systematically apply and use laws and policies to improve health

Programs and Services:

Short-term

☒ Improved capacity to identify, prioritize, and customize relevant programs and services to address public health needs

Intermediate

☐ Increased capability to implement evidence-based/informed public health programs, policies, and services to address public health needs

PROJECT DETAILS

Local the purpose of the project and provide project details for the length of the budget period (11 months).

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- Complete the activities, process measures, outputs, budget period outcomes, and outcome measures column for each program strategy selected.

12	**Project Purpose (150 words maximum):***	The purpose of this project is to ensure the optimal response to the prevention and control of COVID-19 through the efforts of national non-profit organizations. Such organizations are uniquely positioned to strengthen COVID-19 response efforts, whether through mobilizing their own constituents and/or by providing technical assistance to public health agencies and their partnerships. Key focus areas for this effort are: local health agency leadership, communications and state-of-the-art information technology, local health agency's partnerships and local agency's programs and services.

	Program Strategies	**Activities**	**Process Measures**	**Outputs**	**Budget Period Outcomes**	**Outcome Measures**
	Public Health Systems Infrastructure					
	Leadership and Workforce Development	-Develop tools, resources, and/or trainings that address gaps and challenges for local health department leadership - Provide technical assistance (TA) and training related to local department COVID-19 control /prevention systems, capabilities, and responses	-Number of tools and resources developed to respond to COVID-19 -Number of trainings via in-person and/or webinars on emergency prevention/control and response competencies -Number and types of TA provided in real-time	-Tools and resources -Training/webinars Reports of TA provided	-Improved local health department leadership capacity to identify and prioritize public health needs during the COVID-19 outbreak	-Change in the local health department leaders' decision-making to address public health emergencies strategically and systematically

	Data and Information Systems					
	Communication and Information Technology	-Coordinate with local health officials, public health information officers, and infectious disease leaders to assess current COVID-19 communication activities and needs -Convene and coordinate conference calls/in-person meetings to share findings and recommendations emerging from assessments of information gaps and needs	-A rapid assessment of current communication activities and needs among health officials, information officers, and infectious disease leaders -Data analyses -Number of conference calls and/or meetings to share findings and recommendations from the assessment and focus groups	-Report of findings from assessment of current communication activities -Minutes from conference calls, power point presentation	-Improved local health departments' communication and information technology capacity to inform the public and stakeholders efficiently and effectively during COVID-19 outbreak -Improved local health departments' collaboration with critical partners and stakeholders to develop, test, and disseminate timely public health messaging to targeted populations through trusted representatives or spokespersons	-Change in local health departments' use of communication skills and information technology to make health decisions and implement actions during public health emergencies such as COVID-19 -Increase in number of health departments' that develop, test, disseminate messaging to critical partners and stakeholders nto targeted populations
	Partnerships	-Develop training for local health department leadership to effectively provide TA to their critical partners on accurate COVID-19 information and best practices for prevention, control and response	-Number of trainings for leadership to provide TA to partner organizations -Identify partner organizations to receive TA -Identify best or evidence-based practices for prevention, control and response	-Training Manual -List of partner organizations that received TA --Report of best COVID-19 practices for prevention, control and response	-Improved engagement with public and private partners, and other chief stakeholders to support prevention, control, and response to public health emergencies such as the COVID-19 outbreak	-Increase in number of local health departments that engage partners to support prevention, control, and response to public health emergencies such as the COVID-19 outbreak

	Laws and Policies					
	Programs and Services	-Assist local health department leadership in facilitating collaboration via convening meetings among jurisdictional partners and stakeholders to build or strengthen a network of support services -Develop plans to expedite recovery services as appropriate based on the jurisdictional public health agency leadership (or support roles) and other critical stakeholders.	-Number and types of TA provided -Number of meetings -Types and number of plans for jurisdictions and stakeholders	-Report of network of support services issues and recommendations from convened meetings with partners -Report of TA provided -Report of recovery plans developed	-Improved local health departments' capacity to identify, prioritize, and customize relevant programs and services to address COVID-19 and other pblic health emergencies for jurisdictions and stakeholders	-Increase in the number of local health departments that implement evidence-based public health programs and services to address COVID-19 -Increase in number of local health departments that develop recovery programs and services during public health emergencies such as the COVID-19 outbreak

ORGANIZATIONAL CAPACITY AND PROGRAM EXPERIENCE

13	**Recipient Organizational Capacity (200 words maximum):*** Applicant must have the ability to …. -Coordinate and convene local health officials, public health information officers, and infectious disease leaders during public health emergencies -Convene conference calls, trainings, and webinars with local health agency leadership -Conduct rapid assessments -Analyze and manage data from local agency leadership about the type of information assistance required to address the public health emergencies and needs for real-time information by stakeholders and the public -Share findings and recommendations emerging from the rapid assessment
14	**Recipient Program Experience (200 words maximum):*** The applicant must have an established history of training and providing technical assistance local health agency leadership during public health emergencies. Applicant must have experience with: conducting rapid-turn-around assessments; analyzing existing data; developing instruments, sampling frames, and respondent samples; and developing tools and resources related to timely communications in response to public health emergencies; knowledge of how public health messaging is developed and disseminated during times of high uncertainty and concern; extensive expertise and experience assisting local health agency leadership with effectively working with critical stakeholders and the public during public health emergencies; and demonstrated ability to identify best practices related to partnering with stakeholders and developing messaging that target different audiences.

COLLABORATIVE WORK

15	**Expectations for Collaboration, as applicable (200 words maximum):** The applicant is expected to collaborate with the CDC and other critical organizations, as needed, to implement this project.
16	**Expected Subcontractual Work and Recommended Criteria for Selecting Subcontractors, as applicable (200 words maximum):** Applicant is permitted to pursue subcontract work as needed with organizations or individuals that possess technical knowledge or capacity to assist with activities identified in this project plan. However, the recipient is expected to have the capacity to directly perform most of the strategies and activities.
17	**Will the proposed CBA benefit governmental public health agencies?** ☒ **Yes** ☐ **No** **If yes, briefly describe how (200 words maximum):** This project is expected to build the capacity local health agency leadership to effectively prevent, control, and respond during public health emergencies.

BUDGET INSTRUCTIONS

18	**General Instructions for Use of Funds, as applicable (100 words maximum):** -Applicant may only expend funds for reasonable and relevant program purposes, including personnel, supplies, communication and marketing materials, database enhancement, and services, such as contractual. - Actual funding level for this project may be slightly or substantially higher or lower than estimated, and Recipients should be willing to revise the workplan they submit in response to it, in collaboration with CDC Technical Monitors. -Applicant may not use funds for any activities or products inconsistent with the purposes and intent of the project plan.

CIO CERTIFICATION*

19	**By submitting this project plan, I certify that my CIO currently does not maintain a comparable NOFO related to this proposed CBA project. I understand my CIO is responsible for adhering to all applicable scientific policies and securing requisite clearances in the Scientific Tracking and Reporting System (STARS). I will discuss the project with my Associate Director for Science (ADS) and obtain the appropriate scientific clearances prior to initiating project activities that involve the collection, generation, or analysis of public health data.**

FY 2019 CIO Project Plan

CDC-RFA-OT18-1802
Strengthening Public Health Systems and Services through National Partnerships to Improve and Protect the Nation's Health

GENERAL INFORMATION			
1	**Project title (please do not use all caps; 15 words maximum):*** Strengthening State Health Agencies' Public Health Emergency Response Capacity to COVID-19 Through Health Officials	2	**CIO:***
		3	**Division:*** **Office:**
4	**CIO point of contact (POC) name:*** **CIO POC email address:*** **CIO POC phone number:***		
5	**Select the target population category to receive capacity-building assistance (CBA):*** **Category A** ☒ **Category B** ☐ **Category C** ☐ **Category A: Governmental Public Health Departments** – This category is focused on meeting the priority organizational-level CBA needs of one of the following health department types: state, tribal, local, or territorial. Organizational level includes, but is not limited to, business processes, system design, strategic planning, resource management, agency leadership, and governance. **Category B: Workforce Segments Across Governmental Public Health Departments** – This category is focused on meeting the priority CBA needs of one workforce segment across two or more health department types (state, tribal, local, or territorial). Workforce segments can include, but are not limited to, epidemiologists, chronic disease specialists, public health lawyers, environmentalists, informaticians, and nutritionists. **Category C: Nongovernmental Public Health Components** – This category is focused on meeting the priority CBA needs of one type of nongovernmental component of the public health system. Nongovernmental components represent, but are not limited to, community-based organizations, community health centers, primary care providers, governors, hospitals, economists, legislators, education organizations, social action organizations, and public safety agencies.		
6	**Description of the target population:* (25 words maximum)** **Note: Proposals should not build capacity for CDC or other federal agencies** State Health Agencies' Health Officials and other relevant leadership		
PROJECT FUNDING OT18-1802 Period of Performance Length: August 1, 2018 – July 31, 2023 Budget Period Length:			
7	**Proposed Project Funding:*** **$_____(Whole Numbers Only)**		
8	**Expected Length of Project (Check one):*** ☐ **The CIO will award new funding each budget period for the remainder of the period of performance.** ☐ **The CIO will award new funding each budget period for at least two consecutive years.** ☒ **The CIO will fund the project for one year.**		

CBA PROGRAM APPROACH – NOFO LOGIC MODEL

Select the program strategies and the program outcomes the project should work toward for the length of the project

9

CBA Program Strategies (Check one or more):*

☐ **Public Health Systems Infrastructure:** Activities to improve operational capacity, such as policies and plans, administration and management, and quality improvement

☒ **Leadership and Workforce Development:** Activities to improve leadership and workforce competencies, recruitment, and retention

☐ **Data and Information Systems:** Activities to improve collection, management, interpretation, and dissemination of data to guide decision-making

☒ **Communication and Information Technology**: Activities to improve use of communication and information technology to affect health decisions and actions

☒ **Partnerships:** Activities to improve establishment and maintenance of results-driven partnerships

☐ **Laws and Policies:** Activities to improve the ability to interpret and inform laws, including statutes and regulations, and policies that affect health

☐ **Programs and Services:** Activities to improve the identification of best practices and the implementation of evidence-based/informed programs and services

10

Crisis Response Approaches (Check one or more)*

☒ **Strengthen Incident Management for Early Crisis Response**
☒ **Strengthen Jurisdictional Recovery**
☐ **Strengthen Biosurveillance**
☒ **Strengthen Information Management**
☐ **Strengthen Countermeasures and Mitigation**
☐ **Strengthen Surge Management**
☒ **Strengthen Communications**

11

CBA Program Outcomes (Check one or more):*

Public Health Systems Infrastructure:

Short-term

☐ Improved operational capacity to evaluate, manage, and improve public health systems

Intermediate

☐ Increased capability of public health systems to achieve nationally established standards

Leadership and Workforce Development:

Short-term

☒ Improved leadership capacity to identify and prioritize public health needs

☐ Strengthened core and discipline-specific public health competencies among the workforce to improve job performance

Intermediate

☒ Increased leadership decision-making to address public health needs strategically and systematically

☐ Strengthened capability of public health workforce to deliver essential public health services

Data and Information Systems:

Short-term

☐ Improved capacity of data and information systems to conduct public health monitoring and surveillance

Intermediate

☐ Increased capability to use data to inform decision-making and support evidence-based practices and policies

Communication and Information Technology:

Short-term

☒ Improved communication and information technology capacity to inform the public efficiently and effectively

Intermediate

☐ Strengthened capability to use communication and information technology to affect health decisions and actions

Partnerships:

Short-term

☒ Improved capacity to establish and maintain partnerships within and across sectors to create a shared vision of health

Intermediate

☒ Strengthened capability to respond to public health priorities collaboratively and strategically

Laws and Policies:

Short-term

☐ Increased capacity to evaluate laws and policies to affect health

Intermediate

☐ Strengthened capability to systematically apply and use laws and policies to improve health

Programs and Services:

Short-term

☒ Improved capacity to identify, prioritize, and customize relevant programs and services to address public health needs

Intermediate

☐ Increased capability to implement evidence-based/informed public health programs, policies, and services to address public health needs

PROJECT DETAILS

State the purpose of the project and provide project details for the length of the budget period (11 months).

- For the selected program strategies, describe proposed activities and provide sample process measures to track progress implementing the activities. Describe the expected outputs (resources, tools, products, etc.) and outcomes (changes to occur), and provide sample outcome measures to track progress achieving the outcomes.
- Complete the activities, process measures, outputs, budget period outcomes, and outcome measures column for each program strategy selected.

12	**Project Purpose (150 words maximum):***	**The purpose of this project is to ensure the optimal response to the prevention and control of COVID-19 through the efforts of national non-profit organizations. Such organizations are uniquely positioned to strengthen COVID-19 response efforts, whether through mobilizing their own constituents and/or by providing technical assistance to public health agencies and their partnerships. Key focus areas for this effort are: state health agency leadership, communications and state-of-the-art information technology, state health agency's partnerships and state agency's programs and services.**					
	Program Strategies	**Activities**	**Process Measures**	**Outputs**	**Budget Period Outcomes**	**Outcome Measures**
	Public Health Systems Infrastructure					
	Leadership and Workforce Development	-Develop tools, resources, and/or trainings that address gaps and challenges for state health agency leadership - Provide technical assistance (TA) and training related to state health agency COVID-19 control /prevention systems, capabilities, and responses	-Number of tools and resources developed to respond to COVID-19 -Number of trainings via in-person and/or webinars on emergency prevention/control and response competencies -Number and types of TA provided in real-time	-Tools and resources -Training/webinars Reports of TA provided	-Improved leadership capacity to identify and prioritize public health needs during the COVID-19 outbreak	-Change in leadership's decision-making to address public health emergencies strategically and systematically

	Data and Information Systems					
	Communication and Information Technology	-Coordinate with state health officials, public health information officers, and infectious disease leaders to assess current COVID-19 communication activities and needs -Convene and coordinate conference calls/in-person meetings to share findings and recommendations emerging from assessments of information gaps and needs	-A rapid assessment of current communication activities and needs among health officials, information officers, and infectious disease leaders -Date analyses -Number of conference calls and/or meetings to share findings and recommendations from the assessment and focus groups	-Report of findings from assessment of current communication activities -Minutes from conference calls, power point presentation	-Improved state health agencies' communication and information technology capacity to inform the public and stakeholders efficiently and effectively during the COVID-19 outbreak -Improved collaboration with critical partners and stakeholders to develop, test, and disseminate timely public health messaging to targeted populations through trusted representatives or spokespersons	-Increase in number of state health agencies' use of communication skills and information technology to make health decisions and implement actions during public health emergencies as COVID-19 -Increase in collaboration with partners to develop, test, and disseminate messaging to targeted populations
	Partnerships	-Develop training for health agency leadership to effectively provide TA to their critical partners on accurate COVID-19 information and best practices for prevention, control and response	-Number of trainings for leadership to provide TA to partner organizations -Identify partner organizations to receive TA -Identify best or evidence-based practices for prevention, control and response	-Training Manual -List of partner organizations that received TA -Report of best COVID-19 practices for prevention, control and response	-Improved capacity to establish and maintain partnerships within and across sectors to create a shared vision of public health emergencies prevention, control and response	-Increase in state health agencies response to public health emergencies such as the COVID-19 outbreak collaboratively and strategically
	Laws and Policies					

	Programs and Services	-Assist state leadership in facilitating collaboration via convening meetings among jurisdictional partners and stakeholders to build or strengthen a network of support services -Develop plans to expedite recovery services as appropriate based on the jurisdictional public health agency lead (or support roles) and stakeholders.	-Number and types of TA provided -Number of meetings convened -Types and number plans for jurisdictions and stakeholders developed	-Report of network of support services issues and recommendations from convened meetings with partners -Report of TA provided to partners on recovery services -Report of recovery plans developed	-Improved capacity to identify, prioritize, and customize relevant programs and services to address COVID-19 and other public health emergencies for jurisdictions and stakeholders	-Increase in state health agencies to implement evidence-based public health programs and services to address COVID-19

ORGANIZATIONAL CAPACITY AND PROGRAM EXPERIENCE

13	**Recipient Organizational Capacity (200 words maximum):*** Applicant must have the ability to …. -Coordinate and convene state health officials, public health information officers, and infectious disease leaders during public health emergencies -Convene conference calls, trainings, and webinars with state health agency leadership -Conduct rapid assessments -Analyze and manage data from state agency leadership about the type of information assistance required to address the public health emergencies and needs for real-time information by stakeholders and the public -Share findings and recommendations emerging from the rapid assessment
14	**Recipient Program Experience (200 words maximum):*** The applicant must have an established history of training and providing technical assistance state health agency leadership during public health emergencies. Applicant must have experience with: conducting rapid-turn-around assessments; analyzing existing data; developing instruments, sampling frames, and respondent samples; and developing tools and resources related to timely communications in response to public health emergencies; knowledge of how public health messaging is developed and disseminated during times of high uncertainty and concern; extensive expertise and experience assisting state health agency leadership with effectively working with critical stakeholders and the public during public health emergencies; and demonstrated ability to identify best practices related to partnering with stakeholders and developing messaging that target different audiences.

COLLABORATIVE WORK

15	**Expectations for Collaboration, as applicable (200 words maximum):** The applicant is expected to collaborate with the CDC and other critical organizations, as needed, to implement this project.
16	**Expected Subcontractual Work and Recommended Criteria for Selecting Subcontractors, as applicable (200 words maximum):**

	Applicant is permitted to pursue subcontract work as needed with organizations or individuals that possess technical knowledge or capacity to assist with activities identified in this project plan. However, the recipient is expected to have the capacity to directly perform most of the strategies and activities.
17	**Will the proposed CBA benefit governmental public health agencies?** ☒ **Yes** ☐ **No** **If yes, briefly describe how (200 words maximum):** This project is expected to build the capacity state health agency leadership to effectively prevent, control, and respond during public health emergencies.

BUDGET INSTRUCTIONS

18	**General Instructions for Use of Funds, as applicable (100 words maximum):** -Applicant may only expend funds for reasonable and relevant program purposes, including personnel, supplies, communication and marketing materials, database enhancement, and services, such as contractual. - Actual funding level for this project may be slightly or substantially higher or lower than estimated, and Recipients should be willing to revise the workplan they submit in response to it, in collaboration with CDC Technical Monitors. -Applicant may not use funds for any activities or products inconsistent with the purposes and intent of the project plan.

CIO CERTIFICATION*

19	**By submitting this project plan, I certify that my CIO currently does not maintain a comparable NOFO related to this proposed CBA project. I understand my CIO is responsible for adhering to all applicable scientific policies and securing requisite clearances in the Scientific Tracking and Reporting System (STARS). I will discuss the project with my Associate Director for Science (ADS) and obtain the appropriate scientific clearances prior to initiating project activities that involve the collection, generation, or analysis of public health data.**

FY 2019 CIO Project Plan

CDC-RFA-OT18-1802
Strengthening Public Health Systems and Services through National Partnerships to Improve and Protect the Nation's Health

GENERAL INFORMATION			
1	**Project title (please do not use all caps; 15 words maximum):*** Strengthening Territorial Health Agencies' Public Health Emergency Response Capacity to COVID-19	2	**CIO:***
		3	**Division:*** **Office:**
4	**CIO point of contact (POC) name:*** **CIO POC email address:*** **CIO POC phone number:***		
5	**Select the target population category to receive capacity-building assistance (CBA):*** **Category A** ☒ **Category B** ☐ **Category C** ☐ **Category A: Governmental Public Health Departments** – This category is focused on meeting the priority organizational-level CBA needs of one of the following health department types: Territorial, tribal, local, or territorial. Organizational level includes, but is not limited to, business processes, system design, strategic planning, resource management, agency leadership, and governance. **Category B: Workforce Segments Across Governmental Public Health Departments** – This category is focused on meeting the priority CBA needs of one workforce segment across two or more health department types (Territorial, tribal, local, or territorial). Workforce segments can include, but are not limited to, epidemiologists, chronic disease specialists, public health lawyers, environmentalists, informaticians, and nutritionists. **Category C: Nongovernmental Public Health Components** – This category is focused on meeting the priority CBA needs of one type of nongovernmental component of the public health system. Nongovernmental components represent, but are not limited to, community-based organizations, community health centers, primary care providers, governors, hospitals, economists, legislators, education organizations, social action organizations, and public safety agencies.		
6	**Description of the target population:* (25 words maximum)** **Note: Proposals should not build capacity for CDC or other federal agencies** Territorial Health Agencies, Territorial Health Officials, and other relevant leadership		

PROJECT FUNDING OT18-1802 Period of Performance Length: August 1, 2018 – July 31, 2023 Budget Period Length:			
7	**Proposed Project Funding:*** **$_____(Whole Numbers Only)**		
8	**Expected Length of Project (Check one):*** ☐ **The CIO will award new funding each budget period for the remainder of the period of performance.** ☐ **The CIO will award new funding each budget period for at least two consecutive years.** ☒ **The CIO will fund the project for one year.**		

CBA PROGRAM APPROACH – NOFO LOGIC MODEL

Select the program strategies and the program outcomes the project should work toward for the length of the project

9

CBA Program Strategies (Check one or more):*

☐ **Public Health Systems Infrastructure:** Activities to improve operational capacity, such as policies and plans, administration and management, and quality improvement

☒ **Leadership and Workforce Development:** Activities to improve leadership and workforce competencies, recruitment, and retention

☐ **Data and Information Systems:** Activities to improve collection, management, interpretation, and dissemination of data to guide decision-making

☒ **Communication and Information Technology**: Activities to improve use of communication and information technology to affect health decisions and actions

☒ **Partnerships:** Activities to improve establishment and maintenance of results-driven partnerships

☐ **Laws and Policies:** Activities to improve the ability to interpret and inform laws, including statutes and regulations, and policies that affect health

☐ **Programs and Services:** Activities to improve the identification of best practices and the implementation of evidence-based/informed programs and services

10

Crisis Response Approaches (Check one or more)*

☒ **Strengthen Incident Management for Early Crisis Response**
☒ **Strengthen Jurisdictional Recovery**
☐ **Strengthen Biosurveillance**
☒ **Strengthen Information Management**
☐ **Strengthen Countermeasures and Mitigation**
☐ **Strengthen Surge Management**
☒ **Strengthen Communications**

11

CBA Program Outcomes (Check one or more):*

Public Health Systems Infrastructure:

Short-term

☐ Improved operational capacity to evaluate, manage, and improve public health systems

Intermediate

☐ Increased capability of public health systems to achieve nationally established standards

Leadership and Workforce Development:

Short-term

☒ Improved leadership capacity to identify and prioritize public health needs

☐ Strengthened core and discipline-specific public health competencies among the workforce to improve job performance

Intermediate

☒ Increased leadership decision-making to address public health needs strategically and systematically

☐ Strengthened capability of public health workforce to deliver essential public health services

Data and Information Systems:

Short-term

☐ Improved capacity of data and information systems to conduct public health monitoring and surveillance

Intermediate

☐ Increased capability to use data to inform decision-making and support evidence-based practices and policies

Communication and Information Technology:

Short-term

☒ Improved communication and information technology capacity to inform the public efficiently and effectively

Intermediate

☐ Strengthened capability to use communication and information technology to affect health decisions and actions

Partnerships:

Short-term

☒ Improved capacity to establish and maintain partnerships within and across sectors to create a shared vision of health

Intermediate

☐ Strengthened capability to respond to public health priorities collaboratively and strategically

Laws and Policies:

Short-term

☐ Increased capacity to evaluate laws and policies to affect health

Intermediate

☐ Strengthened capability to systematically apply and use laws and policies to improve health

Programs and Services:

Short-term

☐ Improved capacity to identify, prioritize, and customize relevant programs and services to address public health needs

Intermediate

☐ Increased capability to implement evidence-based/informed public health programs, policies, and services to address public health needs

PROJECT DETAILS

Territorial the purpose of the project and provide project details for the length of the budget period (11 months).

- For the selected program strategies, describe proposed activities and provide sample process measures to track progress implementing the activities. Describe the expected outputs (resources, tools, products, etc.) and outcomes (changes to occur), and provide sample outcome measures to track progress achieving the outcomes.
- Complete the activities, process measures, outputs, budget period outcomes, and outcome measures column for each program strategy selected.

12	**Project Purpose (150 words maximum):***	The purpose of this project is to ensure the optimal response to the prevention and control of COVID-19 through the efforts of national non-profit organizations. Such organizations are uniquely positioned to strengthen COVID-19 response efforts, whether through mobilizing their own constituents and/or by providing technical assistance to public health agencies and their partnerships. Key focus areas for this effort are: Territorial health agency leadership, communications and state-of-the-art information technology, and Territorial health agency's partnerships.				
	Program Strategies	**Activities**	**Process Measures**	**Outputs**	**Budget Period Outcomes**	**Outcome Measures**
	Public Health Systems Infrastructure					
	Leadership and Workforce Development	-Develop tools, resources, and/or trainings that address gaps and challenges for Territorial health agency leadership - Provide technical assistance (TA) and training related to Territorial health agency COVID-19 control /prevention systems, capabilities, and responses	-Number of tools and resources developed to respond to COVID-19 -Number of trainings via in-person and/or webinars on emergency prevention/control and response competencies -Number and types of TA provided in real-time-Number and types of TA provided in real-time	-Tools and resources -Training/webinars Reports of TA provided	-Improved territorial departments leadership's capacity to identify and prioritize public health needs during the COVID-19 outbreak	-Change in territorial health departments' decision-making to address public health emergencies such as the COVID-19 outbreak strategically and systematically

	Data and Information Systems					
	Communication and Information Technology	-Coordinate with Territorial health officials, information officers, and infectious disease leaders to assess current COVID-19 communication activities and needs -Convene and coordinate conference calls/in-person meetings to share findings and recommendations emerging from assessments of information gaps and needs	-Conduct rapid assessment of current communication activities and needs among health officials, information officers, and infectious disease leaders -Analysis of data -Number of conference calls and/or meetings to share findings and recommendations from the assessment and focus groups	-Report of findings from assessment of current communication activities -Minutes from conference calls, power point presentation	-Improved territorial departments leadership's communication and information technology capacity to inform the public and stakeholders efficiently and effectively during public health emergencies	-Increase in the number of territorial departments leadership's use of communication skills and information technology to make health decisions and implement actions during public health emergencies such as COVID-19
	Partnerships	-Develop training for health agency leadership to effectively provide TA to their critical partners on accurate COVID-19 information and best practices for prevention, control and response	-Number of trainings for leadership to provide TA to partner organizations -Identify partner organizations to receive TA -Identify best or evidence-based practices for prevention, control and response	-Training Manual -List of partner organizations that received TA --Report of best COVID-19 practices for prevention, control and response	-Improved territorial health departments leadership's engagement with public and private partners, and other chief stakeholders to support prevention, control, and response to public health emergencies such as the COVID-19 outbreak	-Increase in territorial health departments response to public health emergencies such as the COVID-19 outbreak collaboratively and strategically
	Laws and Policies					
	Programs and Services					

ORGANIZATIONAL CAPACITY AND PROGRAM EXPERIENCE

13 **Recipient Organizational Capacity (200 words maximum):***

Applicant must have the ability to ….
-Coordinate and convene territorial health officials, public health information officers, and infectious disease leaders during public health emergencies
-Convene conference calls, trainings, and webinars with Territorial health agency leadership
-Conduct rapid assessments
-Analyze and manage data from territorial departments leadership about the type of information assistance required to address the public health emergencies and needs for real-time information by stakeholders and the public
-Share findings and recommendations emerging from the rapid assessment

14 **Recipient Program Experience (200 words maximum):***

The aplicant must have an established history of training and providing technical assistance Territorial health departments leadership during public health emergencies. Applicant must have experience with: conducting rapid-turn-around assessments; analyzing existing data; developing instruments, sampling frames, and respondent samples; and developing tools and resources related to timely communications in response to public health emergencies; knowledge of how public health messaging is developed and disseminated during times of high uncertainty and concern; extensive expertise and experience assisting Territorial health agency leadership with effectively working with critical stakeholders and the public during public health emregencies; and demonstrated ability to identify best practices related to partnering with stakeholders and devoping messaging that target different audiences.

COLLABORATIVE WORK

15 **Expectations for Collaboration, as applicable (200 words maximum):**

The applicant is expected to collaborate with the CDC and other critical organizations, as needed, to implement this project.

16 **Expected Subcontractual Work and Recommended Criteria for Selecting Subcontractors, as applicable (200 words maximum):**

Applicant can pursue subcontract work as needed with organizations or individuals that possess technical knowledge or capacity to assist with activities identified in this project plan. However, the recipient is expected to have the capacity to directly perform the majority of the strategies and activities.

17 **Will the proposed CBA benefit governmental public health agencies?**

☒ **Yes**
☐ **No**

If yes, briefly describe how (200 words maximum): This project is expected to build the capacity territorial healh departments leadership to effectively prevent, control, and respond during public health emergencies.

BUDGET INSTRUCTIONS

18 **General Instructions for Use of Funds, as applicable (100 words maximum):**

-Applicant may only expend funds for reasonable and relevant program purposes, including personnel, supplies, communication and marketing materials, database enhancement, and services, such as contractual.
- Actual funding level for this project may be slightly or substantially higher or lower than estimated, and Recipients should be willing to revise the workplan they submit in response to it, in collaboration with CDC Technical Monitors.
-Applicant may not use funds for any activities or products inconsistent with the purposes and intent of the project plan.

CIO CERTIFICATION*	
19	**By submitting this project plan, I certify that my CIO currently does not maintain a comparable NOFO related to this proposed CBA project. I understand my CIO is responsible for adhering to all applicable scientific policies and securing requisite clearances in the Scientific Tracking and Reporting System (STARS). I will discuss the project with my Associate Director for Science (ADS) and obtain the appropriate scientific clearances prior to initiating project activities that involve the collection, generation, or analysis of public health data.**

FY 2019 CIO Project Plan

CDC-RFA-OT18-1802
Strengthening Public Health Systems and Services through National Partnerships to Improve and Protect the Nation's Health

GENERAL INFORMATION			
1	**Project title (please do not use all caps; 15 words maximum):*** Tribal Capacity Building for COVID-19 Disease Control	2	**CIO:***
		3	**Division:*** **Office:**
4	**CIO point of contact (POC) name:*** **CIO POC email address:*** **CIO POC phone number:***		
5	**Select the target population category to receive capacity-building assistance (CBA):*** **Category A** ☒ **Category B** ☐ **Category C** ☐ **Category A: Governmental Public Health Departments** – This category is focused on meeting the priority organizational-level CBA needs of one of the following health department types: state, tribal, local, or territorial. Organizational level includes, but is not limited to, business processes, system design, strategic planning, resource management, agency leadership, and governance. **Category B: Workforce Segments Across Governmental Public Health Departments** – This category is focused on meeting the priority CBA needs of one workforce segment across two or more health department types (state, tribal, local, or territorial). Workforce segments can include, but are not limited to, epidemiologists, chronic disease specialists, public health lawyers, environmentalists, informaticians, and nutritionists. **Category C: Nongovernmental Public Health Components** – This category is focused on meeting the priority CBA needs of one type of nongovernmental component of the public health system. Nongovernmental components represent, but are not limited to, community-based organizations, community health centers, primary care providers, governors, hospitals, economists, legislators, education organizations, social action organizations, and public safety agencies.		
6	**Description of the target population:* (25 words maximum)** **Note: Proposals should not build capacity for CDC or other federal agencies** Tribal health departments		

PROJECT FUNDING OT18-1802 Period of Performance Length: August 1, 2018 – July 31, 2023 Budget Period Length:			
7	**Proposed Project Funding:*** **$_____(Whole Numbers Only)**		
8	**Expected Length of Project (Check one):*** ☐ **The CIO will award new funding each budget period for the remainder of the period of performance.** ☐ **The CIO will award new funding each budget period for at least two consecutive years.** ☒ **The CIO will fund the project for one year.**		

CBA PROGRAM APPROACH – NOFO LOGIC MODEL

Select the program strategies and the program outcomes the project should work toward for the length of the project

9

CBA Program Strategies (Check one or more):*

☒ **Public Health Systems Infrastructure:** Activities to improve operational capacity, such as policies and plans, administration and management, and quality improvement
☒ **Leadership and Workforce Development:** Activities to improve leadership and workforce competencies, recruitment, and retention
☐ **Data and Information Systems:** Activities to improve collection, management, interpretation, and dissemination of data to guide decision-making
☐ **Communication and Information Technology**: Activities to improve use of communication and information technology to affect health decisions and actions
☐ **Partnerships:** Activities to improve establishment and maintenance of results-driven partnerships
☐ **Laws and Policies:** Activities to improve the ability to interpret and inform laws, including statutes and regulations, and policies that affect health
☐ **Programs and Services:** Activities to improve the identification of best practices and the implementation of evidence-based/informed programs and services

10

Crisis Response Approaches (Check one or more)*

☒ **Strengthen Incident Management for Early Crisis Response**
☐ **Strengthen Jurisdictional Recovery**
☐ **Strengthen Biosurveillance**
☒ **Strengthen Information Management**
☐ **Strengthen Countermeasures and Mitigation**
☐ **Strengthen Surge Management**
☒ **Strengthen Communications**

11

CBA Program Outcomes (Check one or more):*

Public Health Systems Infrastructure:
Short-term
☐ Improved operational capacity to evaluate, manage, and improve public health systems
Intermediate
☐ Increased capability of public health systems to achieve nationally established standards
Leadership and Workforce Development:
Short-term
☒ Improved leadership capacity to identify and prioritize public health needs
☐ Strengthened core and discipline-specific public health competencies among the workforce to improve job performance
Intermediate
☒ Increased leadership decision-making to address public health needs strategically and systematically
☐ Strengthened capability of public health workforce to deliver essential public health services
Data and Information Systems:
Short-term
☐ Improved capacity of data and information systems to conduct public health monitoring and surveillance
Intermediate
☐ Increased capability to use data to inform decision-making and support evidence-based practices and policies
Communication and Information Technology:
Short-term
☒ Improved communication and information technology capacity to inform the public efficiently and effectively
Intermediate
☒ Strengthened capability to use communication and information technology to affect health decisions and actions
Partnerships:
Short-term
☐ Improved capacity to establish and maintain partnerships within and across sectors to create a shared vision of health
Intermediate
☐ Strengthened capability to respond to public health priorities collaboratively and strategically

Laws and Policies:

Short-term

☐ Increased capacity to evaluate laws and policies to affect health

Intermediate

☐ Strengthened capability to systematically apply and use laws and policies to improve health

Programs and Services:

Short-term

☐ Improved capacity to identify, prioritize, and customize relevant programs and services to address public health needs

Intermediate

☐ Increased capability to implement evidence-based/informed public health programs, policies, and services to address public health needs

PROJECT DETAILS

State the purpose of the project and provide project details for the length of the budget period (11 months).

- For the selected program strategies, describe proposed activities and provide sample process measures to track progress implementing the activities. Describe the expected outputs (resources, tools, products, etc.) and outcomes (changes to occur), and provide sample outcome measures to track progress achieving the outcomes.
- Complete the activities, process measures, outputs, budget period outcomes, and outcome measures column for each program strategy selected.

12	**Project Purpose (150 words maximum):***	NIHB will provide Tribal heath department officials and leaders with training, information-sharing opportunities, assessment results and recommendations, and communication strategies in order for tribes to effectively carry out mission-critical activities pertaining to rapid, comprehensive and effective systematic response to the COVID-19 virus threat.

Program Strategies	**Activities**	**Process Measures**	**Outputs**	**Budget Period Outcomes**	**Outcome Measures**
Public Health Systems Infrastructure					
Leadership and Workforce Development	Create, deliver, and evaluate 2 trainings for Tribal health officials and leaders	# of trainings delivered # of tribal health officals and leaders in attendance at each training	Two culturally-appropriate trainings on effective, systematic response to COVID-19	Improved leadership capacity to identify and implement public health-informed strategies to respond to COVID-19 threat	% of Tribal health officials and leaders reporting an increased understanding of effective strategies for preventing COVID-19 spread among community
Data and Information Systems					
Communication and Information Technology	Conduct 9 surveys from selected tribes and Area Indian Health Boards on the state of COVID-19 communication,	# of surveys completed # of resources shared	Summary report of identified gaps in tribal communication, prevention, and surveillance efforts for COVID-19	Increased understanding of key factors impeding effective tribal response to emergent public	% of Tribal health officials and leaders reporting an increased awareness of resources available to support tribal-

		prevention activities, and surveillance efforts Use data collected in surveys to identify gaps in tribal efforts to mitigate COVID-19 threat Develop a communications strategy for distributing resources to tribal health officials and leaders for addressing these gaps (e.g. in a newsletter)		Informational resources for tribal health leaders	health threats like COVID-19 Increased awareness of resources available to support tribal response	specific concerns about infectious disease response.
	Partnerships					
	Laws and Policies					
	Programs and Services					

ORGANIZATIONAL CAPACITY AND PROGRAM EXPERIENCE

13	**Recipient Organizational Capacity (200 words maximum):*** The recipient should have capacity to manage CDC cooperative agreements and expertise in delivering CBA to tribal health departments. The receipient should have the capacity to conduct an assessment of tribal needs for responding to public health emergencies like a COVID-19 outbreak, and develop an evidence-informed report including recommendations. The recipient must have existing, collaborative relationships with numerous tribal health departments and leaders in order to expedite project activities.
14	**Recipient Program Experience (200 words maximum):*** The recipient must have extensive experience partnering with tribes and tribal health organizations, convening tribal leader gatherings, managing CDC programs, and developing and providing comprehensive capacity building trainings. The recipient should have experience collecting and analyzing data, and developing evidence-informed reports for a variety of audiences.

COLLABORATIVE WORK

15	**Expectations for Collaboration, as applicable (200 words maximum):** The recipient will be expected to collaborate with tribal health departments and leaders to complete project activities.

16	**Expected Subcontractual Work and Recommended Criteria for Selecting Subcontractors, as applicable (200 words maximum):**
17	**Will the proposed CBA benefit governmental public health agencies?** ☒ **Yes** ☐ **No** **If yes, briefly describe how (200 words maximum):** Strengthening the capacity of tribal health departments and leaders to respond to public health emergencies will bolster the current response to COVID-19 and mitigate health disparities experienced by Tribal communities, a vulnerable population.
BUDGET INSTRUCTIONS	
18	**General Instructions for Use of Funds, as applicable (100 words maximum):**
CIO CERTIFICATION*	
19	**By submitting this project plan, I certify that my CIO currently does not maintain a comparable NOFO related to this proposed CBA project. I understand my CIO is responsible for adhering to all applicable scientific policies and securing requisite clearances in the Scientific Tracking and Reporting System (STARS). I will discuss the project with my Associate Director for Science (ADS) and obtain the appropriate scientific clearances prior to initiating project activities that involve the collection, generation, or analysis of public health data.**

FY20 CIO Project Plan

CDC-RFA-OT18-1802
Strengthening Public Health Systems and Services through National Partnerships to Improve and Protect the Nation's Health

GENERAL INFORMATION			
1	**Project title (please do not use all caps; 10 word limit):*** **COVID-19: Building capacity of local health departments to maximize legal authorities.**	2	**CIO: ***
		3	**Division/Branch/Office/Unit: ***
4	**CIO point of contact (POC) name: *** **CIO POC email address:** **CIO POC phone number: ***		
5	**Select the target population category to receive capacity-building assistance (CBA): *** **CATEGORY A** **Category A: Governmental Public Health Departments** – This category is focused on meeting the priority organizational-level CBA needs of one of the following health department types: state, tribal, local, or territorial. Organizational level includes, but is not limited to, business processes, system design, strategic planning, resource management, agency leadership, and governance. **Category B: Workforce Segments Across Governmental Public Health Departments** – This category is focused on meeting the priority CBA needs of one workforce segment across two or more health department types (state, tribal, local, or territorial). Workforce segments can include, but are not limited to, epidemiologists, chronic disease specialists, public health lawyers, environmentalists, informaticians, and nutritionists. **Category C: Nongovernmental Public Health Components** – This category is focused on meeting the priority CBA needs of one type of nongovernmental component of the public health system. Nongovernmental components represent, but are not limited to, community-based organizations, community health centers, primary care providers, governors, hospitals, economists, legislators, education organizations, social action organizations, and public safety agencies.		
6	**Description of the target population: * (25 word limit)** Local health departments Note: Proposals should not build capacity for CDC or other federal agencies		

PROJECT FUNDING OT18-1802 Period of Performance Length: August 1, 2018 – July 31, 2023 Budget Period Length: September 1, 2020 –July 31, 2021	
7	**Proposed Project Funding for FY20 Activities: *** **$_____(Whole Numbers Only)**
8	**Expected Length of Project (Check one): *** ☒ **The CIO will fund the project for one year.** ☐ **The CIO will award new funding each budget period for more than one year.**

CBA PROGRAM APPROACH – NOFO LOGIC MODEL

Select the program strategies and the associated program outcomes the project should work toward for the length of the project

9

CBA Program Strategies (Check one or more): *

☐ **Public Health Systems Infrastructure:** Activities to improve operational capacity, such as policies and plans, administration and management, and quality improvement

☐ **Leadership and Workforce Development:** Activities to improve leadership and workforce competencies, recruitment, and retention

☐ **Data and Information Systems:** Activities to improve collection, management, interpretation, and dissemination of data to guide decision-making

☐ **Communication and Information Technology**: Activities to improve use of communication and information technology to affect health decisions and actions

☐ **Partnerships:** Activities to improve establishment and maintenance of results-driven partnerships

☒ **Laws and Policies:** Activities to improve the ability to interpret and inform laws, including statutes and regulations, and policies that affect health

☐ **Programs and Services:** Activities to improve the identification of best practices and the implementation of evidence-based/informed programs and services

10

CBA Program Outcomes (Check one or more): *

Public Health Systems Infrastructure:

Short-term

☐ Improved operational capacity to evaluate, manage, and improve public health systems

Intermediate

☐ Increased capability of public health systems to achieve nationally established standards

Leadership and Workforce Development:

Short-term

☐ Improved leadership capacity to identify and prioritize public health needs

☐ Strengthened core and discipline-specific public health competencies among the workforce to improve job performance

Intermediate

☐ Increased leadership decision-making to address public health needs strategically and systematically

☐ Strengthened capability of public health workforce to deliver essential public health services

Data and Information Systems:

Short-term

☐ Improved capacity of data and information systems to conduct public health monitoring and surveillance

Intermediate

☐ Increased capability to use data to inform decision-making and support evidence-based practices and policies

Communication and Information Technology:

Short-term

☐ Improved communication and information technology capacity to inform the public efficiently and effectively

Intermediate

☐ Strengthened capability to use communication and information technology to affect health decisions and actions

Partnerships:

Short-term

☐ Improved capacity to establish and maintain partnerships within and across sectors to create a shared vision of health

Intermediate

☐ Strengthened capability to respond to public health priorities collaboratively and strategically

Laws and Policies:

Short-term

☒ Increased capacity to evaluate laws and policies to affect health

Intermediate

☒ Strengthened capability to systematically apply and use laws and policies to improve health

Programs and Services:

Short-term

☐ Improved capacity to identify, prioritize, and customize relevant programs and services to address public health needs

Intermediate

☐ Increased capability to implement evidence-based/informed public health programs, policies, and services to address public health needs

11	PROJECT DETAILS State the purpose of the project and provide project details for the length of the budget period (11 months). For the selected program strategies: - Describe proposed activities and provide sample process measures to track progress implementing the activities. - Describe the expected outputs (resources, tools, products, etc.) and outcomes (change to occur), and provide sample outcome measures to track progress achieving the outcomes.	
	Project Purpose (150 word limit)	**The 2019-20 coronavirus is considered a public health emergency and is being evaluated by all major health organizations around the world. In the United States, the public health response is operationalized by practitioners within local jurisdictions who are in a unique position closest to the epidemic who use legal authorities and currently available public health emergency statutes, regulations as well as other policies or agreements. The proper use of these legal tools can be the difference between an effective or ineffective public health response. The purpose of this project is to support local health departments, as well as jurisdiction public health practitioners, decision makers, and legal counsel at the local level who may have a specific impact on the ability of jurisdictions to respond the the epidemic through their use of legal authorities by creating customized resources, toolkits, presentations, materials, and other relevant media to use legal authorities, policies and agreements within existing law and identify gaps to efficiently and effectively address specific jurisdictional needs during the response.**
	Program Strategy: Public Health Systems Infrastructure	
	Activities *	
	Process Measures *	
	Outputs *	
	Budget Period Outcomes *	
	Outcome Measures *	
	Program Strategy: Leadership and Workforce Development	
	Activities *	
	Process Measures *	
	Outputs *	
	Budget Period Outcomes *	
	Outcome Measures *	
	Program Strategy: Data and Information Systems	
	Activities *	

	Process Measures *	
	Outputs *	
	Budget Period Outcomes *	
	Outcome Measures *	
	Program Strategy: Communication and Information Technology	
	Activities *	
	Process Measures *	
	Outputs *	
	Budget Period Outcomes *	
	Outcome Measures *	
	Program Strategy: Partnerships	
	Activities *	
	Process Measures *	
	Outputs *	
	Budget Period Outcomes *	
	Outcome Measures *	
	Program Strategy: Laws and Policies	
	Activities *	**Activities may include, but are not limited to identifying legal issues impacting community mitigation strategies such as travel bans, school closure, and measures specifically aimed at social distancing;, the drafting and implementation of Memorandums of Undersatnding or Memorandums of Agreement; transporting of patients; waste disposal; Isolation and quarantine; surveillance and disease reporting; contact tracing; examining legal authorities for disease investigation, privacy protection and waivers; developing strategies to research the impact of laws and legal authorities including the use of legal epidemiology; understanding and effectively using HIPPA and the Public Health exceptions; and working directly with the target population to identify jurisdiction specific issues, gaps, and limitations to develop working strategies to implement a successful response.**
	Process Measures *	**All response strategies implemented at the local level by various jurisdictions including, but not limited to, emergency declarations, community mitigation strategies, memorandums of agreement/understanding, the use of legal epidemiology, analyses of the use of laws, regulations and**

		ordinances, surveillance and disease reporting, etc. will be documented by jurisdiction, summarized, and reported to relevant stakeholders and CDC-PHLP.
	Outputs *	**Produce an analysis of the use or potential use of various law and policy strategies implemented at the local jurisdictional level to effectively address the spread of COVID 19 or create efficiencies in the response from a legal and or policy perspective. Identify how local jurisdictions use community mitigation strategies, memorandums of agreement/understanding, the use of legal epidemiology to idenfiy gaps or efficiencies in the legal and policy aspects of their response.**
	Budget Period Outcomes *	**Completion of the analysis of the use or potential use of various law and policy strategies implemented at the local jurisdictional level to effectively address the spread of COVID 19 or create efficiencies in the response from a legal and or policy perspective. Reporting to the CDC-PHLP and other stakeholders of the findings from the project related the to technical assistance provided to local jurisdictions, the analyses performed, and the use of currently available public health law and policy tools during the response.**
	Outcome Measures *	**A tool, toolkit, training, report, presentation, or similar resource created from the analyses that can be used to build better responses based on specific jurisdictional strategies used during the COVID 19 response at the local level. Development of a marketing/communication/outreach strategy designed specifically to provide resources to local jurisdictions that may have current and future impact on their ability to respond to various public health emergencies based on the available law and policy tools available. A recommendation to CDC based on the gap analysis related to what local jurisdictions may need to be more effective in their response.**
	Program Strategy: Programs and Services	
	Activities *	
	Process Measures *	
	Outputs *	
	Budget Period Outcomes *	
	Outcome Measures *	

ORGANIZATIONAL CAPACITY AND PROGRAM EXPERIENCE

12	**Recipient Organizational Capacity (200 word limit):*** Applicant must have experience to working directly with the local health departments across the nation and serving the needs of leadership in public health including the county Chief Public Health Officers. In addition, the applicant must have experience working on issues related to law and policy at the State public health department level as well as experience working on legal preparedness issues at the local jurisdictional level.
13	**Recipient Program Experience (200 word limit):*** The successful applicant will have experience working with local health officers and programs that demonstrate how laws establish the authority of public health agencies and delineate their functions. The successful applicant should be able to serve as the go to resource for local public health agencies and strives to provide critical public health law resources on various topics including emergency preparedness and response. The successful applicant should also be able to demonstrate periodically convening a workgroup of local health agency attorneys who are available to provide real time technical assistance on legal questions in emergencies.

COLLABORATIVE WORK

14	**Expectations for Collaboration, as applicable (200 word limit):** The successful applicant will be able to work directly with local public health officers and their staff. In addition, the successful organization may need to work through health officers to coordinate with leadership at the local level such as such as local health officers to identify specific strategies within the state to respond to COVID19. Due to the changing nature, dynamics, epidemiology and other factors related to COVID19, the successful applicant organization will need to work closely with CDC-PHLP to share information, research, data, and other resources that help to identify the specific needs of the public health legal and policy fields during the response
15	**Expected Subcontractual Work and Recommended Criteria for Selecting Subcontractors, as applicable (200 word limit):** To be determined by the successful applicant.
BUDGET INSTRUCTIONS	
16	**General Instructions for Use of Funds, as applicable (100 word limit):** The successful applicant must be aware that 100% of the funding that supports this project is provided to support COVID 19 preparedness and response. Therefore, use of the funds should be dedicated to specific activities directly related to Coronavirus preparation and the response.
CIO CERTIFICATION*	
17	**By submitting this project plan, I certify that my CIO currently does not maintain a comparable NOFO related to a CBA. I understand my CIO is responsible for adhering to all applicable scientific policies and securing requisite clearances in the Scientific Tracking and Reporting System (STARS). I will discuss the project with my Associate Director for Science (ADS) and obtain the appropriate scientific clearances prior to initiating project activities that involve the collection, generation, or analysis of public health data.**

FY20 CIO Project Plan

CDC-RFA-OT18-1802
Strengthening Public Health Systems and Services through National Partnerships to Improve and Protect the Nation's Health

GENERAL INFORMATION			
1	**Project title (please do not use all caps; 10 word limit):*** **COVID-19: Building capacity of state healh departments to maximize legal authorities.**	2	**CIO: ***
		3	**Division/Branch/Office/Unit: ***
4	**CIO point of contact (POC) name:** **CIO POC email address:** **CIO POC phone number:**		
5	**Select the target population category to receive capacity-building assistance (CBA): *** **CATEGORY A** **Category A: Governmental Public Health Departments** – This category is focused on meeting the priority organizational-level CBA needs of one of the following health department types: state, tribal, local, or territorial. Organizational level includes, but is not limited to, business processes, system design, strategic planning, resource management, agency leadership, and governance. **Category B: Workforce Segments Across Governmental Public Health Departments** – This category is focused on meeting the priority CBA needs of one workforce segment across two or more health department types (state, tribal, local, or territorial). Workforce segments can include, but are not limited to, epidemiologists, chronic disease specialists, public health lawyers, environmentalists, informaticians, and nutritionists. **Category C: Nongovernmental Public Health Components** – This category is focused on meeting the priority CBA needs of one type of nongovernmental component of the public health system. Nongovernmental components represent, but are not limited to, community-based organizations, community health centers, primary care providers, governors, hospitals, economists, legislators, education organizations, social action organizations, and public safety agencies.		
6	**Description of the target population: * (25 word limit)** State health departments Note: Proposals should not build capacity for CDC or other federal agencies		

PROJECT FUNDING OT18-1802 Period of Performance Length: August 1, 2018 – July 31, 2023 Budget Period Length: September 1, 2020 –July 31, 2021	
7	**Proposed Project Funding for FY20 Activities: *** **$_____(Whole Numbers Only)**
8	**Expected Length of Project (Check one): *** ☒ **The CIO will fund the project for one year.** ☐ **The CIO will award new funding each budget period for more than one year.**

CBA PROGRAM APPROACH – NOFO LOGIC MODEL

Select the program strategies and the associated program outcomes the project should work toward for the length of the project

9

CBA Program Strategies (Check one or more): *

☐ **Public Health Systems Infrastructure:** Activities to improve operational capacity, such as policies and plans, administration and management, and quality improvement

☐ **Leadership and Workforce Development:** Activities to improve leadership and workforce competencies, recruitment, and retention

☐ **Data and Information Systems:** Activities to improve collection, management, interpretation, and dissemination of data to guide decision-making

☐ **Communication and Information Technology**: Activities to improve use of communication and information technology to affect health decisions and actions

☐ **Partnerships:** Activities to improve establishment and maintenance of results-driven partnerships

☒ **Laws and Policies:** Activities to improve the ability to interpret and inform laws, including statutes and regulations, and policies that affect health

☐ **Programs and Services:** Activities to improve the identification of best practices and the implementation of evidence-based/informed programs and services

10

CBA Program Outcomes (Check one or more): *

Public Health Systems Infrastructure:

Short-term

☐ Improved operational capacity to evaluate, manage, and improve public health systems

Intermediate

☐ Increased capability of public health systems to achieve nationally established standards

Leadership and Workforce Development:

Short-term

☐ Improved leadership capacity to identify and prioritize public health needs

☐ Strengthened core and discipline-specific public health competencies among the workforce to improve job performance

Intermediate

☐ Increased leadership decision-making to address public health needs strategically and systematically

☐ Strengthened capability of public health workforce to deliver essential public health services

Data and Information Systems:

Short-term

☐ Improved capacity of data and information systems to conduct public health monitoring and surveillance

Intermediate

☐ Increased capability to use data to inform decision-making and support evidence-based practices and policies

Communication and Information Technology:

Short-term

☐ Improved communication and information technology capacity to inform the public efficiently and effectively

Intermediate

☐ Strengthened capability to use communication and information technology to affect health decisions and actions

Partnerships:

Short-term

☐ Improved capacity to establish and maintain partnerships within and across sectors to create a shared vision of health

Intermediate

☐ Strengthened capability to respond to public health priorities collaboratively and strategically

Laws and Policies:

Short-term

☒ Increased capacity to evaluate laws and policies to affect health

Intermediate

☒ Strengthened capability to systematically apply and use laws and policies to improve health

Programs and Services:

Short-term

☐ Improved capacity to identify, prioritize, and customize relevant programs and services to address public health needs

Intermediate

☐ Increased capability to implement evidence-based/informed public health programs, policies, and services to address public health needs

11	PROJECT DETAILS State the purpose of the project and provide project details for the length of the budget period (11 months). For the selected program strategies: - Describe proposed activities and provide sample process measures to track progress implementing the activities. - Describe the expected outputs (resources, tools, products, etc.) and outcomes (change to occur), and provide sample outcome measures to track progress achieving the outcomes.	
	Project Purpose (150 word limit)	**The 2019-20 coronavirus is considered a public health emergency and is being evaluated by all major health organizations around the world. In the United States, the public health response is overseen and managed by state health departments and practitioners at the state jurisdictional level who are in a unique position fully understand their operational authorities related to the epidemic and who use legal authorities and currently available public health emergency statutes, regulations as well as other policies or agreements to respond effectively. The proper use of these legal tools can be the difference between an effective or ineffective public health response. The purpose of this project is to support state health departments, as well as state jurisdiction decision makers, practitioners and legal counsel by creating customized resources, toolkits, presentations, materials, and other relevant media to use legal authorities, policies and agreements within existing law and identify gaps to efficiently and effectively address specific jurisdictional needs during the response.**
	Program Strategy: Public Health Systems Infrastructure	
	Activities *	
	Process Measures *	
	Outputs *	
	Budget Period Outcomes *	
	Outcome Measures *	
	Program Strategy: Leadership and Workforce Development	
	Activities *	
	Process Measures *	
	Outputs *	
	Budget Period Outcomes *	
	Outcome Measures *	
	Program Strategy: Data and Information Systems	
	Activities *	
	Process Measures *	

	Outputs *	
	Budget Period Outcomes *	
	Outcome Measures *	
	Program Strategy: Communication and Information Technology	
	Activities *	
	Process Measures *	
	Outputs *	
	Budget Period Outcomes *	
	Outcome Measures *	
	Program Strategy: Partnerships	
	Activities *	
	Process Measures *	
	Outputs *	
	Budget Period Outcomes *	
	Outcome Measures *	
	Program Strategy: Laws and Policies	
	Activities *	**Activities may include, but are not limited to identifying legal issues impacting state level community mitigation strategies such as travel bans, school closure, and measures specifically aimed at social distancing; State Emergency Declarations and expanded emergency powers; the drafting and implementation of Memorandums of Undersatnding or Memorandums of Agreement; transporting of patients across state lines; Isolation and quarantine; surveillance and disease reporting; examining legal authorities for disease investigation, privacy protection and waivers; developing strategies to research the impact of laws and legal authorities including the use of legal epidemiology; understanding and effectively using HIPPA and the Public Health exceptions; and working directly with the target population to identify jurisdiction specific issues, gaps, and limitations to develop working strategies to implement a successful response.**
	Process Measures *	**All response strategies implemented at the state level by various jurisdictions including, but not limited to, emergency declarations, community mitigation strategies, memorandums of agreement/understanding, the use of legal epidemiology, analyses of the use of statutory laws and statewide regulations, privacy protections and waivers, HIPPA, etc. will be documented by jurisdiction, summarized, and reported to relevant stakeholders and CDC-PHLP.**

	Outputs *	**Produce an analysis of the use or potential use of various state law and policy strategies implemented at various jurisdictions to address the spread of COVID 19 or create efficiencies in the response from a legal and or policy perspective. Identify how jurisdictions of various population size, economic scope, and demographic diversity use state level mitigation strategies, memorandums of agreement/understanding, the use of legal epidemiology to idenfiy gaps or efficiencies in the legal and policy aspects of their response.**
	Budget Period Outcomes *	**Completion of the analysis of the use or potential use of various law and policy strategies implemented at the state jurisdictional level to effectively address the spread of COVID 19 or create efficiencies in the response from a legal and or policy perspective. Reporting to the CDC-PHLP and other stakeholders of the findings from the project related the to technical assistance provided to state jurisdictions, the analyses performed, and the use of currently available public health law and policy tools during the response.**
	Outcome Measures *	**A tool, toolkit, training, report, presentation, or similar resource created from the analyses that can be used to build better responses based on specific state jurisdictional strategies used during the COVID 19 response at the state level. Development of a marketing/communication/outreach strategy designed specifically to provide resources to State jurisdictions that may have current and future impact on their ability to respond to various public health emergencies based on the available law and policy tools available. A recommendation to CDC based on the gap analysis related to what State jurisdictions may need to be more effective in their response.**
	Program Strategy: Programs and Services	
	Activities *	
	Process Measures *	
	Outputs *	
	Budget Period Outcomes *	
	Outcome Measures *	

ORGANIZATIONAL CAPACITY AND PROGRAM EXPERIENCE

12 **Recipient Organizational Capacity (200 word limit):***

Applicant must have experience to working directly with the State health departments across the nation and serving the needs of leadership in public health including the states' Chief Public Health Officers. In addition, the applicant must have experience working on issues related to law and policy at the State public health department level.

13 **Recipient Program Experience (200 word limit):***

The successful applicant will have experience working with State Health Officers and programs that demonstrate how laws establish the authority of public health agencies and delineate their functions. The successful applicant should be able to serve as the go to resource for state and territorial public health agencies and strives to provide critical public health law resources on various topics including emergency preparedness and response. The successful applicant should also be able to demonstrate periodically convening a workgroup of state health agency attorneys who are available to provide real time technical assistance on legal questions in emergencies.

COLLABORATIVE WORK

14 **Expectations for Collaboration, as applicable (200 word limit):**

The successful applicant will be able to work directly with chief public health officers and their staff. In addition, the successful organization may need to work through health officers to coordinate with leadership at the local level

	such as such as local health officers to identify specific strategies within the state to respond to COVID19. Due to the changing nature, dynamics, epidemiology and other factors related to COVID19, the successful applicant organization will need to work closely with CDC-PHLP to share information, research, data, and other resources that help to identify the specific needs of the public health legal and policy fields during the response.
15	**Expected Subcontractual Work and Recommended Criteria for Selecting Subcontractors, as applicable (200 word limit):** To be determined by the successful applicant.
BUDGET INSTRUCTIONS	
16	**General Instructions for Use of Funds, as applicable (100 word limit):** The successful applicant must be aware that 100% of the funding that supports this project is provided to support COVID 19 preparedness and response. Therefore, use of the funds should be dedicated to specific activities directly related to Coronavirus preparation and the response.
CIO CERTIFICATION*	
17	**By submitting this project plan, I certify that my CIO currently does not maintain a comparable NOFO related to a CBA. I understand my CIO is responsible for adhering to all applicable scientific policies and securing requisite clearances in the Scientific Tracking and Reporting System (STARS). I will discuss the project with my Associate Director for Science (ADS) and obtain the appropriate scientific clearances prior to initiating project activities that involve the collection, generation, or analysis of public health data.**

CATEGORY B COVID-19

CIO PROJECT PLANS

FY 2019 CIO Project Plan

CDC-RFA-OT18-1802
Strengthening Public Health Systems and Services through National Partnerships to Improve and Protect the Nation's Health

GENERAL INFORMATION			
1	**Project title (please do not use all caps; 15 words maximum):*** Enhancing environmental health capabilities and engagement in COVID-19 response efforts	2	**CIO:***
		3	**Division:*** **Office:**
4	**CIO point of contact (POC) name:*** **CIO POC email address:*** **CIO POC phone number:***		
5	**Select the target population category to receive capacity-building assistance (CBA):*** **Category A** ☐ **Category B** ☒ **Category C** ☐ **Category A: Governmental Public Health Departments** – This category is focused on meeting the priority organizational-level CBA needs of one of the following health department types: state, tribal, local, or territorial. Organizational level includes, but is not limited to, business processes, system design, strategic planning, resource management, agency leadership, and governance. **Category B: Workforce Segments Across Governmental Public Health Departments** – This category is focused on meeting the priority CBA needs of one workforce segment across two or more health department types (state, tribal, local, or territorial). Workforce segments can include, but are not limited to, epidemiologists, chronic disease specialists, public health lawyers, environmentalists, informaticians, and nutritionists. **Category C: Nongovernmental Public Health Components** – This category is focused on meeting the priority CBA needs of one type of nongovernmental component of the public health system. Nongovernmental components represent, but are not limited to, community-based organizations, community health centers, primary care providers, governors, hospitals, economists, legislators, education organizations, social action organizations, and public safety agencies.		
6	**Description of the target population:* (25 words maximum)** **Note: Proposals should not build capacity for CDC or other federal agencies** The target audience is environmental health (EH) programs and workforce of state, tribal, and local health department.		

PROJECT FUNDING OT18-1802 Period of Performance Length: August 1, 2018 – July 31, 2023 Budget Period Length: September1, 2019 –July 31, 2020			
7	**Proposed Project Funding:*11** **$_____(Whole Numbers Only)**		
8	**Expected Length of Project (Check one):*** ☐ **The CIO will award new funding each budget period for the remainder of the period of performance.** ☐ **The CIO will award new funding each budget period for at least two consecutive years.** ☒ **The CIO will fund the project for one year.**		

CBA PROGRAM APPROACH – NOFO LOGIC MODEL

Select the program strategies and the program outcomes the project should work toward for the length of the project

9

CBA Program Strategies (Check one or more):*

☒ **Public Health Systems Infrastructure:** Activities to improve operational capacity, such as policies and plans, administration and management, and quality improvement
☒ **Leadership and Workforce Development:** Activities to improve leadership and workforce competencies, recruitment, and retention
☒ **Data and Information Systems:** Activities to improve collection, management, interpretation, and dissemination of data to guide decision-making
☐ **Communication and Information Technology**: Activities to improve use of communication and information technology to affect health decisions and actions
☒ **Partnerships:** Activities to improve establishment and maintenance of results-driven partnerships
☒ **Laws and Policies:** Activities to improve the ability to interpret and inform laws, including statutes and regulations, and policies that affect health
☒ **Programs and Services:** Activities to improve the identification of best practices and the implementation of evidence-based/informed programs and services

10

Crisis Response Approaches (Check one or more)*

☐ **Strengthen Incident Management for Early Crisis Response**
☐ **Strengthen Jurisdictional Recovery**
☐ **Strengthen Biosurveillance**
☒ **Strengthen Information Management**
☒ **Strengthen Countermeasures and Mitigation**
☐ **Strengthen Surge Management**
☒ **Strengthen Communications**

11

CBA Program Outcomes (Check one or more):*

Public Health Systems Infrastructure:
Short-term
☒ Improved operational capacity to evaluate, manage, and improve public health systems
Intermediate
☒ Increased capability of public health systems to achieve nationally established standards

Leadership and Workforce Development:
Short-term
☐ Improved leadership capacity to identify and prioritize public health needs
☒ Strengthened core and discipline-specific public health competencies among the workforce to improve job performance
Intermediate
☐ Increased leadership decision-making to address public health needs strategically and systematically
☒ Strengthened capability of public health workforce to deliver essential public health services

Data and Information Systems:
Short-term
☒ Improved capacity of data and information systems to conduct public health monitoring and surveillance
Intermediate
☒ Increased capability to use data to inform decision-making and support evidence-based practices and policies

Communication and Information Technology:
Short-term
☐ Improved communication and information technology capacity to inform the public efficiently and effectively
Intermediate
☐ Strengthened capability to use communication and information technology to affect health decisions and actions

Partnerships:
Short-term
☒ Improved capacity to establish and maintain partnerships within and across sectors to create a shared vision of health
Intermediate
☒ Strengthened capability to respond to public health priorities collaboratively and strategically

Laws and Policies:

Short-term

☐ Increased capacity to evaluate laws and policies to affect health

Intermediate

☐ Strengthened capability to systematically apply and use laws and policies to improve health

Programs and Services:

Short-term

☒ Improved capacity to identify, prioritize, and customize relevant programs and services to address public health needs

Intermediate

☒ Increased capability to implement evidence-based/informed public health programs, policies, and services to address public health needs

PROJECT DETAILS

State the purpose of the project and provide project details for the length of the budget period (11 months).

- For the selected program strategies, describe proposed activities and provide sample process measures to track progress implementing the activities. Describe the expected outputs (resources, tools, products, etc.) and outcomes (changes to occur), and provide sample outcome measures to track progress achieving the outcomes.
- Complete the activities, process measures, outputs, budget period outcomes, and outcome measures column for each program strategy selected.

12	**Project Purpose (150 words maximum):***	Environmental health (EH) professionals play a key role in disease prevention efforts. EH addresses the environment component of the disease triad (host, agent, and environment) by keeping agents from moving through the environment and reaching the host. When an outbreak occurs, EH professionals coordinate with epidemiology and laboratory to stop the disease. EH professionals implement controls (e.g., sanitary and infection control interventions, healthcare facility safety and emergency preparedness, engineered work practices, and appropriate personal protective equipment) to prevent disease transmission and protect personal and worker safety. As one of the largest segments of the public health worforce, EH professionals are instrumental to effective coronavirus outbreak prevention and response. The purpose of this project is to enhance EH capabilities and engagement in coronavirus outbreak prevention and response through practice-based training in conducting environmental assessments and monitoring environmental conditions for preventing disease transmission, provision of resources, strengthening partnerships, and developing needed guidance documents and protocols.

Program Strategies	**Activities**	**Process Measures**	**Outputs**	**Budget Period Outcomes**	**Outcome Measures**
Public Health Systems Infrastructure	Develop protocols and guidance documents for conducting environmental assessments to prevent coronavirus transmission Determine EH program baseline capacity and needs for strengthening	Status of development of EH protocols and guidance documents Completed assessment and report on the baseline capacity of EH programs and needs	Developed protocols and guidance documents Report on the baseline operational capacity of EH programs and needs Updated EH policies for protecting against exposures	Improved operational capacity of EH programs to conduct EH assessments to prevent coronavirus transmission Increased protection against exposures	Number of EH programs with increased operational capacity to conduct EH assessments to prevent coronavirus transmission Improved EH program capacity to update and revise policies

		coronavirus response activities Assist EH programs to update/revise EH policies as needed to protect against exposures	Status of assistance to EH programs			
	Leadership and Workforce Development	Design, plan, and deliver EH training to strengthen EH workforce technical and professional competencies for coronavirus response activities	Number of EH trainings designed and delivered Number of EH professionals trained	Completed and delivered trainings for building EH workforce technical and professional competencies	Strengthened EH workforce with improved technical capabilities and professional competencies	Improvement in technical capabilities and professional competencies (e.g., increased competency scores on post-test vs pre-test) Increase in productivity, effectiveness, and job satisfaction among workforce
	Data and Information Systems	Establish contracts with data system companies or vendors for procuring and enhancing EH data information systems Procure IT equipment and electronic data tools and resources (e.g., mobile devices, tablets, internet hotspots) to support EH assessments and services	Status of contract development with data system companies or vendors Status of procurement of IT equipment and electronic data tools and resources	Established contracts with data system companies Procured IT equipment and electronic tools and resources for enhanced data collection	Enhanced EH data and information systems with increased data collection and management capabilities	Improvement in information systems for EH data collection and management (e.g. improved data quality or improved reach of collection) Increased availability of data to guide decision making (e.g. increased number of publications and reports available to the public)
	Communication and Information Technology					

	Partnerships	Develop and disseminate frameworks and recommendations for strengthening partnerships to address the relationships between environmental factors/pathways and other components of the disease triad (host and agent)	Status of framework completion Number of dissemination actvities	Framework for strengthening partnerships	Strengthened coordination between agent, host, and environmental components of the disease triad	Increased and improved partnerships
	Laws and Policies					
	Programs and Services	Procure equipment and resources to support EH programs engagement in the coronavirus response Assist with identifying and implementing evidence-based/informed EH programs and services	Status of procurement for EH equipment and resources Status of implementing evidence-based/informed EH programs and services	Procured equipment to support EH programs and services Strategies for improved implementation of evidence based/informed programs and services	Improved effectiveness and efficiency of EH programs and services	Increased availability of equipment and resources to support EH programs Improved implementation of evidence-based/informed programs and services

ORGANIZATIONAL CAPACITY AND PROGRAM EXPERIENCE

13	**Recipient Organizational Capacity (200 words maximum):*** The recipient should have demonstrated experience in developing and disseminating in-person and electronic training solutions addressing technical, field-based EH topics and practice areas. The applicant should demonstrate approaches that use innovative and collaborative methodologies to accomplish the proposed project activities. A particularly useful benefit would be experience or ability to develop and disseminate new course content on relevant EH practice areas and topics impacting the EH professionals who work at state, tribal, local and territorial health departments throughout the U.S. The applicant should be able to produce training materials that meet the needs of the target audience (in this case, the target audience will be EH professionals from state, tribal, local, and territorial health departments) and that are supported by current evidence base. Since much of the EH subject matter expertise resides with well-trained and experienced EH professionals across the nation, the recipient must be prepared to work with the CDC Water, Food, and Environmental Health Services Branch (WFEHSB) staff to identify and determine EH experts to contract with to accomplish certain project activities.

14	**Recipient Program Experience (200 words maximum):*** The recipient should have: 1. Extensive knowledge and experience with project planning and implementation. 2. Extensive knowledge and experience developing effective relationships and partnerships with EH programs at public health departments. 3. Subject matter expertise in EH.

COLLABORATIVE WORK

15	**Expectations for Collaboration, as applicable (200 words maximum):** Collaboration with other organizations or agencies may be deemed appropriate and acceptable to accomplish project work plan objectives and deliverables.
16	**Expected Subcontractual Work and Recommended Criteria for Selecting Subcontractors, as applicable (200 words maximum):** The recipient may be expected to subcontract with EH subject matter experts and other organizations or agencies to carry out work plan objectives. These contractors will consist of highly skilled and trained EH professionals with EH practice and workforce development experience.
17	**Will the proposed CBA benefit governmental public health agencies?** ☒ **Yes** ☐ **No** **If yes, briefly describe how (200 words maximum):** This project will benefit governmental public health agencies by enhancing EH program and professional capacity and engagement in coronavirus response efforts. This project will result in strengthened public health department, EH program capacity, ultimately strengthening the public health systems and workforce.

BUDGET INSTRUCTIONS

18	**General Instructions for Use of Funds, as applicable (100 words maximum):** The proposed funding amount is subject to the availability of funds. Applicant proposals should be scalable. If less funds are available, CDC and the recipient will work together to revise and further prioritize activities in the work plan.

CIO CERTIFICATION*

19	**By submitting this project plan, I certify that my CIO currently does not maintain a comparable NOFO related to CBA. I understand it is my CIO's responsibility to pursue Office of Management and Budget (OMB) and Paperwork Reduction Act (PRA) clearance for this project. I will discuss the project with my Associate Director for Science (ADS) and initiate the appropriate clearance prior to funding.**

FY 2019 CIO Project Plan

CDC-RFA-OT18-1802
Strengthening Public Health Systems and Services through National Partnerships to Improve and Protect the Nation's Health

GENERAL INFORMATION			
1	**Project title (please do not use all caps; 15 words maximum):*** **Increasing Epidemiologist Public Health Emergency Domestic Response Capacity to 2019 Novel Coronavirus**	2	**CIO:***
		3	**Division:*** **Office:**
4	**CIO point of contact (POC) name:** **CIO POC email address:** **CIO POC phone number:**		
5	**Select the target population category to receive capacity-building assistance (CBA):*** **Category A** ☐ **Category B** ☒ **Category C** ☐ **Category A: Governmental Public Health Departments** – This category is focused on meeting the priority organizational-level CBA needs of one of the following health department types: state, tribal, local, or territorial. Organizational level includes, but is not limited to, business processes, system design, strategic planning, resource management, agency leadership, and governance. **Category B: Workforce Segments Across Governmental Public Health Departments** – This category is focused on meeting the priority CBA needs of one workforce segment across two or more health department types (state, tribal, local, or territorial). Workforce segments can include, but are not limited to, epidemiologists, chronic disease specialists, public health lawyers, environmentalists, informaticians, and nutritionists. **Category C: Nongovernmental Public Health Components** – This category is focused on meeting the priority CBA needs of one type of nongovernmental component of the public health system. Nongovernmental components represent, but are not limited to, community-based organizations, community health centers, primary care providers, governors, hospitals, economists, legislators, education organizations, social action organizations, and public safety agencies.		
6	**Description of the target population:* (25 words maximum)** **Note: Proposals should not build capacity for CDC or other federal agencies** Applied Epidemiologists in State, Tribal, Local and Territorial (STLT) Health Departments.		

PROJECT FUNDING OT18-1802 Period of Performance Length: August 1, 2018 – July 31, 2023 Budget Period Length: September1, 2019 –July 31, 2020			
7	**Proposed Project Funding:*11** **$_____(Whole Numbers Only)**		
8	**Expected Length of Project (Check one):*** ☐ **The CIO will award new funding each budget period for the remainder of the period of performance.** ☐ **The CIO will award new funding each budget period for at least two consecutive years.**		

☒ **The CIO will fund the project for one year.**

CBA PROGRAM APPROACH – NOFO LOGIC MODEL

Select the program strategies and the program outcomes the project should work toward for the length of the project

9

CBA Program Strategies (Check one or more):*

☒ **Public Health Systems Infrastructure:** Activities to improve operational capacity, such as policies and plans, administration and management, and quality improvement
☐ **Leadership and Workforce Development:** Activities to improve leadership and workforce competencies, recruitment, and retention
☐ **Data and Information Systems:** Activities to improve collection, management, interpretation, and dissemination of data to guide decision-making
☐ **Communication and Information Technology**: Activities to improve use of communication and information technology to affect health decisions and actions
☒ **Partnerships:** Activities to improve establishment and maintenance of results-driven partnerships
☐ **Laws and Policies:** Activities to improve the ability to interpret and inform laws, including statutes and regulations, and policies that affect health
☐ **Programs and Services:** Activities to improve the identification of best practices and the implementation of evidence-based/informed programs and services

10

Crisis Response Approaches (Check one or more)*

☒ **Strengthen Incident Management for Early Crisis Response**
☒ **Strengthen Jurisdictional Recovery**
☒ **Strengthen Biosurveillance**
☒ **Strengthen Information Management**
☒ **Strengthen Countermeasures and Mitigation**
☒ **Strengthen Surge Management**
☒ **Strengthen Communications**

11

CBA Program Outcomes (Check one or more):*

Public Health Systems Infrastructure:
Short-term
☒ Improved operational capacity to evaluate, manage, and improve public health systems
Intermediate
☐ Increased capability of public health systems to achieve nationally established standards
Leadership and Workforce Development:
Short-term
☐ Improved leadership capacity to identify and prioritize public health needs
☐ Strengthened core and discipline-specific public health competencies among the workforce to improve job performance
Intermediate
☐ Increased leadership decision-making to address public health needs strategically and systematically
☐ Strengthened capability of public health workforce to deliver essential public health services
Data and Information Systems:
Short-term
☐ Improved capacity of data and information systems to conduct public health monitoring and surveillance
Intermediate
☐ Increased capability to use data to inform decision-making and support evidence-based practices and policies
Communication and Information Technology:
Short-term
☐ Improved communication and information technology capacity to inform the public efficiently and effectively
Intermediate
☐ Strengthened capability to use communication and information technology to affect health decisions and actions
Partnerships:
Short-term
☒ Improved capacity to establish and maintain partnerships within and across sectors to create a shared vision of health

Intermediate

☐ Strengthened capability to respond to public health priorities collaboratively and strategically

Laws and Policies:

Short-term

☐ Increased capacity to evaluate laws and policies to affect health

Intermediate

☐ Strengthened capability to systematically apply and use laws and policies to improve health

Programs and Services:

Short-term

☐ Improved capacity to identify, prioritize, and customize relevant programs and services to address public health needs

Intermediate

☐ Increased capability to implement evidence-based/informed public health programs, policies, and services to address public health needs

PROJECT DETAILS

State the purpose of the project and provide project details for the length of the budget period (11 months).

- For the selected program strategies, describe proposed activities and provide sample process measures to track progress implementing the activities. Describe the expected outputs (resources, tools, products, etc.) and outcomes (changes to occur), and provide sample outcome measures to track progress achieving the outcomes.
- Complete the activities, process measures, outputs, budget period outcomes, and outcome measures column for each program strategy selected.

12	**Project Purpose (150 words maximum):***	The goal of this project is to ensure the optimal response to prevention and control of novel coronavirus (COVID-19) through the efforts of non-governmental organizations (NGOs). NGOs have contributed to the quality, efficiency and speed of the COVID-19 response, and are important collaborators with CDC and STLT partners. This proposal advances public health surveillance, epidemiological and information sharing (informatics) capacity for state, local and territorial public health departments.

Program Strategies	**Activities**	**Process Measures**	**Outputs**	**Budget Period Outcomes**	**Outcome Measures**
Public Health Systems Infrastructure	**Provide and support technical assistance and training to strengthen STLT epidemiological capability for the COVID-19 response.** **Support bi-directional information exchange between the CDC and state and local public health agencies** **Levearge existing mechanisms to provide consultations to assist public health agency investigations and support epidemiologic data collection,**	**Convene members and host calls and webinars with STLT health departments to share information, discuss promising practices, identify needs, and tools/resources** **Communicate and coordinate guidance and recommendations with public health officials, partners, and stakeholders to support decision-making**	**Tools provided through organizational communication channels for members** **Evidence of technical assistance provided to public health epidemiologists** **Develop an after-action report and update processes as appropriate.**	**Strengthened state, local and territorial surveillance and detection systems** **Strengthened epidemiological investigation capability to respond to COVID-19** **Identified strengths and gaps to improve future response posture**	**Disseminated technical, logistical, clinical information with technical assistance support as COVID-19 recommendations emerge and change** **Strengthened processes and procedures in responding to public health emergencies**

		accessibility, and quality. Provide direct COVID-19 epidemiological response support to US states, territories, and freely associated states of the Pacific Update organization specific ConOps plans based on response lessons learned Track and evaluate successes and barriers that impact COVID-19 response operations	Identify and prioritize health departments requiring epidemiologic support for COVID-19 response Create and revise existing response SOPs and processes per the gaps identified in after-action reports Review internal (organizational) and external (CDC, health departments etc.) strengths and barriers impacting response operations and report to CDC	Submit report to CDC identifying and assessing policy strengths and barriers to effective COVID-19 response		
	Leadership and Workforce Development					
	Data and Information Systems					
	Communication and Information Technology					
	Partnerships	Continue coordination with key public health non-profit partners and stakeholders Sustain collaboration with the State Coordination Task Force (SCTF), such as partner call participation and CDC	Activate and scale-up organizational emergency response structure to support public health response efforts of CDC task forces and STLT health departments	Assign dedicated resources to SCTF and other CDC working groups as needed Report pertinent response information compiled by the	Collaborated with COVID-19 response partners to provide multidisciplinary response interventions Improved organizational or CDC guidance inclusive of state,	Established and strengthened diverse public health partnerships with key constituency groups such as health department officials, epidemiologists and laboratorians

		guidance feedback and input Identify respective stakeholders to gather lessons learned and coordinate CDC tools/guidance	Convene STLT public health leaders to assist with guidance and resource development	organization to the CDC	local, territorial and public health laboratory perspectives	Coordinated implementation of evidence-based COVID-19 programs, policies and services
	Laws and Policies					
	Programs and Services					

ORGANIZATIONAL CAPACITY AND PROGRAM EXPERIENCE

13 **Recipient Organizational Capacity (200 words maximum): ***

The organization must have capacity to connect and communicate with STLT epidemiology public health agency officials at the national level.

14 **Recipient Program Experience (200 words maximum): ***

The organization must have a track record of communicating and implementing effective intervention to strengthen the response posture of STLT public health epidemiologic, informatics, and surveillance capacity.

COLLABORATIVE WORK

15 **Expectations for Collaboration, as applicable (200 words maximum):**

The organization must establish and maintain at least one liaison to CDC's State Coordination Taskforce (SCTF) throughout the emergency response and work collaboratively with other response partners as appropriate.

16 **Expected Subcontractual Work and Recommended Criteria for Selecting Subcontractors, as applicable (200 words maximum):**

Subcontracting may be necessary to address the COVID-19 response needs of public health laboratorians

17 **Will the proposed CBA benefit governmental public health agencies?**

☒ **Yes**
☐ **No**

If yes, briefly describe how (200 words maximum):

NGOs are uniquely positioned to strengthen response efforts, whether through mobilizing their own constituents or by providing technical assistance to public sector health departments.

BUDGET INSTRUCTIONS	
18	**General Instructions for Use of Funds, as applicable (100 words maximum):** **Funds will be used to cover personnel and benefit costs, travel expenses, supplies and consultant fees needed to cover work described above.**
CIO CERTIFICATION*	
19	**By submitting this project plan, I certify that my CIO currently does not maintain a comparable NOFO related to CBA. I understand it is my CIO's responsibility to pursue Office of Management and Budget (OMB) and Paperwork Reduction Act (PRA) clearance for this project. I will discuss the project with my Associate Director for Science (ADS) and initiate the appropriate clearance prior to funding.**

FY 2019 CIO Project Plan

CDC-RFA-OT18-1802
Strengthening Public Health Systems and Services through National Partnerships to Improve and Protect the Nation's Health

GENERAL INFORMATION			
1	**Project title (please do not use all caps; 15 words maximum):*** **Support to strengthen national infrastructure for epidemiology, surveillance, and laboratory testing for COVID-19.**	2	**CIO:***
		3	**Division:*** **Office:**
4	**CIO point of contact (POC) name:** **CIO POC email address:** **CIO POC phone number:**		
5	**Select the target population category to receive capacity-building assistance (CBA):*** **Category A** ☐ **Category B** ☒ **Category C** ☐ **Category A: Governmental Public Health Departments** – This category is focused on meeting the priority organizational-level CBA needs of one of the following health department types: state, tribal, local, or territorial. Organizational level includes, but is not limited to, business processes, system design, strategic planning, resource management, agency leadership, and governance. **Category B: Workforce Segments Across Governmental Public Health Departments** – This category is focused on meeting the priority CBA needs of one workforce segment across two or more health department types (state, tribal, local, or territorial). Workforce segments can include, but are not limited to, epidemiologists, chronic disease specialists, public health lawyers, environmentalists, informaticians, and nutritionists. **Category C: Nongovernmental Public Health Components** – This category is focused on meeting the priority CBA needs of one type of nongovernmental component of the public health system. Nongovernmental components represent, but are not limited to, community-based organizations, community health centers, primary care providers, governors, hospitals, economists, legislators, education organizations, social action organizations, and public safety agencies.		
6	**Description of the target population:* (25 words maximum)** **Note: Proposals should not build capacity for CDC or other federal agencies** This project seeks to build capacity of applied epidemiologists in state, tribal, local, and territorial public health departments.		

PROJECT FUNDING OT18-1802 Period of Performance Length: August 1, 2018 – July 31, 2023 Budget Period Length: September1, 2019 –July 31, 2020			
7	**Proposed Project Funding:*11** $_____**(Whole Numbers Only)**		
8	**Expected Length of Project (Check one):*** ☐ **The CIO will award new funding each budget period for the remainder of the period of performance.**		

☐ **The CIO will award new funding each budget period for at least two consecutive years.**

☒ **The CIO will fund the project for one year.**

CBA PROGRAM APPROACH – NOFO LOGIC MODEL

Select the program strategies and the program outcomes the project should work toward for the length of the project

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☒ **Strengthen Jurisdictional Recovery**
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☐ **Strengthen Countermeasures and Mitigation**
☒ **Strengthen Surge Management**
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11

CBA Program Outcomes (Check one or more):*

Public Health Systems Infrastructure:
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☐ Improved operational capacity to evaluate, manage, and improve public health systems
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Short-term
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☐ Increased capacity to evaluate laws and policies to affect health
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Programs and Services:
Short-term
☒ Improved capacity to identify, prioritize, and customize relevant programs and services to address public health needs
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PROJECT DETAILS

State the purpose of the project and provide project details for the length of the budget period (11 months).

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- Complete the activities, process measures, outputs, budget period outcomes, and outcome measures column for each program strategy selected.

12	**Project Purpose (150 words maximum):***	Recipient will provide public health leadership and support to slow and mitigate the impact of COVID-19 in the U.S., coordinating with domestic partners to identify cases, identify contacts, characterize disease transmission, provide clinical and infection control guidance, and support the science base to inform methods to mitigate the impact of this virus. These funds would be used to support the coordination of the response as follows:				
	Program Strategies	**Activities**	**Process Measures**	**Outputs**	**Budget Period Outcomes**	**Outcome Measures**
	Public Health Systems Infrastructure					
	Leadership and Workforce Development	Masters-level epidemiology fellows will be placed at STLT agencies to provide needed epidemiology and data preparedness capacity to support COVID-19 and related epidemiology needs. Training will be provided to existing STLT staff in informatics, epidemiology and surveillance so that the applied public health workforce can monitor and respond	Number of fellows onboarded; number of workforce development activities/enhance-ments completed, including but not limited to fellowships and developed trainings.	Training materials developed for STLT staff Webinars and/or peer-to-peer learning sessions developed and implemented	Improved leadership skills of mid-level STLT epidemiologists to serve as public health leaders during response Strengthened core and discipline-specific public health competencies among the workforce as evidenced by improved job performance and capacity.	Change in number of fellows and STLT staff that self-report improved leadership skills Change in number of STLT staff that demonstrate improved job performance

		to public health informatics needs to support COVID-19 and emerging public health needs. Leadership training will be provided to mid-level STLT epidemiologists to provide skills needed to serve as public health leaders during public health emergency responses.				
	Data and Information Systems	Support STLT health agency with response-related data preparedness needs, including surveillance, lab testing, harmonization of epi-lab data, laboratory equipment, training and technical assistance. An Epidemiology Capacity Assessment will be developed to inform targeted capacity building activities to improve data systems and provide training to ensure a competent and qualified workforce to respond to public health emergencies, including COVID-19.	Number of STLT health agencies that complete Epidemiology Capacity Assessment Identification of capacity and gaps to support epi, lab, and surveillance workforce in data analysis, information systems, and related activities.	A report that enumerates the applied epi workforce and provides recommendations on strengthening epidemiology and preparedness capacity. Data systems trainings and resources are developed to address gaps and implement report recommendations.	Improved capacity of data and information systems to conduct public health monitoring and surveillance for COVID-19 Increased capability to use data to inform decision-making and support evidence-based practices and policies to address COVID-19 needs	Change in number of STLT health agencies reporting adoption of innovative monitoring and surveillance activities Change in STLT health agencies reporting use of data to inform decision-making
	Communication and Information Technology					
	Partnerships	Collaborate with STLT public health agencies, federal partners and national non-profit organizations to provide a forum for information and resource sharing,	Number of major convenings held or forums developed to share information and resources Number of technical	Development of resource hub (via website, etc.) for information sharing. System or process developed to request technical	Improved capacity to establish and maintain partnerships within and across sectors to create a shared vision of health.	Change in number of STLT public health agencies reporting partnerships developed to address COVID-19 needs within jurisdiction

		technical assistance, and consultation on the epidemiologic and surveillance needs during a public health emergency response. Liaise with federal partners and national non-profit organizations to facilitate a coordinated, effective national response to a public health emergency	assistance or consultations provided	assistance or consultation		
	Laws and Policies					
	Programs and Services	Provide appropriate response staffing and other operational needs to support STLT public health agencies, and other partners during a public health emergency response. Convene STLT applied epidemiologists and other public health partners at meetings related to public health emergency responses on topics pertaining to pandemic planning considerations (including COVID-19), surveillance, epi, lab, and data preparedness needs, among others. Use evidence and data to implement programs and services that address public health needs during a pandemic (including COVID-19)	Number of convenings Number of partner organizations participating in convenings Number of programs and services identified to address pandemic needs	Resource developed on key evidence-based programs and services used during a pandemic response Programs and services implemented to address pandemic needs	Improved capacity to identify, prioritize, and customize relevant programs and services to address public health needs	Change in number of STLT health agencies reporting customization of programs and services to address COVID-19 needs.

ORGANIZATIONAL CAPACITY AND PROGRAM EXPERIENCE

13

Recipient Organizational Capacity (200 words maximum): *

Recipient must have have ability to reach, communicate to and from and coordinate action with the target population described.

The funding recipient must be a member-based organization that collaborates with applied epidemiologists and public health leaders in state, tribal, local, and territorial governmental public health departments. The recipient must be a nationally recognized leader in building and sustaining applied epidemiology programs and workforce development. The recipient must have the ability to convene representative groups of epidemiologists and informaticians who conduct public health surveillance, support public health surveillance systems, and utilize surveillance data to guide public health action. Recipient should have content expertise in the fields of applied epidemiology, disasters, workforce development, data review and interpretation, emergency preparedness, and evidence-based public health.

14

Recipient Program Experience (200 words maximum): *

The funding recipient must have extensive experience supporting capacity building for applied public health epidemiologists and STLT health departments. Demonstrated experience must include:

- Convening public health epidemiologists, informaticians, and public health leaders;
- Supporting a broad spectrum of public health epidemiology programs, including preparedness, infectious diseases, surveillance, and non-infectious diseases;
- Planning, implementing, monitoring, and evaluating a national applied epidemiology fellowship program;
- Managing federally funded programs and projects related to public health capacity building, including reporting on progress.

The recipient will have broad experience coordinating programs, services, leadership and or training activities with the target population described, and can readily expand as needed, with appropriate funding support.

COLLABORATIVE WORK

15

Expectations for Collaboration, as applicable (200 words maximum):

Recipient must work closely with CDC Technical Monitors and designated external partners, if any, to achieve objectives with/for the target population described.

16

Expected Subcontractual Work and Recommended Criteria for Selecting Subcontractors, as applicable (200 words maximum):

Subcontracting may be required, if jointly determined by CDC Technical Monitors and Recipient, based on project circumstances. Recipient should be prepared to work with CDC program to identify key requirements and corresponding selection criteria.

17

Will the proposed CBA benefit governmental public health agencies?

☒ **Yes**
☐ **No**

If yes, briefly describe how (200 words maximum):

NGOs and similar public health partner organizations are uniquely positioned to strengthen response efforts, whether through mobilizing their own constituents or by providing technical assistance to public sector health departments.

BUDGET INSTRUCTIONS

18

General Instructions for Use of Funds, as applicable (100 words maximum):

Actual funding level for this project may be slightly or substantially higher or lower than estimated, and Recipients should be willing to revise the workplan they submit in response to it, in collaboration with CDC Technical Monitors. Recipients must

	ensure proposed costs are allowable, allocable and reasonable. If this Project Plan does not provide sufficiently detailed guidance for the Recipient to thoroughly cost one or more activities, the Recipient should use its professional judgement and experience with the subject matter to provide estimates.
CIO CERTIFICATION*	
19	**By submitting this project plan, I certify that my CIO currently does not maintain a comparable NOFO related to CBA. I understand it is my CIO's responsibility to pursue Office of Management and Budget (OMB) and Paperwork Reduction Act (PRA) clearance for this project. I will discuss the project with my Associate Director for Science (ADS) and initiate the appropriate clearance prior to funding.**

FY 2019 CIO Project Plan

CDC-RFA-OT18-1802
Strengthening Public Health Systems and Services through National Partnerships to Improve and Protect the Nation's Health

GENERAL INFORMATION			
1	**Project title (please do not use all caps; 15 words maximum):*** **Strengthening Capacity of Health Strategist Workforce to Address COVID-19 Response Needs**	2	**CIO:***
		3	**Division:*** **Office:**
4	**CIO point of contact (POC) name:*** **CIO POC email address:*** **CIO POC phone number:***		
5	**Select the target population category to receive capacity-building assistance (CBA):*** **Category A ☐ Category B ☒ Category C ☐** **Category A: Governmental Public Health Departments** – This category is focused on meeting the priority organizational-level CBA needs of one of the following health department types: state, tribal, local, or territorial. Organizational level includes, but is not limited to, business processes, system design, strategic planning, resource management, agency leadership, and governance. **Category B: Workforce Segments Across Governmental Public Health Departments** – This category is focused on meeting the priority CBA needs of one workforce segment across two or more health department types (state, tribal, local, or territorial). Workforce segments can include, but are not limited to, epidemiologists, chronic disease specialists, public health lawyers, environmentalists, informaticians, and nutritionists. **Category C: Nongovernmental Public Health Components** – This category is focused on meeting the priority CBA needs of one type of nongovernmental component of the public health system. Nongovernmental components represent, but are not limited to, community-based organizations, community health centers, primary care providers, governors, hospitals, economists, legislators, education organizations, social action organizations, and public safety agencies.		
6	**Description of the target population:* (25 words maximum)** **Health strategist workforce (leaders and mid-career professionals) in state, tribal, local and territorial health departments within multi-sector networks, partnerships and access to knowledge/resources.** **Note: Proposals should not build capacity for CDC or other federal agencies**		

PROJECT FUNDING OT18-1802 Period of Performance Length: August 1, 2018 – July 31, 2023 Budget Period Length:			
7	**Proposed Project Funding:*** **$_____(Whole Numbers Only)**		
8	**Expected Length of Project (Check one):*** ☐ **The CIO will award new funding each budget period for the remainder of the period of performance.** ☐ **The CIO will award new funding each budget period for at least two consecutive years.**		

☒ **The CIO will fund the project for one year.**

CBA PROGRAM APPROACH – NOFO LOGIC MODEL

Select the program strategies and the program outcomes the project should work toward for the length of the project

9

CBA Program Strategies (Check one or more):*

☐ **Public Health Systems Infrastructure:** Activities to improve operational capacity, such as policies and plans, administration and management, and quality improvement
☐ **Leadership and Workforce Development:** Activities to improve leadership and workforce competencies, recruitment, and retention
☐ **Data and Information Systems:** Activities to improve collection, management, interpretation, and dissemination of data to guide decision-making
☒ **Communication and Information Technology**: Activities to improve use of communication and information technology to affect health decisions and actions
☒ **Partnerships:** Activities to improve establishment and maintenance of results-driven partnerships
☐ **Laws and Policies:** Activities to improve the ability to interpret and inform laws, including statutes and regulations, and policies that affect health
☒ **Programs and Services:** Activities to improve the identification of best practices and the implementation of evidence-based/informed programs and services

10

Crisis Response Approaches (Check one or more)*

☐ **Strengthen Incident Management for Early Crisis Response**
☒ **Strengthen Jurisdictional Recovery**
☐ **Strengthen Biosurveillance**
☐ **Strengthen Information Management**
☒ **Strengthen Countermeasures and Mitigation**
☒ **Strengthen Surge Management**
☒ **Strengthen Communications**

11

CBA Program Outcomes (Check one or more):*

Public Health Systems Infrastructure:
Short-term
☐ Improved operational capacity to evaluate, manage, and improve public health systems
Intermediate
☐ Increased capability of public health systems to achieve nationally established standards
Leadership and Workforce Development:
Short-term
☐ Improved leadership capacity to identify and prioritize public health needs
☐ Strengthened core and discipline-specific public health competencies among the workforce to improve job performance
Intermediate
☐ Increased leadership decision-making to address public health needs strategically and systematically
☐ Strengthened capability of public health workforce to deliver essential public health services
Data and Information Systems:
Short-term
☐ Improved capacity of data and information systems to conduct public health monitoring and surveillance
Intermediate
☐ Increased capability to use data to inform decision-making and support evidence-based practices and policies
Communication and Information Technology:
Short-term
☐ Improved communication and information technology capacity to inform the public efficiently and effectively
Intermediate
☒ Strengthened capability to use communication and information technology to affect health decisions and actions
Partnerships:
Short-term
☐ Improved capacity to establish and maintain partnerships within and across sectors to create a shared vision of health

Intermediate

☒ Strengthened capability to respond to public health priorities collaboratively and strategically

Laws and Policies:

Short-term

☐ Increased capacity to evaluate laws and policies to affect health

Intermediate

☐ Strengthened capability to systematically apply and use laws and policies to improve health

Programs and Services:

Short-term

☒ Improved capacity to identify, prioritize, and customize relevant programs and services to address public health needs

Intermediate

☐ Increased capability to implement evidence-based/informed public health programs, policies, and services to address public health needs

PROJECT DETAILS

State the purpose of the project and provide project details for the length of the budget period (11 months).

- For the selected program strategies, describe proposed activities and provide sample process measures to track progress implementing the activities. Describe the expected outputs (resources, tools, products, etc.) and outcomes (changes to occur), and provide sample outcome measures to track progress achieving the outcomes.
- Complete the activities, process measures, outputs, budget period outcomes, and outcome measures column for each program strategy selected.

12	**Project Purpose (150 words maximum):***	**The purpose of the project is to build capacity of health strategists to address the COVID-19 response within their jurisdiction. Suggested activities are designed to support health strategists in preparedness and response activities: communicating key COVID-19 information, building and maintaining partnerships, and assessing mental health interventions to leverage resources needed to assist with the response. Applicants are encouraged to propose additional activities, performance measures, outputs, and outcomes, as needed, to address the unique capacity-building assistance needs of health strategists.**

Program Strategies	Activities	Process Measures	Outputs	Budget Period Outcomes	Outcome Measures
Public Health Systems Infrastructure					
Leadership and Workforce Development					
Data and Information Systems					
Communication and Information Technology	**Developing and disseminating resources to improve health strategist workforce in creating and implementing**	**Number of virtual convenings (webinars, calls, etc.) provided** **Number of materials developed**	**Resources developed to translate COVID-19 data and guidance into communication campaigns**	**Improved communication and information technology capacity to inform the public efficiently and effectively**	**Health strategists reporting development and use of a communications plan to disseminate**

		communication campaigns that are accurate, relevant, and culturally competent				COVID-19 information
	Partnerships	Engage health strategist workforce in stakeholder convenings to leverage resources to address COVID-19 needs within jurisdiction Identify and train health strategist workforce on successful practices to inform and mobilize communities in collaborative efforts to address COVID-19 needs	Number of stakeholder virtual convenings held Number of health strategists participating in trainings on informing and mobilizing public and private sectors	Resource developed guiding health strategists on partnering across jurisdictions to address COVID-19 response needs	Strengthen the capacity of health strategists to engage health departments and other key stakeholders in addressing emergency preparedness and response needs	Health strategists that use a collaborative process to identify and address COVID-19 response needs within their community
	Laws and Policies					
	Programs and Services	Assess mental health interventions and disaster landscape to develop tools and resources for health departments	Number of existing surveillance systems assessed to inform guidance Number of existing resources assessed to inform guidance	Mental health surveillance guidance developed for health departments during and after COVID-19 outbreak	Improved capacity to effectively and accurately interpret available data for mental health surveillance purposes during and after COVID-19 outbreak	Health strategists that use guidance developed Health strategists that report increased capacity of mental health surveillance during and after COVID-19 outbreak

ORGANIZATIONAL CAPACITY AND PROGRAM EXPERIENCE

13	**Recipient Organizational Capacity (200 words maximum):*** **The recipient must demonstrate they are capacity-mobilizing organization with existing infrastructure (e.g., an established regional public health training model) and technology to reach the public health workforce nationally. They must have the ability to connect subject matter experts and the public health workforce for training, surveys, surveillance and workforce**

	development activities. Relationships with Public Health organizations and associations is needed to reach the health strategists in the public health workforce across the United States.
14	Recipient Program Experience (200 words maximum):* The recipient must demonstrate experience and expertise in public health emergency preparedness and response, particularly in the areas of developing and disseminating culturally competent communication campaigns, hosting convenings, public health trainings, public health systems and services research, and mental health surveillance.

COLLABORATIVE WORK

15	Expectations for Collaboration, as applicable (200 words maximum): The applicant is expected to collaborate with the CDC and other key stakeholders (including other national organizations) to support efforts to minimize the impact of COVID-19 in communities.
16	Expected Subcontractual Work and Recommended Criteria for Selecting Subcontractors, as applicable (200 words maximum): The successful applicant is expected to play a substantial role in implementing project activities. Subcontracting is permitted, as needed, to address specific technical needs associated with project activities.
17	Will the proposed CBA benefit governmental public health agencies? ☒ Yes ☐ No If yes, briefly describe how (200 words maximum): The project activities will benefit governmental public health agencies through working across systems to address COVID-19 needs at the individual, community, and national levels.

BUDGET INSTRUCTIONS

18	General Instructions for Use of Funds, as applicable (100 words maximum): Recipient will be permitted to expend funds for project-related costs (personnel, fringe, supplies, etc.) in accordance with general terms and conditions for non-research cooperative agreement. Applicant proposals should be scalable. If less funds are available, CDC and the recipient will work together to revise and further prioritize activities in the work plan.

CIO CERTIFICATION*

19	By submitting this project plan, I certify that my CIO currently does not maintain a comparable NOFO related to this proposed CBA project. I understand my CIO is responsible for adhering to all applicable scientific policies and securing requisite clearances in the Scientific Tracking and Reporting System (STARS). I will discuss the project with my Associate Director for Science (ADS) and obtain the appropriate scientific clearances prior to initiating project activities that involve the collection, generation, or analysis of public health data.

FY 2019 CIO Project Plan

CDC-RFA-OT18-1802
Strengthening Public Health Systems and Services through National Partnerships to Improve and Protect the Nation's Health

GENERAL INFORMATION			
1	**Project title (please do not use all caps; 15 words maximum):*** Surveillance for SARS-CoV-2 infections among hospitalized children and adults	2	**CIO:***
		3	**Division:* Office:**
4	**CIO point of contact (POC) name:** **CIO POC email address:*** **CIO POC phone number:***		
5	**Select the target population category to receive capacity-building assistance (CBA):*** **Category A** ☐ **Category B** ☒ **Category C** ☐ **Category A: Governmental Public Health Departments** – This category is focused on meeting the priority organizational-level CBA needs of one of the following health department types: state, tribal, local, or territorial. Organizational level includes, but is not limited to, business processes, system design, strategic planning, resource management, agency leadership, and governance. **Category B: Workforce Segments Across Governmental Public Health Departments** – This category is focused on meeting the priority CBA needs of one workforce segment across two or more health department types (state, tribal, local, or territorial). Workforce segments can include, but are not limited to, epidemiologists, chronic disease specialists, public health lawyers, environmentalists, informaticians, and nutritionists. **Category C: Nongovernmental Public Health Components** – This category is focused on meeting the priority CBA needs of one type of nongovernmental component of the public health system. Nongovernmental components represent, but are not limited to, community-based organizations, community health centers, primary care providers, governors, hospitals, economists, legislators, education organizations, social action organizations, and public safety agencies.		
6	**Description of the target population:* (25 words maximum)** **Note: Proposals should not build capacity for CDC or other federal agencies** Epidemiologists in state, tribal, local and territorial health departments		

PROJECT FUNDING OT18-1802 Period of Performance Length: August 1, 2018 – July 31, 2023 Budget Period Length: September1, 2019 –July 31, 2020			
7	**Proposed Project Funding:*11** **$_____(Whole Numbers Only)**		
8	**Expected Length of Project (Check one):*** ☐ **The CIO will award new funding each budget period for the remainder of the period of performance.** ☐ **The CIO will award new funding each budget period for at least two consecutive years.** ☒ **The CIO will fund the project for one year.**		

CBA PROGRAM APPROACH – NOFO LOGIC MODEL

Select the program strategies and the program outcomes the project should work toward for the length of the project	
9	**CBA Program Strategies (Check one or more):*** ☐ **Public Health Systems Infrastructure:** Activities to improve operational capacity, such as policies and plans, administration and management, and quality improvement ☐ **Leadership and Workforce Development:** Activities to improve leadership and workforce competencies, recruitment, and retention ☒ **Data and Information Systems:** Activities to improve collection, management, interpretation, and dissemination of data to guide decision-making ☐ **Communication and Information Technology**: Activities to improve use of communication and information technology to affect health decisions and actions ☒ **Partnerships:** Activities to improve establishment and maintenance of results-driven partnerships ☐ **Laws and Policies:** Activities to improve the ability to interpret and inform laws, including statutes and regulations, and policies that affect health ☐ **Programs and Services:** Activities to improve the identification of best practices and the implementation of evidence-based/informed programs and services
10	**Crisis Response Approaches (Check one or more)*** ☒ **Strengthen Incident Management for Early Crisis Response** ☐ **Strengthen Jurisdictional Recovery** ☒ **Strengthen Biosurveillance** ☒ **Strengthen Information Management** ☒ **Strengthen Countermeasures and Mitigation** ☒ **Strengthen Surge Management** ☐ **Strengthen Communications**
11	**CBA Program Outcomes (Check one or more):*** **Public Health Systems Infrastructure:** **Short-term** ☐ Improved operational capacity to evaluate, manage, and improve public health systems **Intermediate** ☐ Increased capability of public health systems to achieve nationally established standards **Leadership and Workforce Development:** **Short-term** ☐ Improved leadership capacity to identify and prioritize public health needs ☐ Strengthened core and discipline-specific public health competencies among the workforce to improve job performance **Intermediate** ☐ Increased leadership decision-making to address public health needs strategically and systematically ☐ Strengthened capability of public health workforce to deliver essential public health services **Data and Information Systems:** **Short-term** ☒ Improved capacity of data and information systems to conduct public health monitoring and surveillance **Intermediate** ☒ Increased capability to use data to inform decision-making and support evidence-based practices and policies **Communication and Information Technology:** **Short-term** ☐ Improved communication and information technology capacity to inform the public efficiently and effectively **Intermediate** ☐ Strengthened capability to use communication and information technology to affect health decisions and actions **Partnerships:** **Short-term** ☒ Improved capacity to establish and maintain partnerships within and across sectors to create a shared vision of health **Intermediate** ☒ Strengthened capability to respond to public health priorities collaboratively and strategically **Laws and Policies:**

Short-term

☐ Increased capacity to evaluate laws and policies to affect health

Intermediate

☐ Strengthened capability to systematically apply and use laws and policies to improve health

Programs and Services:

Short-term

☐ Improved capacity to identify, prioritize, and customize relevant programs and services to address public health needs

Intermediate

☐ Increased capability to implement evidence-based/informed public health programs, policies, and services to address public health needs

PROJECT DETAILS

State the purpose of the project and provide project details for the length of the budget period (11 months).

- For the selected program strategies, describe proposed activities and provide sample process measures to track progress implementing the activities. Describe the expected outputs (resources, tools, products, etc.) and outcomes (changes to occur), and provide sample outcome measures to track progress achieving the outcomes.
- Complete the activities, process measures, outputs, budget period outcomes, and outcome measures column for each program strategy selected.

12	**Project Purpose (150 words maximum):***	To facilitate collaboration with public health partner organizations to conduct surveillance for SARS-CoV-2-associated infections, determine the health burden of SARS-CoV-2-associated infections, provide sound information to policy makers and the public, promote prevention strategies, detect changes in SARS-CoV-2-associated infections, and to guide public health interventions to limit morbidity and mortality. The project goals include: • Improve the public's health by supporting the efforts of epidemiologists working at the state, local, tribal and territorial levels of the public health system. • Promote the effective use of epidemiologic data to guide public health practice and improve health. • Provide an evidence base for influencing public health programs and policy. • Influence surveillance standards for all categorical programs in state, territorial and local health agencies. • Provide an established resource to public health agencies and partners for epidemiology and surveillance. • Apply epidemiologic expertise of partners to support US health security through work with global partners.

	Program Strategies	**Activities**	**Process Measures**	**Outputs**	**Budget Period Outcomes**	**Outcome Measures**
	Public Health Systems Infrastructure					
	Leadership and Workforce Development					

	Data and Information Systems	To conduct surveillance for SARS-CoV-2-associated infections among hospitalized children and adults. Estimate hospitalization rates that can be examined by race/ethnicity, sex and age group in a timely manner; describe the temporal trends of laboratory-confirmed SARS-CoV-2 hospitalization, describe characteristics of persons hospitalized with severe illness; describe the clinical features and course of disease among persons hospitalized with SAR-CoV-2; examine risk and protective factors for severe sequelae of SAR-CoV-2 infections, including co-morbid conditions and statin medications; examine etiologic agents associated with severe bacterial illness, including pneumonia among SAR-CoV-2-infected persons; establish the completeness of case ascertainment by this population-based	Utilize existing surveillance infrastructure to establish surveillance for SARS-CoV-2-associated hospitalizations Utilize existing partnerships with hospitals and laboratories to conduct surveillance Increase engagement with surveillance area hospitals and gather SARS-CoV-2 testing data Establish and have participation from all sites in national-level analyses	SARS-CoV-2-associated hospitalization by age groups. Epidemiologic and clinical data on cases of SARS-CoV-2-associated hospitalization Complete case ascertainment of SARS-CoV-2 hospitalized cases Epidemiologic analyses that can contribute to identifying ways to mitigate and/or reduce burden of COVID-19	Establish population-based surveillance for SARS-CoV-2-associated hospitalizations Increased integration of state-of-the-art technology into data collection and information systems. Improved capacity of data and information systems to conduct public health monitoring and surveillance Increased implementation of evidence-based public health programs, policies, and services.	Delivery of standardized data on SARS-CoV-2-associated hospitalizations Delivery of complete case counts of SARS-CoV-2-associated hospitalizations weekly Data from surveillance will be used in CDC guidance

		hospitalization surveillance system. To leverage electronic medical record systems and health information exchanges to provide rapid case ascertainment of hospitalized persons with SARS-CoV-2 infection Contibute data to be able to identify high-risk persons that would benefit from a public health intervention (e.g., vaccines, antivirals, etc.) and other epidemiologic gaps				
	Communication and Information Technology					
	Partnerships	Faciliate meetings to discuss SARS-CoV-2 surveillance and gaps in current epidemiology	Establish and strengthen participation from each contributing site	Strengthen capability to respond to public health priorities collaboratively and strategically	Increased communication and partnership development between CDC, public health departments, and other U.S. government organizations engaged in public health communication, research.	Participating sites will continue to implement surveillance and/or new special studies
	Laws and Policies					
	Programs and Services					

ORGANIZATIONAL CAPACITY AND PROGRAM EXPERIENCE

13

Recipient Organizational Capacity (200 words maximum):*

Organizational capacity requires the following skill set: Program director capable of managing all focus areas and activities including leading SARS-CoV-2 projects and programs and staff supervision. A research analyst to manage all state SARS-CoV-2 projects, provide consultation on data collection, surveys, and assessments focusing on SARS-CoV-2 and public health informatics programs and related activities, and provide technical support for state-based SARS-CoV-2 projects. An accountant will be required to maintain day to day accounting activities related to state subgrants.

14

Recipient Program Experience (200 words maximum):*

To accomplish the program goals, the recipient will require experience in communication and coordination with state, local and federal public health agencies to guide and facilitate the promotion of effective public health decision making. Experience in epidemiology of respiratory viruses including influenza and RSV, and in operating respiratory virus surveillance systems in public health departments. Experience in conducting training in surveillance. Experience in collecting, analyzing and reporting data from epidemiologic studies and surveillance systems. Experience in working with partners to provide technical assistance on surveillance data. Experience in working with CDC programs to implement surveillance systems.

COLLABORATIVE WORK

15

Expectations for Collaboration, as applicable (200 words maximum):

Information gathered from this collaboration will help CDC determine the health burden of SARS-CoV-2, provide sound information to policy makers and the public, promote prevention efforts, evaluate prevention strategies, guide vaccine development, and to guide public health interventions to limit morbidity and mortality.

16

Expected Subcontractual Work and Recommended Criteria for Selecting Subcontractors, as applicable (200 words maximum):

No expectations of contracted work.

17

Will the proposed CBA benefit governmental public health agencies?

☒ **Yes**
☐ **No**

If yes, briefly describe how (200 words maximum):

The partnership between CDC/NCIRD and the recipient will benefit state and/or local public health departments by strengthening their respiratory virus surveillance systems. It will allow them to contribute to national SARS-CoV-2-associated hospitalization rates and describe their cases both clinically and epidemiologically. This partnership will help develop enhanced surveillance and response systems and methods to increase local, state, and global pandemic preparedness.

BUDGET INSTRUCTIONS

18

General Instructions for Use of Funds, as applicable (100 words maximum):

Funds will be allocated for meeting and conference attendance, personnel support for position descriptions, and subawards to public health agencies to accommodate the activities listed in Section 12.

CIO CERTIFICATION*

19

By submitting this project plan, I certify that my CIO currently does not maintain a comparable NOFO related to CBA. I understand it is my CIO's responsibility to pursue Office of Management and Budget (OMB) and Paperwork Reduction Act (PRA) clearance for this project. I will discuss the project with my Associate Director for Science (ADS) and initiate the appropriate clearance prior to funding.

FY 2019 CIO Project Plan

CDC-RFA-OT18-1802
Strengthening Public Health Systems and Services through National Partnerships to Improve and Protect the Nation's Health

GENERAL INFORMATION			
1	**Project title (please do not use all caps; 15 words maximum):*** **Improving COVID-19 response capacity of epidemiologists in STLT health departments**	2	**CIO:***
		3	**Division:*** **Office:**
4	**CIO point of contact (POC) name:*** **CIO POC email address:*** **CIO POC phone number:***		
5	**Select the target population category to receive capacity-building assistance (CBA):*** **Category A ☐ Category B ☒ Category C ☐** **Category A: Governmental Public Health Departments** – This category is focused on meeting the priority organizational-level CBA needs of one of the following health department types: state, tribal, local, or territorial. Organizational level includes, but is not limited to, business processes, system design, strategic planning, resource management, agency leadership, and governance. **Category B: Workforce Segments Across Governmental Public Health Departments** – This category is focused on meeting the priority CBA needs of one workforce segment across two or more health department types (state, tribal, local, or territorial). Workforce segments can include, but are not limited to, epidemiologists, chronic disease specialists, public health lawyers, environmentalists, informaticians, and nutritionists. **Category C: Nongovernmental Public Health Components** – This category is focused on meeting the priority CBA needs of one type of nongovernmental component of the public health system. Nongovernmental components represent, but are not limited to, community-based organizations, community health centers, primary care providers, governors, hospitals, economists, legislators, education organizations, social action organizations, and public safety agencies.		
6	**Description of the target population:* (25 words maximum)** **Note: Proposals should not build capacity for CDC or other federal agencies** State, tribal, local and territorial epidemiologists		

PROJECT FUNDING OT18-1802 Period of Performance Length: August 1, 2018 – July 31, 2023 Budget Period Length: September1, 2019 –July 31, 2020			
7	**Proposed Project Funding:*11** **$_____(Whole Numbers Only)**		
8	**Expected Length of Project (Check one):*** ☐ **The CIO will award new funding each budget period for the remainder of the period of performance.** ☐ **The CIO will award new funding each budget period for at least two consecutive years.** ☒ **The CIO will fund the project for one year.**		

CBA PROGRAM APPROACH – NOFO LOGIC MODEL

Select the program strategies and the program outcomes the project should work toward for the length of the project

9

CBA Program Strategies (Check one or more):*

☐ **Public Health Systems Infrastructure:** Activities to improve operational capacity, such as policies and plans, administration and management, and quality improvement
☐ **Leadership and Workforce Development:** Activities to improve leadership and workforce competencies, recruitment, and retention
☒ **Data and Information Systems:** Activities to improve collection, management, interpretation, and dissemination of data to guide decision-making
☐ **Communication and Information Technology**: Activities to improve use of communication and information technology to affect health decisions and actions
☒ **Partnerships:** Activities to improve establishment and maintenance of results-driven partnerships
☐ **Laws and Policies:** Activities to improve the ability to interpret and inform laws, including statutes and regulations, and policies that affect health
☒ **Programs and Services:** Activities to improve the identification of best practices and the implementation of evidence-based/informed programs and services

10

Crisis Response Approaches (Check one or more)*

☒ **Strengthen Incident Management for Early Crisis Response**
☐ **Strengthen Jurisdictional Recovery**
☒ **Strengthen Biosurveillance**
☒ **Strengthen Information Management**
☐ **Strengthen Countermeasures and Mitigation**
☒ **Strengthen Surge Management**
☐ **Strengthen Communications**

11

CBA Program Outcomes (Check one or more):*

Public Health Systems Infrastructure:
Short-term
☐ Improved operational capacity to evaluate, manage, and improve public health systems
Intermediate
☐ Increased capability of public health systems to achieve nationally established standards

Leadership and Workforce Development:
Short-term
☐ Improved leadership capacity to identify and prioritize public health needs
☐ Strengthened core and discipline-specific public health competencies among the workforce to improve job performance
Intermediate
☐ Increased leadership decision-making to address public health needs strategically and systematically
☐ Strengthened capability of public health workforce to deliver essential public health services

Data and Information Systems:
Short-term
☒ Improved capacity of data and information systems to conduct public health monitoring and surveillance
Intermediate
☐ Increased capability to use data to inform decision-making and support evidence-based practices and policies

Communication and Information Technology:
Short-term
☐ Improved communication and information technology capacity to inform the public efficiently and effectively
Intermediate
☐ Strengthened capability to use communication and information technology to affect health decisions and actions

Partnerships:
Short-term
☒ Improved capacity to establish and maintain partnerships within and across sectors to create a shared vision of health
Intermediate
☐ Strengthened capability to respond to public health priorities collaboratively and strategically

Laws and Policies:

Short-term

☐ Increased capacity to evaluate laws and policies to affect health

Intermediate

☐ Strengthened capability to systematically apply and use laws and policies to improve health

Programs and Services:

Short-term

☒ Improved capacity to identify, prioritize, and customize relevant programs and services to address public health needs

Intermediate

☐ Increased capability to implement evidence-based/informed public health programs, policies, and services to address public health needs

PROJECT DETAILS

State the purpose of the project and provide project details for the length of the budget period (11 months).

- For the selected program strategies, describe proposed activities and provide sample process measures to track progress implementing the activities. Describe the expected outputs (resources, tools, products, etc.) and outcomes (changes to occur), and provide sample outcome measures to track progress achieving the outcomes.
- Complete the activities, process measures, outputs, budget period outcomes, and outcome measures column for each program strategy selected.

12	**Project Purpose (150 words maximum):***	The purpose of this project is to to expand and strengthen capacity and coordination of epidemiologists in STLT health departments during the ongoing response to COVID-19. Epidemiologists are on the front lines of the public health response and must monitor multiple people associated with COVID-19 infections for two weeks. During a public health emergency, this can be challenging as the number of quarantined and monitored individuals increases. This project supports public health surge capacity to ensure a timely and effective response, and aims to advance public health surveillance data systems and analytics to support rapid detection and response (e.g. monitor cases, trace contacts, and rapidly communicate with persons under quarantine) by facilitating reporting and information sharing between health care facilities and public health. Applicants are encouraged to propose additional activities, performance measures, outputs, and outcomes, as needed, to address the unique capacity-building assistance needs of epidemiologists.					
	Program Strategies	**Activities**	**Process Measures**	**Outputs**	**Budget Period Outcomes**	**Outcome Measures**
	Public Health Systems Infrastructure					
	Leadership and Workforce Development					
	Data and Information Systems	Activities to enhance data and surveillance systems related to COVID-19 response Activities to improve data quality, accuracy and completeness related to COVID-19 response	Recommendations developed and changes implemented to strengthen data and surveillance systems Processes identified to improve data	Enhanced data and surveillance systems for COVID-19 response Established processes to ensure data quality, accuracy and	Improved capacity of data and information systems to conduct public health monitoring and surveillance	STLT agencies using enhanced data and surveillance systems STLT agencies reporting implementation of established processes

			quality, accuracy and completeness	completeness for COVID-19 response		
	Communication and Information Technology					
	Partnerships	Activities to facilitate collaboration and convening of key national partners to address emergency preparedness and response needs related to COVID-19, such as hosting COVID-19 calls, webinars, and virtual meetings	# of calls held # of webinars held # of virtual meetings held	COVID-19 calls, webinars, and virtual meetings conducted	Increased collaboration of national partners to address emergency preparedness and response needs related to COVID-19	# of national partners participating on calls, webinars and virtual meetings # of action items identified during convenings that are addressed for COVID-19 response
	Laws and Policies					
	Programs and Services	Activities to support public health surge capacity, such as working with supply chain partners to understand supply usage, availability, and access to personal protective equipment (PPE)	# of supply chain partners contacted # of sites assessed to determine PPE inventory	Supply chain management tools developed PPE inventory lists created	Improved capacity to identify, prioritize, and customize relevant programs and services to address public health needs Increased awareness and understanding of supply, usage, availability and access to PPE	Use and implementation supply chain management tools Maintenance of PPE inventory lists
ORGANIZATIONAL CAPACITY AND PROGRAM EXPERIENCE						
13	**Recipient Organizational Capacity (200 words maximum):*** Recipient must demonstrate organizational capacity and skill sets needed to: - facilitate dialogue between national partners organizations, public health departments, other stakeholders - understand surveillance needs, processes, activities, and systems - manage large scale surveillance and surge capacity projects to address public health preparedness and response needs					

14	**Recipient Program Experience (200 words maximum):*** Recipient must demonstrate experience: - working with public health agencies and national partners on surveillance enhancements - managing large scale public health surveillance projects - organizing, convening and hosting key stakeholder to discuss emerging issues and response-related needs - collaborating with subject matter experts in public health informatics, clinical practice, and data policies - partnering with supply chain managers to better understand supply usage, availability, and access

COLLABORATIVE WORK

15	**Expectations for Collaboration, as applicable (200 words maximum):**
16	**Expected Subcontractual Work and Recommended Criteria for Selecting Subcontractors, as applicable (200 words maximum):**
17	**Will the proposed CBA benefit governmental public health agencies?** ☒ **Yes** ☐ **No** **If yes, briefly describe how (200 words maximum):** The capacity-building assistance provided will strengthen the ability of epidemiologists in STLT health departments to address COVID-19 response needs related to surge capacity and surveillance systems.

BUDGET INSTRUCTIONS

18	**General Instructions for Use of Funds, as applicable (100 words maximum):**

CIO CERTIFICATION*

19	**By submitting this project plan, I certify that my CIO currently does not maintain a comparable NOFO related to CBA. I understand it is my CIO's responsibility to pursue Office of Management and Budget (OMB) and Paperwork Reduction Act (PRA) clearance for this project. I will discuss the project with my Associate Director for Science (ADS) and initiate the appropriate clearance prior to funding.**

FY 2019 CIO Project Plan

CDC-RFA-OT18-1802
Strengthening Public Health Systems and Services through National Partnerships to Improve and Protect the Nation's Health

GENERAL INFORMATION			
1	**Project title (please do not use all caps; 15 words maximum):*** **Improving COVID-19 response capacity of public health informaticians in STLT health departments**	2	**CIO:**
		3	**Division:** **Office:**
4	**CIO point of contact (POC) name:** **CIO POC email address:** **CIO POC phone number:**		
5	**Select the target population category to receive capacity-building assistance (CBA):*** **Category A** ☐ **Category B** ☒ **Category C** ☐ **Category A: Governmental Public Health Departments** – This category is focused on meeting the priority organizational-level CBA needs of one of the following health department types: state, tribal, local, or territorial. Organizational level includes, but is not limited to, business processes, system design, strategic planning, resource management, agency leadership, and governance. **Category B: Workforce Segments Across Governmental Public Health Departments** – This category is focused on meeting the priority CBA needs of one workforce segment across two or more health department types (state, tribal, local, or territorial). Workforce segments can include, but are not limited to, epidemiologists, chronic disease specialists, public health lawyers, environmentalists, informaticians, and nutritionists. **Category C: Nongovernmental Public Health Components** – This category is focused on meeting the priority CBA needs of one type of nongovernmental component of the public health system. Nongovernmental components represent, but are not limited to, community-based organizations, community health centers, primary care providers, governors, hospitals, economists, legislators, education organizations, social action organizations, and public safety agencies.		
6	**Description of the target population:* (25 words maximum)** **Note: Proposals should not build capacity for CDC or other federal agencies** Public health informaticians in state, tribal, local, and territorial (STLT) health departments		
PROJECT FUNDING OT18-1802 Period of Performance Length: August 1, 2018 – July 31, 2023 Budget Period Length: September1, 2019 –July 31, 2020			
7	**Proposed Project Funding:*11** **$_____(Whole Numbers Only)**		
8	**Expected Length of Project (Check one):*** ☐ **The CIO will award new funding each budget period for the remainder of the period of performance.** ☐ **The CIO will award new funding each budget period for at least two consecutive years.** ☒ **The CIO will fund the project for one year.**		

CBA PROGRAM APPROACH – NOFO LOGIC MODEL

Select the program strategies and the program outcomes the project should work toward for the length of the project

9

CBA Program Strategies (Check one or more):*

☒ **Public Health Systems Infrastructure:** Activities to improve operational capacity, such as policies and plans, administration and management, and quality improvement

☐ **Leadership and Workforce Development:** Activities to improve leadership and workforce competencies, recruitment, and retention

☒ **Data and Information Systems:** Activities to improve collection, management, interpretation, and dissemination of data to guide decision-making

☒ **Communication and Information Technology**: Activities to improve use of communication and information technology to affect health decisions and actions

☐ **Partnerships:** Activities to improve establishment and maintenance of results-driven partnerships

☐ **Laws and Policies:** Activities to improve the ability to interpret and inform laws, including statutes and regulations, and policies that affect health

☐ **Programs and Services:** Activities to improve the identification of best practices and the implementation of evidence-based/informed programs and services

10

Crisis Response Approaches (Check one or more)*

☒ **Strengthen Incident Management for Early Crisis Response**

☐ **Strengthen Jurisdictional Recovery**

☒ **Strengthen Biosurveillance**

☒ **Strengthen Information Management**

☐ **Strengthen Countermeasures and Mitigation**

☐ **Strengthen Surge Management**

☐ **Strengthen Communications**

11

CBA Program Outcomes (Check one or more):*

Public Health Systems Infrastructure:

Short-term

☒ Improved operational capacity to evaluate, manage, and improve public health systems

Intermediate

☐ Increased capability of public health systems to achieve nationally established standards

Leadership and Workforce Development:

Short-term

☐ Improved leadership capacity to identify and prioritize public health needs

☐ Strengthened core and discipline-specific public health competencies among the workforce to improve job performance

Intermediate

☐ Increased leadership decision-making to address public health needs strategically and systematically

☐ Strengthened capability of public health workforce to deliver essential public health services

Data and Information Systems:

Short-term

☒ Improved capacity of data and information systems to conduct public health monitoring and surveillance

Intermediate

☒ Increased capability to use data to inform decision-making and support evidence-based practices and policies

Communication and Information Technology:

Short-term

☒ Improved communication and information technology capacity to inform the public efficiently and effectively

Intermediate

☐ Strengthened capability to use communication and information technology to affect health decisions and actions

Partnerships:

Short-term

☐ Improved capacity to establish and maintain partnerships within and across sectors to create a shared vision of health

Intermediate

☐ Strengthened capability to respond to public health priorities collaboratively and strategically

Laws and Policies:

Short-term

☐ Increased capacity to evaluate laws and policies to affect health

Intermediate

☐ Strengthened capability to systematically apply and use laws and policies to improve health

Programs and Services:

Short-term

☒ Improved capacity to identify, prioritize, and customize relevant programs and services to address public health needs

Intermediate

☐ Increased capability to implement evidence-based/informed public health programs, policies, and services to address public health needs

PROJECT DETAILS

State the purpose of the project and provide project details for the length of the budget period (11 months).

- For the selected program strategies, describe proposed activities and provide sample process measures to track progress implementing the activities. Describe the expected outputs (resources, tools, products, etc.) and outcomes (changes to occur), and provide sample outcome measures to track progress achieving the outcomes.
- Complete the activities, process measures, outputs, budget period outcomes, and outcome measures column for each program strategy selected.

12	**Project Purpose (150 words maximum):***	The purpose of this project is to expand and strengthen capacity and coordination of Public health informaticians in STLT health departments during the ongoing response to COVID-19. The purpose of the project is to build COVID-19 preparedness and response capacity of STLT informaticians. The goal of the project is to increase capacity of information and surveillance systems, enhance data use and sharing, and improve collaboration among informaticians and key public health partners during the COVID-19 response. Applicants are encouraged to propose additional activities, performance measures, outputs, and outcomes, as needed, to address the unique capacity-building assistance needs of STLT informaticians.

Program Strategies	Activities	Process Measures	Outputs	Budget Period Outcomes	Outcome Measures
Public Health Systems Infrastructure	Update emergency preparedness business process and system requirements framework to support state/local planning and leverage newer health IT Activities to improve interoperability between laboratory systems and electronic health (EHRs) for sharing results for COVID-19 and	# of processes identified that require updates # of analyses completed to conduct interoperatbility assessment	Updated framework completed Interoperable systems and processes established	Improved capacity to manage emergency preparedness business process and system requirements Improved interoperability of EHRs and laboratory systems for more timely reporting, outbreak interventions, and clinical treatment to patients	State and local health departments reporting implementation of updated framework State and local health departments reporting improved interoperability between labs and EHRs

		other novel diseases				
	Leadership and Workforce Development					
	Data and Information Systems	Assess COVID-19 data and surveillance needs of STLTS Number of STLT HDs assessed Develop data and surveillance systems to address gaps and needs of STLTS during COVID-19 response Develop protocols and guides to facilitate timely and accurate information sharing Convene stakeholders through appropriate channels such as webinars and online learning collaboratives Create a web interface and database to collect daily counts from each state for (1) number of Coronavirus tests performed and (2) number of positive tests. Database can be used for future outbreaks	Completed assessment that includes recommendations to address gaps Number of systems/artifacts developed for COVID-19 response needs Number of protocols developed Number of guides produced Number of database development trainings held	COVID-19 response systems and artifacts implemented by STLTs Protocols and guides are disseminated for use Training and technical assistance provided that specifically addresses data and information sharing for public health preparedness and response needs Web interface and database created	Improved capacity of data and information systems to conduct public health monitoring and surveillance Increased capability to use data to inform decision-making and support evidence-based practices and policies	Protocols and guides are disseminated for use STLT agencies who report using guides and implementing protocols Processes established to promote data sharing among jurisdictions to inform public health needs during COVID-19 response Number of states trained to use database Number of states participating in data collection activities

	Communication and Information Technology	Develop a mobile app for COVID-19 (specific content and features to be determined)	# of mobile app development phases completed	Mobile app for COVID-19 available for public use	Improved communication and information technology capacity to inform the public efficiently and effectively	# individuals using COVID-19 mobile app
	Partnerships					
	Laws and Policies					
	Programs and Services	Support efforts to develop and implement clinical decision support (CDS) tools for COVID-19 screening by leveraging approaches and clinical partnerships developed for previously CDC funded CDS work.	# of CDS tools developed	CDS tools for COVID-19	Improved capacity to identify, prioritize, and customize relevant programs and services to address public health needs	# of public health practitioners using CDS tools developed for COVID-19 # of approaches implemented by users of CDS tools

ORGANIZATIONAL CAPACITY AND PROGRAM EXPERIENCE

13 **Recipient Organizational Capacity (200 words maximum):***

Recipient must demonstrate organizational capacity and skill sets required to:

- facilitate dialogue between national partners organizations, public health departments, other stakeholders
- understand information needs, processes, and systems
- define functional and technical requirements
- manage large scale health IT and informatics projects; work with healthcare institutions to implement data platforms, services and applications.

14 **Recipient Program Experience (200 words maximum): ***

Recipient must demonstrate experience:

- working with public health agencies and national partners on informatics initiatives from concept to implementation
- managing large scale health IT projects
- conducting informatics business process analyses, information requirements needs assessments
- collaborating with subject matter experts in public health informatics, clinical practice, and data policies

COLLABORATIVE WORK

15 **Expectations for Collaboration, as applicable (200 words maximum):**

16 **Expected Subcontractual Work and Recommended Criteria for Selecting Subcontractors, as applicable (200 words maximum):**

17 **Will the proposed CBA benefit governmental public health agencies?**

	☒ **Yes** ☐ **No** **If yes, briefly describe how (200 words maximum):** The capacity-building assistance provided will strengthen the ability of informaticians in STLT health departments to address COVID-19 response needs related to data, IT, and surveillance systems.
BUDGET INSTRUCTIONS	
18	**General Instructions for Use of Funds, as applicable (100 words maximum):**
CIO CERTIFICATION*	
19	**By submitting this project plan, I certify that my CIO currently does not maintain a comparable NOFO related to CBA. I understand it is my CIO's responsibility to pursue Office of Management and Budget (OMB) and Paperwork Reduction Act (PRA) clearance for this project. I will discuss the project with my Associate Director for Science (ADS) and initiate the appropriate clearance prior to funding.**

FY20 CIO Project Plan

CDC-RFA-OT18-1802
Strengthening Public Health Systems and Services through National Partnerships to Improve and Protect the Nation's Health

GENERAL INFORMATION			
1	**Project title (please do not use all caps; 10 word limit):*** **COVID-19: Developing legal public health strategies to maximize response.**	2	**CIO:**
		3	**Division/Branch/Office/Unit:**
4	**CIO point of contact (POC) name:** **CIO POC email address:** **CIO POC phone number:**		
5	**Select the target population category to receive capacity-building assistance (CBA): *** CATEGORY B **Category A: Governmental Public Health Departments** – This category is focused on meeting the priority organizational-level CBA needs of one of the following health department types: state, tribal, local, or territorial. Organizational level includes, but is not limited to, business processes, system design, strategic planning, resource management, agency leadership, and governance. **Category B: Workforce Segments Across Governmental Public Health Departments** – This category is focused on meeting the priority CBA needs of one workforce segment across two or more health department types (state, tribal, local, or territorial). Workforce segments can include, but are not limited to, epidemiologists, chronic disease specialists, public health lawyers, environmentalists, informaticians, and nutritionists. **Category C: Nongovernmental Public Health Components** – This category is focused on meeting the priority CBA needs of one type of nongovernmental component of the public health system. Nongovernmental components represent, but are not limited to, community-based organizations, community health centers, primary care providers, governors, hospitals, economists, legislators, education organizations, social action organizations, and public safety agencies.		
6	**Description of the target population: * (25 word limit)** Public health lawyers and their clients Note: Proposals should not build capacity for CDC or other federal agencies		
PROJECT FUNDING OT18-1802 Period of Performance Length: August 1, 2018 – July 31, 2023 Budget Period Length: September 1, 2020 –July 31, 2021			
7	**Proposed Project Funding for FY20 Activities: *** **$_____(Whole Numbers Only)**		
8	**Expected Length of Project (Check one): *** ☒ **The CIO will fund the project for one year.** ☐ **The CIO will award new funding each budget period for more than one year.**		

CBA PROGRAM APPROACH – NOFO LOGIC MODEL

Select the program strategies and the associated program outcomes the project should work toward for the length of the project

9

CBA Program Strategies (Check one or more): *

☐ **Public Health Systems Infrastructure:** Activities to improve operational capacity, such as policies and plans, administration and management, and quality improvement

☐ **Leadership and Workforce Development:** Activities to improve leadership and workforce competencies, recruitment, and retention

☐ **Data and Information Systems:** Activities to improve collection, management, interpretation, and dissemination of data to guide decision-making

☐ **Communication and Information Technology**: Activities to improve use of communication and information technology to affect health decisions and actions

☐ **Partnerships:** Activities to improve establishment and maintenance of results-driven partnerships

☒ **Laws and Policies:** Activities to improve the ability to interpret and inform laws, including statutes and regulations, and policies that affect health

☐ **Programs and Services:** Activities to improve the identification of best practices and the implementation of evidence-based/informed programs and services

10

Crisis Response Approaches (Check one or more)*

☒ **Strengthen Incident Management for Early Crisis Response**

☒ **Strengthen Jurisdictional Recovery**

☐ **Strengthen Biosurveillance**

☐ **Strengthen Information Management**

☐ **Strengthen Countermeasures and Mitigation**

☐ **Strengthen Surge Management**

☐ **Strengthen Communications**

11

CBA Program Outcomes (Check one or more): *

Public Health Systems Infrastructure:

Short-term

☐ Improved operational capacity to evaluate, manage, and improve public health systems

Intermediate

☐ Increased capability of public health systems to achieve nationally established standards

Leadership and Workforce Development:

Short-term

☐ Improved leadership capacity to identify and prioritize public health needs

☐ Strengthened core and discipline-specific public health competencies among the workforce to improve job performance

Intermediate

☐ Increased leadership decision-making to address public health needs strategically and systematically

☐ Strengthened capability of public health workforce to deliver essential public health services

Data and Information Systems:

Short-term

☐ Improved capacity of data and information systems to conduct public health monitoring and surveillance

Intermediate

☐ Increased capability to use data to inform decision-making and support evidence-based practices and policies

Communication and Information Technology:

Short-term

☐ Improved communication and information technology capacity to inform the public efficiently and effectively

Intermediate

☐ Strengthened capability to use communication and information technology to affect health decisions and actions

Partnerships:

Short-term

☐ Improved capacity to establish and maintain partnerships within and across sectors to create a shared vision of health

Intermediate

☐ Strengthened capability to respond to public health priorities collaboratively and strategically

Laws and Policies:

Short-term

	☒ Increased capacity to evaluate laws and policies to affect health **Intermediate** ☒ Strengthened capability to systematically apply and use laws and policies to improve health **Programs and Services:** **Short-term** ☐ Improved capacity to identify, prioritize, and customize relevant programs and services to address public health needs **Intermediate** ☐ Increased capability to implement evidence-based/informed public health programs, policies, and services to address public health needs
12	**PROJECT DETAILS** State the purpose of the project and provide project details for the length of the budget period (11 months). For the selected program strategies: - Describe proposed activities and provide sample process measures to track progress implementing the activities. - Describe the expected outputs (resources, tools, products, etc.) and outcomes (change to occur), and provide sample outcome measures to track progress achieving the outcomes.

	Project Purpose (150 word limit)	**The 2019-20 coronavirus is considered a public health emergency and is being evaluated by all major health organizations around the world. In the United States, the public health response is operationalized by public health lawyers and practitioners at the state, tribal, local, and territorial (STLT) jurisdictional levels using legal authorities and currently available public health emergency statutes, regulations as well as other policies or agreements. The proper use of these legal tools can be the difference between an effective or ineffective public health response. The purpose of this project is to support organizations who serve public health attorneys, health department policy advisors, STLT practitioners, and legal counsel who may have a specific impact on the ability of STLT jurisdictions to respond the the epidemic by creating customized resources, toolkits, presentations, materials, and other relevant media to use legal authorities, policies and agreements within existing law and identify gaps to efficiently and effectively address specific jurisdictional needs during the response.**
	Program Strategy: Public Health Systems Infrastructure	
	Activities *	
	Process Measures *	
	Outputs *	
	Budget Period Outcomes *	
	Outcome Measures *	
	Program Strategy: Leadership and Workforce Development	
	Activities *	
	Process Measures *	
	Outputs *	
	Budget Period Outcomes *	

	Outcome Measures *	
	Program Strategy: Data and Information Systems	
	Activities *	
	Process Measures *	
	Outputs *	
	Budget Period Outcomes *	
	Outcome Measures *	
	Program Strategy: Communication and Information Technology	
	Activities *	
	Process Measures *	
	Outputs *	
	Budget Period Outcomes *	
	Outcome Measures *	
	Program Strategy: Partnerships	
	Activities *	
	Process Measures *	
	Outputs *	
	Budget Period Outcomes *	
	Outcome Measures *	
	Program Strategy: Laws and Policies	
	Activities *	**Activities may include, but are not limited to identifying community mitigation strategies, examining the use of emergency declarations, the drafting and implementation of Memorandums of Undersatnding or Memorandums of Agreement; Examining legal authorities for disease investigation, privacy protection and waivers; Developing strategies to research the impact of laws and legal authorities including the use of legal epidemiology; Understanding and effectively using HIPPA and**

		the Public Health exceptions; and working directly with the target population to identify jurisdiction specific issues, gaps, and limitations to develop working strategies to implement a successful response.
	Process Measures *	**Requests for technical assistance will be documented and categorized by the types of public health workforce discipline making the request (attorney, policy advisor, responder, healthcare provider, etc.). The types of requests will be summarized for appropriate response in partnership with CDC-PHLP.**
	Outputs *	**Outputs will be dependent on the specific needs of the workforce disciplines and based on the requests for technical assistance. Outputs may include but are not limited to producing an analysis of the impacts related to various uses of memorandums of agreement/understanding; developing jurisdictional level capacity to implement legal epidemiology research strategies; conducting gap analyses to determine effective and efficient strategies for specific workforce disciplines across jurisdictions to address COVID 19 issues.**
	Budget Period Outcomes *	**Implementation of specific templates, tools, and strategies for addressing the gaps identified by various public health workforce disciplines related to the COVID 19 response and based on the analyses conducted as part of this project**
	Outcome Measures *	**The finalized templates, tools, and strategies for addressing the gaps identified by various public health workforce disciplines related to the COVID 19 response and received by the relevant stakeholders.**
	Program Strategy: Programs and Services	
	Activities *	
	Process Measures *	
	Outputs *	
	Budget Period Outcomes *	
	Outcome Measures *	

ORGANIZATIONAL CAPACITY AND PROGRAM EXPERIENCE

13	**Recipient Organizational Capacity (200 word limit):*** The successful applicant organization will have experience working with, state and local attorneys, practitioners who use the law as a tool to improve public health outcomes, and others including staff who would use legal epidemiology to study public health policy and legal issues that impact public health outcomes. The staff of the successful applicant organization will be able to demonstrate success in the development of cutting edge, original thinking types of endeavors and creatively identify the best strategies to reach consensus outcomes related to public health law issues.
14	**Recipient Program Experience (200 word limit):*** The successful applicant organization will have program experience working with CDC-PHLP and other entities on outreach, implementing effective legal strategies, using policy implementation to address public health needs, and implementing strategies that uniquely address novel issues related to public health needs, programs, and response.

COLLABORATIVE WORK

15	**Expectations for Collaboration, as applicable (200 word limit):** The successful applicant will need to collaborate with organizations that serve public health attorneys, policy makers, and practitioners who use law as a tool to improve public health outcomes including, but not limited to, legal

	researchers and epidemiologist focusing on the impacts of law and policy. Due to the changing nature, dynamics, epidemiology and other factors related to COVID19, the successful applicant organization will need to work closely with CDC-PHLP to share information, research, data, and other resources that help to identify the specific needs of the public health legal and policy fields during the response.
16	**Expected Subcontractual Work and Recommended Criteria for Selecting Subcontractors, as applicable (200 word limit):** To be determined by the successful applicant.
BUDGET INSTRUCTIONS	
17	**General Instructions for Use of Funds, as applicable (100 word limit):** The successful applicant must be aware that 100% of the funding that supports this project is provided to support COVID 19 preparedness and response. Therefore, use of the funds should be dedicated to specific activities directly related to Coronavirus preparation and the response.
CIO CERTIFICATION*	
18	**By submitting this project plan, I certify that my CIO currently does not maintain a comparable NOFO related to a CBA. I understand my CIO is responsible for adhering to all applicable scientific policies and securing requisite clearances in the Scientific Tracking and Reporting System (STARS). I will discuss the project with my Associate Director for Science (ADS) and obtain the appropriate scientific clearances prior to initiating project activities that involve the collection, generation, or analysis of public health data.**

CATEGORY C COVID-19

CIO PROJECT PLANS

FY 2019 CIO Project Plan

CDC-RFA-OT18-1802
Strengthening Public Health Systems and Services through National Partnerships to Improve and Protect the Nation's Health

GENERAL INFORMATION			
1	**Project title (please do not use all caps; 15 words maximum):*** **Building COVID-19 response capacity for physicians**	2	**CIO:***
		3	**Division:*** **Office:**
4	**CIO point of contact (POC) name:*** **CIO POC email address:*** **CIO POC phone number:***		
5	**Select the target population category to receive capacity-building assistance (CBA):*** **Category A ☐ Category B ☐ Category C ☒** **Category A: Governmental Public Health Departments** – This category is focused on meeting the priority organizational-level CBA needs of one of the following health department types: state, tribal, local, or territorial. Organizational level includes, but is not limited to, business processes, system design, strategic planning, resource management, agency leadership, and governance. **Category B: Workforce Segments Across Governmental Public Health Departments** – This category is focused on meeting the priority CBA needs of one workforce segment across two or more health department types (state, tribal, local, or territorial). Workforce segments can include, but are not limited to, epidemiologists, chronic disease specialists, public health lawyers, environmentalists, informaticians, and nutritionists. **Category C: Nongovernmental Public Health Components** – This category is focused on meeting the priority CBA needs of one type of nongovernmental component of the public health system. Nongovernmental components represent, but are not limited to, community-based organizations, community health centers, primary care providers, governors, hospitals, economists, legislators, education organizations, social action organizations, and public safety agencies.		
6	**Description of the target population:* (25 words maximum)** **Note: Proposals should not build capacity for CDC or other federal agencies** Physicians		

PROJECT FUNDING OT18-1802 Period of Performance Length: August 1, 2018 – July 31, 2023 Budget Period Length: September1, 2019 –July 31, 2020			
7	**Proposed Project Funding:*11** **$_____(Whole Numbers Only)**		
8	**Expected Length of Project (Check one):*** ☐ **The CIO will award new funding each budget period for the remainder of the period of performance.** ☐ **The CIO will award new funding each budget period for at least two consecutive years.** ☒ **The CIO will fund the project for one year.**		

CBA PROGRAM APPROACH – NOFO LOGIC MODEL

Select the program strategies and the program outcomes the project should work toward for the length of the project

9

CBA Program Strategies (Check one or more):*

☐ **Public Health Systems Infrastructure:** Activities to improve operational capacity, such as policies and plans, administration and management, and quality improvement
☐ **Leadership and Workforce Development:** Activities to improve leadership and workforce competencies, recruitment, and retention
☐ **Data and Information Systems:** Activities to improve collection, management, interpretation, and dissemination of data to guide decision-making
☒ **Communication and Information Technology**: Activities to improve use of communication and information technology to affect health decisions and actions
☐ **Partnerships:** Activities to improve establishment and maintenance of results-driven partnerships
☐ **Laws and Policies:** Activities to improve the ability to interpret and inform laws, including statutes and regulations, and policies that affect health
☒ **Programs and Services:** Activities to improve the identification of best practices and the implementation of evidence-based/informed programs and services

10

Crisis Response Approaches (Check one or more)*

☐ **Strengthen Incident Management for Early Crisis Response**
☐ **Strengthen Jurisdictional Recovery**
☐ **Strengthen Biosurveillance**
☐ **Strengthen Information Management**
☒ **Strengthen Countermeasures and Mitigation**
☒ **Strengthen Surge Management**
☒ **Strengthen Communications**

11

CBA Program Outcomes (Check one or more):*

Public Health Systems Infrastructure:
Short-term
☐ Improved operational capacity to evaluate, manage, and improve public health systems
Intermediate
☐ Increased capability of public health systems to achieve nationally established standards

Leadership and Workforce Development:
Short-term
☐ Improved leadership capacity to identify and prioritize public health needs
☐ Strengthened core and discipline-specific public health competencies among the workforce to improve job performance
Intermediate
☐ Increased leadership decision-making to address public health needs strategically and systematically
☐ Strengthened capability of public health workforce to deliver essential public health services

Data and Information Systems:
Short-term
☐ Improved capacity of data and information systems to conduct public health monitoring and surveillance
Intermediate
☐ Increased capability to use data to inform decision-making and support evidence-based practices and policies

Communication and Information Technology:
Short-term
☒ Improved communication and information technology capacity to inform the public efficiently and effectively
Intermediate
☐ Strengthened capability to use communication and information technology to affect health decisions and actions

Partnerships:
Short-term
☐ Improved capacity to establish and maintain partnerships within and across sectors to create a shared vision of health
Intermediate
☐ Strengthened capability to respond to public health priorities collaboratively and strategically

Laws and Policies:

Short-term

☐ Increased capacity to evaluate laws and policies to affect health

Intermediate

☐ Strengthened capability to systematically apply and use laws and policies to improve health

Programs and Services:

Short-term

☒ Improved capacity to identify, prioritize, and customize relevant programs and services to address public health needs

Intermediate

☒ Increased capability to implement evidence-based/informed public health programs, policies, and services to address public health needs

PROJECT DETAILS

State the purpose of the project and provide project details for the length of the budget period (11 months).

- For the selected program strategies, describe proposed activities and provide sample process measures to track progress implementing the activities. Describe the expected outputs (resources, tools, products, etc.) and outcomes (changes to occur), and provide sample outcome measures to track progress achieving the outcomes.
- Complete the activities, process measures, outputs, budget period outcomes, and outcome measures column for each program strategy selected.

12	**Project Purpose (150 words maximum):***	The purpose of this project is to to expand and strengthen capacity and coordination of physicians during the ongoing response to COVID-19. Physicians and clinicians play an important role in diagnosing and treating patients during emergencies. They also play a criticial role in sharing timely, accurate and evidence-based information. This project seeks to: 1. Maintain a COVID-19 resource center for physicians and clinicians to ensure dissemination of accurate, evidence-based information rooted in science 2. Provide training, resources, and technical assistance to ensure timely and appropriate diagnosis, testing, and treatement of COVID-19 patients

	Program Strategies	**Activities**	**Process Measures**	**Outputs**	**Budget Period Outcomes**	**Outcome Measures**
	Public Health Systems Infrastructure					
	Leadership and Workforce Development					
	Data and Information Systems					
	Communication and Information Technology	Develop, maintain and disseminate tools and resources to achieve the following objectives: share developments on	Number of resources and tools developed for dissemination Target audience reached through	Maintenance of COVID-19 resource center	Improved communication and information technology capacity to inform the public efficiently and effectively	Number of physicians and health care providers who report using the COVID-19 resource center to inform the public

		spread and management of COVID-19, review epidemiologic and clinical characteristics of COVID-19 infections, identify methods to protect providers from becoming infected, provide tips to educate patients, and use lessons learned from prior epidemics to respond to possible sustained transmission.	dissemination strategies			
	Partnerships					
	Laws and Policies					
	Programs and Services	Identify best practices of physicians and health care providers during COVID-19 response Develop and package resources and tool for health care providers and patients that support diagnosis, testing, and treatment and services during COVID-19 response Disseminate products to target audiences and relevant stakeholders	Best practices identified to be included in guides and resources Number of resources and tools peer reviewed prior to dissemination Target audience reached through dissemination strategies Physicians and health care providers trained to implement COVID-19 related services	Guides developed to promote implementation of programs and services during COVID-19 response Training and technical assistance provided to physicians and health care providers	Model policies, protocols, standards and practices are implemented by physicians and health care providers Improved capacity to identify, prioritize, and customize relevant programs and services to address public health needs Increased capability to implement evidence-based/informed public health programs, policies, and services to	Physicians who report new model policies, protocols, standards and practices implemented for COVID-19 response Health care settings that report implementing evidence-based/informed practices and services for COVID-19 response

					address public health needs	

ORGANIZATIONAL CAPACITY AND PROGRAM EXPERIENCE

13

Recipient Organizational Capacity (200 words maximum):*

The recipient will have the capacity to identify model programs and services, distill scalable elements of these models, and translate those model elements into strategies and tools that can be disseminated and implemented at scale while allowing for customization for the target population and other stakeholders. The recipient must demonstrate capacity to oversee and manage all aspects of the project to ensure that subject matter experts and CDC-recommended stakeholders are engaged, appropriate communication modes are used to disseminate developed tools, and the developed tools are available and useful to the target population and other healthcare stakeholders.

14

Recipient Program Experience (200 words maximum):*

The recipient must have experience translating clinical recommendations for execution in public and private healthcare settings. Demonstrate experience working directly with healthcare systems, hospitals, or other healthcare settings to build internal capacity, particularly for emergency preparedness and response needs. Tools will be produced that can be adapted to different audience needs, but maintain fidelity to CDC's recommendations. The recipient must have documented experience in the context of public health emergency preparedness and response: translating clinical recommendations for execution in healthcare settings (e.g., hospitals, health systems, community health clinics), working directly with healthcare providers and settings to build internal capacity, and developing tools for healthcare settings and/or providers to translate clinical recommendations to practice,

COLLABORATIVE WORK

15

Expectations for Collaboration, as applicable (200 words maximum):

It is expected that the awardee will collaborate with CDC and other organizations with expertise in these areas .

16

Expected Subcontractual Work and Recommended Criteria for Selecting Subcontractors, as applicable (200 words maximum):

17

Will the proposed CBA benefit governmental public health agencies?

☒ **Yes**
☐ **No**

If yes, briefly describe how (200 words maximum):

The tools, guides, and resources developed can be used by state, tribal, local and territorial health departments to collaborate with physicians healthcare systems to implement programs and services that address the COVID-19 needs in their jurisdictions.

BUDGET INSTRUCTIONS

18

General Instructions for Use of Funds, as applicable (100 words maximum):

CIO CERTIFICATION*

19

By submitting this project plan, I certify that my CIO currently does not maintain a comparable NOFO related to CBA. I understand it is my CIO's responsibility to pursue Office of Management and Budget (OMB) and Paperwork Reduction Act (PRA) clearance for this project. I will discuss the project with my Associate Director for Science (ADS) and initiate the appropriate clearance prior to funding.

FY 2019 CIO Project Plan

CDC-RFA-OT18-1802
Strengthening Public Health Systems and Services through National Partnerships to Improve and Protect the Nation's Health

GENERAL INFORMATION			
1	**Project title (please do not use all caps; 15 words maximum):*** **Strengthening Capacity of Community Based Organizations to Address COVID-19 Response Needs**	2	**CIO:***
		3	**Division:*** **Office:**
4	**CIO point of contact (POC) name:*** **CIO POC email address:*** **CIO POC phone number:***		
5	**Select the target population category to receive capacity-building assistance (CBA):*** **Category A ☐ Category B ☐ Category C ☒** **Category A: Governmental Public Health Departments** – This category is focused on meeting the priority organizational-level CBA needs of one of the following health department types: state, tribal, local, or territorial. Organizational level includes, but is not limited to, business processes, system design, strategic planning, resource management, agency leadership, and governance. **Category B: Workforce Segments Across Governmental Public Health Departments** – This category is focused on meeting the priority CBA needs of one workforce segment across two or more health department types (state, tribal, local, or territorial). Workforce segments can include, but are not limited to, epidemiologists, chronic disease specialists, public health lawyers, environmentalists, informaticians, and nutritionists. **Category C: Nongovernmental Public Health Components** – This category is focused on meeting the priority CBA needs of one type of nongovernmental component of the public health system. Nongovernmental components represent, but are not limited to, community-based organizations, community health centers, primary care providers, governors, hospitals, economists, legislators, education organizations, social action organizations, and public safety agencies.		
6	**Description of the target population:* (25 words maximum)** **Community Based Organizations** **Note: Proposals should not build capacity for CDC or other federal agencies**		

PROJECT FUNDING OT18-1802 Period of Performance Length: August 1, 2018 – July 31, 2023 Budget Period Length:			
7	**Proposed Project Funding:*** **$_____(Whole Numbers Only)**		
8	**Expected Length of Project (Check one):*** ☐ **The CIO will award new funding each budget period for the remainder of the period of performance.** ☐ **The CIO will award new funding each budget period for at least two consecutive years.**		

☒ **The CIO will fund the project for one year.**

CBA PROGRAM APPROACH – NOFO LOGIC MODEL

Select the program strategies and the program outcomes the project should work toward for the length of the project

9

CBA Program Strategies (Check one or more):*

☐ **Public Health Systems Infrastructure:** Activities to improve operational capacity, such as policies and plans, administration and management, and quality improvement
☐ **Leadership and Workforce Development:** Activities to improve leadership and workforce competencies, recruitment, and retention
☐ **Data and Information Systems:** Activities to improve collection, management, interpretation, and dissemination of data to guide decision-making
☒ **Communication and Information Technology**: Activities to improve use of communication and information technology to affect health decisions and actions
☒ **Partnerships:** Activities to improve establishment and maintenance of results-driven partnerships
☐ **Laws and Policies:** Activities to improve the ability to interpret and inform laws, including statutes and regulations, and policies that affect health
☐ **Programs and Services:** Activities to improve the identification of best practices and the implementation of evidence-based/informed programs and services

10

Crisis Response Approaches (Check one or more)*

☐ **Strengthen Incident Management for Early Crisis Response**
☐ **Strengthen Jurisdictional Recovery**
☐ **Strengthen Biosurveillance**
☐ **Strengthen Information Management**
☒ **Strengthen Countermeasures and Mitigation**
☒ **Strengthen Surge Management**
☒ **Strengthen Communications**

11

CBA Program Outcomes (Check one or more):*

Public Health Systems Infrastructure:
Short-term
☐ Improved operational capacity to evaluate, manage, and improve public health systems
Intermediate
☐ Increased capability of public health systems to achieve nationally established standards
Leadership and Workforce Development:
Short-term
☐ Improved leadership capacity to identify and prioritize public health needs
☐ Strengthened core and discipline-specific public health competencies among the workforce to improve job performance
Intermediate
☐ Increased leadership decision-making to address public health needs strategically and systematically
☐ Strengthened capability of public health workforce to deliver essential public health services
Data and Information Systems:
Short-term
☐ Improved capacity of data and information systems to conduct public health monitoring and surveillance
Intermediate
☐ Increased capability to use data to inform decision-making and support evidence-based practices and policies
Communication and Information Technology:
Short-term
☐ Improved communication and information technology capacity to inform the public efficiently and effectively
Intermediate
☒ Strengthened capability to use communication and information technology to affect health decisions and actions
Partnerships:
Short-term
☐ Improved capacity to establish and maintain partnerships within and across sectors to create a shared vision of health

Intermediate

☒ Strengthened capability to respond to public health priorities collaboratively and strategically

Laws and Policies:

Short-term

☐ Increased capacity to evaluate laws and policies to affect health

Intermediate

☐ Strengthened capability to systematically apply and use laws and policies to improve health

Programs and Services:

Short-term

☐ Improved capacity to identify, prioritize, and customize relevant programs and services to address public health needs

Intermediate

☐ Increased capability to implement evidence-based/informed public health programs, policies, and services to address public health needs

PROJECT DETAILS

State the purpose of the project and provide project details for the length of the budget period (11 months).

- For the selected program strategies, describe proposed activities and provide sample process measures to track progress implementing the activities. Describe the expected outputs (resources, tools, products, etc.) and outcomes (changes to occur), and provide sample outcome measures to track progress achieving the outcomes.
- Complete the activities, process measures, outputs, budget period outcomes, and outcome measures column for each program strategy selected.

12	**Project Purpose (150 words maximum):***	**The purpose of the project is to build capacity of community-based organizations to address the COVID-19 response within their jurisdiction. Suggested activities are designed to support CBOs in preparedness and response activities, communicating key COVID-19 information, and building and maintaining partnerships to leverage resources needed to assist with the response. Applicants are encouraged to propose additional activities, performance measures, outputs, and outcomes, as needed, to address the unique capacity-building assistance needs of CBOs.**

Program Strategies	Activities	Process Measures	Outputs	Budget Period Outcomes	Outcome Measures
Public Health Systems Infrastructure					
Leadership and Workforce Development					
Data and Information Systems					
Communication and Information Technology	**Train CBOs in creating communication campaigns that are relevant, culturally competent, and at sufficient literacy**	**Number of virtual trainings and materials developed**	**Trainings on translating COVID-19 data and guidance into communication campaigns**	**Improved communication and information technology capacity to inform the public efficiently and effectively**	**CBOs reporting development and use of a communications plan to disseminate COVID-19 information**

		level to disseminate COVID-19 information		Communication plan to disseminate COVID-19 information Messaging to share prevention and treatment strategies for addressing COVID-19	Intermediate Strengthened capability to use communication and information technology to affect health decisions and actions	CBOs that increase use of information technology to disseminate COVID-19 information
	Partnerships	Engage CBOs in stakeholder convenings to leverage resources to address COVID-19 needs within jurisdiction Expand CBO partnerships through community engagement and mobilization Identify and train CBOs on successful practices to inform and mobilize the public and private sectors in collaborative efforts to address COVID-19 needs	Number of stakeholder virtual convenings held CBO representatives that attend virtual convenings CBOs participating in trainings on informing and mobilizing public and private sectors	Resource developed guiding CBOs on partnering across jurisdictions to work across systems to address COVID-19 response needs	Strengthen the capacity of CBOs to engage health departments and other key stakeholders (community health centers, hospital systems, etc.) in addressing emergency preparedness and response needs	CBOs that use a collaborative process to identify and address COVID-19 response needs within their community
	Laws and Policies					
	Programs and Services					

ORGANIZATIONAL CAPACITY AND PROGRAM EXPERIENCE

13	**Recipient Organizational Capacity (200 words maximum):*** **The successful applicant should have the capacity and reach to leverage partnerships between the government and private and philanthropic sectors to develop and implement health protection programs.**

14	**Recipient Program Experience (200 words maximum):*** **The successful applicant should have experience leveraging resources across sectors to collaborate with CDC in launching new programs, expanding existing programs, and examining scalability of promising programs. The applicant should demonstrate success in serving as a strategic implementing partner with CDC and organizations in the philanthropic and private sectors.**

COLLABORATIVE WORK

15	**Expectations for Collaboration, as applicable (200 words maximum):** **The applicant is expected to collaborate with the CDC and other key stakeholders (including other national organizations) to support efforts to minimize the impact of COVID-19 in communities.**
16	**Expected Subcontractual Work and Recommended Criteria for Selecting Subcontractors, as applicable (200 words maximum):** **The successful applicant is expected to play a substantial role in implementing project activities. Subcontracting is permitted, as needed, to address specific technical needs associated with project activities.**
17	**Will the proposed CBA benefit governmental public health agencies?** ☒ **Yes** ☐ **No** **If yes, briefly describe how (200 words maximum):** **The project activities will benefit governmental public health agencies through working across systems to address COVID-19 needs at the individual, community, and national levels.**

BUDGET INSTRUCTIONS

18	**General Instructions for Use of Funds, as applicable (100 words maximum):** **Recipient will be permitted to expend funds for project-related costs (personnel, fringe, supplies, etc.) in accordance with general terms and conditions for non-research cooperative agreement. Applicant proposals should be scalable. If less funds are available, CDC and the recipient will work together to revise and further prioritize activities in the work plan.**

CIO CERTIFICATION*

19	**By submitting this project plan, I certify that my CIO currently does not maintain a comparable NOFO related to this proposed CBA project. I understand my CIO is responsible for adhering to all applicable scientific policies and securing requisite clearances in the Scientific Tracking and Reporting System (STARS). I will discuss the project with my Associate Director for Science (ADS) and obtain the appropriate scientific clearances prior to initiating project activities that involve the collection, generation, or analysis of public health data.**

FY 2019 CIO Project Plan

CDC-RFA-OT18-1802
Strengthening Public Health Systems and Services through National Partnerships to Improve and Protect the Nation's Health

GENERAL INFORMATION			
1	**Project title (please do not use all caps; 15 words maximum):*** **Building City Government Capacity to Address COVID-19**	2	**CIO:***
		3	**Division:*** **Office:**
4	**CIO point of contact (POC) name:*** **CIO POC email address:*** **CIO POC phone number:***		
5	**Select the target population category to receive capacity-building assistance (CBA):*** **Category A ☐ Category B ☐ Category C ☒** **Category A: Governmental Public Health Departments** – This category is focused on meeting the priority organizational-level CBA needs of one of the following health department types: state, tribal, local, or territorial. Organizational level includes, but is not limited to, business processes, system design, strategic planning, resource management, agency leadership, and governance. **Category B: Workforce Segments Across Governmental Public Health Departments** – This category is focused on meeting the priority CBA needs of one workforce segment across two or more health department types (state, tribal, local, or territorial). Workforce segments can include, but are not limited to, epidemiologists, chronic disease specialists, public health lawyers, environmentalists, informaticians, and nutritionists. **Category C: Nongovernmental Public Health Components** – This category is focused on meeting the priority CBA needs of one type of nongovernmental component of the public health system. Nongovernmental components represent, but are not limited to, community-based organizations, community health centers, primary care providers, governors, hospitals, economists, legislators, education organizations, social action organizations, and public safety agencies.		
6	**Description of the target population:* (25 words maximum)** **City governments (i.e. mayors, city council members, and agency directors)** **Note: Proposals should not build capacity for CDC or other federal agencies**		

PROJECT FUNDING OT18-1802 Period of Performance Length: August 1, 2018 – July 31, 2023 Budget Period Length:			
7	**Proposed Project Funding:*** **$_____(Whole Numbers Only)**		
8	**Expected Length of Project (Check one):*** ☐ **The CIO will award new funding each budget period for the remainder of the period of performance.** ☐ **The CIO will award new funding each budget period for at least two consecutive years.** ☒ **The CIO will fund the project for one year.**		

CBA PROGRAM APPROACH – NOFO LOGIC MODEL

Select the program strategies and the program outcomes the project should work toward for the length of the project

9

CBA Program Strategies (Check one or more):*

☐ **Public Health Systems Infrastructure:** Activities to improve operational capacity, such as policies and plans, administration and management, and quality improvement

☒ **Leadership and Workforce Development:** Activities to improve leadership and workforce competencies, recruitment, and retention

☐ **Data and Information Systems:** Activities to improve collection, management, interpretation, and dissemination of data to guide decision-making

☒ **Communication and Information Technology**: Activities to improve use of communication and information technology to affect health decisions and actions

☒ **Partnerships:** Activities to improve establishment and maintenance of results-driven partnerships

☐ **Laws and Policies:** Activities to improve the ability to interpret and inform laws, including statutes and regulations, and policies that affect health

☐ **Programs and Services:** Activities to improve the identification of best practices and the implementation of evidence-based/informed programs and services

10

Crisis Response Approaches (Check one or more)*

☐ **Strengthen Incident Management for Early Crisis Response**
☐ **Strengthen Jurisdictional Recovery**
☐ **Strengthen Biosurveillance**
☒ **Strengthen Information Management**
☒ **Strengthen Countermeasures and Mitigation**
☐ **Strengthen Surge Management**
☒ **Strengthen Communications**

11

CBA Program Outcomes (Check one or more):*

Public Health Systems Infrastructure:

Short-term

☐ Improved operational capacity to evaluate, manage, and improve public health systems

Intermediate

☐ Increased capability of public health systems to achieve nationally established standards

Leadership and Workforce Development:

Short-term

☐ Improved leadership capacity to identify and prioritize public health needs

☐ Strengthened core and discipline-specific public health competencies among the workforce to improve job performance

Intermediate

☒ Increased leadership decision-making to address public health needs strategically and systematically

☐ Strengthened capability of public health workforce to deliver essential public health services

Data and Information Systems:

Short-term

☐ Improved capacity of data and information systems to conduct public health monitoring and surveillance

Intermediate

☐ Increased capability to use data to inform decision-making and support evidence-based practices and policies

Communication and Information Technology:

Short-term

☐ Improved communication and information technology capacity to inform the public efficiently and effectively

Intermediate

☒ Strengthened capability to use communication and information technology to affect health decisions and actions

Partnerships:

Short-term

☐ Improved capacity to establish and maintain partnerships within and across sectors to create a shared vision of health

Intermediate

☒ Strengthened capability to respond to public health priorities collaboratively and strategically

Laws and Policies:

Short-term

☐ Increased capacity to evaluate laws and policies to affect health

Intermediate

☐ Strengthened capability to systematically apply and use laws and policies to improve health

Programs and Services:

Short-term

☐ Improved capacity to identify, prioritize, and customize relevant programs and services to address public health needs

Intermediate

☐ Increased capability to implement evidence-based/informed public health programs, policies, and services to address public health needs

PROJECT DETAILS

State the purpose of the project and provide project details for the length of the budget period (11 months).

- For the selected program strategies, describe proposed activities and provide sample process measures to track progress implementing the activities. Describe the expected outputs (resources, tools, products, etc.) and outcomes (changes to occur), and provide sample outcome measures to track progress achieving the outcomes.
- Complete the activities, process measures, outputs, budget period outcomes, and outcome measures column for each program strategy selected.

12	**Project Purpose (150 words maximum):***	**The purpose of the project is to build city government capacity to address the COVID-19 response within their jurisdiction. Suggested activities are designed to support city governments in building and maintaining partnerships to leverage resources needed to assist with the response. And to support city governments in using mitigation strategies, including emergency declarations and Memorandums of Understanding or Memorandums of Agreement, etc., to address COVID-19 needs. Applicants are encouraged to propose additional activities, performance measures, outputs, and outcomes, as needed, to address the unique needs of city governments.**

Program Strategies	Activities	Process Measures	Outputs	Budget Period Outcomes	Outcome Measures
Public Health Systems Infrastructure					
Leadership and Workforce Development					
Data and Information Systems					
Communication and Information Technology					

	Partnerships	Engage city governments in stakeholder convenings to leverage resources to address COVID-19 needs within jurisdiction	Virtual convenings held with stakeholders	Resource developed on partnering across jurisdictions to work across systems to address COVID-19 response needs	Strengthen the capacity of city governments to engage health departments and other key stakeholders in addressing emergency preparedness and response needs	City government leaders reporting strengthened capacity to leverage partnerships and resources to address emergency preparedness and response needs
	Laws and Policies	Examine use of community mitigation strategies, including use of emergency declarations, Memorandums of Understanding or Memorandums of Agreement, etc., to address COVID-19 needs within jurisdiction Provide training or technical assistance to city government staff in using community mitigation strategies to address COVID-19 needs within their jurisdiction	Number of trainings or technical assistance provided	Trainings developed Reports of trainings/technical assistance provided to city governments	Strengthen the capacity of city governments to leverage community mitigation strategies to address COVID-19 response needs	City governments reporting improved capacity to use community mitigation strategies
	Programs and Services					

ORGANIZATIONAL CAPACITY AND PROGRAM EXPERIENCE

13	**Recipient Organizational Capacity (200 words maximum):*** **The successful applicant should demonstrate capacity to build multisector tools, frameworks, and partnerships to address prevention needs within their target population. The organization should demonstrate capacity to provide training and technical assistance in using systems thinking to improve health and safety while advancing health equity. More specifically, the applicant should demonstrate the capacity to leverage virtual meetings, etc. to build capacity of their target population.**

14	**Recipient Program Experience (200 words maximum):*** **The successful applicant should demonstrate experience providing training and technical assistance services to city governments. Experience should include working across systems within a jurisdiction to address prevention and health equity needs. Such experience should include tool identification and development to meet the needs of a jurisdiction and leveraging such tools to build scalable programs that may be used in various jurisdictions.**

COLLABORATIVE WORK

15	**Expectations for Collaboration, as applicable (200 words maximum):** **The applicant is expected to collaborate with the CDC and other key stakeholders (including other national organizations) to support efforts to minimize the impact of COVID-19 in communities.**
16	**Expected Subcontractual Work and Recommended Criteria for Selecting Subcontractors, as applicable (200 words maximum):** **The successful applicant is expected to play a substantial role in implementing project activities. Subcontracting is permitted, as needed, to address specific technical needs associated with project activities.**
17	**Will the proposed CBA benefit governmental public health agencies?** ☒ **Yes** ☐ **No** **If yes, briefly describe how (200 words maximum):** **The project activities will benefit governmental public health agencies through working across systems to address COVID-19 needs at the individual, community, and national levels.**

BUDGET INSTRUCTIONS

18	**General Instructions for Use of Funds, as applicable (100 words maximum):** **Recipient will be permitted to expend funds for project-related costs (personnel, fringe, supplies, etc.) in accordance with general terms and conditions for non-research cooperative agreement. Applicant proposals should be scalable. If less funds are available, CDC and the recipient will work together to revise and further prioritize activities in the work plan.**

CIO CERTIFICATION*

19	**By submitting this project plan, I certify that my CIO currently does not maintain a comparable NOFO related to this proposed CBA project. I understand my CIO is responsible for adhering to all applicable scientific policies and securing requisite clearances in the Scientific Tracking and Reporting System (STARS). I will discuss the project with my Associate Director for Science (ADS) and obtain the appropriate scientific clearances prior to initiating project activities that involve the collection, generation, or analysis of public health data.**

FY 2019 CIO Project Plan

CDC-RFA-OT18-1802
Strengthening Public Health Systems and Services through National Partnerships to Improve and Protect the Nation's Health

GENERAL INFORMATION			
1	**Project title (please do not use all caps; 15 words maximum):*** **Strengthening Maternal and Child Health Programs to Respond to COVID-19**	2	**CIO:***
		3	**Division:*** **Office:**
4	**CIO point of contact (POC) name:*** **CIO POC email address:*** **CIO POC phone number:***		
5	**Select the target population category to receive capacity-building assistance (CBA):*** **Category A ☐ Category B ☐ Category C ☒** **Category A: Governmental Public Health Departments** – This category is focused on meeting the priority organizational-level CBA needs of one of the following health department types: state, tribal, local, or territorial. Organizational level includes, but is not limited to, business processes, system design, strategic planning, resource management, agency leadership, and governance. **Category B: Workforce Segments Across Governmental Public Health Departments** – This category is focused on meeting the priority CBA needs of one workforce segment across two or more health department types (state, tribal, local, or territorial). Workforce segments can include, but are not limited to, epidemiologists, chronic disease specialists, public health lawyers, environmentalists, informaticians, and nutritionists. **Category C: Nongovernmental Public Health Components** – This category is focused on meeting the priority CBA needs of one type of nongovernmental component of the public health system. Nongovernmental components represent, but are not limited to, community-based organizations, community health centers, primary care providers, governors, hospitals, economists, legislators, education organizations, social action organizations, and public safety agencies.		
6	**Description of the target population:* (25 words maximum)** **MCH program directors and staff and CYSHCN directors in health departments** **Note: Proposals should not build capacity for CDC or other federal agencies**		

PROJECT FUNDING OT18-1802 Period of Performance Length: August 1, 2018 – July 31, 2023 Budget Period Length:			
7	**Proposed Project Funding:*** **$_____(Whole Numbers Only)**		
8	**Expected Length of Project (Check one):*** ☐ **The CIO will award new funding each budget period for the remainder of the period of performance.** ☐ **The CIO will award new funding each budget period for at least two consecutive years.**		

☒ **The CIO will fund the project for one year.**

CBA PROGRAM APPROACH – NOFO LOGIC MODEL

Select the program strategies and the program outcomes the project should work toward for the length of the project

9

CBA Program Strategies (Check one or more):*

☐ **Public Health Systems Infrastructure:** Activities to improve operational capacity, such as policies and plans, administration and management, and quality improvement
☒ **Leadership and Workforce Development:** Activities to improve leadership and workforce competencies, recruitment, and retention
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☒ **Communication and Information Technology**: Activities to improve use of communication and information technology to affect health decisions and actions
☒ **Partnerships:** Activities to improve establishment and maintenance of results-driven partnerships
☐ **Laws and Policies:** Activities to improve the ability to interpret and inform laws, including statutes and regulations, and policies that affect health
☐ **Programs and Services:** Activities to improve the identification of best practices and the implementation of evidence-based/informed programs and services

10

Crisis Response Approaches (Check one or more)*

☐ **Strengthen Incident Management for Early Crisis Response**
☒ **Strengthen Jurisdictional Recovery**
☐ **Strengthen Biosurveillance**
☐ **Strengthen Information Management**
☒ **Strengthen Countermeasures and Mitigation**
☐ **Strengthen Surge Management**
☒ **Strengthen Communications**

11

CBA Program Outcomes (Check one or more):*

Public Health Systems Infrastructure:
Short-term
☐ Improved operational capacity to evaluate, manage, and improve public health systems
Intermediate
☐ Increased capability of public health systems to achieve nationally established standards
Leadership and Workforce Development:
Short-term
☐ Improved leadership capacity to identify and prioritize public health needs
☐ Strengthened core and discipline-specific public health competencies among the workforce to improve job performance
Intermediate
☒ Increased leadership decision-making to address public health needs strategically and systematically
☒ Strengthened capability of public health workforce to deliver essential public health services
Data and Information Systems:
Short-term
☐ Improved capacity of data and information systems to conduct public health monitoring and surveillance
Intermediate
☐ Increased capability to use data to inform decision-making and support evidence-based practices and policies
Communication and Information Technology:
Short-term
☒ Improved communication and information technology capacity to inform the public efficiently and effectively
Intermediate
☒ Strengthened capability to use communication and information technology to affect health decisions and actions
Partnerships:
Short-term
☐ Improved capacity to establish and maintain partnerships within and across sectors to create a shared vision of health

Intermediate

☒ Strengthened capability to respond to public health priorities collaboratively and strategically

Laws and Policies:

Short-term

☐ Increased capacity to evaluate laws and policies to affect health

Intermediate

☐ Strengthened capability to systematically apply and use laws and policies to improve health

Programs and Services:

Short-term

☒ Improved capacity to identify, prioritize, and customize relevant programs and services to address public health needs

Intermediate

☒ Increased capability to implement evidence-based/informed public health programs, policies, and services to address public health needs

PROJECT DETAILS

State the purpose of the project and provide project details for the length of the budget period (11 months).

- For the selected program strategies, describe proposed activities and provide sample process measures to track progress implementing the activities. Describe the expected outputs (resources, tools, products, etc.) and outcomes (changes to occur), and provide sample outcome measures to track progress achieving the outcomes.
- Complete the activities, process measures, outputs, budget period outcomes, and outcome measures column for each program strategy selected.

12	**Project Purpose (150 words maximum):***	**The purpose of the project is to build health department MCH program director and staff capacity to address the COVID-19 response within their jurisdiction. Suggested activities are designed to support the MCH workforce in preparedness and response activities, communicating key COVID-19 information, and building and maintaining partnerships to leverage resources needed to assist with the response. Applicants are encouraged to propose additional activities, performance measures, outputs, and outcomes, as needed, to address the unique needs of MCH program directors and their staff in health departments.**

	Program Strategies	Activities	Process Measures	Outputs	Budget Period Outcomes	Outcome Measures
	Public Health Systems Infrastructure					
	Leadership and Workforce Development	**Design and develop tools to support maternal and child workforce development in preparedness and response**	**Number of trainings and technical assistance provided**	**Minutes or report from convenings Tools and other resources to support maternal and child health workforce**	**Increased maternal and child health leadership and program staff capabilities to protect, respond, and support pregnant women and children during emergencies**	**Agencies reporing increased capabilities to respond to the needs of pregnant woman and children during the COVID-19 response**
	Data and Information Systems					

	Communication and Information Technology	**Develop and disseminate key information related to COVID-19 for pregnant women and children** **Provide information about COVID-19 and public health functions to diverse audiences through multiple methods to inform public health decision making**	**Trainings to increase awareness of public health and healthcare strategies to prevent and treat COVID-19**	**Communication plan to disseminate COVID-19 information** **Messaging to share prevention and treatment strategies for addressing COVID-19**	**Improved communication and information technology capacity to inform the public efficiently and effectively Intermediate** **Strengthened capability to use communication and information technology to affect health decisions and actions**	**Agencies updating communication plan to disseminate information related to COVID-19**
	Partnerships	**Convene webinars or other virtual meetings to help public health preparedness planners connect with MCH programs and staff who are organizing response efforts for pregnant women and children** **Support MCH program leaders and staff in leveraging partnerships and resources to address COVID-19**	**Virtual convenings held to connect MCH staff with key stakeholders at various levels**	**Resources developed for cross-sector partnerships to address COVID-19 response**	**Strengthened capability to respond to COVID-19 and other public health priorities collaboratively and strategically**	**Agencies reporting increased partnerships or coalitions collaborating to address COVID-19 needs**
	Laws and Policies					
	Programs and Services	**Provide training and technical assistance to improve delivery of programs and services within communities**	**Number of trainings provided** **Number of programs assessed to determine technical assistance needs**	**Trainings developed** **Report of MCH health department program needs**	**Increased capability to implement evidence-based/informed public health programs, policies,**	**Agencies reporting updated programs, policies, and services to address COVID-19 response needs**

					and services to address COVID-19	

ORGANIZATIONAL CAPACITY AND PROGRAM EXPERIENCE

13	**Recipient Organizational Capacity (200 words maximum):*** **The successful applicant is expected to have access to a network of maternal and child health professionals across health departments. Successful applicant should demonstrate capacity to provide training, technical assistance, and information sharing to maternal and child health professionals.**
14	**Recipient Program Experience (200 words maximum):*** **Successful applicant will demonstrate experience collaborating across the public health system to address public health emergencies. This includes but is not limited to planning and implementing virtual stakeholder convenings and developing resources to inform**

COLLABORATIVE WORK

15	**Expectations for Collaboration, as applicable (200 words maximum):** **The applicant is expected to collaborate with the CDC and other key stakeholders (including other national organizations) to support efforts to minimize the impact of COVID-19 in communities.**
16	**Expected Subcontractual Work and Recommended Criteria for Selecting Subcontractors, as applicable (200 words maximum):** **The successful applicant is expected to play a substantial role in implementing project activities. Subcontracting is permitted, as needed, to address specific technical needs associated with project activities.**
17	**Will the proposed CBA benefit governmental public health agencies?** **☒Yes** **☐No** **If yes, briefly describe how (200 words maximum):** **The project activities will benefit governmental public health agencies through working across systems to address COVID-19 needs at the individual, community, and national levels.**

BUDGET INSTRUCTIONS

18	**General Instructions for Use of Funds, as applicable (100 words maximum):** **Recipient will be permitted to expend funds for project-related costs (personnel, fringe, supplies, etc.) in accordance with general terms and conditions for non-research cooperative agreement. Applicant proposals should be scalable. If less funds are available, CDC and the recipient will work together to revise and further prioritize activities in the work plan.**

CIO CERTIFICATION*

19	**By submitting this project plan, I certify that my CIO currently does not maintain a comparable NOFO related to this proposed CBA project. I understand my CIO is responsible for adhering to all applicable scientific policies and securing requisite clearances in the Scientific Tracking and Reporting System (STARS). I will discuss the project with my Associate Director for Science (ADS) and obtain the appropriate scientific clearances prior to initiating project activities that involve the collection, generation, or analysis of public health data.**

FY 2019 CIO Project Plan

CDC-RFA-OT18-1802
Strengthening Public Health Systems and Services through National Partnerships to Improve and Protect the Nation's Health

GENERAL INFORMATION			
1	**Project title (please do not use all caps; 15 words maximum):*** **Building Capacity of Hospitals' Response to COVID-19 across the U.S.**	2	**CIO:**
		3	**Division:** **Office:**
4	**CIO point of contact (POC) name:** **CIO POC email address:** **CIO POC phone number:**		
5	**Select the target population category to receive capacity-building assistance (CBA):*** **Category A** ☐ **Category B** ☐ **Category C** ☒ **Category A: Governmental Public Health Departments** – This category is focused on meeting the priority organizational-level CBA needs of one of the following health department types: state, tribal, local, or territorial. Organizational level includes, but is not limited to, business processes, system design, strategic planning, resource management, agency leadership, and governance. **Category B: Workforce Segments Across Governmental Public Health Departments** – This category is focused on meeting the priority CBA needs of one workforce segment across two or more health department types (state, tribal, local, or territorial). Workforce segments can include, but are not limited to, epidemiologists, chronic disease specialists, public health lawyers, environmentalists, informaticians, and nutritionists. **Category C: Nongovernmental Public Health Components** – This category is focused on meeting the priority CBA needs of one type of nongovernmental component of the public health system. Nongovernmental components represent, but are not limited to, community-based organizations, community health centers, primary care providers, governors, hospitals, economists, legislators, education organizations, social action organizations, and public safety agencies.		
6	**Description of the target population:* (25 words maximum)** **Note: Proposals should not build capacity for CDC or other federal agencies** US hospitals and health systems and 50 state and local hospital associations, including front line clinicians, staff, and corporate leadership		
PROJECT FUNDING OT18-1802 Period of Performance Length: August 1, 2018 – July 31, 2023 Budget Period Length:			
7	**Proposed Project Funding:*** **$_____(Whole Numbers Only)**		
8	**Expected Length of Project (Check one):*** ☐ **The CIO will award new funding each budget period for the remainder of the period of performance.** ☐ **The CIO will award new funding each budget period for at least two consecutive years.** ☒ **The CIO will fund the project for one year.**		

CBA PROGRAM APPROACH – NOFO LOGIC MODEL

Select the program strategies and the program outcomes the project should work toward for the length of the project

9

CBA Program Strategies (Check one or more):*

☐ **Public Health Systems Infrastructure:** Activities to improve operational capacity, such as policies and plans, administration and management, and quality improvement

☒ **Leadership and Workforce Development:** Activities to improve leadership and workforce competencies, recruitment, and retention

☐ **Data and Information Systems:** Activities to improve collection, management, interpretation, and dissemination of data to guide decision-making

☐ **Communication and Information Technology**: Activities to improve use of communication and information technology to affect health decisions and actions

☒ **Partnerships:** Activities to improve establishment and maintenance of results-driven partnerships

☐ **Laws and Policies:** Activities to improve the ability to interpret and inform laws, including statutes and regulations, and policies that affect health

☒ **Programs and Services:** Activities to improve the identification of best practices and the implementation of evidence-based/informed programs and services

10

Crisis Response Approaches (Check one or more)*

☒ **Strengthen Incident Management for Early Crisis Response**
☒ **Strengthen Jurisdictional Recovery**
☐ **Strengthen Biosurveillance**
☒ **Strengthen Information Management**
☐ **Strengthen Countermeasures and Mitigation**
☒ **Strengthen Surge Management**
☐ **Strengthen Communications**

11

CBA Program Outcomes (Check one or more):*

Public Health Systems Infrastructure:

Short-term

☐ Improved operational capacity to evaluate, manage, and improve public health systems

Intermediate

☐ Increased capability of public health systems to achieve nationally established standards

Leadership and Workforce Development:

Short-term

☒ Improved leadership capacity to identify and prioritize public health needs

☒ Strengthened core and discipline-specific public health competencies among the workforce to improve job performance

Intermediate

☒ Increased leadership decision-making to address public health needs strategically and systematically

☐ Strengthened capability of public health workforce to deliver essential public health services

Data and Information Systems:

Short-term

☐ Improved capacity of data and information systems to conduct public health monitoring and surveillance

Intermediate

☐ Increased capability to use data to inform decision-making and support evidence-based practices and policies

Communication and Information Technology:

Short-term

☐ Improved communication and information technology capacity to inform the public efficiently and effectively

Intermediate

☐ Strengthened capability to use communication and information technology to affect health decisions and actions

Partnerships:

Short-term

☒ Improved capacity to establish and maintain partnerships within and across sectors to create a shared vision of health

Intermediate

☒ Strengthened capability to respond to public health priorities collaboratively and strategically

Laws and Policies:

Short-term

☐ Increased capacity to evaluate laws and policies to affect health

Intermediate

☐ Strengthened capability to systematically apply and use laws and policies to improve health

Programs and Services:

Short-term

☒ Improved capacity to identify, prioritize, and customize relevant programs and services to address public health needs

Intermediate

☒ Increased capability to implement evidence-based/informed public health programs, policies, and services to address public health needs

PROJECT DETAILS

State the purpose of the project and provide project details for the length of the budget period (11 months).

- For the selected program strategies, describe proposed activities and provide sample process measures to track progress implementing the activities. Describe the expected outputs (resources, tools, products, etc.) and outcomes (changes to occur), and provide sample outcome measures to track progress achieving the outcomes.
- Complete the activities, process measures, outputs, budget period outcomes, and outcome measures column for each program strategy selected.

12	**Project Purpose (150 words maximum):***					
	Program Strategies	**Activities**	**Process Measures**	**Outputs**	**Budget Period Outcomes**	**Outcome Measures**
	Public Health Systems Infrastructure					
	Leadership and Workforce Development	-Convene hospital and health systems leadership related to engagement across public and private sectors via in-person meetings, webinars, and conference calls -Assess existing and emerging COVID-19 outbreak priorities and recommendations among hospitals and health systems, the 50 state and local	-Number of meetings convened -Types of issues, concerns, and priorities discussed -Analyses of data from the assessment of priorities -Analyses of TA needs -Number and types of TA provided	-Reports/minutes of the discussions -Report of findings on priorities and recommendations -Report of findings on TA needs and the TA provided -Dissemination findings via reports, conference presentations, webinars, blogs, podcasts, newsletters, and guidance documents	-Improved hospital/health systems leadership capacity to collaborate with multi-sector partners to identify, prioritize and address the COVID-19 outbreak	-Increase in number of collaborations formed and employed between hospitals/health systems leadership and health departments and other multi-sector leadership to strengthen hospitals/health systems' capacity to address COVID-19 collaboratively -Identification and prioritization of

		hospital associations, and front-line clinicians, staff, and corporate leadership -Assess COVID-19 real-time technical assistance (TA) needs across hospitals and health systems, the 50 state and local hospital associations, and front-line clinicians, staff, and corporate leadership -Provide TA to target population based on identified COVID-19 needs and priorities				issues, and plans developed
	Data and Information Systems					
	Communication and Information Technology					
	Partnerships	-Facilitate and mobilize the expansion of hospitals and health systems' partnerships across multiple sectors, particularly public health departments during COVID-19 outbreak through a collaborative process -Engage with the public health system leadership to identify best	-Number of convened in-person meetings and conference calls among hospitals/health systems, primarily with health departments -Number of convened in-person meetings and conference calls with public health system focusing on best practices to address the COVID-19	-Minutes from all convened meetings and calls -Report of the best practices' findings -Report of findings hospitals/health systems leadership opinions -Report of findings on COVID-19 control and response mechanisms	-Improved capacity of hospitals/health systems to establish and maintain partnerships across sectors to create a shared vision of controlling and responding to public health emergencies such as the COVID-19 outbreak	-Increase in number and types of multi-sector partnerships established that resulted in a shared vision of controlling and responding to public health emergencies such as the COVID-19 outbreak strategically

		practices to address the COVID-19 outbreak through collaborative processes -Share those best practices with hospitals and health systems, the 50 state and local hospital associations, and front-line clinicians, staff, and corporate leadership -Assess hospitals/ health systems leadership's opinions on the application and utility of identified best practices' -Develop innovative COVID-19 control and response mechanisms to inform and mobilize hospitals and health systems, the 50 state and local hospital associations, and front-line clinicians, staff, and corporate leadership through collaborative efforts	outbreak relevant for hospitals/ health systems -Number of meetings to share best practices with hospitals and health systems, the 50 state and local hospital associations, and front-line clinicians, staff, and corporate leadership -Analyses of hospitals/health systems leadership opinions -Number and type of COVID-19 control and response mechanisms			
	Laws and Policies					
	Programs and Services	-Integrate prevention/control /response strategies and actions across hospitals and health systems,	-Number of hospitals and health systems, and frontline clinicians, staff, and corporate leadership that	-Report of findings on adopted strategies and actions	-Improved capacity to identify, prioritize, and customize relevant programs and services to address public health	-Increase in number of customized programs and services developed to address COVID-19 outbreak

		and frontline clinicians, staff, and corporate leadership -Identify effective mechanisms to ensure capable assessment and response to public health emergencies -Develop indicators and measures to determine effectiveness in addressing public health emergencies such as COVID-19	adopted strategies and actions -Number and types of effective mechanisms identified -Number and types of indicators and measures developed	-Report of findings on mechanisms identified -Report of findings on indicators and measures developed	emergencies such as the COVID-19 outbreak in hospitals/health systems and the frontline workforce	-Increase in number of hospitals and health systems that integrated evidence-based/informed strategies and actions into their programs and services to address the COVID-19 outbreak

ORGANIZATIONAL CAPACITY AND PROGRAM EXPERIENCE

13 **Recipient Organizational Capacity (200 words maximum):***

The applicant must have the infrastructure, capacity, resources, expertise, and ability to reach a broad range U.S. health hospitals and health systems and their leadership, and frontline workforce. It is critical that the applicant has capacity to assist its target population effectively and efficiently responding to public health emergencies such as the COVID-19 outbreak. There should be capacity, resources and expertise to effectively plan, implement, monitor and evaluate all proposed activities.

14 **Recipient Program Experience (200 words maximum):***

The applicant must have an established history of providing capacity building to hospitals, state and local hospital associations and their leadership, and front-line clinicians and staff.

COLLABORATIVE WORK

15 **Expectations for Collaboration, as applicable (200 words maximum):**

The applicant is expected to collaborate with multi-sector partners and stakeholders, particularly leadership representing the public health system since COVID-19 is currently a public health emergency.

16 **Expected Subcontractual Work and Recommended Criteria for Selecting Subcontractors, as applicable (200 words maximum):**

The applicant can subcontract activities, as needed. However, the applicant is expected to play substantial role in implementing the project activities.

17 **Will the proposed CBA benefit governmental public health agencies?**

☒ **Yes**
☐ **No**

If yes, briefly describe how (200 words maximum): The project is expected to benefit government public health agencies through strengthened relationships with hospitals and health systems and frontline clinicians during public health emergencies such as the COVID-19 outbreak.

BUDGET INSTRUCTIONS

18	**General Instructions for Use of Funds, as applicable (100 words maximum):** -Applicant may only expend funds for reasonable and relevant program purposes, including personnel, supplies, communication and marketing materials, database enhancement, and services, such as contractual. - Actual funding level for this project may be slightly or substantially higher or lower than estimated, and Recipients should be willing to revise the workplan they submit in response to it, in collaboration with CDC Technical Monitors. -Applicant may not use funds for any activities or products inconsistent with the purposes and intent of the project plan.

CIO CERTIFICATION*

19	**By submitting this project plan, I certify that my CIO currently does not maintain a comparable NOFO related to this proposed CBA project. I understand my CIO is responsible for adhering to all applicable scientific policies and securing requisite clearances in the Scientific Tracking and Reporting System (STARS). I will discuss the project with my Associate Director for Science (ADS) and obtain the appropriate scientific clearances prior to initiating project activities that involve the collection, generation, or analysis of public health data.**

FY 2019 CIO Project Plan

CDC-RFA-OT18-1802
Strengthening Public Health Systems and Services through National Partnerships to Improve and Protect the Nation's Health

GENERAL INFORMATION			
1	**Project title (please do not use all caps; 15 words maximum):* Building COVID-19 response capacity for state governors and their staff**	2	**CIO:**
		3	**Division:** **Office:**
4	**CIO point of contact (POC) name:** **CIO POC email address:** **CIO POC phone number:**		
5	**Select the target population category to receive capacity-building assistance (CBA):*** **Category A ☐ Category B ☐ Category C ☒** **Category A: Governmental Public Health Departments** – This category is focused on meeting the priority organizational-level CBA needs of one of the following health department types: state, tribal, local, or territorial. Organizational level includes, but is not limited to, business processes, system design, strategic planning, resource management, agency leadership, and governance. **Category B: Workforce Segments Across Governmental Public Health Departments** – This category is focused on meeting the priority CBA needs of one workforce segment across two or more health department types (state, tribal, local, or territorial). Workforce segments can include, but are not limited to, epidemiologists, chronic disease specialists, public health lawyers, environmentalists, informaticians, and nutritionists. **Category C: Nongovernmental Public Health Components** – This category is focused on meeting the priority CBA needs of one type of nongovernmental component of the public health system. Nongovernmental components represent, but are not limited to, community-based organizations, community health centers, primary care providers, governors, hospitals, economists, legislators, education organizations, social action organizations, and public safety agencies.		
6	**Description of the target population:* (25 words maximum)** **Note: Proposals should not build capacity for CDC or other federal agencies** Governors and their staff		

PROJECT FUNDING OT18-1802 Period of Performance Length: August 1, 2018 – July 31, 2023 Budget Period Length: September 1, 2019 –July 31, 2020			
7	**Proposed Project Funding:*11** **$_____(Whole Numbers Only)**		
8	**Expected Length of Project (Check one):*** ☐ **The CIO will award new funding each budget period for the remainder of the period of performance.** ☐ **The CIO will award new funding each budget period for at least two consecutive years.** ☒ **The CIO will fund the project for one year.**		

CBA PROGRAM APPROACH – NOFO LOGIC MODEL

Select the program strategies and the program outcomes the project should work toward for the length of the project

9

CBA Program Strategies (Check one or more):*

☐ **Public Health Systems Infrastructure:** Activities to improve operational capacity, such as policies and plans, administration and management, and quality improvement

☒ **Leadership and Workforce Development:** Activities to improve leadership and workforce competencies, recruitment, and retention

☐ **Data and Information Systems:** Activities to improve collection, management, interpretation, and dissemination of data to guide decision-making

☒ **Communication and Information Technology**: Activities to improve use of communication and information technology to affect health decisions and actions

☐ **Partnerships:** Activities to improve establishment and maintenance of results-driven partnerships

☐ **Laws and Policies:** Activities to improve the ability to interpret and inform laws, including statutes and regulations, and policies that affect health

☐ **Programs and Services:** Activities to improve the identification of best practices and the implementation of evidence-based/informed programs and services

10

Crisis Response Approaches (Check one or more)*

☒ **Strengthen Incident Management for Early Crisis Response**
☒ **Strengthen Jurisdictional Recovery**
☐ **Strengthen Biosurveillance**
☒ **Strengthen Information Management**
☐ **Strengthen Countermeasures and Mitigation**
☐ **Strengthen Surge Management**
☒ **Strengthen Communications**

11

CBA Program Outcomes (Check one or more):*

Public Health Systems Infrastructure:

Short-term

☐ Improved operational capacity to evaluate, manage, and improve public health systems

Intermediate

☐ Increased capability of public health systems to achieve nationally established standards

Leadership and Workforce Development:

Short-term

☒ Improved leadership capacity to identify and prioritize public health needs

☐ Strengthened core and discipline-specific public health competencies among the workforce to improve job performance

Intermediate

☒ Increased leadership decision-making to address public health needs strategically and systematically

☐ Strengthened capability of public health workforce to deliver essential public health services

Data and Information Systems:

Short-term

☐ Improved capacity of data and information systems to conduct public health monitoring and surveillance

Intermediate

☐ Increased capability to use data to inform decision-making and support evidence-based practices and policies

Communication and Information Technology:

Short-term

☒ Improved communication and information technology capacity to inform the public efficiently and effectively

Intermediate

☐ Strengthened capability to use communication and information technology to affect health decisions and actions

Partnerships:

Short-term

☐ Improved capacity to establish and maintain partnerships within and across sectors to create a shared vision of health

Intermediate

☐ Strengthened capability to respond to public health priorities collaboratively and strategically

Laws and Policies:

Short-term

☐ Increased capacity to evaluate laws and policies to affect health

Intermediate

☐ Strengthened capability to systematically apply and use laws and policies to improve health

Programs and Services:

Short-term

☐ Improved capacity to identify, prioritize, and customize relevant programs and services to address public health needs

Intermediate

☐ Increased capability to implement evidence-based/informed public health programs, policies, and services to address public health needs

PROJECT DETAILS

State the purpose of the project and provide project details for the length of the budget period (11 months).

- For the selected program strategies, describe proposed activities and provide sample process measures to track progress implementing the activities. Describe the expected outputs (resources, tools, products, etc.) and outcomes (changes to occur), and provide sample outcome measures to track progress achieving the outcomes.
- Complete the activities, process measures, outputs, budget period outcomes, and outcome measures column for each program strategy selected.

12	**Project Purpose (150 words maximum):***	The purpose of this project is to to expand and strengthen capacity and coordination of governors and their staff during the ongoing response to COVID-19. The goals is to build gubernatorial leadership leadership capacity to prepare for and respond to public health emergencies collectively and systematically by providing COVID-19 focused technical assistance, tools, and resources for state governors and their staff. Applicants are encouraged to propose additional activities, performance measures, outputs, and outcomes, as needed, to address the unique capacity-building assistance needs of state governors and their staff.

Program Strategies	**Activities**	**Process Measures**	**Outputs**	**Budget Period Outcomes**	**Outcome Measures**
Public Health Systems Infrastructure					
Leadership and Workforce Development	Modernize and revise the exsiting "Governors Guide to Pandemic Influenza" to adapt it to COVID and other emerging diseases Host a COVID-focused summit for governors key advisors (including public safety, homeland security, transportation, human services, etc.)	Completion of revision and review of Governor's guide by subject matter experts # of participants registered to attend COVID-19 summit # of participants registered to attend Public Health Preparedness and response workshop	Governor's Guide to COVID-19 and other emerging diseases published Summit event, materials and resources Prepareness and Response Workshop event, materials resources Post-event report summary of impacts and recommendations	Improved leadership capacity to identify and prioritize public health needs Increased leadership decision-making to address public health needs strategically and systematically	Reported use of COVID-19 governors guide Reported knowledge and behavior change of Summit participants Reported knowledge and behavior change of Workshop participants

		Expand an existing program and cohort of states for a Public Health Preparedness and Response Workshop for State and Territorial Gubernatorial and Legislative Leadership		to inform response efforts		
	Data and Information Systems					
	Communication and Information Technology	Develop and disseminate technical assistance (TA) resources and memos Develop and maintain a state-focused COVID website Host webinars and peer-to-peer learning calls between states	# of resources developed for governors to effectively address COVID-19 response needs # of website visits # of resources downloaded from website # of webinars held, webinar participation	TA provided via resources, memos, and other appropriate channels Up-to-date COVID state-focused website State learning collaboratives established	Improved communication and information technology capacity to inform the public efficiently and effectively	Dissemination of TA resources Frequency of website updates Convenings of state learning collaboratives
	Partnerships					
	Laws and Policies					
	Programs and Services					

ORGANIZATIONAL CAPACITY AND PROGRAM EXPERIENCE

13	**Recipient Organizational Capacity (200 words maximum):*** The recipient must have the relevant skills, technology (electronic information and communication systems), organizational reach, and infrastructure (phsyicsl space and equipment) address the preparedness and response needs of state governors and their staff at the national level. They must demonstrate ability to improve capacity of governors and state decision makers to

	make informed policy and operational decisions; to increase the efficiency and effectiveness state emergency management; and to promte collaboration between gubernational leadership, their staff and emergency response stakeholders.
14	**Recipient Program Experience (200 words maximum):*** The recipient must possess experience and expertise building the preparedness and response capacity of governors across 50 states, three territories and two commonwealths. The organization must demonstrate a track record of supporting state efforts to protect the public's health through a wide range of technical assistance, training, workshops, and convenings that specifically address building emergency preparedness and response capacity. The organization serves as an informational hub for its members and has a history of preparing fact sheets, policy memos, and publications that are evidenced-based and rooted in science.
COLLABORATIVE WORK	
15	**Expectations for Collaboration, as applicable (200 words maximum):** The recipient is expected to work closely with CDC subject matter experts and relevant national partners, as appropriate, to successfully implement project activities.
16	**Expected Subcontractual Work and Recommended Criteria for Selecting Subcontractors, as applicable (200 words maximum):**
17	**Will the proposed CBA benefit governmental public health agencies?** ☒ **Yes** ☐ **No** **If yes, briefly describe how (200 words maximum):** The capacity-building assistance provided will strengthen the ability of state governors and their staff to plan for, communicate and address public health preparedness and response needs in collaboration with governemral public health agencies.
BUDGET INSTRUCTIONS	
18	**General Instructions for Use of Funds, as applicable (100 words maximum):**
CIO CERTIFICATION*	
19	**By submitting this project plan, I certify that my CIO currently does not maintain a comparable NOFO related to CBA. I understand it is my CIO's responsibility to pursue Office of Management and Budget (OMB) and Paperwork Reduction Act (PRA) clearance for this project. I will discuss the project with my Associate Director for Science (ADS) and initiate the appropriate clearance prior to funding.**

FY 2019 CIO Project Plan

CDC-RFA-OT18-1802
Strengthening Public Health Systems and Services through National Partnerships to Improve and Protect the Nation's Health

GENERAL INFORMATION			
1	**Project title (please do not use all caps; 15 words maximum):*** Building Capacity of the Public Health System to Improve Population Health Affected by COVID-19	2	**CIO:**
		3	**Division:** **Office:**
4	**CIO point of contact (POC) name:** **CIO POC email address:** **CIO POC phone number:**		
5	**Select the target population category to receive capacity-building assistance (CBA):*** **Category A** ☐ **Category B** ☐ **Category C** ☒ **Category A: Governmental Public Health Departments** – This category is focused on meeting the priority organizational-level CBA needs of one of the following health department types: state, tribal, local, or territorial. Organizational level includes, but is not limited to, business processes, system design, strategic planning, resource management, agency leadership, and governance. **Category B: Workforce Segments Across Governmental Public Health Departments** – This category is focused on meeting the priority CBA needs of one workforce segment across two or more health department types (state, tribal, local, or territorial). Workforce segments can include, but are not limited to, epidemiologists, chronic disease specialists, public health lawyers, environmentalists, informaticians, and nutritionists. **Category C: Nongovernmental Public Health Components** – This category is focused on meeting the priority CBA needs of one type of nongovernmental component of the public health system. Nongovernmental components represent, but are not limited to, community-based organizations, community health centers, primary care providers, governors, hospitals, economists, legislators, education organizations, social action organizations, and public safety agencies.		
6	**Description of the target population:* (25 words maximum)** **Note: Proposals should not build capacity for CDC or other federal agencies** CBOs serving racial/ethnic minority communities		

PROJECT FUNDING OT18-1802 Period of Performance Length: August 1, 2018 – July 31, 2023 Budget Period Length:			
7	**Proposed Project Funding:*** **$_____(Whole Numbers Only)**		
8	**Expected Length of Project (Check one):*** ☐ **The CIO will award new funding each budget period for the remainder of the period of performance.** ☐ **The CIO will award new funding each budget period for at least two consecutive years.** ☒ **The CIO will fund the project for one year.**		

CBA PROGRAM APPROACH – NOFO LOGIC MODEL

Select the program strategies and the program outcomes the project should work toward for the length of the project

9

CBA Program Strategies (Check one or more):*

☐ **Public Health Systems Infrastructure:** Activities to improve operational capacity, such as policies and plans, administration and management, and quality improvement
☐ **Leadership and Workforce Development:** Activities to improve leadership and workforce competencies, recruitment, and retention
☐ **Data and Information Systems:** Activities to improve collection, management, interpretation, and dissemination of data to guide decision-making
☒ **Communication and Information Technology**: Activities to improve use of communication and information technology to affect health decisions and actions
☒ **Partnerships:** Activities to improve establishment and maintenance of results-driven partnerships
☐ **Laws and Policies:** Activities to improve the ability to interpret and inform laws, including statutes and regulations, and policies that affect health
☐ **Programs and Services:** Activities to improve the identification of best practices and the implementation of evidence-based/informed programs and services

10

Crisis Response Approaches (Check one or more)*

☐ **Strengthen Incident Management for Early Crisis Response**
☐ **Strengthen Jurisdictional Recovery**
☐ **Strengthen Biosurveillance**
☒ **Strengthen Information Management**
☒ **Strengthen Countermeasures and Mitigation**
☐ **Strengthen Surge Management**
☒ **Strengthen Communications**

11

CBA Program Outcomes (Check one or more):*

Public Health Systems Infrastructure:
Short-term
☐ Improved operational capacity to evaluate, manage, and improve public health systems
Intermediate
☐ Increased capability of public health systems to achieve nationally established standards

Leadership and Workforce Development:
Short-term
☐ Improved leadership capacity to identify and prioritize public health needs
☐ Strengthened core and discipline-specific public health competencies among the workforce to improve job performance
Intermediate
☐ Increased leadership decision-making to address public health needs strategically and systematically
☐ Strengthened capability of public health workforce to deliver essential public health services

Data and Information Systems:
Short-term
☐ Improved capacity of data and information systems to conduct public health monitoring and surveillance
Intermediate
☐ Increased capability to use data to inform decision-making and support evidence-based practices and policies

Communication and Information Technology:
Short-term
☒ Improved communication and information technology capacity to inform the public efficiently and effectively
Intermediate
☒ Strengthened capability to use communication and information technology to affect health decisions and actions

Partnerships:
Short-term
☒ Improved capacity to establish and maintain partnerships within and across sectors to create a shared vision of health
Intermediate
☒ Strengthened capability to respond to public health priorities collaboratively and strategically

Laws and Policies:

Short-term

☐ Increased capacity to evaluate laws and policies to affect health

Intermediate

☐ Strengthened capability to systematically apply and use laws and policies to improve health

Programs and Services:

Short-term

☐ Improved capacity to identify, prioritize, and customize relevant programs and services to address public health needs

Intermediate

☐ Increased capability to implement evidence-based/informed public health programs, policies, and services to address public health needs

PROJECT DETAILS

State the purpose of the project and provide project details for the length of the budget period (11 months).

- For the selected program strategies, describe proposed activities and provide sample process measures to track progress implementing the activities. Describe the expected outputs (resources, tools, products, etc.) and outcomes (changes to occur), and provide sample outcome measures to track progress achieving the outcomes.
- Complete the activities, process measures, outputs, budget period outcomes, and outcome measures column for each program strategy selected.

12	**Project Purpose (150 words maximum):***	This project aims to strengthen partnerships among CBOs to support increased engagement in the response to COVID-19. Project activities will build the capacity of CBOs serving racial/ethnic minorities to share important public health information with their target populations. Efforts will include addressing the stigmatization of the Asian community due to the COVID-19 outbreak.				
	Program Strategies	**Activities**	**Process Measures**	**Outputs**	**Budget Period Outcomes**	**Outcome Measures**
	Public Health Systems Infrastructure					
	Leadership and Workforce Development					
	Data and Information Systems					
	Communication and Information Technology	Develop communication procedure to provide emergency information to CBO network Conduct formative assessment (e.g. key informant interviews, focus	Change in amount of time required to share information with CBOs # of key informant interviews, focus group and materials reviewed	Development of a communication procedure for disseminating information to CBOs Development of culturally appropriate,	Increased reach and exposure across racial and ethnic CBOs to COVID-19 communications campaign materials	# of CBOs that are using COVID-19 communications educational materials # of website visitors

		groups, materials review) for development of COVID-19 campaign Develop a COVID-19-specific website translated into multiple languages Develop supplemental materials to support distribution of information (e.g. social media posts)	# of languages website is translated into # of materials developed that are culturally appropriate and in different languages	educational materials		# of people reached through social media campaign (reach, impressions, engagement)
	Partnerships	Develop a CBO COVID-19 network at the regional, state and local levels who are actively involved in public health related to racial/ethnic minority populations to assist with distributing COVID-19 materials Collaborate with CDC and other CDC partners to inform development of social media	# of entities identified for COVID-19 network	An established and active network of CBOs for disseminating public health information related to racial/ethnic minorities	Increased number of organizations at regional, state and local levels working together and sharing resources, strategies, and lessons learned in order to better serve racial/ethnic minorities	# of entities engaged in COVID-19 network # of resources shared among network
	Laws and Policies					
	Programs and Services					
ORGANIZATIONAL CAPACITY AND PROGRAM EXPERIENCE						

13	**Recipient Organizational Capacity (200 words maximum):*** Recipient should have demonstrated capacity to manage CDC cooperative agreements and expertise in delivering CBA to racial/ethnic minority CBOs, especially those working with AANHPI. The recipient must have the capacity to develop informational material communicating information to a variety of audiences.
14	**Recipient Program Experience (200 words maximum):*** The recipient must have established, productive relationships with CBOs serving racial/ethnic minority populations in order to expedite project activities. The recipient must have experience collaborating with CBOs on sharing accurate, culturally-appropriate, educational materials and interventions.

COLLABORATIVE WORK

15	**Expectations for Collaboration, as applicable (200 words maximum):** The recipient must collaborate with CBOs and CDC to share accurate information regarding COVID-19 outbreaks and preventive measures.
16	**Expected Subcontractual Work and Recommended Criteria for Selecting Subcontractors, as applicable (200 words maximum):** Subcontracting may be necessary for the design and translation of campaign materials.
17	**Will the proposed CBA benefit governmental public health agencies?** ☒ **Yes** ☐ **No** **If yes, briefly describe how (200 words maximum):** CBOs have access to dynamic networks outside of the governmental public health system and may leverage these networks to strengthen response efforts. The target population of this project is instrumental in improving the delivery of health information to especially vulnerable populations.

BUDGET INSTRUCTIONS

18	**General Instructions for Use of Funds, as applicable (100 words maximum):** Funds will be used to cover personnel and benefit costs, travel expenses, supplies and consultant fees needed to cover work described above.

CIO CERTIFICATION*

19	**By submitting this project plan, I certify that my CIO currently does not maintain a comparable NOFO related to this proposed CBA project. I understand my CIO is responsible for adhering to all applicable scientific policies and securing requisite clearances in the Scientific Tracking and Reporting System (STARS). I will discuss the project with my Associate Director for Science (ADS) and obtain the appropriate scientific clearances prior to initiating project activities that involve the collection, generation, or analysis of public health data.**

FY 2019 CIO Project Plan

CDC-RFA-OT18-1802
Strengthening Public Health Systems and Services through National Partnerships to Improve and Protect the Nation's Health

GENERAL INFORMATION			
1	**Project title (please do not use all caps; 15 words maximum):*** COVID-19 Prevention and Control in Urban Indians Health Programs	2	**CIO:**
		3	**Division:** **Office:**
4	**CIO point of contact (POC) name:** **CIO POC email address:** **CIO POC phone number:**		
5	**Select the target population category to receive capacity-building assistance (CBA):*** **Category A** ☐ **Category B** ☐ **Category C** ☒ **Category A: Governmental Public Health Departments** – This category is focused on meeting the priority organizational-level CBA needs of one of the following health department types: state, tribal, local, or territorial. Organizational level includes, but is not limited to, business processes, system design, strategic planning, resource management, agency leadership, and governance. **Category B: Workforce Segments Across Governmental Public Health Departments** – This category is focused on meeting the priority CBA needs of one workforce segment across two or more health department types (state, tribal, local, or territorial). Workforce segments can include, but are not limited to, epidemiologists, chronic disease specialists, public health lawyers, environmentalists, informaticians, and nutritionists. **Category C: Nongovernmental Public Health Components** – This category is focused on meeting the priority CBA needs of one type of nongovernmental component of the public health system. Nongovernmental components represent, but are not limited to, community-based organizations, community health centers, primary care providers, governors, hospitals, economists, legislators, education organizations, social action organizations, and public safety agencies.		
6	**Description of the target population:* (25 words maximum)** **Note: Proposals should not build capacity for CDC or other federal agencies** 43 urban Indian health programs		

PROJECT FUNDING OT18-1802 Period of Performance Length: August 1, 2018 – July 31, 2023 Budget Period Length:			
7	**Proposed Project Funding:*** **$_____(Whole Numbers Only)**		
8	**Expected Length of Project (Check one):*** ☐ **The CIO will award new funding each budget period for the remainder of the period of performance.** ☐ **The CIO will award new funding each budget period for at least two consecutive years.** ☒ **The CIO will fund the project for one year.**		

CBA PROGRAM APPROACH – NOFO LOGIC MODEL

Select the program strategies and the program outcomes the project should work toward for the length of the project

9

CBA Program Strategies (Check one or more):*

☒ **Public Health Systems Infrastructure:** Activities to improve operational capacity, such as policies and plans, administration and management, and quality improvement
☒ **Leadership and Workforce Development:** Activities to improve leadership and workforce competencies, recruitment, and retention
☐ **Data and Information Systems:** Activities to improve collection, management, interpretation, and dissemination of data to guide decision-making
☐ **Communication and Information Technology**: Activities to improve use of communication and information technology to affect health decisions and actions
☐ **Partnerships:** Activities to improve establishment and maintenance of results-driven partnerships
☐ **Laws and Policies:** Activities to improve the ability to interpret and inform laws, including statutes and regulations, and policies that affect health
☐ **Programs and Services:** Activities to improve the identification of best practices and the implementation of evidence-based/informed programs and services

10

Crisis Response Approaches (Check one or more)*

☐ **Strengthen Incident Management for Early Crisis Response**
☐ **Strengthen Jurisdictional Recovery**
☐ **Strengthen Biosurveillance**
☐ **Strengthen Information Management**
☒ **Strengthen Countermeasures and Mitigation**
☐ **Strengthen Surge Management**
☒ **Strengthen Communications**

11

CBA Program Outcomes (Check one or more):*

Public Health Systems Infrastructure:
Short-term
☒ Improved operational capacity to evaluate, manage, and improve public health systems
Intermediate
☒ Increased capability of public health systems to achieve nationally established standards

Leadership and Workforce Development:
Short-term
☐ Improved leadership capacity to identify and prioritize public health needs
☒ Strengthened core and discipline-specific public health competencies among the workforce to improve job performance
Intermediate
☒ Increased leadership decision-making to address public health needs strategically and systematically
☐ Strengthened capability of public health workforce to deliver essential public health services

Data and Information Systems:
Short-term
☐ Improved capacity of data and information systems to conduct public health monitoring and surveillance
Intermediate
☐ Increased capability to use data to inform decision-making and support evidence-based practices and policies

Communication and Information Technology:
Short-term
☐ Improved communication and information technology capacity to inform the public efficiently and effectively
Intermediate
☐ Strengthened capability to use communication and information technology to affect health decisions and actions

Partnerships:
Short-term
☐ Improved capacity to establish and maintain partnerships within and across sectors to create a shared vision of health
Intermediate
☐ Strengthened capability to respond to public health priorities collaboratively and strategically

Laws and Policies:

Short-term

☐ Increased capacity to evaluate laws and policies to affect health

Intermediate

☐ Strengthened capability to systematically apply and use laws and policies to improve health

Programs and Services:

Short-term

☐ Improved capacity to identify, prioritize, and customize relevant programs and services to address public health needs

Intermediate

☐ Increased capability to implement evidence-based/informed public health programs, policies, and services to address public health needs

PROJECT DETAILS

State the purpose of the project and provide project details for the length of the budget period (11 months).

- For the selected program strategies, describe proposed activities and provide sample process measures to track progress implementing the activities. Describe the expected outputs (resources, tools, products, etc.) and outcomes (changes to occur), and provide sample outcome measures to track progress achieving the outcomes.
- Complete the activities, process measures, outputs, budget period outcomes, and outcome measures column for each program strategy selected.

12	**Project Purpose (150 words maximum):***	This project will develop the capacity of Urban Indian health programs to monitor and communicate COVID-19/public health information with American Indians/Alaska Natives living in urban areas. Urban Indian Health Programs (UIHPs) are an important participant in the Indian Health Service health care delivery system, and are a touchpoint for reducing COVID-19 spread among Urban Indians.

Program Strategies	**Activities**	**Process Measures**	**Outputs**	**Budget Period Outcomes**	**Outcome Measures**
Public Health Systems Infrastructure	Survey UIHPs to assess risk factors of COVID-19 for Urban Indians Develop an evidence-informed risk mitigation plan for COVID-19 in partnership with UIHPs Distribute plan among 43 UIHPs	# of UIHPs surveyed # of UIHPs receiving risk mitigation plan	Summary report of risk factors for UIHPs & Urban Indian populations during outbreaks Risk mitigation plan to support UIHP preparedness for and response to potential outbreaks of COVID-19 among Urban Indian populations	Improved capacity to identify, prioritize, and customize relevant programs and services to address public health needs during an outbreak	# of UIHPs reporting an increase in capacity to prepare for and respond to COVID-19 outbreaks among Urban Indian populations
Leadership and Workforce Development	Develop trainings/resources for current UIHP staff to provide skills needed to serve as public health leaders during public health emergency responses	# of trainings/resources developed # of staff trained # of UIHPs reached with training	Workforce development trainings for UIHP staff Resources communicating important countermeasure and mitigation steps	Increased leadership decision-making to address public health needs strategically and systematically	% of training attendees reporting an improved capacity to prepare for and respond to public health emergency responses like COVID-19.

		Provide training to staff across network of 43 UIHPs				
	Data and Information Systems					
	Communication and Information Technology					
	Partnerships					
	Laws and Policies					
	Programs and Services					

ORGANIZATIONAL CAPACITY AND PROGRAM EXPERIENCE

13	**Recipient Organizational Capacity (200 words maximum):*** The recipient must have the the capacity to provide UIHPs with training and technical assistance to help them implement and evaluate quality, accessible and culturally appropriate health care services for AI/ANs living in urban areas, on a variety of topics, such as: local partnership development, policies, procedures and operational needs, research and program planning, and implementation and evaluation.
14	**Recipient Program Experience (200 words maximum):*** The recipient must have existing relationships with a network of 43 Urban Indian health programs. The recipient must have experience conducting needs assessment on public health topics, developing tools and resources, and facilitating trainings, both in person and virtually to meet the needs of UIHPs.

COLLABORATIVE WORK

15	**Expectations for Collaboration, as applicable (200 words maximum):** The recipient will need to collaborate with UIHPs in order to achieve project goals of mitigating COVID-19 risk among Urban Indian populations.
16	**Expected Subcontractual Work and Recommended Criteria for Selecting Subcontractors, as applicable (200 words maximum):**

17	**Will the proposed CBA benefit governmental public health agencies?** ☒ **Yes** ☐ **No** **If yes, briefly describe how (200 words maximum):** Strengthening the capacity of Urban Indian health programs to respond to public health emergencies will bolster the current response to COVID-19 and mitigate health disparities experienced by Urban Indians, a vulnerable population.

BUDGET INSTRUCTIONS

18	**General Instructions for Use of Funds, as applicable (100 words maximum):**

CIO CERTIFICATION*

19	**By submitting this project plan, I certify that my CIO currently does not maintain a comparable NOFO related to this proposed CBA project. I understand my CIO is responsible for adhering to all applicable scientific policies and securing requisite clearances in the Scientific Tracking and Reporting System (STARS). I will discuss the project with my Associate Director for Science (ADS) and obtain the appropriate scientific clearances prior to initiating project activities that involve the collection, generation, or analysis of public health data.**

FY20 CIO Project Plan

CDC-RFA-OT18-1802
Strengthening Public Health Systems and Services through National Partnerships to Improve and Protect the Nation's Health

GENERAL INFORMATION			
1	**Project title (please do not use all caps; 10 word limit):*** **COVID-19: Building Urban Tribal public health capacity to use legal authorities.**	2	**CIO:**
		3	**Division/Branch/Office/Unit:**
4	**CIO point of contact (POC) name:** **CIO POC email address:** **CIO POC phone number:**		
5	**Select the target population category to receive capacity-building assistance (CBA): *** **CATEGORY C – URBAN TRIBAL** **Category A: Governmental Public Health Departments** – This category is focused on meeting the priority organizational-level CBA needs of one of the following health department types: state, tribal, local, or territorial. Organizational level includes, but is not limited to, business processes, system design, strategic planning, resource management, agency leadership, and governance. **Category B: Workforce Segments Across Governmental Public Health Departments** – This category is focused on meeting the priority CBA needs of one workforce segment across two or more health department types (state, tribal, local, or territorial). Workforce segments can include, but are not limited to, epidemiologists, chronic disease specialists, public health lawyers, environmentalists, informaticians, and nutritionists. **Category C: Nongovernmental Public Health Components** – This category is focused on meeting the priority CBA needs of one type of nongovernmental component of the public health system. Nongovernmental components represent, but are not limited to, community-based organizations, community health centers, primary care providers, governors, hospitals, economists, legislators, education organizations, social action organizations, and public safety agencies.		
6	**Description of the target population: * (25 word limit)** 43 Urban Indian Health Programs Note: Proposals should not build capacity for CDC or other federal agencies		

PROJECT FUNDING
OT18-1802 Period of Performance Length: August 1, 2018 – July 31, 2023   Budget Period Length: September 1, 2020 –July 31, 2021

7	**Proposed Project Funding for FY20 Activities: *** **$_____(Whole Numbers Only)**
8	**Expected Length of Project (Check one): *** ☒ **The CIO will fund the project for one year.** ☐ **The CIO will award new funding each budget period for more than one year.**

CBA PROGRAM APPROACH – NOFO LOGIC MODEL

Select the program strategies and the associated program outcomes the project should work toward for the length of the project

9

CBA Program Strategies (Check one or more): *

☐ **Public Health Systems Infrastructure:** Activities to improve operational capacity, such as policies and plans, administration and management, and quality improvement

☐ **Leadership and Workforce Development:** Activities to improve leadership and workforce competencies, recruitment, and retention

☐ **Data and Information Systems:** Activities to improve collection, management, interpretation, and dissemination of data to guide decision-making

☐ **Communication and Information Technology**: Activities to improve use of communication and information technology to affect health decisions and actions

☐ **Partnerships:** Activities to improve establishment and maintenance of results-driven partnerships

☒ **Laws and Policies:** Activities to improve the ability to interpret and inform laws, including statutes and regulations, and policies that affect health

☐ **Programs and Services:** Activities to improve the identification of best practices and the implementation of evidence-based/informed programs and services

10

CBA Program Outcomes (Check one or more): *

Public Health Systems Infrastructure:

Short-term

☐ Improved operational capacity to evaluate, manage, and improve public health systems

Intermediate

☐ Increased capability of public health systems to achieve nationally established standards

Leadership and Workforce Development:

Short-term

☐ Improved leadership capacity to identify and prioritize public health needs

☐ Strengthened core and discipline-specific public health competencies among the workforce to improve job performance

Intermediate

☐ Increased leadership decision-making to address public health needs strategically and systematically

☐ Strengthened capability of public health workforce to deliver essential public health services

Data and Information Systems:

Short-term

☐ Improved capacity of data and information systems to conduct public health monitoring and surveillance

Intermediate

☐ Increased capability to use data to inform decision-making and support evidence-based practices and policies

Communication and Information Technology:

Short-term

☐ Improved communication and information technology capacity to inform the public efficiently and effectively

Intermediate

☐ Strengthened capability to use communication and information technology to affect health decisions and actions

Partnerships:

Short-term

☐ Improved capacity to establish and maintain partnerships within and across sectors to create a shared vision of health

Intermediate

☐ Strengthened capability to respond to public health priorities collaboratively and strategically

Laws and Policies:

Short-term

☒ Increased capacity to evaluate laws and policies to affect health

Intermediate

☒ Strengthened capability to systematically apply and use laws and policies to improve health

Programs and Services:

Short-term

☐ Improved capacity to identify, prioritize, and customize relevant programs and services to address public health needs

Intermediate

☐ Increased capability to implement evidence-based/informed public health programs, policies, and services to address public health needs

11	PROJECT DETAILS State the purpose of the project and provide project details for the length of the budget period (11 months). For the selected program strategies: - Describe proposed activities and provide sample process measures to track progress implementing the activities. - Describe the expected outputs (resources, tools, products, etc.) and outcomes (change to occur), and provide sample outcome measures to track progress achieving the outcomes.	
	Project Purpose (150 word limit)	**The 2019-20 coronavirus is considered a public health emergency and is being evaluated by all major health organizations around the world. It is especially concerning in populations with underlying health concerns. In the United States, the public health response is overseen and managed by practitioners at the local jurisdictional level who are in a unique position fully understand their operational authorities related to the epidemic and who use legal authorities and currently available public health emergency statutes, regulations as well as other policies or agreements to respond effectively. It is critical to ensure that potentially high risk members of the urban community, such as tribal members, are included in the development of plans and implemented response strategies. The proper use of these legal tools can be the difference between an effective or ineffective public health response. The purpose of this project is to support organizations who serve urban Indian populations, decision makers, practitioners and legal counsel by creating customized resources, toolkits, presentations, materials, and other relevant media to use legal authorities, policies and agreements within existing law and identify gaps to efficiently and effectively address specific jurisdictional needs for urban Indian populations during the response.**
	Program Strategy: Public Health Systems Infrastructure	
	Activities *	
	Process Measures *	
	Outputs *	
	Budget Period Outcomes *	
	Outcome Measures *	
	Program Strategy: Leadership and Workforce Development	
	Activities *	
	Process Measures *	
	Outputs *	
	Budget Period Outcomes *	
	Outcome Measures *	
	Program Strategy: Data and Information Systems	
	Activities *	

	Process Measures *	
	Outputs *	
	Budget Period Outcomes *	
	Outcome Measures *	
	Program Strategy: Communication and Information Technology	
	Activities *	
	Process Measures *	
	Outputs *	
	Budget Period Outcomes *	
	Outcome Measures *	
	Program Strategy: Partnerships	
	Activities *	
	Process Measures *	
	Outputs *	
	Budget Period Outcomes *	
	Outcome Measures *	
	Program Strategy: Laws and Policies	
	Activities *	**Activities may include, but are not limited to identifying legal issues impacting urban Indian healthcare service delivery and strategies to address COVID 19 including community mitigation strategies such as travel bans, school closure, and measures specifically aimed at social distancing; assessing impact of State Emergency Declarations and expanded emergency powers on urban Indians access to healthcare; the drafting and implementation of Memorandums of Undersatnding or Memorandums of Agreement; transporting of people; Isolation and quarantine; surveillance and disease reporting; examining legal authorities for disease investigation, privacy protection and waivers; developing strategies to research the impact of laws and legal authorities including the use of legal epidemiology; understanding and effectively using HIPPA and the Public Health exceptions; and working directly with the target population to identify jurisdiction specific issues, gaps, and limitations to develop working strategies to implement a successful response.**

	Process Measures *	**All response strategies implemented at the local level and impacting urban Indian populations by various jurisdictions including, but not limited to, emergency declarations, community mitigation strategies, memorandums of agreement/understanding, the use of legal epidemiology, analyses of the use of statutory laws and statewide regulations, privacy protections and waivers, HIPPA, etc. will be documented by jurisdiction, summarized, and reported to relevant stakeholders and CDC-PHLP.**
	Outputs *	**Produce an analysis of the use or potential use of various state law and policy strategies implemented at various jurisdictions to address the spread of COVID 19 or create efficiencies in the response from a legal and or policy perspective. Identify how jurisdictions of various population size, economic scope, and demographic diversity use state level mitigation strategies, memorandums of agreement/understanding, the use of legal epidemiology to idenfiy gaps or efficiencies in the legal and policy aspects of their response.**
	Budget Period Outcomes *	**Completion of the analysis of the use or potential use of various law and policy strategies implemented at the local jurisdictional level to effectively address the spread of COVID 19 within urban Indian populations or create efficiencies in the response from a legal and or policy perspective. Reporting to the CDC-PHLP and other stakeholders of the findings from the project related the to technical assistance provided to local jurisdictions serving urban indians, the analyses performed, and the use of currently available public health law and policy tools during the response.**
	Outcome Measures *	**A tool, toolkit, training, report, presentation, or similar resource created from the analyses that can be used to build better responses based on specific state jurisdictional strategies used during the COVID 19 response at the local level. Development of a marketing/communication/outreach strategy designed specifically to provide resources to local jurisdictions that may have current and future impact on their ability to respond to various public health emergencies impacting urban Indian populations based on the available law and policy tools available. A recommendation to CDC based on the gap analysis related to what state jurisdictions may need to be more effective in their response.**
	Program Strategy: Programs and Services	
	Activities *	
	Process Measures *	
	Outputs *	
	Budget Period Outcomes *	
	Outcome Measures *	

ORGANIZATIONAL CAPACITY AND PROGRAM EXPERIENCE

12	**Recipient Organizational Capacity (200 word limit):*** Applicant must have experience to working directly with the community organizations and healthcare entities that serve the needs of urban Indians related to public health. In addition, the applicant must have experience working on issues related to law and policy as it relates to Tribal Nations and interacts with local and state jurisdictions law and policy.

13	**Recipient Program Experience (200 word limit):*** The successful applicant will have experience working with Urban Indians and Tribal Nations regarding how laws establish the authority of public health agencies and delineate their functions. The successful applicant should be able to serve as the go to resource for urban Indians to provide critical public health law resources on various topics including emergency preparedness and response.
COLLABORATIVE WORK	
14	**Expectations for Collaboration, as applicable (200 word limit):** The successful applicant will be able to work directly with organizations who provide support with urban Indians and can research how laws and legal authorities impact how urban Indians receive services critical to the response during the COVID 19 epidemic. Due to the changing nature, dynamics, epidemiology and other factors related to COVID19, the successful applicant organization will need to work closely with CDC-PHLP to share information, research, data, and other resources that help to identify the specific needs of the public health legal and policy fields during the response.
15	**Expected Subcontractual Work and Recommended Criteria for Selecting Subcontractors, as applicable (200 word limit):** To be determined by the successful applicant.
BUDGET INSTRUCTIONS	
16	**General Instructions for Use of Funds, as applicable (100 word limit):** The successful applicant must be aware that 100% of the funding that supports this project is provided to support COVID 19 preparedness and response. Therefore, use of the funds should be dedicated to specific activities directly related to Coronavirus preparation and the response.
CIO CERTIFICATION*	
17	**By submitting this project plan, I certify that my CIO currently does not maintain a comparable NOFO related to a CBA. I understand my CIO is responsible for adhering to all applicable scientific policies and securing requisite clearances in the Scientific Tracking and Reporting System (STARS). I will discuss the project with my Associate Director for Science (ADS) and obtain the appropriate scientific clearances prior to initiating project activities that involve the collection, generation, or analysis of public health data.**

FY20 CIO Project Plan

CDC-RFA-OT18-1802
Strengthening Public Health Systems and Services through National Partnerships to Improve and Protect the Nation's Health

GENERAL INFORMATION			
1	**Project title (please do not use all caps; 10 word limit):*** **COVID-19: Assisting Leaders implementing legal strategies to maximize effective response.**	2	**CIO:**
		3	**Division/Branch/Office/Unit:**
4	**CIO point of contact (POC) name:** **CIO POC email address:** **CIO POC phone number:**		
5	**Select the target population category to receive capacity-building assistance (CBA): *** CATEGORY C **Category A: Governmental Public Health Departments** – This category is focused on meeting the priority organizational-level CBA needs of one of the following health department types: state, tribal, local, or territorial. Organizational level includes, but is not limited to, business processes, system design, strategic planning, resource management, agency leadership, and governance. **Category B: Workforce Segments Across Governmental Public Health Departments** – This category is focused on meeting the priority CBA needs of one workforce segment across two or more health department types (state, tribal, local, or territorial). Workforce segments can include, but are not limited to, epidemiologists, chronic disease specialists, public health lawyers, environmentalists, informaticians, and nutritionists. **Category C: Nongovernmental Public Health Components** – This category is focused on meeting the priority CBA needs of one type of nongovernmental component of the public health system. Nongovernmental components represent, but are not limited to, community-based organizations, community health centers, primary care providers, governors, hospitals, economists, legislators, education organizations, social action organizations, and public safety agencies.		
6	**Description of the target population: * (25 word limit)** Governors and their staff Note: Proposals should not build capacity for CDC or other federal agencies		

PROJECT FUNDING
OT18-1802 Period of Performance Length: August 1, 2018 – July 31, 2023   Budget Period Length: September 1, 2020 –July 31, 2021
7 **Proposed Project Funding for FY20 Activities: ***   **$_____(Whole Numbers Only)**
8 **Expected Length of Project (Check one): ***   ☒ **The CIO will fund the project for one year.**   ☐ **The CIO will award new funding each budget period for more than one year.**

CBA PROGRAM APPROACH – NOFO LOGIC MODEL

Select the program strategies and the associated program outcomes the project should work toward for the length of the project

9

CBA Program Strategies (Check one or more): *

☐ **Public Health Systems Infrastructure:** Activities to improve operational capacity, such as policies and plans, administration and management, and quality improvement

☒ **Leadership and Workforce Development:** Activities to improve leadership and workforce competencies, recruitment, and retention

☐ **Data and Information Systems:** Activities to improve collection, management, interpretation, and dissemination of data to guide decision-making

☐ **Communication and Information Technology**: Activities to improve use of communication and information technology to affect health decisions and actions

☐ **Partnerships:** Activities to improve establishment and maintenance of results-driven partnerships

☒ **Laws and Policies:** Activities to improve the ability to interpret and inform laws, including statutes and regulations, and policies that affect health

☐ **Programs and Services:** Activities to improve the identification of best practices and the implementation of evidence-based/informed programs and services

10

CBA Program Outcomes (Check one or more): *

Public Health Systems Infrastructure:

Short-term

☐ Improved operational capacity to evaluate, manage, and improve public health systems

Intermediate

☐ Increased capability of public health systems to achieve nationally established standards

Leadership and Workforce Development:

Short-term

☒ Improved leadership capacity to identify and prioritize public health needs

☐ Strengthened core and discipline-specific public health competencies among the workforce to improve job performance

Intermediate

☒ Increased leadership decision-making to address public health needs strategically and systematically

☒ Strengthened capability of public health workforce to deliver essential public health services

Data and Information Systems:

Short-term

☐ Improved capacity of data and information systems to conduct public health monitoring and surveillance

Intermediate

☐ Increased capability to use data to inform decision-making and support evidence-based practices and policies

Communication and Information Technology:

Short-term

☐ Improved communication and information technology capacity to inform the public efficiently and effectively

Intermediate

☐ Strengthened capability to use communication and information technology to affect health decisions and actions

Partnerships:

Short-term

☐ Improved capacity to establish and maintain partnerships within and across sectors to create a shared vision of health

Intermediate

☐ Strengthened capability to respond to public health priorities collaboratively and strategically

Laws and Policies:

Short-term

☒ Increased capacity to evaluate laws and policies to affect health

Intermediate

☐ Strengthened capability to systematically apply and use laws and policies to improve health

Programs and Services:

Short-term

☐ Improved capacity to identify, prioritize, and customize relevant programs and services to address public health needs

Intermediate

☐ Increased capability to implement evidence-based/informed public health programs, policies, and services to address public health needs

11	PROJECT DETAILS State the purpose of the project and provide project details for the length of the budget period (11 months). For the selected program strategies: - Describe proposed activities and provide sample process measures to track progress implementing the activities. - Describe the expected outputs (resources, tools, products, etc.) and outcomes (change to occur), and provide sample outcome measures to track progress achieving the outcomes.	
	Project Purpose (150 word limit)	**The 2019-20 coronavirus is considered a public health emergency and is being evaluated by all major health organizations around the world. In the United States, the public health response is operationalized by governors and executive branch decision-makers use of regular legal authorities and currently available public health emergency statutes, regulations as well as other policies or agreements. The proper use of these legal tools can be the difference between an effective or ineffective public health response. The purpose of this project is to support organizations who serve governors and executive branch decision-makers with the ability to create customized resources, toolkits, presentations, materials, and other relevant media to use legal authorities, policies and agreements within existing law and identify gaps to efficiently and effectively address specific jurisdictional needs during the response.**
	Program Strategy: Public Health Systems Infrastructure	
	Activities *	
	Process Measures *	
	Outputs *	
	Budget Period Outcomes *	
	Outcome Measures *	
	Program Strategy: Leadership and Workforce Development	
	Activities *	
	Process Measures *	
	Outputs *	
	Budget Period Outcomes *	
	Outcome Measures *	
	Program Strategy: Data and Information Systems	
	Activities *	
	Process Measures *	

	Outputs *	
	Budget Period Outcomes *	
	Outcome Measures *	
	Program Strategy: Communication and Information Technology	
	Activities *	
	Process Measures *	
	Outputs *	
	Budget Period Outcomes *	
	Outcome Measures *	
	Program Strategy: Partnerships	
	Activities *	
	Process Measures *	
	Outputs *	
	Budget Period Outcomes *	
	Outcome Measures *	
	Program Strategy: Laws and Policies	
	Activities *	**Activities may include, but are not limited to identifying community mitigation strategies, examining the use of emergency declarations, the drafting and implementation of Memorandums of Undersatnding or Memorandums of Agreement; Conducting Administrative Law Reviews; Developing strategies to operate the response under emergency statutes and creating the most effective methods to respond; and working directly with the target population to identify jurisdiction specific issues, gaps, and limitations to develop working strategies to implement a successful response.**
	Process Measures *	**All response strategies implemented by governors including, but not limited to, emergency declarations, community mitigation strategies, memorandums of agreement/understanding, etc. will be documented by jurisdiction, summarized, and reported to relevant stakeholders and CDC-PHLP.**
	Outputs *	**Produce an analysis of the use or potential use of emergency declarations, community mitigation strategies, and memorandums of agreement/understanding in all jurisdictions reported to use such measures to effectively address the spread of COVID 19 or create efficiencies in the response from a legal and or policy perspective.**

	Budget Period Outcomes *	**Completion of the analysis based on the outputs related to the use or potential use of emergency declarations, community mitigation strategies, and memorandums of agreement/understanding in all jurisdictions reported to use such measures to effectively address the spread of COVID 19 or create efficiencies in the response from a legal and or policy perspective.**
	Outcome Measures *	**A tool, toolkit, training, report, presentation, or similar resource created from the analyses that can be used to build better responses based on specific jurisdictional strategies used during the COVID 19 response.**
	Program Strategy: Programs and Services	
	Activities *	
	Process Measures *	
	Outputs *	
	Budget Period Outcomes *	
	Outcome Measures *	

ORGANIZATIONAL CAPACITY AND PROGRAM EXPERIENCE

12	**Recipient Organizational Capacity (200 word limit):*** The successful applicant will have the capacity to reach high level state decision makers who have the legal authority to declare emergencies, make executive level decisions impacting the entire state such as social distancing and similar level mitigation strategies. These decisions are typically governors of states and the organization should have access to or serve the needs of governors and their staff.
13	**Recipient Program Experience (200 word limit):*** The successful applicant should be able to demonstrate specific work related to homeland security and public in a manner that provides information, research, policy analysis, technical assistance and resource development for governors and their staff about emerging policy trends across a range of homeland security and public safety issues. Past experience may include, but is not limited to exploring state transportation solutions that may impact the response to COVID19, working with schools and other large venues where people regularly congregate, information-sharing and health data, and public health preparedness.

COLLABORATIVE WORK

14	**Expectations for Collaboration, as applicable (200 word limit):** The successful applicant will be able to work directly with governors and their staff. In addition, the successful organization may need to work through governors to closely work with leadership at the local level such as mayors to identify specific strategies within the state to respond to COVID19. Due to the changing nature, dynamics, epidemiology and other factors related to COVID19, the successful applicant organization will need to work closely with CDC-PHLP to share information, research, data, and other resources that help to identify the specific needs of the public health legal and policy fields during the response.
15	**Expected Subcontractual Work and Recommended Criteria for Selecting Subcontractors, as applicable (200 word limit):** To be determined by the successful applicant.

BUDGET INSTRUCTIONS

16	**General Instructions for Use of Funds, as applicable (100 word limit):** The successful applicant must be aware that 100% of the funding that supports this project is provided to support COVID 19 preparedness and response. Therefore, use of the funds should be dedicated to specific activities directly related to Coronavirus preparation and the response.
CIO CERTIFICATION*	
17	**By submitting this project plan, I certify that my CIO currently does not maintain a comparable NOFO related to a CBA. I understand my CIO is responsible for adhering to all applicable scientific policies and securing requisite clearances in the Scientific Tracking and Reporting System (STARS). I will discuss the project with my Associate Director for Science (ADS) and obtain the appropriate scientific clearances prior to initiating project activities that involve the collection, generation, or analysis of public health data.**

FY 2019 CIO Project Plan

CDC-RFA-OT18-1802
Strengthening Public Health Systems and Services through National Partnerships to Improve and Protect the Nation's Health

GENERAL INFORMATION			
1	**Project title (please do not use all caps; 15 words maximum):* Building Capacity of Community Health Centers to Respond to COVID-19**	2	**CIO:***
		3	**Division:*** **Office:**
4	**CIO point of contact (POC) name:*** **CIO POC email address:*** **CIO POC phone number:***		
5	**Select the target population category to receive capacity-building assistance (CBA):*** **Category A ☐ Category B ☐ Category C ☒** **Category A: Governmental Public Health Departments** – This category is focused on meeting the priority organizational-level CBA needs of one of the following health department types: state, tribal, local, or territorial. Organizational level includes, but is not limited to, business processes, system design, strategic planning, resource management, agency leadership, and governance. **Category B: Workforce Segments Across Governmental Public Health Departments** – This category is focused on meeting the priority CBA needs of one workforce segment across two or more health department types (state, tribal, local, or territorial). Workforce segments can include, but are not limited to, epidemiologists, chronic disease specialists, public health lawyers, environmentalists, informaticians, and nutritionists. **Category C: Nongovernmental Public Health Components** – This category is focused on meeting the priority CBA needs of one type of nongovernmental component of the public health system. Nongovernmental components represent, but are not limited to, community-based organizations, community health centers, primary care providers, governors, hospitals, economists, legislators, education organizations, social action organizations, and public safety agencies.		
6	**Description of the target population:* (25 words maximum)** **Health centers and the patients and communities they serve** **Note: Proposals should not build capacity for CDC or other federal agencies**		

PROJECT FUNDING OT18-1802 Period of Performance Length: August 1, 2018 – July 31, 2023 Budget Period Length:			
7	**Proposed Project Funding:*** **$_____(Whole Numbers Only)**		
8	**Expected Length of Project (Check one):*** **☐ The CIO will award new funding each budget period for the remainder of the period of performance.** **☐ The CIO will award new funding each budget period for at least two consecutive years.** **☒ The CIO will fund the project for one year.**		

CBA PROGRAM APPROACH – NOFO LOGIC MODEL

Select the program strategies and the program outcomes the project should work toward for the length of the project

9

CBA Program Strategies (Check one or more):*

☐ **Public Health Systems Infrastructure:** Activities to improve operational capacity, such as policies and plans, administration and management, and quality improvement

☒ **Leadership and Workforce Development:** Activities to improve leadership and workforce competencies, recruitment, and retention

☐ **Data and Information Systems:** Activities to improve collection, management, interpretation, and dissemination of data to guide decision-making

☒ **Communication and Information Technology**: Activities to improve use of communication and information technology to affect health decisions and actions

☒ **Partnerships:** Activities to improve establishment and maintenance of results-driven partnerships

☐ **Laws and Policies:** Activities to improve the ability to interpret and inform laws, including statutes and regulations, and policies that affect health

☐ **Programs and Services:** Activities to improve the identification of best practices and the implementation of evidence-based/informed programs and services

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Crisis Response Approaches (Check one or more)*

☐ **Strengthen Incident Management for Early Crisis Response**
☐ **Strengthen Jurisdictional Recovery**
☐ **Strengthen Biosurveillance**
☐ **Strengthen Information Management**
☒ **Strengthen Countermeasures and Mitigation**
☐ **Strengthen Surge Management**
☒ **Strengthen Communications**

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CBA Program Outcomes (Check one or more):*

Public Health Systems Infrastructure:

Short-term

☐ Improved operational capacity to evaluate, manage, and improve public health systems

Intermediate

☐ Increased capability of public health systems to achieve nationally established standards

Leadership and Workforce Development:

Short-term

☒ Improved leadership capacity to identify and prioritize public health needs

☐ Strengthened core and discipline-specific public health competencies among the workforce to improve job performance

Intermediate

☒ Increased leadership decision-making to address public health needs strategically and systematically

☒ Strengthened capability of public health workforce to deliver essential public health services

Data and Information Systems:

Short-term

☐ Improved capacity of data and information systems to conduct public health monitoring and surveillance

Intermediate

☐ Increased capability to use data to inform decision-making and support evidence-based practices and policies

Communication and Information Technology:

Short-term

☒ Improved communication and information technology capacity to inform the public efficiently and effectively

Intermediate

☒ Strengthened capability to use communication and information technology to affect health decisions and actions

Partnerships:

Short-term

☒ Improved capacity to establish and maintain partnerships within and across sectors to create a shared vision of health

Intermediate

☒ Strengthened capability to respond to public health priorities collaboratively and strategically

Laws and Policies:

Short-term

☐ Increased capacity to evaluate laws and policies to affect health

Intermediate

☐ Strengthened capability to systematically apply and use laws and policies to improve health

Programs and Services:

Short-term

☐ Improved capacity to identify, prioritize, and customize relevant programs and services to address public health needs

Intermediate

☒ Increased capability to implement evidence-based/informed public health programs, policies, and services to address public health needs

PROJECT DETAILS

State the purpose of the project and provide project details for the length of the budget period (11 months).

- For the selected program strategies, describe proposed activities and provide sample process measures to track progress implementing the activities. Describe the expected outputs (resources, tools, products, etc.) and outcomes (changes to occur), and provide sample outcome measures to track progress achieving the outcomes.
- Complete the activities, process measures, outputs, budget period outcomes, and outcome measures column for each program strategy selected.

12	**Project Purpose (150 words maximum):***	**The purpose of the project is to build community health center capacity to address the COVID-19 response within their community. Suggested activities are designed to support the community health center workforce in prevention strategies, preparedness and response activities, communicating key COVID-19 information, and building and maintaining partnerships to leverage resources needed to assist with the response. Applicants are encouraged to propose additional activities, performance measures, outputs, and outcomes, as needed, to address the unique needs of community health center care teams and staff to address COVID-19 needs in their community.**				
	Program Strategies	**Activities**	**Process Measures**	**Outputs**	**Budget Period Outcomes**	**Outcome Measures**
	Public Health Systems Infrastructure					
	Leadership and Workforce Development	**Provide training and technical assistance to health center care teams and staff to use prevention strategies and reduce spread of COVID-19 and other high-burden diseases** **Train community health center care teams and staff on techniques to reduce stigma associated with COVID-19**	**Number of trainings and technical assistance provided** **Number of health centers engaged in training and technical assistance** **Number of health centers requesting coaching or technical assistance** **Number of virtual convenings to**	**Trainings/Webinars on proper prevention strategies and protocols** **Report/Meeting minutes outlining health center needs for updating protocols** **Quality improvement tools and protocols to decrease the spread of COVID-**	**Increased leadership decision-making to address COVID-19 needs strategically and systematically** **Strengthened capability of health center care teams to deliver services to address COVID-19 needs**	**% change in number of leaders reporting improved decision-making** **% change in health centers reporting updated protocols addressing preparedness needs for medical countermeasures**

		Provide training and technical assistance to emergency management coalition representatives to support updating preparedness protocols as necessary	discuss quality improvement tools and protocols	19 within jurisdictions		
	Data and Information Systems					
	Communication and Information Technology	Provide accessible, accurate, actionable, and current COVID-19 information that is culturally sensitive and linguistically appropriate. Train health center staff on developing communication systems or plans to enable efficient and effective community-centered dialogue Provide information about COVID-19 and public health functions to diverse audiences through multiple methods to inform public health decision making	Trainings to increase awareness of public health and healthcare strategies to prevent and treat COVID-19	Communication plan to disseminate COVID-19 information Messaging to share prevention and treatment strategies for addressing COVID-19	Improved communication and information technology capacity to inform the public efficiently and effectively Intermediate Strengthened capability to use communication and information technology to affect health decisions and actions	Agencies updating communication plan to disseminate information related to COVID-19 Agencies reporting increased use of information technology to disseminate COVID-19 information.
	Partnerships	Successful applicant should demonstrate capacity to provide training, technical assistance, and	Virtual convenings held to establish a shared vision of health relating to COVID-19 Trainings provided for leveraging	Resources on cross-sector models of care to address COVID-19	Increased number of collaborative state and local partnership models that strategically engage health departments,	Agencies reporting increased partnerships or coalitions collaborating to address COVID-19 needs

		information sharing to	stakeholder resources to address system needs within the community		community health centers, primary care associations (PCAs), and health center controlled networks (HCCNs) and payers that connect systems of care to address COVID-19 needs in their communities Improved capacity to establish and maintain partnerships within and across sectors to create a shared vision of health Strengthened capability to respond to public health priorities collaboratively and strategically	
	Laws and Policies					
	Programs and Services	Provide training and technical assistance to improve delivery of programs and services at community health centers	Number of resources developed Number of centers assessed to determine technical assistance needs	Resources (care guides, toolkits, infographics, etc.) developed to share best practices for identifying and caring for clients that present with symptoms associated with COVID-19 Report of health center needs	Increased capability to implement evidence-based/informed programs, policies, and services to address COVID-19	Agencies reporting updated programs, policies, and services to address COVID-19 response needs

ORGANIZATIONAL CAPACITY AND PROGRAM EXPERIENCE

13	**Recipient Organizational Capacity (200 words maximum):*** **Successful applicant should demonstrate capacity to provide training, technical assistance, and information sharing to America's community health centers. Organization should demonstrate reach to addres capacity-building assistance needs for health centers across the nation. Such capacity includes ability to asses health center needs; plan and facilitate trainings; and share finding and recommendations to contribute to the broader public health system strategy to combat COVID-19.**

14	**Recipient Program Experience (200 words maximum):*** **Successful applicant should demonstrate experience collaborating across the public health system to address public health emergencies. This includes but is not limited to updating health center protocols, educating health center care teams and staff, educating health center patients and visitors, and partnering with multiple sectors to minimize the spread of infectious diseases within communities.**

COLLABORATIVE WORK

15	**Expectations for Collaboration, as applicable (200 words maximum):** **The applicant is expected to collaborate with the CDC and other key stakeholders (including other national organizations) to support efforts to minimize the impact of COVID-19 in communities.**
16	**Expected Subcontractual Work and Recommended Criteria for Selecting Subcontractors, as applicable (200 words maximum):** **The successful applicant is expected to play a substantial role in implementing project activities. Subcontracting is permitted, as needed, to address specific technical needs associated with project activities.**
17	**Will the proposed CBA benefit governmental public health agencies?** **☒Yes** **☐No** **If yes, briefly describe how (200 words maximum):** **The project activities will benefit governmental public health agencies through working across systems to address COVID-19 needs at the individual, community, and national levels.**

BUDGET INSTRUCTIONS

18	**General Instructions for Use of Funds, as applicable (100 words maximum):** **Recipient will be permitted to expend funds for project-related costs (personnel, fringe, supplies, etc.) in accordance with general terms and conditions for non-research cooperative agreement. Applicant proposals should be scalable. If less funds are available, CDC and the recipient will work together to revise and further prioritize activities in the work plan.**

CIO CERTIFICATION*

19	**By submitting this project plan, I certify that my CIO currently does not maintain a comparable NOFO related to this proposed CBA project. I understand my CIO is responsible for adhering to all applicable scientific policies and securing requisite clearances in the Scientific Tracking and Reporting System (STARS). I will discuss the project with my Associate Director for Science (ADS) and obtain the appropriate scientific clearances prior to initiating project activities that involve the collection, generation, or analysis of public health data.**