

Centers for Disease Control and Prevention

Center for Global Health

Pakistan FELTP-Human/Animal Disease Investigation and Technical Assistance to the Pakistan Ministry of Health and Ministry of Agriculture

CDC-RFA-GH15-1620

Application Due Date: 07/22/2015

Pakistan FELTP-Human/Animal Disease Investigation and Technical Assistance to the Pakistan Ministry of Health and Ministry of Agriculture

CDC-RFA-GH15-1620

TABLE OF CONTENTS

I. Overview Information

A. Federal Agency Name
B. Funding Opportunity Title
C. Announcement Type
D. Agency Funding Opportunity Number
E. Catalog of Federal Domestic Assistance (CFDA) Number
F. Dates

1. Letter of Intent Deadline
2. Application Deadline
3. Informational Conference Call for Potential Applicants

G. Executive Summary

1. Summary Paragraph

II. Full Text

A. Funding Opportunity Description

1. Background
2. CDC Project Description

B. Award Information

1. Funding Instrument Type
2. Funding Activity Category
3. Fiscal Year
4. Approximate Total Fiscal Year Funding
5. Approximate Project Period Funding
6. Total Project Period Length
7. Expected Number of Awards
8. Approximate Average Award
9. Award Ceiling
10. Award Floor
11. Estimated Award Date
12. Budget Period Length
13. Funds Tracking
14. Direct Assistance
15. Indirect Costs

C. Eligibility Information

1. Eligible Applicants
2. Additional Information on Eligibility
3. Justification for Less than Maximum Competition
4. Other
5. Cost Sharing or Matching
6. Maintenance of Effort

D. Application and Submission Information

1. Required Registrations
2. Request Application Package
3. Application Package
4. Submission Dates & Times
5. CDC Assurances and Certifications
6. Content and Form of Application Submission
7. Letter of Intent
8. Table of Contents
9. Project Abstract Summary
10. Project Narrative
11. Work Plan
12. Budget Narrative
13. Tobacco and Nutrition Policies
14. Intergovernmental Review of Federal Programs
15. Funding Restrictions
16. Other Submission Requirements

E. Application Review Information

1. Review and Selection Process
2. Anticipated Announcement and Award Dates

F. Award Administration Information

1. Award Notices
2. Administrative and National Policy Requirements
3. Reporting
4. Federal Funding Accountability and Transparency Act of 2006

G. Agency Contacts
H. Other Information
I. Glossary

Part I. Overview Information

A. Federal Agency Name:

Centers for Disease Control and Prevention

B. Funding Opportunity Title:

Pakistan FELTP-Human/Animal Disease Investigation and Technical Assistance to the Pakistan Ministry of Health and Ministry of Agriculture

C. Announcement Type:

This announcement is only for non-research international activities supported by CDC. If research is proposed, the application will not be considered. Research for this purpose is defined at:

http://www.cdc.gov /od /science /integrity /docs /cdc -policy -distinguishing -public -health -research -nonresearch.pdf.

D. Agency Funding Opportunity Number:

CDC-RFA-GH15-1620

E. Catalog of Federal Domestic Assistance (CFDA) Number:

93.283

F. Dates:

1. Due Date for Letter of Intent: **N/A**

2. Due Date for Applications: **07/22/2015**

3. Date for Informational Conference Call: **N/A**

G. Executive Summary:

1. Summary Paragraph:

A large portion of the population in Pakistan lives in close proximity to livestock and poultry. This close contact facilitates transmission of zoonotic disease from animals to humans. Yet the veterinary workforce in Pakistan is insufficiently trained in epidemiologic investigation to adequately conduct surveillance and report early warning signs of diseases that may transfer into the human population. However in Pakistan there is no clearly designated unit responsible for surveillance of, and response to, animal diseases. There is a need to develop a trained veterinary workforce, reinforce laboratory capacity to test infection samples, and influence the way the animal-human health surveillance system develops.

The Pakistan- Field Epidemiology and Laboratory Training Program (FELTP) was designed as a comprehensive approach to strengthen capacity in epidemiology, public health surveillance and response, public health laboratories, and information systems for surveillance. The program was implemented by the CDC, in conjunction with the Government of Pakistan (GOP), the Ministry of Health (MOH), and the Pakistan-National Institute of Health (NIH).

The purpose of this cooperative agreement is to expand activities to the animal health sector to address zoonotic disease by developing the capacity of the veterinary workforce in Pakistan, reinforce capacity, and develop a strong collaboration between the MOH and the Pakistan Agricultural Research Council. This will result in increased sharing of data and information facilitating a quicker response to early warning signs of zoonotic infections that can impact the human population in Pakistan.

a. Eligible Applicants: Single

b. FOA Type: Cooperative Agreement

c. Approximate Number of Awards: 1
d. Total Project Period Funding: $1,000,000
e. Average One Year Award Amount: $200,000
f. Number of Years of Award: 5
g. Approximate Date When Awards will be Announced: 09/30/15
h. Cost Sharing and /or Matching Requirement: No

Part II. Full Text

A. Funding Opportunity Description

1. Background

The preventable portion of the disease burden in Pakistan is large, and it is disproportionately borne by the poor. Improved health outcomes require effective prevention and disease control measures which in turn require investments in public health surveillance, a recognized public good and responsibility of governments. In light of the importance of surveillance in improving health outcomes, a joint assessment of Pakistan's public health surveillance system was undertaken by the NIH/MOH, Government of Pakistan (GOP), World Health Organization (WHO), Centers for Disease Control and Prevention (CDC), and the World Bank (WB) during 2004-2005.
One critical finding of the national assessment activity was a need to build disease surveillance capacity within the overall public health system of Pakistan. In April 2005, the USAID Mission in Pakistan agreed to fund a three-year proposal to establish a FELTP, under the guidance of the Division of Global Health Protection (DGHP) CDC. The overarching goal of the program is to provide assistance to the GOP, the MOH, and the NIH: to enhance health system capacity, to produce appropriate health information, and to provide data for the GOP to make policy determinations, resource allocation and programmatic improvements to increase the overall effectiveness and efficiency of public health practice throughout Pakistan.
A large portion of the population in Pakistan lives in close proximity to livestock and poultry. This close contact facilitates transmission of zoonotic disease from animals to humans. The veterinary workforce in Pakistan is insufficiently trained in epidemiologic investigation to adequately conduct surveillance and report early warning signs of diseases that may transfer into the human population. In addition to insufficient veterinary workforce, veterinary laboratory capacity and a collaborative system between MOH and PARC are currently insufficient to ensure early and rapid response to minimize animal to human transmission from emerging or re-emerging zoonotic diseases. Because of the amount of close animal to human contact, zoonotic disease surveillance is a critical and currently underdeveloped component in the overall public health surveillance system in Pakistan. An added need is to reinforce the zoonotic diseases sector which has a direct human health impact. The Pakistan Agricultural Research Council (PARC), established in 1981, has the mandate (through the Ministry of Food, Agriculture, and Livestock) to undertake, aid, promote, and coordinate surveillance and research activities at the federal and provincial levels in Pakistan to provide science-based solutions for animal-human public health issues. By strengthening the veterinary disease surveillance capacity, the Pakistan Agricultural Research Council (PARC) can detect emerging infectious disease early before transmission to human hosts.

a. Statutory Authorities

Section 307 of the Public Health Service Act (42 U.S.C. 2421) and Section 301 (a) of the Public Health Service Act, (42 U.S.C. 241(a))

b. Healthy People 2020

This cooperative agreement is in alignment with CDC's global health Goals for the Healthy People 2020 (proposed) initiatives of Reducing the number of people infected with infectious diseases that disproportionately impact the developing world. For additional information see https://www.healthypeople.gov/2020/topics-objectives/topic/global-health

c. Other National Public Health Priorities and Strategies

Not applicable

d. Relevant Work

This FOA will build on work initiated in CDC-RFA-GH10-1002 Pakistan FELTP-Human/Animal Disease Investigation and Technical Assistance to the Ministry of Food, Agriculture, and Livestock.

2. CDC Project Description

A.2.a. Approach

CDC-RFA-GH15-1620 Logic Model:

Strengthening and Development of Applied Epidemiology and Sustainable Public Health Capacity through Collaboration, Program Development and Implementation, Communication and Information Sharing

Bold indicates expected project period outcomes.

Strategies and Activities	Short-Term Outcomes	Intermediate Outcomes	Long-Term Outcomes
1) Develop Veterinary Workforce Capacity Develop veterinarian training plan Train district and provincial veterinarians in epidemiological investigation Deploy veterinarian residents to participate in outbreak investigations 2) Develop Veterinary Laboratory Capacity Develop sensitive and specific diagnostic	**Increased epi investigation knowledge and skills amongst veterinarians from diverse districts and provinces** **Improved geographical coverage for sentinel surveillance** **Reduced disparity in coverage of trained staff across provinces and districts**	**Improved capacity to monitor and detect existing, newly emerging or re-emerging zoonotic diseases across Pakistan** **Improved timeliness of response to zoonotic disease outbreaks** **Increased adoption and utilization of guidelines and protocols for surveillance and field investigations**	Improved quality of outbreak investigation in Pakistan and in the region Reduced transmission of zoonotic diseases from animal to humans Decreased geographical disparity in risk/burden of zoonotic disease transmission from animals to humans Reduced morbidity and mortality from zoonotic disease in Pakistan

zoonotic tests Develop a LQS plan Develop SOPs, TORs, EOPs for laboratory testing Collect and transport case samples 3) Develop System for Zoonotic Disease Surveillance, Detection and Response Develop collaboration between MOH and PARC Select and develop Sentinel Surveillance sites Expand number of Sentinel Surveillance sites Integrate surveillance activities into existing Government public health systems Develop mechanisms for sharing and exchanging data and information	**Increased availability of sensitive and specific diagnostic zoonotic tests** **Improved standardization of veterinary labs across diverse districts and provinces** **Increased use of data, from identified sentinel sites, for training and disease investigations** **Improved and increased exchange of information on surveillance and outbreak response among Ministries, MINFAL and PARC** **Improved capacity of sentinel surveillance** **Improve collaboration between CDC/FETP, Pakistan Ministry of Food, Agriculture and Livestock, and MOH**	**to improve impact of zoonotic disease response.** **Improved performance and data quality of all veterinary labs across diverse districts and provinces** **Improved animal disease surveillance, detection and response capabilities**	

i. Problem Statement

Pakistan has a very large population with a large portion living in close proximity to livestock and poultry. This close contact facilitates transmission of zoonotic disease from animals to humans. The outbreak of avian influenza in December 2007 is one example of the need to address zoonotic disease outbreaks. The veterinary workforce in Pakistan is insufficiently trained in epidemiologic investigation to adequately conduct surveillance and report early warning signs of diseases that may transfer into the human population.

ii. Purpose

The purpose of this cooperative agreement is to strengthen the expertise of the Pakistan Agricultural Research Council (PARC) by supporting multiple collaborative programs with the United States Centers for Disease Control and to strengthen the PARC's institutional capacity to respond to outbreaks and improve surveillance.

iii. Outcomes

Short Term Outcomes

- Increased epi investigation knowledge and skills amongst veterinarians from diverse districts and provinces
- Improved geographical coverage for sentinel surveillance.
- Reduced disparity in coverage of trained staff across provinces and districts
- Increased availability of sensitive and specific diagnostic zoonotic tests
- Improved standardization of veterinary labs across diverse districts and provinces
- Increased use of data, from identified sentinel sites, for training and disease investigations
- Improved and increased exchange of information on surveillance and outbreak response among Ministries, MINFAL and PARC
- Improved capacity of sentinel surveillance
- Improve collaboration between CDC/FETP, Pakistan Ministry of Food, Agriculture and Livestock, and MOH

Intermediate Outcomes highlight importance of surveillance in improving health

- Improved capacity to monitor and detect existing, newly emerging or re-emerging zoonotic diseases across Pakistan
- Improved timeliness of response to zoonotic disease outbreaks
- Increased adoption and utilization of guidelines and protocols for surveillance and field investigations to improve impact of zoonotic disease response.
- Improved performance and data quality of all veterinary labs across diverse districts and provinces
- Improved animal disease surveillance, detection and response capabilities

iv. Funding Strategy

N/A

v. Strategies and Activities

1) Develop Veterinary Workforce Capacity
   a. Develop veterinarian training plan
   b. Train district and provincial veterinarians in epidemiological investigation
   c. Deploy veterinarian residents to participate in outbreak investigations

2) Develop Veterinary Laboratory Capacity
   a. Develop sensitive and specific diagnostic zoonotic tests
   b. Develop a LQS plan
   c. Develop SOPs, TORs, EOPs for laboratory testing
   d. Collect and transport case samples

3) Develop System for Zoonotic Disease Surveillance, Detection and Response
   a. Develop collaboration between MOH and PARC
   b. Select and develop Sentinel Surveillance sites
   c. Expand number of Sentinel Surveillance sites
   d. Integrate surveillance activities into existing Government public health systems
   e. Develop mechanisms for sharing and exchanging data and information

1. Collaborations

a. With CDC-funded programs:
Awardee is required to work with CDC Center for Global Health Division of Global Health Protection Field and Applied Epidemiology Training Program Branch to develop strategies that will recruit and train members of the Pakistani veterinary public health who would benefit most from and are likely to use their epidemiology training to improve public health outcomes; that is, they will use their training to enhance regional disease surveillance, improve epidemiologic investigation and response capabilities within their regions.

b. With organizations external to CDC:
Although not required, Awardee is strongly encouraged to develop and sustain partnerships with other strategic partners and work together to enhance field epidemiology in Pakistan. These collaborators and partners are those that have demonstrated interest and have the capacity to work together to improve the public health workforce in Pakistan. The collaboration and partnership will foster the professional development of and Pakistani veterinary public health professionals and students, contribute to the strengthening of surveillance and outbreak response systems, and also work toward advancing the networking and sharing of regional field epidemiology and surveillance information across Pakistan. The awardee is encouraged to work with their partners and collaborators to develop training plans that encourage applicants for training from those who have the greatest likelihood of being retained and utilized in their disease surveillance and epidemiologic investigation duties at the local and regional levels

2. Target Populations

This FOA is targeting a large portion of the population of Pakistan that lives in close contact with livestock and poultry. Because of the close living proximity of humans and livestock, this population is at high risk for contracting zoonotic diseases.

b. Evaluation and Performance Measurement

i. CDC Evaluation and Performance Measurement Strategy

Throughout the 5-year FOA period, the FETP Pakistan office will work with the awardee to demonstrate program outcomes through process and outcome evaluation of funded activities. The office will use process evaluation to assess the extent to which planned program activities have been implemented and lead to feasible program outcomes. They will use outcome evaluation to assess whether funded activities are leading to intended outcomes. In addition, FETP Pakistan office in partnership with the awardee will conduct a program site visit and prepare a report to be used for program monitoring and quality improvement and will highlight annually key process and outcome data results. Evaluations included in this plan will be reviewed by the program manager. The awardee will report evaluation findings to relevant network stakeholders and will make these publically available. The awardee will use overall evaluation findings during the 5-year FOA period to establish key recommendations for partners on program implementation and effectiveness, sustainability of FETPs, and continued program improvement upon completion of this award.

Evaluation and Performance Matrix

Evaluation Question	Performance Measure	Data Source	Collection Method	Frequency of Collection	Dissemination and Utilization

PROCESS					
Is the awardee implementing activities in Pakistan and the region?	# of activities implemented either through sub-recipients or sub-contractors	Program progress reports	Document review	Annually	Develop an evaluation report
	# of dollar amount spent on activities	Financial reports	Document review	Annually	Develop an evaluation report
	# of program areas where activities are implemented	Program progress reports	Document review	Annually	Develop an evaluation report
Are the activities completed?	# of activities completed by program area	Program progress reports	Document review	Annually	Develop an evaluation report
OUTCOME					
To what extent did the quality of outbreak investigation improve in Pakistan?	# of steps followed residents in an outbreak investigation protocol	Network program managers	Document review	Annually	Develop an evaluation report
To what extent did the veterinarian Lab Capacity improve?	# of trainings of vet residents to assist in outbreaks	Network program managers	Document review	Annually	Develop an evaluation report
To what extent did collaboration between MINFAL, MOH and other ministries improve?	# collaborative activities between MINFAL, MOH and other ministries	Operational plan	Document review	Annually	Develop an evaluation report

To what extent did the capacity to detect newly emerging diseases improve?	# of outbreaks detected and # of outbreaks investigations conducted	Program monitoring data base	Document review	Annually	Develop an evaluation report
To what extent were surveillance activities expanded to further sites?	# work opportunities in field epidemiology by topic, duration, and country	Program monitoring data base	Document review	Annually	Develop an evaluation report
To what extent were training opportunities for FETP veterinarian residents improved?	# new training opportunities offered by topic and duration	Program monitoring data base	Document review	Annually	Develop an evaluation report
To what degree did involvement of veterinarian residents in outbreak investigations, and field epidemiology activities increase?	# of outbreak investigation conducted involving veterinarian residents per academic year	Program monitoring data base	Document review	Annually	Develop an evaluation report
To what extent were guidelines and protocols for surveillance reinforced?	Qualitative assessment on Adopting accreditation standards	Program monitoring data base	Document review	Annually	Develop an evaluation report

ii. Applicant Evaluation and Performance Measurement Plan

c. Organizational Capacity of Awardees to Execute the Approach

All applicant organizations must demonstrate their existing or forthcoming capacity to successfully execute all proposed strategies and activities to meet the program requirements of the selected funding category. Specifically, applicants should have:

• Capacity to conduct surveillance, epidemiology, and evaluation activities
• Availability of sophisticated laboratory instruments and analytical and quality testing facilities that are supported by qualified and trained manpower
• Ability to integrate surveillance activities into existing government public health systems
• Ability of sharing and exchanging data and information with partners e.g. ministry of health
• Capacity to collect, handle and transport case samples
• Capacity to develop diverse partnerships and build coalitions
• Capacity to train veterinarians in epidemiological investigations and lead zoonotic outbreak responses

d. Work Plan

Applicants should provide a high-level work plan that covers the duration of the project, with more detail for the first year of the project period. The work plan should cross walk to the strategies and activities, outcomes, and performance measures presented in the logic model and narrative sections of the FOA. The table below should be completed for each project period outcome identified in the logic model. If a particular activity leads to multiple outcomes, it should be described under each outcome measure.

Project Period Outcome: *[from Outcomes section and/or logic model]*	**Outcome Measure:** *[from Evaluation and Performance Measurement section]*		
Strategies/Activities	**Process Measure** *[from Evaluation and Performance Measurement section]*	**Responsible Position / Party**	**Completion Date**
1.			
2.			
3.			
4.			
5.			
6.			
7.			

e. CDC Monitoring and Accountability Approach

Monitoring activities include routine and ongoing communication between CDC and awardees, site visits, and awardee reporting (including work plans, performance, and financial reporting). HHS grants policy specifies the following HHS expectations for post-award monitoring for grants and cooperative agreements:

- Tracking awardee progress in achieving the desired outcomes.
- Insuring the adequacy of awardee systems that underlie and generate data reports.
- Creating an environment that fosters integrity in program performance and results.

Monitoring may also include the following activities:

- Ensuring that work plans are feasible based on the budget and consistent with the intent of the award.
- Ensuring that awardees are performing at a sufficient level to achieve objectives within stated timeframes.
- Working with awardees on adjusting the work plan based on achievement of objectives and changing budgets.
- Monitoring performance measures (both programmatic and financial) to assure satisfactory performance levels.

Other activities deemed necessary to monitor the award, if applicable.

These may include monitoring and reporting activities as outlined in HHS grants policy that assists grants management staff (e.g., grants management officers and specialists, and project officers) in the identification, notification, and management of high-risk grantees.

.

f. CDC Program Support to Awardees

Review and approve grantee's annual work plan, as part of the review-and-approval process

Meet on an annual basis with the grantee to review annual progress report for each U.S. Government Fiscal Year, and to review annual work plans and the subsequent year, as part of the review and approval process

Provide technical assistance, as mutually agreed upon, and revise annually during validation of the first and subsequent annual work plans

Provide technical oversight for all activities under this award

Facilitate in-country planning and review meetings for technical assistance activities

Monitor implementation of activities in Pakistan and in the region as agreed upon under this award

Provide technical assistance or advice on any data collections on 10 or more people that are planned or conducted by the awardee. All such data collections-- where CDC staff will be or are approving, directing, conducting, managing, or owning data-- must undergo OMB project determinations by CDC and may require OMB PRA clearance prior to the start of the project

B. Award Information

1. Funding Instrument Type:	Cooperative Agreement CDC's substantial involvement in this program appears in the CDC Program Support to Awardees Section.
2. Funding Activity Category:	HL
3. Fiscal Year:	2015
Estimated Total Funding:	$1,000,000
4. Approximate Total Fiscal Year Funding:	$200,000
5. Approximate Project Period Funding:	$1,000,000
6. Total Project Period Length:	5 year(s)
7. Expected Number of Awards:	1

8. Approximate Average Award: $200,000 Per Budget Period
9. Award Ceiling: $200,000 Per Budget Period
10. Award Floor: $0 Per Budget Period
11. Estimated Award Date: 09/30/2015
12. Budget Period Length: 12 month(s)

Throughout the project period, CDC will continue the award based on the availability of funds, the evidence of satisfactory progress by the awardee (as documented in required reports), and the determination that continued funding is in the best interest of the federal government. The total number of years for which federal support has been approved (project period) will be shown in the "Notice of Award." This information does not constitute a commitment by the federal government to fund the entire period. The total project period comprises the initial competitive segment and any subsequent non-competitive continuation award(s).

13. Funds Tracking

Applicant is required to track funds by P-Accounts/Sub-Accounts for each project/cooperative agreement awarded.

14. Direct Assistance

Direct assistance is not available through this FOA.

15. Indirect Costs

Indirect Costs are not an allowable cost through this FOA.

C. Eligibility Information

1. Eligible Applicants

Eligibility Category: Others (see text field entitled "Additional Information on Eligibility" for clarification)

2. Special Eligibility Requirements

Pakistan Agricultural Research Council, Islamabad, Pakistan

3. Justification for Less than Maximum Competition

The Pakistan Agricultural Research Council (PARC), established in 1981, has the mandate (through the Ministry of Food, Agriculture, and Livestock) to undertake, aid, promote, and coordinate surveillance and research activities at the federal and provincial levels in Pakistan to provide science-based solutions for animal-human public health issues. The institution is the most stable veterinary public health service and research institution in Pakistan with the capacity to conduct animal health surveillance trainings and respond to zoonotic health threats throughout Pakistan. Moreover, it possesses the requisite scientific and technical expertise, together with the service, research and administrative infrastructure to strengthen the veterinary workforce. Through its mandate PARC has played a pivotal role to manage several national zoonotic crises in Pakistan in the last 25 years. These combined attributes make them uniquely qualified as the only organization in Pakistan capable of effectively conducting epidemiology, veterinary laboratory surveillance, outbreak response and other public health program activities proposed for this cooperative agreement.

4. Other

N/A

5. Cost Sharing or Matching

Cost Sharing / Matching Requirement: No

Cost sharing or matching funds are not required for this program. Although there is no statutory match requirement for this FOA, leveraging other resources and related ongoing efforts to promote sustainability is strongly encouraged.

6. Maintenance of Effort

Maintenance of Effort is not required.

D. Application and Submission Information

1. Required Registrations

An organization must be registered at the three following locations before it can submit an application for funding at www.grants.gov.

a. Data Universal Numbering System:

All applicant organizations must obtain a Data Universal Numbering System (DUNS) number. A DUNS number is a unique nine-digit identification number provided by Dun & Bradstreet (D&B). It will be used as the Universal Identifier when applying for federal awards or cooperative agreements.

The applicant organization may request a DUNS number by telephone at 1-866-705-5711 (toll free) or internet at http:// fedgov.dnb. com/webform/ displayHomePage.do. The DUNS number will be provided at no charge.

If funds are awarded to an applicant organization that includes sub-awardees, those sub-awardees must provide their DUNS numbers before accepting any funds.

b. System for Award Management (SAM):

The SAM is the primary registrant database for the federal government and the repository into which an entity must submit information required to conduct business as an awardee. All applicant organizations must register with SAM, and will be assigned a SAM number. All information relevant to the SAM number must be current at all times during which the applicant has an application under consideration for funding by CDC. If an award is made, the SAM information must be maintained until a final financial report is submitted or the final payment is received, whichever is later. The SAM registration process can require 10 or more business days, and registration must be renewed annually. Additional information about registration procedures may be found at ***www.SAM.gov.***

c. Grants.gov:

The first step in submitting an application online is registering your organization at www.grants.gov, the official HHS E-grant Web site. Registration information is located at the "Get Registered" option at www.grants.gov.

All applicant organizations must register at www.grants.gov. The one-time registration process usually takes not more than five days to complete. Applicants should start the registration process as early as possible.

Step	System	Requirements	Duration	Follow Up

1	Data Universal Number System (DUNS)	1. Click on http:// fedgov.dnb.com/webform 2. Select Begin DUNS search/request process 3. Select your country or territory and folllow the instructions to obtain your DUNS 9-digit # 4. Request appropriate staff member(s) to obtain DUNS number, verify & update information under DUNS number	1-2 Business Days	To confirm that you have been issued a new DUNS number check online at (http:// fedgov.dnb.com/ webform) or call 1-866-705-5711
2	System for Award Management (SAM) formerly Central Contractor Registration (CRR)	1. Retrieve organizations DUNS number 2. Go to www.sam.gov and designate an E-Biz POC (note CCR username will not not work in SAM and you will need to have an active SAM account before you can register on grants.gov)	3-5 Business Days but up to 2 weeks and must be renewed once a year	For SAM Customer Service Contact www.fsd.gov/US Calls: 866-606-8220
3	Grants.gov	1. Set up an individual account in Grants.gov using organization new DUNS number to become an authorized organization representative (AOR) 2. Once the account is set up the E-BIZ POC will be notified via email 3. Log into grants.gov using the password the E-BIZ POC received and create new password 4. This authorizes the AOR to submit applications on behalf of the organization	Same day but can take 8 weeks to be fully registered and approved in the system (note, applicants MUST obtain a DUNS number and SAM account before applying on grants.gov)	Register early! Log into grants.gov and check AOR status until it shows you have been approved

2. Request Application Package

Applicants may access the application package at www.grants.gov.

3. Application Package

Applicants must download the SF-424 application package associated with this funding opportunity from www.grants.gov. If Internet access is not available, or if the online forms cannot be accessed, applicants may call the CDC PGO staff at 770-488-2700 or e-mail PGO PGOTIM@cdc.gov for assistance. Persons with hearing loss may access CDC telecommunications at TTY 1-888-232-6348.

4. Submission Dates and Times

If the application is not submitted by the deadline published in the FOA, it will not be processed. PGO personnel will notify the applicant that their application did not meet the deadline. The applicant must receive pre-approval to submit a paper application (see Other Submission Requirements section for additional details). If the applicant is authorized to submit a paper application, it must be received by the deadline provided by PGO.

If Grants.gov cannot receive applications due to an emergency or other unanticipated event (and circumstances preclude advance notification of an extension), then applications must be submitted by the first business day on which government operations resume.

Due Date for Applications: **07/22/2015**

Electronically submitted applications must be submitted no later than 11:59 p.m., ET, on the listed application due date.

5. CDC Assurances and Certifications

All applicants are required to sign and submit CDC Assurances and Certifications documents that can be found on the CDC Web site: http://www.cdc.gov/grants/interestedinapplying/applicationprocess.html

Applicants may follow either of the following processes:

- Applicants must name this file "Assurances and Certifications" and upload as a PDF on www.grants.gov.
- Complete the applicable assurances and certifications and submit them directly to CDC on an annual basis at http:// www.cdc.gov/od/pgo/ funding/grants/ foamain.shtm

Assurances and certifications submitted directly to CDC will be kept on file for 1 year and will apply to all applications submitted to CDC within one year of the submission date.

6. Contents and Form of Applications Submission

Applicants are required to submit all of the documents outlined below as their application package on www.grants.gov.

7. Letter of Intent (LOI)

LOI is not requested or required as part of the application for this FOA.

8. Table of Contents

(No page limit, not included in project narrative page limit). Provide a detailed table of contents for the entire submission package that includes all of the documents in the application and headings in the "Project Narrative" section. Name the file "Table of Contents" and upload it as a PDF file under "Other Attachment Forms" at www.grants.gov.

9. Project Abstract Summary

(Maximum of 1 page, single spaced, 12 point font, 1-inch margins). A project abstract is included on the mandatory documents list and must be submitted at www.grants.gov. The project abstract must be a self-contained, brief summary of the proposed project including the purpose and outcomes. This summary must not include any proprietary or confidential information. Applicants must enter the summary in the "Project Abstract Summary" text box at www.grants.gov.

10. Project Narrative

(Maximum of 18 pages single spaced, Calibri 12 point, 1-inch margins, number all pages, content beyond 18 pages will not be reviewed). The Project Narrative must include all of the bolded headings shown in this section. The Project Narrative must be succinct, self-explanatory, and in the order outlined in this section. It must address outcomes and activities to be conducted over the entire project period as identified in the CDC Project Description section.

Applicants must submit a Project Narrative with the application forms. Applicants must name this file "Project Narrative" and upload it at www.grants.gov.

a. Background

Applicants should provide a description of relevant background information that includes the context of the problem (see CDC Background).

b. Approach

i. Problem Statement

Applicants must describe the core information relative to the problem for the jurisdictions or populations they serve. The core information should help reviewers understand how the applicant's response to the FOA will address the public health problem and support public health priorities. (See CDC Project Description).

ii. Purpose

Applicants must describe specifically how their application will address the problem as described in the CDC Project Description.

iii. Outcomes

Applicants must clearly identify the outcomes they expect to achieve by the end of the project period. Outcomes are the results that the program intends to achieve. All outcomes should indicate the intended direction of change (i.e., increase, decrease, maintain). See the program logic model in the Approach section of the CDC Project Description.

iv. Strategy and Activities

The applicant must provide a clear and concise description of the strategies and activities they will use to achieve the project period outcomes. Whenever possible, applicants should use evidence-based program strategies as identified by the Community Guide (or similar reviews) and reference it explicitly as a source. Applicants may propose additional strategies and activities to achieve the outcomes. Applicants should select existing evidence-based strategies that meet their needs, or describe the rationale for developing and evaluating new strategies or practice-based innovations. (See CDC Project description: Strategies and Activities section).

c. Applicant Evaluation and Performance Measurement Plan

Applicants must provide an evaluation and performance measurement plan that is consistent with the CDC Evaluation and Performance Measurement Strategy section of the CDC Project Description of this FOA. Data collected must be used for ongoing monitoring of the award to evaluate its effectiveness, and for continuous program improvement.

The plan must:

- Describe how key program partners will be engaged in the evaluation and performance measurement planning processes.
- Describe the type of evaluations to be conducted (i.e. process and/or outcome).

- Describe key evaluation questions to be answered.
- Describe other information, as determined by the CDC program (e.g., performance measures to be developed by the applicant) that should be included.
- Describe potentially available data sources and feasibility of collecting appropriate evaluation and performance data.
- Describe how evaluation findings will be used for continuous program and quality improvement.
- Describe how evaluation and performance measurement will contribute to development of that evidence base, where program strategies are being employed that lack a strong evidence base of effectiveness.

Awardees will be required to submit a more detailed evaluation and performance measurement plan within the first 6 months of the project, as outlined in the reporting section of the FOA.

Awardees will be required to submit a more detailed evaluation and performance measurement plan within the first six months of the project, as outlined in the reporting section of the FOA.

d. Organizational Capacity of Applicants to Implement the Approach
Applicant must address the organizational capacity requirements as described in the CDC Project Description.

11. Work Plan
Applicants must prepare a work plan consistent with the CDC Project Description Work Plan section. The work plan integrates and delineates more specifically how the awardee plans to carry out achieving the project period outcomes, strategies, and activities, evaluation and performance measurement, including key milestones.

Applicants must name this file "Work Plan" and upload it as a PDF file at www.grants.gov.

12. Budget Narrative
Applicants must submit an itemized budget narrative, which may be scored as part of the Organizational Capacity of Awardees to Execute the Approach. When developing the budget narrative, applicants must consider whether the proposed budget is reasonable and consistent with the purpose, outcomes, and program strategy outlined in the project narrative. The budget must include:

- Salaries and wages
- Fringe benefits
- Consultant costs
- Equipment
- Supplies
- Travel
- Alterations and Renovations
- Other categories
- Contractual costs
- Total Direct costs
- Total Indirect costs

For guidance on completing a detailed budget, see Budget Preparation Guidelines at:
http://www.cdc.gov/grants/interestedinapplying/applicationresources.html

Applicants should name this file "Budget Narrative" and upload it as a PDF file to www.grants.gov. If requesting indirect costs in the budget, a copy of the indirect cost rate agreement is required. If the indirect

cost rate is a provisional rate, the agreement must have been made less than 12 months earlier. Applicants must name this file "Indirect Cost Rate" and upload it to www.grants.gov.

.

13. Tobacco and Nutrition Policies

Awardees are encouraged to implement tobacco and nutrition policies.

Unless otherwise explicitly permitted under the terms of a specific CDC award, no funds associated with this FOA may be used to implement the optional policies, and no applicants will be evaluated or scored on whether they choose to implement these optional policies.

CDC supports implementing evidence-based programs and policies to reduce tobacco use and secondhand smoke exposure, and to promote healthy nutrition. CDC encourages all awardees to implement the following optional recommended evidence-based tobacco and nutrition policies within their own organizations. The tobacco policies build upon the current federal commitment to reduce exposure to secondhand smoke, specifically The Pro-Children Act, 20 U.S.C. 7181-7184, that prohibits smoking in certain facilities that receive federal funds in which education, library, day care, health care,or early childhood development services are provided to children.

Tobacco Policies:

1. Tobacco-free indoors: Use of any tobacco products (including smokeless tobacco) or electronic cigarettes is not allowed in any indoor facilities under the control of the awardee.
2. Tobacco-free indoors and in adjacent outdoor areas: Use of any tobacco products or electronic cigarettes is not allowed in any indoor facilities, within 50 feet of doorways and air intake ducts, and in courtyards under the control of the awardee.
3. Tobacco-free campus: Use of any tobacco products or electronic cigarettes is not allowed in any indoor facilities or anywhere on grounds or in outdoor space under the control of the awardee.

Nutrition Policies:

1. Healthy food-service guidelines must, at a minimum, align with HHS and General Services Administration Health and Sustainability Guidelines for Federal Concessions and Vending Operations. These guidelines apply to cafeterias, snack bars, and vending machines in any facility under the control of the awardee and in accordance with contractual obligations for these services (see: http://www.gsa.gov/ graphics/pbs/Guidelines_for__Federal__Concessions_and_Vending__ _Operations.pdf).
2. Resources that provide guidance for healthy eating and tobacco-free workplaces are:

   http://www.cdc.gov/ nccdphp/dnpao/hwi/ toolkits/ tobacco/index.htm
   http://www. thecommunityguide.org/ tobacco/index.html
   http://www.cdc.gov/ chronicdisease/resources/ guidelines/food-service-guidelines.htm

14. Intergovernmental Review

Executive Order 12372 does not apply to this program.

15. Funding Restrictions

Restrictions that must be considered while planning the programs and writing the budget are:

- Awardees may not use funds for research.
- Awardees may not use funds for clinical care except as allowed by law.
- Awardees may only use funds for reasonable program purposes, including personnel, travel, supplies, and services (such as contractual).
- Generally, awardees may not use HHS/CDC/ATSDR funding for the purchase of furniture or

equipment. Any such proposed spending must be clearly identified in the budget in accordance with CDC's budget guidelines.

- Reimbursement of pre-award costs is not allowed.
- Other than for normal and recognized executive-legislative relationships, no funds may be used for:
    - Publicity or propaganda purposes, for the preparation, distribution, or use of any material designed to support or defeat the enactment of legislation before any legislative body
    - The salary or expenses of any grant or contract recipient, or agent acting for such recipient, related to any activity designed to influence the enactment of legislation, appropriations, regulation, administrative action, or Executive order proposed or pending before any legislative body
    - See Additional Requirement (AR) 12 for detailed guidance on this prohibition and additional guidance on lobbying for CDC awardees.

The direct and primary recipient in a cooperative agreement program must perform a substantial role in carrying out project outcomes and not merely serve as a conduit for an award to another party or provider who is ineligible.

16. Other Submission Requirements

a. Electronic Submission: Applications must be submitted electronically at www.grants.gov. The application package can be downloaded from www.grants.gov. Applicants can complete the application package off-line, and then submit the application by uploading it at www.grants.gov website. All application attachments must be submitted using a PDF file format. Directions for creating PDF files can be found at www.grants.gov. File formats other than PDF may not be readable by PGO TIMS staff.

Applications must be submitted electronically by using the forms and instructions posted for this funding opportunity on www.grants.gov.

If Internet access is not available or if the forms cannot be accessed on-line, applicants may contact the PGO TIMS staff at 770- 488-2700 or by e-mail at pgotim@cdc.gov, Monday through Friday, 7:30 am–4:30 pm Eastern Standard Time (EST), except federal government holidays. Electronic applications will be considered successful if they are available to PGO TIMS staff for processing from www.grants.gov on the deadline date.

Do not use "special characters (i.e. %, &, * etc.) on the cover page of your application (form SF 424 – Application for Federal Assistance) as special characters are not recognized by the electronic system. Use of special characters may result in your application being rejected. When copy/paste is used on application documents, the grantee should ensure that text only is pasted. When extra, blank spaces at the end of the original are pasted into the new document it causes the system to reject the document.

b. Tracking Number: Applications submitted through www.grants.gov, are time/date stamped electronically and assigned a tracking number. The Authorized Organization Representative (AOR) will receive an email notice of receipt when www.grants.gov receives the application. The tracking number serves to document that the application has been submitted and initiates the electronic validation process before the application is made available to CDC.

c. Validation Process: Application submission is not concluded until successful completion of the validation process. After submission of the application package, applicants will receive a "submission receipt" email generated by www.grants.gov. A second email message to applicants will then be generated by www.grants.gov that will either validate or reject the submitted application package. This validation process may take as long as two (2) business days. Applicants are strongly encouraged to check the status of their

application to ensure submission of their package is complete and no submission errors have occurred. Applicants also are strongly encouraged to allocate ample time for filing to guarantee that their application can be submitted and validated by the deadline published in the FOA. Non-validated applications will not be accepted after the published application deadline date.

If you do not receive a "validation" e-mail within two business days of application submission, please contact www.grants.gov. For instructions on how to track your application, refer to the e-mail message generated at the time of application submission or the Application User Guide, Version 3.0, page 57.

d. Technical Difficulties: If the applicant encounters technical difficulties with www.grants.gov, the applicant should contact www.grants.gov Customer Service. The www.grants.gov Contact Center is available 24 hours a day, 7 days a week, with the exception of Federal Holidays. You can reach the www.grants.gov Contact Center at 1-800-518-4726 or by email at support@www.grants.gov. Submissions sent by email, fax, CD's or thumb drives of applications will not be accepted. Please note that www.grants.gov is managed by HHS.

e. Paper Submission: If technical difficulties are encountered at www.grants.gov, applicants should call the www.grants.gov Contact Center at 1-800-518-4726 or e-mail them at support@www.grants.gov for assistance. After consulting with the Contact Center, if the technical difficulties remain unresolved and electronic submission is not possible, applicants may e-mail or call CDC GMO/GMS, before the deadline, and request permission to submit a paper application. Such requests are handled on a case-by-case basis.

An applicant's request for permission to submit a paper application must:

1. Include the www.grants.gov case number assigned to the inquiry;
2. Describe the difficulties that prevent electronic submission and the efforts taken with the www.grants.gov Contact Center to submit electronically; and
3. Be postmarked at least three calendar days before the application deadline. Paper applications submitted without prior approval will not be considered. If a paper application is authorized, PGO will advise the applicant of specific instructions for submitting the application (e.g., original and two hard copies of the application by U.S. mail or express delivery service).

E. Application Review Information

1. Review and Selection Process

a. Phase I Review

All applications will be reviewed initially for completeness by the CDC's Procurement and Grants Office (PGO) staff and will be reviewed jointly for eligibility by the CDC Center for Global Health and PGO. Incomplete applications and applications that are non-responsive to the eligibility criteria will not advance to Phase II review. Applicants will be notified that the application did not meet eligibility and/or published submission requirements.

b. Phase II Review

A review panel will evaluate complete, eligible applications in accordance with the "Criteria" section of the FOA.

Not more than 30 days after the Phase II review is completed, applicants will be notified electronically if their application does not meet eligibility or published submission requirements.

i. Approach	Maximum Points: 50

Evaluate the extent to which the applicant addresses the items below.

- Presents outcomes that are consistent with the project period outcomes described in the CDC Project Description and logic model.
- Describes an overall strategy and activities consistent with the CDC Project Description and logic model.
- Describes strategies and activities that are achievable, appropriate to achieve the outcomes of the project, and evidence-based (to the degree practicable).
- Shows that the proposed use of funds is an efficient and effective way to implement the strategies and activities and attain the project period outcomes.
- Presents a work plan that is aligned with the strategies/activities, outcomes, and performance measures in the approach and is consistent with the content and format proposed by CDC.

ii. Evaluation and Performance Measurement	**Maximum Points: 25**

Evaluate the extent to which the applicant addresses the items below.

- Shows/affirms the ability to collect data on the process and outcome performance measures specified by CDC in the project description and presented by the applicant in their approach.
- Describes clear monitoring and evaluation procedures and how evaluation and performance measurement will be incorporated into planning, implementation, and reporting of project activities.
- Describes how performance measurement and evaluation findings will be reported, and used to demonstrate the outcomes of the FOA and for continuous program quality improvement.
- Describes how evaluation and performance measurement will contribute to developing an evidence base for programs that lack a strong effectiveness evidence base.
- Describes any evaluation studies they are to undertake. Describe in sufficient detail to identify the key evaluation questions, and data sources and analysis methods

iii. Applicant's Organizational Capacity to Implement the Approach	**Maximum Points: 25**

Evaluate the extent to which the applicant addresses the items below.

- Demonstrates relevant experience and capacity (both management, administrative, and technical) to achieve the goals of the project.
- Demonstrates experience and capacity to implement the evaluation plan.
- Provides a staffing plan and project management structure that will be sufficient to meet the goals of the proposed project and which clearly defines staff roles. Provides an organizational chart.
- Budget: When scoring budgets, CDC programs must assess whether the budget aligns with the proposed work plan. For additional guidance, check with the Center for Global Health extramural program office, GMO or GMS.

c. Phase III Review

Applications will be funded in order by score and rank determined by the review panel unless funding preferences or other considerations stated in this FOA apply. Final selection and approval of activities will be prioritized in collaboration with CDC.

In addition, the following factors may affect the funding decision:

CDC will provide justification for any decision to fund out of rank order.

2. Anticipated Announcement and Award Dates

The Grants Management Officer will provide electronic communication to the successful awardee(s) in the form of a notice of award letter. Award date is expected to be 09/30/2015.

F. Award Administration Information

1. Award Notices

Awardees will receive an electronic copy of the Notice of Award (NoA) from the CDC PGO. The NoA shall be the only binding, authorizing document between the awardee and CDC. The NoA will be signed by an authorized GMO and emailed to the awardee program director.

Any application awarded in response to this FOA will be subject to the DUNS, SAM Registration and Federal Funding Accountability And Transparency Act Of 2006 (FFATA) requirements.

Unsuccessful applicants will receive notification of the results of the application review by email with delivery receipt or by mail.

2. Administrative and National Policy Requirements

Awardees must comply with the administration requirements outline in 45 Code of Federal Regulations (CFR) Part 74 or Part 92, as appropriate. To view brief descriptions of relevant provisions visit the CDC website at: http://www.cdc.gov/grants/additionalrequirements/index.html

.

The following administrative requirements apply to this project:

Generally applicable ARs:

- AR-9: Paperwork Reduction Act, Public Law 104-13
- AR-10: Smoke-Free Workplace
- AR-11: Healthy People 2010
- AR-12: Lobbying Restrictions
- AR-14: Accounting System Requirements
- AR-16: Security Clearance Requirement
- AR-21: Small, Minority, And Women-owned Business
- AR-24: Health Insurance Portability and Accountability Act
- AR-25: Release and Sharing of Data
- AR-26: National Historic Preservation Act of 1966, Public Law 89-665
- AR-29: Compliance with EO13513, "Federal Leadership on Reducing Text Messaging while Driving," October 1, 2009
- AR-30: Compliance with Section 508 of the Rehabilitation Act of 1973, 29 U.S.C. § 794d
- AR- 32: Executive Order 131410: Promoting Quality and Efficient Health Care in Federal Government (If applicable applicants should be aware of the program's current business needs and how they align with nationally adopted Public Health Information Network (PHIN) standards, services, practices, and policies when implementing, acquiring, and updating public health information systems.)
- AR-33: Plain Writing Act of 2010, Public Law 111-274
- AR-34: Patient Protection and Affordable Care Act, Public Law 111-148 (e.g. a tobacco-free campus policy and a lactation policy consistent with S4207)
- AR-35: Nutrition Policies

ARs applicable to awards related to conferences:

- AR-20: Conference Support
- AR-27: Conference Disclaimer and Use of Logos

Organization-specific ARs:

- AR-8: Public Health System Reporting (Community-based non-governmental organizations)
- AR-15: Proof of Non-profit Status (Non-profit organizations)

Pilot Program for Enhancement of Employee Whistleblower Protections: All applicants will have a condition of award that applies to 48 CFR section 3.908 requiring grantees to inform their employees in writing of employee whistleblower rights and protections under 41. U.S.C 4712 in the predominant native language of the workforce. If applicable, award recipients will be required to submit an electronic version of the final, peer-reviewed manuscript of any work developed under this award upon acceptance for publication. Additional information will be provided in the award terms. For more information on the Code of Federal Regulations, visit the National Archives and Records Administration at:
http://www.access.gpo.gov/nara/cfr/cfr-table-search.html

3. Reporting

a. CDC Reporting Requirements

Reporting allows for continuous program monitoring and identifies successes and challenges that awardees encounter throughout the project period. Also, reporting is a requirement for awardees who want to apply for yearly continuation of funding. Reporting helps CDC and awardees because it:

- Helps target support to applicants, particularly for cooperative agreements;
- Provides CDC with periodic data to monitor awardee progress towards meeting the FOA outcomes and overall performance;
- Allows CDC to track performance measures and evaluation findings for continuous program improvement throughout the project period and todetermine applicability of evidence-based approaches to different populations, settings, and contexts; and
- Enables the assessment of the overall effectiveness and impact of the FOA.

As described in the following text, awardees must submit an annual performance report, ongoing performance measures data, administrative reports, and a final performance and financial report. A detailed explanation of any additional reporting requirements will be provided in the Notice of Award to successful applicants.

b. Specific Reporting Requirements

i. Awardee Evaluation and Performance Measurement Plan

Awardees must provide a more detailed evaluation and performance measurement plan within the first six months of the project. This more detailed plan should be developed by awardees as part of first-year project activities, with support from CDC. This more detailed plan should build on the elements stated in the initial plan, and should be no more than 25 pages. At a minimum, and in addition to the elements of the initial plan, this plan must:

- Indicate the frequency that evaluation and performance data are to be collected.
- Describe how data will be reported.
- Describe how evaluation findings will be used to ensure continuous quality and program improvement.
- Describe how evaluation and performance measurement will yield findings that will demonstrate the value of the FOA (e.g., effect on improving public health outcomes, effectiveness of FOA as it pertains to performance measurement, cost-effectiveness, or cost-benefit).
- Describe dissemination channels and audiences (including public dissemination).
- Describe other information requested and as determined by the CDC program.

When developing evaluation and performance measurement plans, applicants are encouraged to use the Introduction to Program Evaluation for Public Health Programs: A Self-Study Guide, available at:
http://www.cdc.gov/eval/guide/index.htm

ii. Annual Performance Report

This report must not exceed 45 pages excluding administrative reporting; attachments are not allowed, but web links are allowed.The awardee must submit the Annual Performance Report via www.grants.gov 120 days before the end of the budget period. In addition, the awardee must submit an annual Federal Financial Report within 90 days after the end of the calendar quarter in which the budget year ends.

This report must include the following:

- **Performance Measures (including outcomes)** – Awardees must report on performance measures for each budget period and update measures, if needed.
- **Evaluation Results** – Awardees must report evaluation results for the work completed to date (including any impact data).
- **Work Plan (maximum of 25 pages)** – Awardees must update work plan each budget period.
- **Successes**
    - Awardees must report progress on completing activities outlined in the work plan
    - Awardees must describe any additional successes (e.g., identified through evaluation results or lessons learned) achieved in the past year
    - Awardees must describe success stories
- **Challenges**
    - Awardees should describe any challenges that hinder achievement of both annual and project period outcomes, performance measures, or their ability to complete the activities in the work plan
    - Awardees must describe any additional challenges (e.g., identified through evaluation results or lessons learned) encountered in the past year
- **CDC Program Support to Awardees**
    - Awardees describe how CDC could assist them in overcoming the challenges to achieve both annual and project period outcomes and performance measures, and complete activities outlined in the work plan
- **Administrative Reporting** (not subject to page limits)
    - SF-424A Budget Information-Non-Construction Programs
    - Budget Narrative – Must use the format outlined in Section D. Content and Form of Application Submission, Budget Narrative Section
    - Indirect Cost Rate Agreement

The deadline date for submitting the Annual Performance Report is 120 days before the end of the budget period. Send an electronic copy to CDC Project Officer (PO) with attention to the GMS and PO. The contact information for the GMS and PO is listed in the "Agency Contacts" section of the FOA

iii. Performance Measure Reporting

CDC programs must require awardees to submit performance measures annually at a minimum, and may require reporting more frequently. Performance measure reporting should be limited to the collection of data. When funding is awarded initially, CDC programs should specify reporting frequency, required data fields, and format.

iv. Federal Financial Reporting

The annual FFR form (SF-425) is required and must be submitted through eRA Commons within 90 days after the end of the calendar quarter in which the budget year ends. The report should include only those funds authorized and disbursed during the timeframe covered by the report. The final report must indicate the exact balance of unobligated funds, and may not reflect any unliquidated obligations. The final FFR expenditure data and the Payment Management System's (PMS) cash transaction data must correspond; no discrepancies between the data sets are permitted. Failure to submit the required information by the due date may affect adversely the future funding of the project. If the information cannot be provided by the due date, awardees are required to submit a letter of explanation and include the date by which the information will be provided.

v. Final Performance and Financial Report

At the end of the project period, awardees must submit a final report to include a final financial and performance report. This report is due 90 days after the end of the project period.

At a minimum, this report must include the following:

- Performance Measures (including outcomes) – Applicants must report final performance data for all performance measures for the project period.
- Evaluation results – Applicants must report final evaluation results for the project period
- Impact of Results – Applicants must describe the effects or results of the work completed over the project period, including success stories.
- Additional forms as described in the Notice of Award, including Equipment Inventory Report and Final Invention Statement.
- FFR (SF-425)

This report must not exceed 40 pages.

Awardees should e-mail the report to the CDC PO and the GMS listed in the "Agency Contacts" section of the FOA.

4. Federal Funding Accountability and Transparency Act of 2006

Federal Funding Accountability And Transparency Act Of 2006 (FFATA), Public Law 109-282, the Federal Funding Accountability and Transparency Act of 2006 as amended (FFATA), requires full disclosure of all entities and organizations receiving Federal funds including awards, contracts, loans, other assistance, and payments through a single publicly accessible Web site, www.USASpending.gov.

Compliance with this law is primarily the responsibility of the Federal agency. However, two elements of the law require information to be collected and reported by applicants: 1) information on executive compensation when not already reported through the SAM, and 2) similar information on all sub-awards / subcontracts / consortiums over $25,000.

For the full text of the requirements under the FFATA and HHS guidelines, go to:

- http:// frwebgate.access.gpo.gov/ cgi-bin/getdoc.cgi? dbname=109_cong_ bills&docid= f:s2590enr.txt.pdf
- https:/ /www.fsrs.gov/ documents/ffata_ legislation_110_252. pdf
- http:// www.hhs.gov/asfr/ ogapa/aboutog/ Grants%20Management% 20Information/ffata_ guidelines.html.

G. Agency Contacts

CDC encourages inquiries concerning this FOA.

Program Office Contact

For programmatic technical assistance, contact:

Youness Elhamidi, Project Officer
CDC
CGH/DGHP/FETP
1600 Clifton Road, NE
MS-E93
Atlanta, GA 30333
Phone: (404) 718-4521
Email: vcy1@cdc.gov

Grants Staff Contact

For **financial, awards management, or budget assistance,** contact:

Lakita Reid, Grants Management Specialist
CDC
Procurement and Grants Office (PGO)
2920 Brandywine Rd
MS K-75
Atlanta, GA 30341
Phone: (770) 488-2742
Email: wtl9@cdc.gov

For assistance with **submission difficulties related to www.grants.gov,** contact:

> **www.grants.gov** Contact Center: 1-800-518-4726.
> Hours of Operation: 24 hours a day, 7 days a week. Closed on Federal holidays.

For all other **submission** questions, contact:

> Technical Information Management Section
> Department of Health and Human Services
> CDC Procurement and Grants Office
> 2920 Brandywine Road, MS E-14
> Atlanta, GA 30341
> Telephone: 770-488-2700
> Email: pgotim@cdc.gov

CDC Telecommunications for individuals with hearing loss is available at: TTY 1.888.232.6348.

H. Other Information

Following is a list of acceptable attachments that applicants can upload as PDF files part of their application at www.grants.gov. Applicants may not attach documents other than those listed; if other documents are attached, applications will not be reviewed.

- Project Abstract
- Project Narrative
- Budget Narrative
- CDC Assurances and Certifications

- Work Plan
- Table of Contents for Entire Submission

I. Glossary

Administrative and National Policy Requirements, Additional Requirements (ARs): The Administrative requirements found in 45 CFR Part 74 and Part 92 and other requirements as mandated by statute or CDC policy. CDC programs must indicate which ARs are relevant to the FOA. All ARs are listed in the template for CDC programs. Awardees must then comply with the ARs listed in the FOA. To view brief descriptions of relevant provisions visit the CDC website at: http://www.cdc.gov/grants/additional requirements/index.html

Authority: Legal authorizations that outline the legal basis for the components of each individual FOA. An Office of Global Council (OGC) representative may assist in choosing the authorities appropriate to any given program.

Award: Financial assistance that provides support or stimulation to accomplish a public purpose. Awards include grants and other agreements (e.g., cooperative agreements) in the form of money, or property in lieu of money, by the Federal Government to an eligible recipient.

Budget Period/Year: the duration of each individual funding period within the project period. Traditionally, budget period length is 12 months or 1 year.

Carryover: Unobligated Federal funds remaining at the end of any budget period that, with the approval of the GMO or under an automatic authority, may be carried forward to another budget period to cover allowable costs of that budget period (whether as an offset or additional authorization). Obligated, but unliquidated, funds are not considered carryover.

Catalog of Federal Domestic Assistance (CFDA): A catalog published twice a year which describes domestic assistance programs administered by the federal government. This government-wide compendium of Federal programs lists projects, services, and activities which provide assistance or benefits to the American public. https:// www.cfda.gov/index?s= agency&mode =form&id= 0bebbc3b3261e25 5dc82002b83094717&tab= programs&tabmode= list&subtab=list& subtabmode=list.

CDC Assurances and Certifications: Standard government-wide grant application forms.

CFDA Number: The CFDA number is a unique number assigned to each program/FOA throughout its lifecycle that enables data and funding tracking and transparency.

Competing Continuation Award: An award of financial assistance which adds funds to a grant and extends one or more budget periods beyond the currently established project period.

Continuous Quality Improvement: A system that seeks to improve the provision of services with an emphasis on future results.

Contracts: An award instrument establishing a binding legal procurement relationship between CDC and a recipient obligating the latter to furnish a product.

Cooperative Agreement: An award of financial assistance that is used to enter into the same kind of relationship as a grant; and is distinguished from a grant in that it provides for substantial involvement between the Federal agency and the awardee in carrying out the activity contemplated by the award.

Cost Sharing or Matching: Refers to program costs not borne by the Federal government but required of awardees. It may include the value of allowable third-party in-kind contributions, as well as expenditures by the awardee.

Direct Assistance: assistance given to an applicant such as federal personnel or supplies. See http:// www.cdc.gov/ stltpublichealth/ GrantsFunding/ direct_assistance.html.

Federal Funding Accountability And Transparency Act Of 2006 (FFATA): Requires information on Federal awards, including awards, contracts, loans, and other assistance and payments, be made available to the public on a single website, www.USAspending.gov.

Fiscal Year: The year that budget dollars are allocated to fund program activities. The fiscal year starts October 1st and goes through September 30th.

Grant: A legal instrument used by the Federal government to enter into a relationship, the principal purpose of which is to transfer anything of value to a recipient to carry out a public purpose of support or stimulation authorized by statute. The financial assistance may be in the form of money, or property in lieu of money. The term does not include: a Federal procurement subject to the Federal Acquisition Regulation; technical assistance (which provides services instead of money); or assistance in the form of revenue sharing, loans, loan guarantees, interest subsidies, insurance, or direct payments of any kind to individuals. The main difference between a grant and a cooperative agreement is that there is no anticipated substantial programmatic involvement by the Federal Government under an award.

Grants.gov: A "storefront" web portal for use in electronic collection of data (forms and reports) for Federal grant-making agencies through the www.grants.gov site, www.grants.gov.

Health Disparities: are differences in health outcomes and their determinants between segments of the population, as defined by social, demographic, environmental, and geographic attributes.

Healthy People 2020: Provides national health objectives for improving the health of all Americans by encouraging collaborations across sectors, guiding individuals toward making informed health decisions, and measuring the impact of prevention activities.

Inclusion: Inclusion refers to both the meaningful involvement of community members in all stages of the

program process, and maximum involvement of the target population in the benefits of the intervention. An inclusive process assures that the views, perspectives, and needs of affected communities, care providers, and key partners are actively included.

Indirect Costs: Those costs that are incurred for common or joint objectives and therefore cannot be identified readily and specifically with a particular sponsored project, program, or activity but are nevertheless necessary to the operations of the organization. For example, the costs of operating and maintaining facilities, depreciation, and administrative salaries are generally treated as indirect costs.

International public health work: For purposes of this template, is defined as work conducted internationally for the benefit of a foreign entity or jurisdiction.

Lobbying: Direct lobbying includes any attempt to influence legislation, appropriations, regulations, administrative actions or Executive Orders ("legislation or other orders"), or other similar deliberations at all levels of government through communications that directly express a view on proposed or pending legislation or other orders and which are directed to members of staff, or other employees of a legislative body or to government officials or employees who participate in the formulation of legislation or other orders. Grass Roots lobbying includes efforts directed at inducing or encouraging members of the public to contact their elected representatives at the Federal, State or local levels to urge support of, or opposition to, proposed or pending legislative proposals.

Maintenance of Effort: A requirement contained in authorizing legislation, regulation stating that to receive Federal grant funds a recipient must agree to contribute and maintain a specified level of financial effort for the award from its own resources or other non-Federal sources. This requirement is typically given in terms of meeting a previous base-year dollar amount.

Memorandum of Understanding (MOU) / Memorandum of Agreement (MOA): is a document describing a bilateral or multilateral agreement between parties.It expresses a convergence of will between the parties, indicating an intended common line of action. It is often used in cases where parties either do not imply a legal commitment or in situations where the parties cannot create a legally enforceable agreement.

New FOA: Any FOA that is not a continuation or supplemental award.

Non-Governmental Organization: A non-governmental organization (NGO) is any non-profit, voluntary citizens' group which is organized on a local, national or international level.

Notice of Award: The only binding, authorizing document between the recipient and CDC confirming issue of award funding. The NoA will be signed by an authorized Grants Management Officer, and provided to the recipient fiscal officer identified in the application.

Objective Review: A process that involves the thorough and consistent examination of applications based on an unbiased evaluation of scientific or technical merit or other relevant aspects of the proposal. The review is intended to provide advice to the individuals responsible for making award decisions.

OGC: Office of the General Counsel (OGC) is the legal team for the Department of Health and Human Services (HHS), providing representation and legal advice on a wide range of national issues. OGC supports the development and implementation of HHS's programs by providing legal services to the Secretary of HHS and the organization's various agencies and divisions.

Outcome: The observable benefits or changes for populations and/or public health capabilities that will result from a particular program strategy.

Performance Measures: Performance measurement is the ongoing monitoring and reporting of program accomplishments, particularly progress toward pre-established goals. It is typically conducted by program or agency management. Performance measures may address the type or level of program activities conducted (process), the direct products and services delivered by a program (outputs), or the results of those products and services (outcomes). A "program" may be any activity, project, function, or policy that has an identifiable purpose or set of objectives.

Plain Writing Act of 2010: The Plain Writing Act requires federal agencies to communicate with the public in plain language to make information and communication more accessible and understandable by intended users, especially people with limited health literacy skills or limited English proficiency. www.plainlanguage.gov

Procurement and Grants Office (PGO): PGO is the only entity within CDC which can obligate federal funds. PGO provides non-programmatic management for all CDC financial assistance activities (grants and cooperative agreements) and manages and awards all CDC contracts.

Program Strategies: Public health interventions or public health capabilities.

Program Official: The person responsible for developing the FOA – whether a project officer, program manager, branch chief, division leadership, policy official, center leadership, or similarstaff member.

Project Period Outcome: An outcome that will result by the end of the FOA period of funding.

SAM: The System for Award Management (SAM) is the primary vendor database for the U.S. Federal Government. SAM validates applicant information and electronically shares the secure and encrypted data with the Federal agencies' finance offices to facilitate paperless payments through Electronic Funds Transfer (EFT). The SAM stores organizational information, allowing www.grants.gov to verify your identity and to pre-fill organizational information on grant applications.

Statute: An act of a legislature that declares, proscribes, or commands something; a specific law, expressed in writing. A statute is a written law passed by a legislature on the state or federal level. Statutes set forth general propositions of law that courts apply to specific situations.

Statutory Authority: A legal statute that provides the authority to establish a Federal financial assistance program or award.

Technical Assistance: The providing of advice, assistance, and training pertaining to the development, implementation, maintenance, and/or evaluation of programs.

Work Plan: The summary of annual strategies and activities, personnel and/or partners who will complete them, and the timeline for completion. The work plan will outline the details of all necessary activities that will be supported through the approved budget.