QUESTIONS AND ANSWERS

INFORMATIONAL CALL – IP21-2107

11 JANUARY 2021

Q1. For media flyers and campaign materials, will we be expected to link to the CDC Communications only as in one of our other activities?

A1. While CDC has generic materials available to share, tailored messages for specific audiences may be more impactful. Recipients may use and disseminate CDC materials. We are looking for organizations that could take the messaging and develop products that are tailored to the populations they serve.

Q2. Can CDC's State and Community Health Media Center accept media in the form of social media links (e.g., Facebook Twitter)?

A2. The Media Center has a review process that may or may not accept all submitted materials. Recipients are strongly encouraged to share content with the Media Center, including social media content.

Q3. Will CDC's State and Community Health Media Center assist with opening doors to mainstream media?

A3. CDC's State and Community Health Media Center is an online repository of advertisements and marketing materials produced by state and local health departments, nonprofit organizations, and federal agencies. While CDC cannot guarantee opening doors to mainstream media, this funding opportunity is intended to engage organizations with deep knowledge and relationships with racial and/or ethnic groups experiencing disparities in adult vaccination – in turn, deepening organizational partnerships to better articulate the issue and promising approaches to addressing the issue.

Q4. If we want to subcontract a particular component of this grant, is that acceptable?

A4. Yes, this is acceptable. If you choose to subcontract, please specify the following in your application: subcontractor, subcontracted activities, and rationale for subcontracting.

Q5. Since this funding opportunity is non-competitive, does that mean that if all five organizations submit successful applications, all five will be funded?

A5. Yes, if all five organizations submit applications meeting the application requirements, all five organizations will be funded.

Q6. If the total funding request is more than the money you have, will some applications not be funded, or will all award amounts be reduced?

A6. All five eligible organizations' applications meeting the requirements will be funded. We suggest that you craft your proposal around the $333,333 as an estimate of the scope and size of this project. The actual award amounts are subject to availability of funds.

Q7. If two of the eligible organizations partner, could they apply for a higher amount than the $333,333?

A7. Yes, although final decisions on the award amount in this instance would depend on a sound proposal that provides a rationale for the partnership between eligible organizations, including roles and responsibilities of each organization.

Q8. Is the award is $333,333 per year or over 5 years?

A8. $333,333 is the estimated award amount for each organization for one year.

Q9. Will an outside evaluator offer added credibility to one's application?

A9. While is acceptable to include an outside evaluator in your application, we recommend you focus on meeting the requirements of the application, given the quick application turnaround time. All successful applications from eligible organizations will be funded.

Q10. I believe there was a requirement to be a "national association"? We are a nonprofit leading a coalition of free and charitable clinics in states across the country working on vaccine uptake in underserved communities. Would we meet the requirement?

A10. There are five organizations that are eligible to apply for this funding opportunity: National Medical Association, National Hispanic Medical Association, National Black Nurses Association, Association of American Indian Physicians, and National Council of Urban Indian Health.

Q11. We have work agreements with several organizations that we expect to work with on this grant, but we don't have time to get letters of support from them. As long as we don't write them into the budget, is it okay to refer to these groups in the project narrative?

A11. You can describe the organizations in the narrative. If you intend to provide funding to them, you should include that in the budget. We understand that you won't have time to get letters of support for all, but you can provide those with the final revised proposal that gets generated after the technical reviews are completed. You should include a list of organizations in the appendix and indicate that letters of support will be provided later.

Q12. In addition to the main focus being on COVID-19 and flu vaccinations, would a secondary focus on other vaccinations, such as Tdap, be appropriate?

A12. We suggest focusing entirely on COVID-19 and flu for this first year. There will be opportunities to expand to encompass the other vaccines in future project years.

Q13. How do we list what Congressional districts we will be working in when we expect to work nationwide? Should we just list where our headquarters is?

A13. Yes, you may indicate your headquarters location and list that district.

Q14. The NOFO asks for a table of contents for the project narrative, and in another spot asks for a table of contents for the entire submission. Would a table of contents for just the narrative be acceptable?

A14. Please create a table of contents for the entire submission and you can include in that subheadings for the components of the narrative as applicable.

Q15. I have a couple of questions to make sure we are properly addressing funds tracking and funding preference deliverables, as well as a question about the Lobbying Disclosure form to make sure that we are filling that out absolutely correctly. But these may not be part of the technical review, so may not be as high a priority. Am I right that the technical review will just look at the narrative and budget elements?

A15. Before the proposal is released for technical review, there is an overall review to make sure all the required components are included (as specified in the NOFO). If you omit a component (e.g., lobbying disclosure), the application may be considered incomplete. We suggest working through the questions related to those components before submission.

JANUARY 2021

Partnering with Professional and Medical Associations to Increase Vaccination Coverage Across Different Racial and Ethnic Adult Populations Currently Experiencing Disparities

CDC – RFA – IP21 – 2107

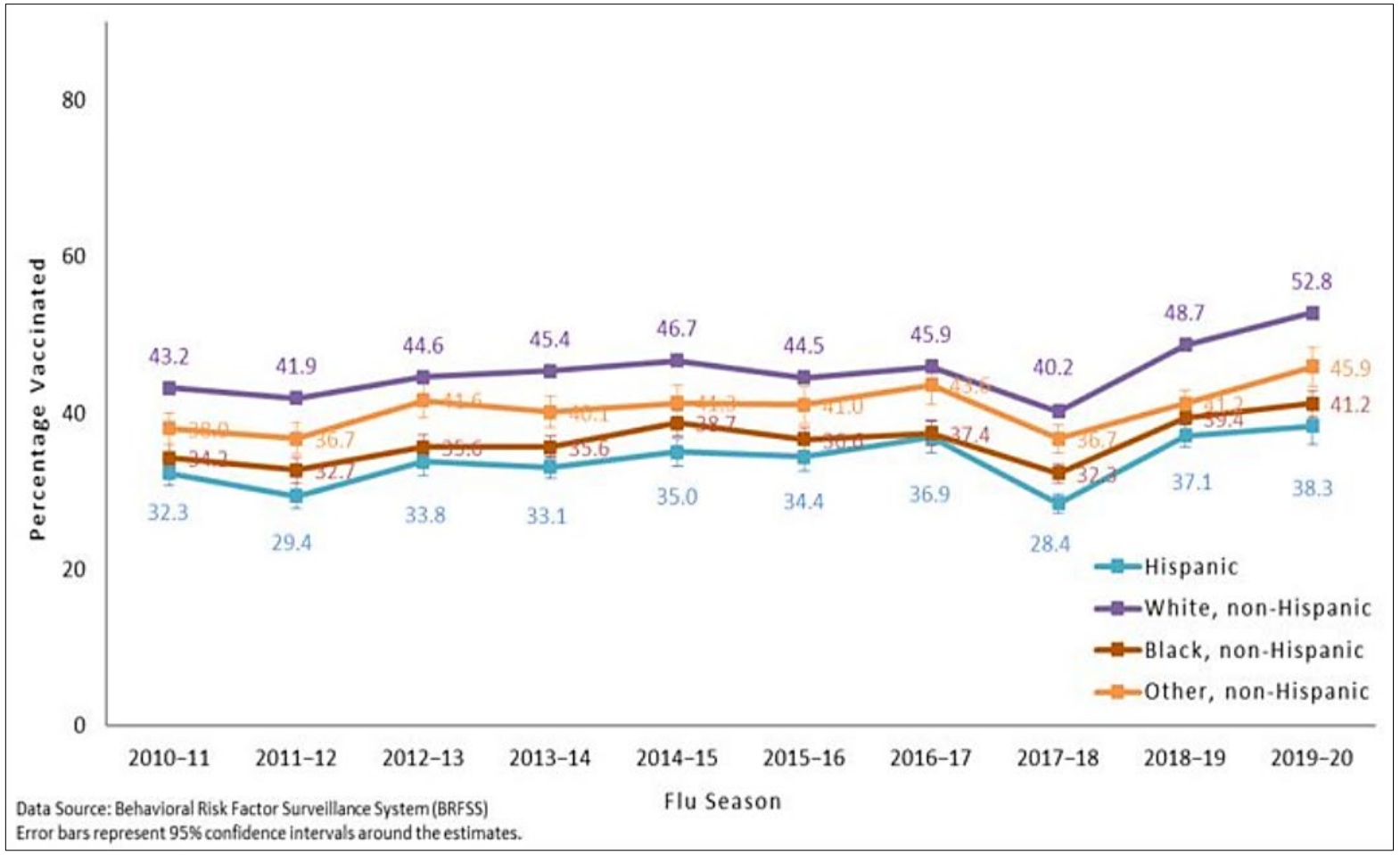
Due January 19, 2021

Today’s objectives

- Provide applicants **background** on the funding opportunity and program
- Describe **key components** of the award
- Outline **key milestones and logistics** for application
- Answer **questions** and **review key dates** for application

Background

Adult vaccination coverage remains low nationally, and significant disparities exist among certain racial and ethnic groups.



- ✓ **Lower flu vaccination coverage** among Black (41.2%) and Hispanic (38.3%) adults aged >19 years compared to white adults (52.8%) in 2019-2020[1]
- ✓ Among adults aged >19 years with **high-risk conditions**, flu vaccination coverage lower among Black (54.9%) and Hispanic adults (52.0%) compared to white adults (61.4%)[2]

*Other includes Asian, American Indian/Alaska Native, and multiple race.

Source: 1. Centers for Disease Control, "Flu Vaccination Coverage, United States, 2019-20 Influenza Season," October 1, 2020, https://www.cdc.gov/flu/fluvaxview/coverage-1920estimates.htm
2. Vaccination Coverage among Adults in the United States, National Health Interview Survey, CDC, 2017.

Even as the influenza vaccination coverage rate across groups has increased, the disparity remains.

Estimated Influenza Vaccination Coverage Among US Adults by Race and Ethnicity of 2017-2018 and 2018-2019 Influenza Seasons

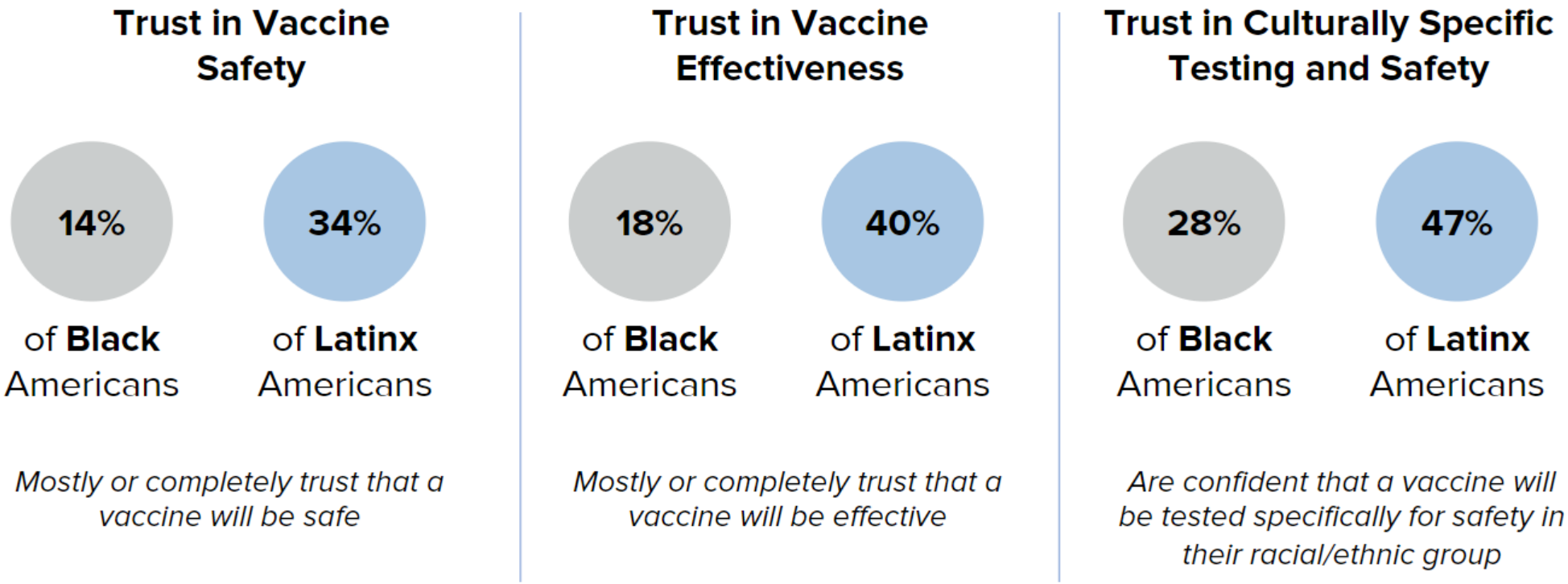
	Vaccination coverage, %	
Group	2017-2018	2018-2019
Overall	37.1	45.3
Non-Hispanic		
White	40.2	48.7
Black	32.3	39.4
Hispanic	28.4	37.1
Asian	42.0	44.0
American Indian/Alaskan Native	33.1	37.6
Other or multiple races	32.4	39.7

Source: Grohskopf LA, Liburd LC, Redfield RR. Addressing Influenza Vaccination Disparities During the COVID-19 Pandemic. *JAMA*. Published online August 20, 2020. doi:10.1001/jama.2020.1584

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The groups experiencing flu vaccination disparities are also disproportionately affected by COVID-19; ensuring their trust in the COVID-19 vaccine's safety and efficacy is essential.

This survey is based on a national assessment around trust in the upcoming COIVD-19 vaccine.



LANGER RESEARCH ASSOCIATES
SURVEY RESEARCH DESIGN · MANAGEMENT · ANALYSIS

UNIDOSUS
STRONGER COMMUNITIES. STRONGER AMERICA.

NAACP

COVID Collaborative

Source: COVID Collaborative. Coronavirus Vaccine Hesitancy in Black and Latinx Communities. November 2020.

Notice of Funding Opportunity (NOFO) Overview

NOFO Goal

CDC seeks to build the evidence base of effective interventions to **improve vaccination coverage** and to identify and implement strategies to **reduce racial and/or ethnic disparities** in adult vaccination coverage.

NOFO Focus Areas

During the performance period, the applicant is expected to build and implement infrastructure/capacity for flu and COVID-19 vaccination activities and carry out those activities, including identifying individual(s) within the applicant organization to address three focus areas.

1. **Develop strategies and resources for individual clinics providing health care**

   Develop, implement, and disseminate strategies and resources to address clinicians' roles in reducing racial and/or ethnic disparities in adult vaccination coverage (messaging, trainings, and materials with a racial/ethnic equity or health equity perspective)

2. **Develop strategies and resources for health care organizations**

   Develop, implement, and disseminate strategies and resources to address the health care organizations' role in reducing racial and/or ethnic disparities in adult vaccination coverage (e.g., recommended processes or practical guidance to members for improving equity in vaccine administration engagement of community health workers in trainings and creation of materials)

3. **Enhance the resource and evidence base**

   Collaborate with the Learning Hub, Data-Informed Technical Assistance, and Media Center to review, modify, and improve resources

CDC is focused on building a community of organizations that can try and scale effective approaches.



Learning Hub

The **Learning Hub** offers technical assistance, coaching, learning opportunities, and synthesized, organized resources.

Recipients of the award may be asked to share materials, insights, or learning opportunities with the Learning Hub.



State and Community Health Media Center

CDC's State and Community Health **Media Center** is an online repository of advertisements and marketing materials produced by state and local health departments, nonprofits organizations, and federal agencies.

Recipients may be expected to share materials they develop or refine, as relevant.



Data-Informed Technical Assistance

The **Data-Informed Technical Assistance** provides the program with data and data-use orientations, self-service data analysis, and office hours for data-related questions and needs.

CDC will assess progress through performance indicators, which recipients will report monthly.

Focus Area A: Develop strategies and resources for individual clinicians providing health care

- Numbers, types, reach, and channels used for sharing information among providers
- Numbers, types, and reach of guidance, resources and/or messaging developed
- Major successes and challenges

Focus Area B: Develop strategies and resources for health care organizations

- Number, types, and reach of strategies developed to engage priority actors in health care organizations
- Numbers, types, and reach of guidance, resources, and/or messaging developed
- Numbers, types, and reach of trainings
- Major successes and challenges

Focus Area C: Enhance the resource and evidence base

- Types of practices, learnings, and/or insights shared

Here's the important information to know about the process.

- Application process
  - Application must be successfully submitted to Grants.gov by **January 19, 2021**, 11:59 p.m. Eastern Daylight Time
  - Applicants will be notified by phone if they are selected
  - Anticipate award date is **February 1, 2021**
- In the interim, feel free to reach out with any questions to the contacts provided at the end of these slides

Additional information to help with your application.

- This application is **non-competitive**
- The estimated award is approximately **$330,000** for one year; the exact amount is subject to availability of funds and the number of eligible organizations that apply and are awarded
- An LOI is **not required** for this opportunity

You must obtain a DUNS number and SAM account on Grants.gov before applying.

1. Apply for a Data Universal Number System (DUNS) number. **This will take 1–2 days.**
2. Register a SAM Account by designating an E-Biz POC. **This can take 3–5 days** and must be done before applicants can register in the Grants.gov system.
3. Use your DUNS number to register an authorized organization representative (AOR). This should be the person who will submit the application on behalf of your organization. **This can range from same day to multiple weeks, so REGISTER EARLY.**
4. *Once the E-Biz POC has received email notification of successful AOR registration,* log in to Grants.gov and complete/submit your application.

Here are some immediate next steps.

- Use the DUNS number to ensure that the **personnel who will be submitting an application on behalf of your organization is registered** as an Authorized Organization Representative (AOR) in the system
- Once the E-Biz POC (assigned from) has received **email notification of successful AOR registration**, you will be able log in to Grants.gov and complete/submit your application
- We are available to assist organizations not yet registered to take the necessary action to ensure timely and complete application submission

We are here to support you during the application process.

- Fiscal Contacts:
  - Grants Management Specialist: Wayne Woods (kuv1@cdc.gov)
  - Grants Management Officer: Freda Johnson (wve2@cdc.gov)
- Programmatic Contacts:
  - Ram Koppaka (vcr4@cdc.gov)
  - Carla Andrews (carandrews@deloitte.com)

Q&A

Thank you for your participation.



Appendix

A reminder on steps required to apply.

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 follow the instructions to obtain your DUNS 9-digit # 4. Request appropriate staff member(s) to obtain DUNS number, verify and 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 (CCR)*	1. Retrieve organizations DUNS number 2. Go to https://www.sam.gov/SAM/ and designate an E-Biz POC (note CCR username will 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 https://fsd.gov/ fsd-gov/ home.do or call: 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, log into grants.gov using the password the E-BIZ POC received and create new password 3. This authorizes the AOR to submit applications on behalf of the organization	Same day but can take 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

Applicants must obtain a DUNS number and SAM account before applying for the NOFO. Please be sure to take these steps immediately to ensure timely application.