CDC-RFA-OT16-16010401SUPP19:
Strengthening the Public Health System in the U.S.-Affiliated Pacific Islands

FY19 CIO Project Plans

YEAR 4 CIO Project Plan Template (FY19)

PACIFIC ISLAND HEALTH OFFICERS' ASSOCIATION (PIHOA) Cooperative Agreement
CDC-RFA-OT16-1601: Strengthening the Public Health System in the US-Affiliated Pacific Islands

GENERAL INFORMATION	
1	**PROJECT TITLE: EVALUATING PRIMARY HPV TESTING IN THE US PACIFIC ISLANDS**
2	**CIO POC name:** Dr. Jin Qin and Dr. Virginia Senkomago **CIO/Division: DDNID/ NCCDPHP/ DCPC** **CIO POC email address:** Dr. Jin Qin – wyv0@cdc.gov ; Dr. Virginia Senkomago – yfz8@cdc.gov **CIO POC telephone number:** Dr. Jin Qin - 770.488.7869 ; Dr. Virginia Senkomago – 404.718.6369
3	**TARGET POPULATION CATEGORY:** *(CHECK ONE BOX)* ☒ **Health Department/Health Ministry:** This category is focused on meeting agency-level capacity-building assistance needs of territorial health departments ☐ **Workforce Segment:** This category is focused on meeting the capacity-building assistance needs of a workforce segment across territorial health departments ☐ **Other Component of the Public Health System:** This category is focused on meeting the priority capacity-building assistance needs of a nongovernmental component of the public health system.
4	**TARGET POPULATION DESCRIPTION (What public health system target population will receive the capacity-building assistance?):** This project aims to build capacity for healthcare delivery for expanded cervical cancer screening and precancer treatment based on primary HPV testing in two US affiliated Pacific Island Jurisdictions (USAPIJs). The USAPIJs face unique geographic, socioeconomic, technical, and cultural challenges in providing traditional cervical screening by Pap test, and hence have low screening coverage. In 2018, the US Preventive Service Task Force approved the use of primary HPV testing for cervical cancer screening – this new screening strategy may overcome many access and participation barriers for women living on USAPI. This project aims to increase the jurisdictions' capacity in implementing this new screening strategy by providing technical assistance, improving healthcare delivery infrastructure (e.g., medical and laboratory procedures), providing medical training (e.g., hrHPV testing, colposcopy, biopsy, and cancer management), developing communication materials, and enhancing data collection and management system.The evaluation will be conducted in Guam and the Common Wealth of the Northern Mariana Islands (CNMI) – lessons learned from these two jurisdictions will guide the implementation of primary HPV testing in other USAPI jurisdictions.

PROJECT FUNDING

OT16-1601 Period of Performance: July 1, 2016–June 30, 2021
Budget Period: August 1, 2019–June 30, 2020

5 **Proposed Project Funding:**

$_____ 802,578 _____ **(Use whole numbers only)**

6 **Expected Length of Project (Check one):***

☒ **The CIO will award new funding each budget period for the remainder of the period of performance (2 years remaining).**

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

(Note: Proposed Project Funding is for an 11-month budget period. Estimated budget period: August 1, 2019–June 30, 2020)

CAPACITY-BUILDING ASSISTANCE PROGRAM APPROACH

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

7 **PROGRAM STRATEGIES THAT RELATE TO THE NOTICE OF FUNDING OPPORTUNITY (NOFO):** (CHECK ONE OR MORE)

- ☐ **Public Health Leadership**
- ☒ **Public Health Systems and Infrastructure**
- ☐ **Public Health Workforce Segments**
- ☐ **Public Health Laws and Policies**
- ☒ **Evidence-based Public Health Practices and Policies**
- ☒ **Public Health Monitoring and Surveillance Systems**

8 **PROGRAM OUTCOMES THAT RELATE TO NOFO:** (CHECK ONE OR MORE EXPECTED OUTCOMES)

Short-term Outcomes

- ☐ **Enhanced knowledge, skills, and awareness of leaders to support current public health priorities**
- ☒ **Increased implementation of processes that build operational efficiency and effectiveness**
- ☐ **Increased knowledge, skills, and competencies among public health workers**
- ☐ **Increased awareness of how laws and policies impact the public's health**
- ☒ **Increased capacity to assess evidence-based public health practices and services for cultural relevance**
- ☐ **Increased knowledge and capacity to develop national health data systems and registries**

Intermediate Outcomes

- ☐ **Increased capacity of leadership to execute strategic plans, policy formulation, and program implementation**
- ☐ **Increased use of performance management systems to monitor and evaluate operational processes**
- ☐ **Strengthened workforce qualifications, performance, and service delivery**
- ☐ **Increased practical, legal- and policy-centered tools and resources for public health practitioners in health departments**
- ☒ **Enhanced capacity to integrate and coordinate culturally relevant practices and services across multiple settings**
- ☒ **Improved collection, maintenance, interpretation, and dissemination of population health data**

PROJECT DETAILS

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

- Select the program strategies, describe proposed activities, and provide sample process measures to track progress implementing the activities.
- Describe the expected outputs (resources, tools, products, etc.) and outcomes (change to occur), and provide sample outcome measures to track progress achieving the outcomes.

9	**Project Purpose (150 words maximum):***	The goal of the project is to provide technical assistance in building capacity to expand current cervical cancer screening using primary HPV testing and treatment in CNMI and Guam. Primary HPV testing is a new cervical cancer screening strategy that was recently recommended by the US Preventive Service Task Force. Samples for HPV testing can be collected by women themselves (self-collection) – this strategy of screening could overcome some of the personnel and geographical challenges screening programs in the USAPI are currently facing with Pap-based screening, and increase cervical cancer screening coverage. This project aims to reach more women than currently served by the National Breast and Cervical Cancer Early Detection Proram (NBCCEDP) and beyond, and will emphasize the development of the local capacity in implementing the new screening strategy and to be self-sustainable. If successful, this approach then could be deployed to other USAPI populations to improve cervical screening coverage.

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Program Strategies	Activities	Process Measures	Outputs	Budget Period Outcomes	Outcome Measures
Public Health Leadership					
Public Health Systems and Infrastructure	Setting up infrastructure for implemental primary HPV testing (e.g. necessary medical and laboratory procedures, medical training, information system, and equipment procurement)	• Hours of training provided • Established procedures and algorithms • Times for completion of screening and follow-up among those with abnormal results	Increased capacity to screening women with primary HPV testing	Increased capacity to screening women with primary HPV testing	
Public Health Workforce Segments					
Public Health Laws and Policies					

	Evidence-based Public Health Practices and Policies	• Establish collaborations between NBCCEDP, laboratories, and healthcare delivery system to streamline cervical cancer screening using primary HPV testing • Develop culturally-appropriate communication materials for community outreach	• • Established operating procedures for HPV sample collection, lab testing, and follow-up • Communcation materials developed • Time and type of outreach activites conducted	Increased cervical cancer screening coverage through NBCCEDP	Increased cervical cancer screening coverage through NBCCEDP	
	Public Health Monitoring and Surveillance Systems	• Incorporate data on primary HPV testing into the NBCCEDP screening database • Examine cost-effectiveness of primary HPV testing for cervical cancer screening	• Number of women screened with HPV testing • Cost-effectiveness of primary HPV testing compared to other screening strategies	• Enhanced data monitoring capacity of screening surveillance • Utilization of most cost-effective method for cervical cancer screening in Pacific Islands	Improved capacity in NBCCEDP database management	

11	**RECIPIENT ORGANIZATIONAL CAPACITY REQUIRED FOR PROJECT (MAXIMUM OF 500 WORDS):** This project requires the existence of National Breast and Cervical Cancer Early Detection Program (NBCCEDP) in the USAPI jurisdictions where it will be implemented. The NBCCEDPs must have at least 2 dedicated staff personnel working on the project. The existence of mobile vans for outreach to increase cervical cancer screening is a plus.
12	**RECIPIENT PROGRAM EXPERIENCE REQUIRED FOR PROJECT (MAXIMUM OF 500 WORDS):** The NBCCEDPs in the USAPI jurisdictions where this project is to be implemented must have at least 5 years of experience and data in screening women for cervical cancer so as to provide historical data to evaluate screening coverage when primary HPV testing is introduced.

COLLABORATIVE WORK

13	**EXPECTATIONS FOR COLLABORATION, IF APPLICABLE (MAXIMUM OF 300 WORDS):** We expect to collaborate fully with PIHOA and the USAPI jurisdictions in conducting this project including engaging in key meetings with USAPI stakeholders, contractors and subcontractors, discussing communication materials produced, discussing any changes to the project implementation, review of outcomes and partner in dissemination of findings.
14	**EXPECTED SUBCONTRACTUAL WORK AND RECOMMENDED CRITERIA FOR IDENTIFYING/SELECTING SUBCONTRACTORS, AS APPLICABLE (MAXIMUM OF 300 WORDS):** We expect that PIHOA will contract and subcontract work to key partners with expertise in developing communication materials on HPV, managing the testing of HPV samples from the USAPI jurisdictions and conducting cost-effectiveness analyses.

BUDGET INSTRUCTIONS

15	**GENERAL INSTRUCTIONS FOR USE OF FUNDS, IF APPLICABLE (MAXIMUM OF 300 WORDS):**

CIO CERTIFICATION

16	**By submitting this project plan, I certify that my CIO unit currently <u>does not</u> manage a comparable NOFO related to this capacity-building assistance program.** **I understand it is my CIO's responsibility to pursue Paperwork Reduction Act (PRA) and Office of Management and Budget (OMB) clearance for this project. I will discuss the project with my Associate Director for Science and initiate the appropriate clearance prior to funding.**

YEAR 4 CIO Project Plan Template (FY19)

PACIFIC ISLAND HEALTH OFFICERS' ASSOCIATION (PIHOA) Cooperative Agreement
CDC-RFA-OT16-1601: Strengthening the Public Health System in the US-Affiliated Pacific Islands

GENERAL INFORMATION	
1	**PROJECT TITLE:** A strategic initiative to support strengthening laboratory management through development of a gap analysis and sustainability of the laboratory capacity in the USAPI
2	**CIO POC name:** Lorine Spencer **CIO/Division:** CSTLTS **CIO POC email address:** akx4@cdc.gov **CIO POC telephone number:** 770-488-1524
3	**TARGET POPULATION CATEGORY:** *(CHECK ONE BOX)* ☒ **Health Department/Health Ministry:** This category is focused on meeting agency-level capacity-building assistance needs of territorial health departments ☒ **Workforce Segment:** This category is focused on meeting the capacity-building assistance needs of a workforce segment across territorial health departments ☐ **Other Component of the Public Health System:** This category is focused on meeting the priority capacity-building assistance needs of a nongovernmental component of the public health system.
4	**TARGET POPULATION DESCRIPTION (What public health system target population will receive the capacity-building assistance?):** **The USAPI leadership, laboratories, laboratory staff, other affiliated staff and partners serving the territories and affiliated states in the USAPI.**

PROJECT FUNDING

OT16-1601 Period of Performance: July 1, 2016–June 30, 2021
Budget Period: August 1, 2019–June 30, 2020

5 **Proposed Project Funding:**

$ 500,000 (Use whole numbers only)

6 **Expected Length of Project (Check one):***

x☐ **The CIO will award new funding each budget period for the remainder of the period of performance (2 years remaining).**

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

(Note: Proposed Project Funding is for an 11-month budget period. Estimated budget period: August 1, 2019–June 30, 2020)

CAPACITY-BUILDING ASSISTANCE PROGRAM APPROACH

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

7 **PROGRAM STRATEGIES THAT RELATE TO THE NOTICE OF FUNDING OPPORTUNITY (NOFO):** (CHECK ONE OR MORE)

- ☐ **Public Health Leadership**
- x☐ **Public Health Systems and Infrastructure**
- x☐ **Public Health Workforce Segments**
- ☐ **Public Health Laws and Policies**
- ☐ **Evidence-based Public Health Practices and Policies**
- ☐ **Public Health Monitoring and Surveillance Systems**

8 **PROGRAM OUTCOMES THAT RELATE TO NOFO:** (CHECK ONE OR MORE EXPECTED OUTCOMES)

Short-term Outcomes

- x☐ **Enhanced knowledge, skills, and awareness of leaders to support current public health priorities**
- x☐ **Increased implementation of processes that build operational efficiency and effectiveness**
- x☐ **Increased knowledge, skills, and competencies among public health workers**
- ☐ **Increased awareness of how laws and policies impact the public's health**
- ☐ **Increased capacity to assess evidence-based public health practices and services for cultural relevance**
- ☐ **Increased knowledge and capacity to develop national health data systems and registries**

Intermediate Outcomes

- ☐ **Increased capacity of leadership to execute strategic plans, policy formulation, and program implementation**
- ☐ **Increased use of performance management systems to monitor and evaluate operational processes**
- x☐ **Strengthened workforce qualifications, performance, and service delivery**
- ☐ **Increased practical, legal- and policy-centered tools and resources for public health practitioners in health departments**
- ☐ **Enhanced capacity to integrate and coordinate culturally relevant practices and services across multiple settings**
- x☐ **Improved collection, maintenance, interpretation, and dissemination of population health data**

PROJECT DETAILS

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

- Select the program strategies, describe proposed activities, and provide sample process measures to track progress implementing the activities.
- Describe the expected outputs (resources, tools, products, etc.) and outcomes (change to occur), and provide sample outcome measures to track progress achieving the outcomes.

9	**Project Purpose (150 words maximum):***	**The PIHOA laboratory coordination is a recognized vital activity for maintaining and expanding the laboratory capabilities in the USAPI. The USAPI laboratories struggle to implement comprehensive public health and clinical laboratory capabilities due to the geographic separation and associated workforce and training challenges. Additionally ensuring consistent quality standards and practices are a key priority for the USAPI which includes affiliated states that are not covered by the US laboratory regulations (CLIA). Conducting a gap analysis and developing a plan for sustainability will strengthen the infrastructure, systems and workforce with the ultimate goal of a quality sustained lab capacity in the USAPI.**

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Program Strategies	Activities	Process Measures	Outputs	Budget Period Outcomes	Outcome Measures
Public Health Leadership					
Public Health Systems and Infrastructure	**Utilizing the PIHOA Lab Strategic plan as a foundation to develop a gap analysis of needs to build & sustain an effective and efficient lab capacity infrastructure and systems in the USAPI**	**1.Identify appropriate partners federal-DOD, FDA, PACOM, others - including leadership and laboratory staff in USAPI 2.Develop a process & list of questions to identify gaps 3.Convene/interview likeminded appropriate partners, USAPI staff and other appropriate individuals to develop a gap analysis &**	**1.Report outlining the gaps in lab capacity for the USAPI including infrastructure (equipment, quality control systems & timeline needed, budget, agencies that may be and systems 2.Recommendations for sustainability of the USAPI lab capacity**	**1.Report on gaps in USAPI laboratory capacity infrastructure & systems 2. Recommendations for how to sustain quality lab capacity infrastructure & systems in the USAPI**	**Sustained quality lab capacity infrastructure & systems in the USAPI**

			recommendations for sustainability 4.Timeline for obtaining a gap analysis 5.Timeline for a report on sustainability 6. Action plan for implementation to include funding and appropriate agencies for same			
	Public Health Workforce Segments	Utilizing the PIHOA Lab Strategic plan as a foundation to identify training needs to build lab capacity in the USAPI	1.Gap analysis & recommendations to Include workforce needs and training needed	1. Gap analysis and recommendations for workforce needed to sustain quality lab capacity in the USAPI i.e. training needs, mode of training, appropriate agencies to conduct training, etc. 2.Action plan to include training needs, appropriate agencies, mode of delivery and budget.	1.Report on gaps in USAPI laboratory capacity workforce 2.Recommendations for how to sustain quality lab capacity workforce in the USAPI	Sustained quality lab capacity workforce in the USAPI
	Public Health Laws and Policies					
	Evidence-based Public Health Practices and Policies					
	Public Health Monitoring and Surveillance Systems					

11	**RECIPIENT ORGANIZATIONAL CAPACITY REQUIRED FOR PROJECT (MAXIMUM OF 500 WORDS):** The recipient should have KSAs and familiarity with the USAPI. Have understanding of the unique barriers that face the USAPI. Staff and contracters who are familiar with the cultural diversity in the USAPI.
12	**RECIPIENT PROGRAM EXPERIENCE REQUIRED FOR PROJECT (MAXIMUM OF 500 WORDS):** Ability to conduct a gap analysis and sustainability plan. Abillity to work with the USAPI on site and long distance to complete the analysis. Ability to collaborate with diverse partners i.e. federal agencies, regaional commissions, USAPI staff and leadership and others. Ability to convene large meetings and conduct focus group interviews via phone.
	COLLABORATIVE WORK
13	**EXPECTATIONS FOR COLLABORATION, IF APPLICABLE (MAXIMUM OF 300 WORDS):** Expectation is to collaborate with CDC CIOs providing support to the lab capacity initiatives in USAPI. Collaborate with organizations currently working with the USAPI on lab capacity. Collaborate with federal agencies who have a stake in the lab capacity in the USAPI i.e. FDA, DOD, SPC, PACOM and others. Recipient may sub-contract work as needed.
14	**EXPECTED SUBCONTRACTUAL WORK AND RECOMMENDED CRITERIA FOR IDENTIFYING/SELECTING SUBCONTRACTORS, AS APPLICABLE (MAXIMUM OF 300 WORDS):** Recipient may sub-sontract work to contractors familiar with the USAPI unique barriers and culture. Contractor may convene & conduct meetings, collect information, prepare the gap analysis and recommendations for sustainability report.
	BUDGET INSTRUCTIONS
15	**GENERAL INSTRUCTIONS FOR USE OF FUNDS, IF APPLICABLE (MAXIMUM OF 300 WORDS):**
	CIO CERTIFICATION
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CDC-RFA-OT16-1601: Strengthening the Public Health System in the US-Affiliated Pacific Islands

GENERAL INFORMATION	
1	**PROJECT TITLE: Pacific Pathways Program: Building Public Health Capacity in the USAPI**
2	**CIO POC name: Elizabeth Davlantes** **CIO/Division: CSTLTS/OIA** **CIO POC email address: lyo2@cdc.gov** **CIO POC telephone number: 404-718-4795**
3	**TARGET POPULATION CATEGORY:** *(CHECK ONE BOX)* ☒ **Health Department/Health Ministry:** This category is focused on meeting agency-level capacity-building assistance needs of territorial health departments ☐ **Workforce Segment:** This category is focused on meeting the capacity-building assistance needs of a workforce segment across territorial health departments ☐ **Other Component of the Public Health System:** This category is focused on meeting the priority capacity-building assistance needs of a nongovernmental component of the public health system.
4	**TARGET POPULATION DESCRIPTION (What public health system target population will receive the capacity-building assistance?):** **USAPI HDs: Help build public health systems capacity and technical expertise in the USAPI, increase public health workforce capacity in the USAPI** **USAPI native youth: Inspire USAPI native youth to pursue public health careers locally, provide intensive hands-on training and mentorship in public health to USAPI youth**

PROJECT FUNDING

OT16-1601 Period of Performance: July 1, 2016–June 30, 2021
Budget Period: August 1, 2019–June 30, 2020

5 **Proposed Project Funding:**

$ 200,000 (Use whole numbers only)

6 **Expected Length of Project (Check one):***

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

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- ☐ **Evidence-based Public Health Practices and Policies**
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8 **PROGRAM OUTCOMES THAT RELATE TO NOFO:** (CHECK ONE OR MORE EXPECTED OUTCOMES)

Short-term Outcomes

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Intermediate Outcomes

- ☐ **Increased capacity of leadership to execute strategic plans, policy formulation, and program implementation**
- ☐ **Increased use of performance management systems to monitor and evaluate operational processes**
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☐ **Improved collection, maintenance, interpretation, and dissemination of population health data**

PROJECT DETAILS

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9	**Project Purpose (150 words maximum):***	Place USAPI youth in positions in local health departments for 2 years and provide training and mentorship to grow their public health skills. Benefits will be to help build public health systems capacity and technical expertise in the USAPI, increase public health workforce capacity in the USAPI, and inspire USAPI native youth to pursue public health careers locally

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Program Strategies	Activities	Process Measures	Outputs	Budget Period Outcomes	Outcome Measures
Public Health Leadership					
Public Health Systems and Infrastructure					
Public Health Workforce Segments	**Place USAPI youth in USAPI HDs. Provide training and mentorship.**	**Completion of specific learning milestones defined by OIA, attending regular training events**	**Increased PH capacity among USAPI native youth, increased PH workforce**	**6 fellows (one per USAPI jurisdiction) to complete half of assigned milestones in the first year**	**Evidence of additional PH capacity at the HD level**
Public Health Laws and Policies					
Evidence-based Public Health Practices and Policies					

	Public Health Monitoring and Surveillance Systems					

11 **RECIPIENT ORGANIZATIONAL CAPACITY REQUIRED FOR PROJECT (MAXIMUM OF 500 WORDS):**

- Select fellows for the Pacific Pathways program according to eligibility criteria specified by CSTLTS
  - CSTLTS will provide input to the selection of fellows
  - Jurisdictions can also help select
- Pay fellows salaries commensurate with health department staff in the USAPI (~$15,000 yearly). Benefits also included
  - Limited funding for relocation may be provided on a case-by-case basis
- Designate a supervisor/mentor outside the local jurisdiction health department (within the NGO partner organization or subcontracted) to support each fellow over 2 years
- Plan monthly training opportunities (remotely/via Zoom) for all Pacific Pathways fellows to provide in-depth instruction on diverse public health topics
- Plan and fund travel to one in-person training opportunity each year for all fellows to network. The in-person training opportunity should focus on issues and needs specific to the USAPI
- Monitor fellows' progress throughout the program, including completion of specific milestones (can be designated by CDC) and quarterly activity reports
  - NGO partner supervisors to provide specific, actionable feedback on milestone progress and activity reports during individual mentorship meetings that should occur at least monthly.

12 **RECIPIENT PROGRAM EXPERIENCE REQUIRED FOR PROJECT (MAXIMUM OF 500 WORDS):**

- **Experience mentoring students and HDs.**
- **Experience planning PH training courses, both remote and in-person.**

COLLABORATIVE WORK

13 **EXPECTATIONS FOR COLLABORATION, IF APPLICABLE (MAXIMUM OF 300 WORDS):**

CDC will collaborate with the partner to select and mentor fellows, as needed

14 **EXPECTED SUBCONTRACTUAL WORK AND RECOMMENDED CRITERIA FOR IDENTIFYING/SELECTING SUBCONTRACTORS, AS APPLICABLE (MAXIMUM OF 300 WORDS):**

BUDGET INSTRUCTIONS

15	GENERAL INSTRUCTIONS FOR USE OF FUNDS, IF APPLICABLE (MAXIMUM OF 300 WORDS):

CIO CERTIFICATION

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