FOA: CDC-RFA-OT13-13020401SUPP17

Category A FY16 CIO Project Plans

(7 Project Plans)

Office for State, Tribal, Local and Territorial Support
Partnership Support Unit
Final

FY 2016 CIO PROJECT PLAN
FOA OT13-1302
Building Capacity of the Public Health System
to Improve Population Health through National, Nonprofit Organizations

Project Plan Instructions

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GENERAL INFORMATION	
Grantee name	
Project title* (20 words maximum) Word count 17	Increasing State and Local Public Health Emergency Domestic Response Capacity to Zika: Zika Prevention ...
CIO*	OFFICE OF PUBLIC HEALTH PREPAREDNESS AND RESPONSE
Division*	DIVISION OF STATE AND LOCAL READINESS Other division
CIO POC name(s)* Enter up to 3 names	Andrea Harris Separate 2 or more entries by a semicolon (e.g., John Doe; Jane Doe,)
CIO POC phone number(s)* Enter up to 3 names	404-639-8411 Enter complete phone number(s) and separate 2 or more entries by a semicolon (e.g., (404)555-1212; (404)555-0009)
CIO POC email address(es)* Enter up to 3 names	fdn7@cdc.gov Enter complete email address(es) and separate 2 or more entries by a semicolon (e.g., johndoe@cdc.gov; janedoe@cdc.gov,)
Target population category*	Category A
Target population type*	☑ Local public health department ☐ State public health department ☐ Territorial public health department ☐ Tribal public health department
Target population description* (25 words maximum) Word count 21	2,800 Local Health Departments across the US, including local health officials , Chief Executive Officers and secondary audience of LHD employees.
Proposed project funding*	$400,000
Funded	Unfunded
PROJECT DETAILS	
Project description* (Narrative including goals, expected outputs, outcomes, and general or sample activities; maximum of 1,000 words) Word count 593	

Goal

CDC is providing public health and technical assistance to public sector and non-governmental organizations in response to increased cases of Zika virus within the United States and US island territories. Focus areas for the effort are: public health risk communications, community and partner education, laboratory detection, human vector (mosquito) control, vector surveillance, prevention of transfusion-transmitted Zika virus, and conducting epidemiologic studies to evaluate health outcomes. Zika disease is expected to re-emerge in warmer weather in mid to late 2017. Heightened vigilance is indicated.

The goal of this funding is to ensure the optimal response to prevention and control of Zika disease through the efforts of non-governmental organizations (NGOs). NGOs are uniquely positioned to strengthen Zika response efforts, whether through mobilizing their own constituents or by providing technical assistance to public sector health departments.

Non-governmental organizations have contributed to the quality, efficiency and speed of the Zika response. NGO efforts continue to be needed to bolster Zika prevention efforts.

Outcomes

The general long-term outcome is support of accelerated public health preparedness planning and operational readiness for responding to Zika. Applicants should propose a plan drawing on their unique organizational strengths that can best contribute to this long-term goal.

A first round of funding was awarded to critical NGOs in July 2016 as a supplement to Funding Announcement Opportunity 13-1302 (titled Building Capacity of the Public Health System to Improve Population Health through National, Nonprofit Organizations.). A second round of supplemental funding is to be provided in early 2017 to ensure that these NGOs can complete and further enhance Zika response activities and support state, local, tribal and territorial jurisdictions.

Through this funding, NGOs are working to achieve these outcomes:
- Increased implementation of evidence-based Zika programs, policies and services.
- Increased capacity to meet the national standards of prevention and control of Zika disease.
- Establishment and strengthening of diverse public health partnerships with key constituency groups such as health department officials, epidemiologists and laboratorians
- Dissemination of technical and clinical information, which has been especially critical as Zika recommendations continue to change.

General Project Activities and Outputs

The applicant will propose a coordinated set of activities and outputs that will achieve the greatest impact on Zika prevention and control. Proposed activities and outputs should be designed to align with evidence-based strategies and the most up-to-date Zika guidance. This applicant will propose and further define a set of activities such as:

1. Work with respective stakeholders to gather lessons learned, hold workgroup sessions to conduct After Action Reports (AARs) and implement Improvement Plans (IPs)
2. Develop tools, resources, and/or trainings that address gaps and challenges identified in Improvement Plans.
3. Provide on-site and remote technical assistance and training to strengthen state and local Zika vector control/prevention systems, capabilities, and responses
4. Strengthened Zika content on partners' websites, summarizing lessons learned and successful best practices
regarding laboratory capacity, blood safety, vector control and human and vector surveillance
5. Continued coordination and collaboration with the State Coordination Task Force
a. SCTF Partner Call Check-In participation
b. CDC guidance feedback and input
6. Update organization specific ConOps plans based on Zika response lessons learned
7. Collaborate with CSTE on a joint NGO ConOps plan (when, how, and who to connect with at CDC during a response)
8. Follow-up work based on NACCHO's Vector Control Assessment results & CSTE's Vector & Human Surveillance Assessment results:
Outreach/assistance to jurisdictions regarding vector control gaps and capacity, developing and/or sharing relevant human and vector surveillance, as well as vector control tools and resources, education to jurisdictions related to vector control and human surveillance, and/or follow-up assessment(s)
9. NACCHO/CSTE Coordination to address vector and human surveillance at the state and local level

Program strategies that relate to FOA* (Check one or more)	☑ Public Health Systems and Organizational Improvement	☑ Public Health Workforce
	☐ Public Health Data and Information Systems	☑ Public Health Practice and Services
	☑ Public Health Partnerships	☑ Public Health Resources, Communication & Evaluation
	☐ Other	

Program outcomes that relate to FOA* (Check two or more)	☑ Increased adoption of new or proven business improvements leading to management and administrative efficiencies or cost savings
	☐ Increased availability and accessibility of continuing education and training focused on public health competencies and new skills, including the use of experience-based internships and fellowships
	☐ Increased incorporation of core public health competencies into employee position descriptions and performance evaluations
	☐ Increased integration of state-of-the-art technology into data collection and information systems
	☑ Increased implementation of evidence-based public health programs, policies, and services
	☑ Improved capacity to meet nationally established standards, such as those for health department accreditation
	☑ Establishment and maintenance of diverse public health partnerships for meaningful cooperation and achievement of evidence-based public health strategies and interventions, such as the CDC Winnable Battles

	☐ Improved quality, availability, and accessibility of public health education materials, training, and evaluation tools and resources ☐ Other
Applicant organizational capacity* (Maximum of 500 words) Word count 20	The organization must have capacity to connect and communicate with local health departments and local mosquito control authorities.
Applicant program experience* (Maximum of 500 words) Word count 22	The organization must have a track record of communicating and implementing effective intervention to strengthen the capacity of local health departments.
COLLABORATIVE WORK	
Expectations for collaboration (If applicable, maximum of 300 words) Word count 6	Collaborations are recommended if needed.
Expected subcontractual work and recommended criteria for identifying/selecting subcontractors (If applicable, maximum of 300 words) Word count 3	Not applicable.
BUDGET INSTRUCTIONS	
General instructions for use of funds – as applicable (Maximum of 300 words) Word count 23	Funds will be used to cover personnel and benefit costs, travel expenses, supplies, and consultant fees needed to cover work described above.
CIO CERTIFICATION*	
By submitting this project plan, I certify that my CIO unit currently does not maintain a comparable FOA related to a Capacity Building Assistance program. submit date:	*You will be directed to a confirmation screen upon successful save or submission.

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GENERAL INFORMATION

Grantee name	
Project title* (20 words maximum) Word count 15	Increasing State and Local Public HealthEmergency Domestic Response Capacity to Zika : Zika Prevention ...
CIO*	OFFICE OF PUBLIC HEALTH PREPAREDNESS AND RESPONSE
Division*	DIVISION OF STATE AND LOCAL READINESS Other division
CIO POC name(s)* Enter up to 3 names	Andrea Harris Separate 2 or more entries by a semicolon (e.g., John Doe; Jane Doe,)
CIO POC phone number(s)* Enter up to 3 names	404-639-8411 Enter complete phone number(s) and separate 2 or more entries by a semicolon (e.g., (404)555-1212; (404)555-0009)
CIO POC email address(es)* Enter up to 3 names	fdn7@cdc gov Enter complete email address(es) and separate 2 or more entries by a semicolon (e.g., johndoe@cdc.gov; janedoe@cdc.gov,)
Target population category*	Category A
Target population type*	☐ Local public health department ☐ State public health department ☐ Territorial public health department ☑ Tribal public health department
Target population description* (25 words maximum) Word count 27	Tribes, urban Indian organizations, and infrastructure at greatest risk for Zika virus disease introduction and transmission. Also, Indian Health Service, Tribal Epidemiology Centers, and other key partners.
Proposed project funding*	$250,000
Funded	Unfunded

PROJECT DETAILS

Project description* (Narrative including goals, expected outputs, outcomes, and general or sample activities; maximum of 1,000 words) Word count 505	

Goal
CDC is providing public health and technical assistance to public sector and non-governmental organizations in response to increased cases of Zika virus within the United States and US island territories. Focus areas for the effort are: public health risk communications, community and partner education, laboratory detection, human vector (mosquito) control, vector surveillance, prevention of transfusion-transmitted Zika virus, and conducting epidemiologic studies to evaluate health outcomes. Zika disease is expected to re-emerge in warmer weather in mid to late 2017. Heightened vigilance is indicated.
The goal of this funding is to ensure the optimal response to prevention and control of Zika disease through the efforts of non-governmental organizations (NGOs). NGOs are uniquely positioned to strengthen Zika response efforts, whether through mobilizing their own constituents or by providing technical assistance to public sector health departments.

Non-governmental organizations have contributed to the quality, efficiency and speed of the Zika response. NGO efforts continue to be needed to bolster Zika prevention efforts.

Outcomes
The general long-term outcome is support of accelerated public health preparedness planning and operational readiness for responding to Zika. Applicants should propose a plan drawing on their unique organizational strengths that can best contribute to this long-term goal.

A first round of funding was awarded to critical NGOs in July 2016 as a supplement to Funding Announcement Opportunity 13-1302 (titled Building Capacity of the Public Health System to Improve Population Health through National, Nonprofit Organizations.). A second round of supplemental funding is to be provided in early 2017 to ensure that these NGOs can complete and further enhance Zika response activities and support state, local, tribal and territorial jurisdictions.
Through this funding, NGOs are working to achieve these outcomes:
• Increased implementation of evidence-based Zika programs, policies and services.
• Increased capacity to meet the national standards of prevention and control of Zika disease.
• Establishment and strengthening of diverse public health partnerships with key constituency groups such as health department officials, epidemiologists and laboratorians
• Dissemination of technical and clinical information, which has been especially critical as Zika recommendations continue to change.

General Project Activities and Outputs
The applicant will propose a coordinated set of activities and outputs that will achieve the greatest impact on Zika prevention and control. Proposed activities and outputs should be designed to align with evidence-based strategies and the most up-to-date Zika guidance. This applicant will propose and further define a set of activities such as:
• Continue outreach, communication and capacity building of Tribal public health (through webinars, Zika summits, etc.)
• Develop multi-pronged communication strategy for CDC to ensure both tribal leaders and Public Health Emergency Directors (and equivalents) receive critical emergency preparedness information.
• Collaborate with and support CDC's critical partners including the Indian Health Service and Tribal Epidemiology Centers in Zika public health preparedness and response
• Strengthened Zika content on partners' websites, summarizing lessons learned and successful best practices regarding laboratory capacity, blood safety, vector control and human and vector surveillance, and communicating effectively to at risk tribal populations
• Continued coordination and collaboration with the State Coordination Task Force
  o SCTF Partner Call Check-In participation
  o CDC guidance feedback and input

Program strategies that relate to FOA*
(Check one or more)

- ☑ Public Health Systems and Organizational Improvement
- ☐ Public Health Data and Information Systems
- ☑ Public Health Partnerships
- ☐ Other
- ☑ Public Health Workforce
- ☑ Public Health Practice and Services
- ☑ Public Health Resources, Communication & Evaluation

Program outcomes that relate to FOA*
(Check two or more)

- ☑ Increased adoption of new or proven business improvements leading to management and administrative efficiencies or cost savings
- ☐ Increased availability and accessibility of continuing education and training focused on public health competencies and new skills, including the use of experience-based internships and fellowships
- ☐ Increased incorporation of core public health competencies into employee position descriptions and performance evaluations
- ☐ Increased integration of state-of-the-art technology into data collection and information systems
- ☑ Increased implementation of evidence-based public health programs, policies, and services
- ☑ Improved capacity to meet nationally established standards, such as those for health department accreditation
- ☑ Establishment and maintenance of diverse public health partnerships for meaningful cooperation and achievement of evidence-based public health strategies and interventions, such as the CDC Winnable Battles
- ☐ Improved quality, availability, and accessibility of public health education materials, training, and evaluation tools and resources
- ☐ Other

Applicant organizational capacity* (Maximum of 500 words) Word count 13	The organization must have capacity to connect and communicate with tribal jurisdictions.
Applicant program experience* (Maximum of 500 words) Word count 28	The organization must have a track record of communicating and implementing effective interventions to strengthen public health preparedness and response activities through the efforts of tribal jurisdictions.
COLLABORATIVE WORK	
Expectations for collaboration (If applicable, maximum of 300 words) Word count 5	No expectations for collaboration.
Expected subcontractual work and recommended criteria for identifying/selecting subcontractors (If applicable, maximum of 300 words) Word count 3	Not applicable.
BUDGET INSTRUCTIONS	
General instructions for use of funds – as applicable (Maximum of 300 words) Word count 23	Funds will be used to cover personnel and benefit costs, travel expenses, supplies, and consultant fees needed to cover work described above.
CIO CERTIFICATION*	
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Division*	DIVISION OF STATE AND LOCAL READINESS Other division
CIO POC name(s)* Enter up to 3 names	Andrea Harris Separate 2 or more entries by a semicolon (e.g., John Doe; Jane Doe.)
CIO POC phone number(s)* Enter up to 3 names	404-639-8411 Enter complete phone number(s) and separate 2 or more entries by a semicolon (e.g., (404)555-1212; (404)555-0009)
CIO POC email address(es)* Enter up to 3 names	fdn7@cdc.gov Enter complete email address(es) and separate 2 or more entries by a semicolon (e.g., johndoe@cdc.gov; janedoe@cdc.gov;)
Target population category*	Category A
Target population type*	☐ Local public health department ☑ State public health department ☐ Territorial public health department ☐ Tribal public health department
Target population description* (25 words maximum) Word count 24	State Health Officials and other agency leaders: senior deputies, state legislative liaisons, informatics directors, environmental health directors, public health preparedness directors, strategic national stockpile coordinators, etc.
Proposed project funding*	$400,000
Funded	Unfunded
PROJECT DETAILS	
Project description* (Narrative including goals, expected outputs, outcomes, and general or sample activities; maximum of 1,000 words) Word count 510	

Goal

CDC is providing public health and technical assistance to public sector and non-governmental organizations in response to increased cases of Zika virus within the United States and US island territories. Focus areas for the effort are: public health risk communications, community and partner education, laboratory detection, human vector (mosquito) control, vector surveillance, prevention of transfusion-transmitted Zika virus, and conducting epidemiologic studies to evaluate health outcomes. Zika disease is expected to re-emerge in warmer weather in mid to late 2017. Heightened vigilance is indicated.

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Outcomes

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- Increased implementation of evidence-based Zika programs, policies and services.
- Increased capacity to meet the national standards of prevention and control of Zika disease.
- Establishment and strengthening of diverse public health partnerships with key constituency groups such as health department officials, epidemiologists and laboratorians
- Dissemination of technical and clinical information, which has been especially critical as Zika recommendations continue to change.

General Project Activities and Outputs

The applicant will propose a coordinated set of activities and outputs that will achieve the greatest impact on Zika prevention and control. Proposed activities and outputs should be designed to align with evidence-based strategies and the most up-to-date Zika guidance. This applicant will propose and further define a set of activities such as:

1. Work with respective stakeholders to gather lessons learned, hold workgroup sessions to conduct After Action Reports (AARs) and implement Improvement Plans (IPs)
2. Develop tools, resources, and/or trainings that address gaps and challenges identified in Improvement Plans
3. Provide on-site and remote technical assistance and training to strengthen state and local Zika vector control/prevention systems, capabilities, and responses
4. Strengthened Zika content on partners' websites, summarizing lessons learned and successful best practices regarding laboratory capacity, blood safety, vector control and human and vector surveillance
5. Continued coordination and collaboration with the State Coordination Task Force
   a. SCTF Partner Call Check-In participation
   b. CDC guidance feedback and input
6. Update organization specific ConOps plans based on Zika response lessons learned

Program strategies that relate to FOA*
(Check one or more)

- ☑ Public Health Systems and Organizational Improvement
- ☐ Public Health Data and Information Systems
- ☑ Public Health Partnerships
- ☑ Public Health Workforce
- ☑ Public Health Practice and Services
- ☑ Public Health Resources, Communication & Evaluation
- ☐ Other

Program outcomes that relate to FOA*
(Check two or more)

- ☑ Increased adoption of new or proven business improvements leading to management and administrative efficiencies or cost savings
- ☐ Increased availability and accessibility of continuing education and training focused on public health competencies and new skills, including the use of experience-based internships and fellowships
- ☐ Increased incorporation of core public health competencies into employee position descriptions and performance evaluations
- ☐ Increased integration of state-of-the-art technology into data collection and information systems
- ☑ Increased implementation of evidence-based public health programs, policies, and services
- ☑ Improved capacity to meet nationally established standards, such as those for health department accreditation
- ☑ Establishment and maintenance of diverse public health partnerships for meaningful cooperation and achievement of evidence-based public health strategies and interventions, such as the CDC Winnable Battles
- ☐ Improved quality, availability, and accessibility of public health education materials, training, and evaluation tools and resources
- ☐ Other

Applicant organizational capacity* (Maximum of 500 words) Word count 18	The organization must have capacity to connect and communicate with state health departments and state health officials.
Applicant program experience* (Maximum of 500 words) Word count 21	The organization must have a track record of communicating and implementing effective intervention to strengthen the capacity of state health departments.
COLLABORATIVE WORK	
Expectations for collaboration (if applicable, maximum of 300 words) Word count 3	Not applicable.
Expected subcontractual work and recommended criteria for identifying/selecting subcontractors (if applicable, maximum of 300 words) Word count 3	Not applicable.
BUDGET INSTRUCTIONS	
General instructions for use of funds – as applicable (Maximum of 300 words) Word count 23	Funds will be used to cover personnel and benefit costs, travel expenses, supplies, and consultant fees needed to cover work described above.
CIO CERTIFICATION*	
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GENERAL INFORMATION	
Grantee name	
Project title* (20 words maximum) Word count 10	Support for Vector-borne Disease Work in State and Territorial Health Departments
CIO*	NATIONAL CENTER FOR EMERGING AND ZOONOTIC INFECTIOUS DISEASES
Division*	OTHER Other division Division of Vector-Borne Diseases
CIO POC name(s)* Enter up to 3 names	Tracy Hasvold Separate 2 or more entries by a semicolon (e.g., John Doe; Jane Doe;)
CIO POC phone number(s)* Enter up to 3 names	(970) 221-6422 Enter complete phone number(s) and separate 2 or more entries by a semicolon (e.g., (404)555-1212; (404)555-0009;)
CIO POC email address(es)* Enter up to 3 names	tab7@cdc.gov Enter complete email address(es) and separate 2 or more entries by a semicolon (e.g., johndoe@cdc.gov; janedoe@cdc.gov;)
Target population category*	Category A
Target population type*	☐ Local public health department ☑ State public health department ☐ Territorial public health department ☐ Tribal public health department
Target population description* (25 words maximum) Word count 24	State and Territorial health departments to include State Health Officials (SHOs) and their staff; five Atlantic and Pacific territories and three freely associated states
Proposed project funding*	$250,000
Funded	Unfunded
PROJECT DETAILS	
Project description* (Narrative including goals, expected outputs, outcomes, and general or sample activities; maximum of 1,000 words) Word count 419	

The Division of Vector-borne Diseases (DVBD) mission is to improve the prevention, treatment and control of medically important vector-borne diseases, particularly West Nile (WN), St. Louis encephalitis (SLE), Eastern equine encephalitis (EEE), Western equine encephalitis (WEE), La Crosse (LAC), Powassan (POW), Dengue (DEN), Chikungunya and Zika viruses.

As of December of 2016, locally acquired Zika virus cases have been reported in more than 35 countries and territories in the Americas, and over 4,500 cases of Zika virus have been reported in the US. Outbreaks of Zika have been reported in tropical Africa, Southeast Asia, the Pacific Islands, and most recently in the Americas. Because the mosquitoes that spread Zika virus are found throughout the world, it is likely that outbreaks will continue to spread.

CDC expects the number of cases of Zika virus disease across the US and around the world to increase substantially in the coming months. There have been reports of a serious fetal malformation called microcephaly (a condition in which a baby's head is smaller than expected when compared to babies of the same sex and age) and other poor pregnancy outcomes in babies of mothers who were infected with Zika virus. Anticipating increased cases of local transmission leading to an increased risk to pregnant women and their developing babies, the Centers for Disease Control and Prevention (CDC) activated its Emergency Operations Center and is mobilizing an extensive emergency response to the Zika virus disease.

Health officials in State and Territorial Health Departments play a key role in formulating and influencing public health policy in state-based public health practice. In order to respond to Zika virus disease, CDC requests assistance with:

- Evaluating effective policies and practices in states
- Providing guidance on appropriate coordination and response to Zika virus across state agencies including environmental agencies
- Providing targeted communication materials on Zika virus to state health officials and other state agencies
- Assisting the states implementing recommendations from the Zika CDC Interim Response Plan

In addition, CDC is requesting the applicant to continue with:
- Assessing how vector control programs are managed in the US
- Updating guidance on vector management and provide targeted communication materials on Zika virus to state health officials and other state agencies
- Leveraging existing technology and identify new resources to support Zika surveillance
- Providing guidance on appropriate coordination and response to Zika virus across state agencies including environmental agencies
- Supporting state health agencies by providing technical assistance, forums for information exchange, networking and collaboration on vector-borne and zoonotic diseases
- Analyzing and comment on policy issues related to vector control to represent the interests of state health agencies

Program strategies that relate to FOA*
(Check one or more)

- ☑ Public Health Systems and Organizational Improvement
- ☐ Public Health Workforce
- ☐ Public Health Data and Information Systems
- ☑ Public Health Practice and Services
- ☑ Public Health Partnerships
- ☑ Public Health Resources, Communication & Evaluation
- ☐ Other

Program outcomes that relate to FOA*
(Check two or more)

- ☐ Increased adoption of new or proven business improvements leading to management and administrative efficiencies or cost savings
- ☑ Increased availability and accessibility of continuing education and training focused on public health competencies and new skills, including the use of experience-based internships and fellowships
- ☐ Increased incorporation of core public health competencies into employee position descriptions and performance evaluations
- ☐ Increased integration of state-of-the-art technology into data collection and information systems
- ☑ Increased implementation of evidence-based public health programs, policies, and services
- ☑ Improved capacity to meet nationally established standards, such as those for health department accreditation
- ☑ Establishment and maintenance of diverse public health partnerships for meaningful cooperation and achievement of evidence-based public health strategies and interventions, such as the CDC Winnable Battles
- ☑ Improved quality, availability, and accessibility of public health education materials, training, and evaluation tools and resources
- ☐ Other

Applicant organizational capacity*
(Maximum of 500 words)

Word count
56

	DVBD recognizes the need to further develop and support collaborative relationships with state and territorial health departments, and other public health partner organizations who can support national capacity building and disease prevention objectives. DVBD would like to partner with state based programs to promote the development of robust vector-borne disease surveillance and control programs.
Applicant program experience* (Maximum of 500 words) Word count 87	DVBD seeks an applicant who has established relationships with CDC, state and territorial health departments and other partner organizations. Applicant must have proven ability to work with state and territorial health departments in developing and implementing activities to include: • Evaluating effective policies and practices in states • Providing guidance on appropriate coordination and response to Zika virus across state agencies including environmental agencies • Providing targeted communication materials on Zika virus to state health officials and other state agencies • Assisting the states implementing recommendations from the Zika CDC Interim Response Plan
COLLABORATIVE WORK	
Expectations for collaboration (If applicable, maximum of 300 words) Word count 20	The applicant would work in consultation and collaboration with CDC, state and territorial health departments and other partner organizations.
Expected subcontractual work and recommended criteria for identifying/selecting subcontractors (If applicable, maximum of 300 words) Word count 25	There may be a need to subcontract work; however, DVBD would work in consultation with recipient to identify any work for subcontracting purposes.
BUDGET INSTRUCTIONS	
General instructions for use of funds – as applicable (Maximum of 300 words) Word count 25	Funds will be used to cover personnel and benefit costs, travel expenses, supplies, equipment and consultant fees needed to cover work described above.
CIO CERTIFICATION*	
By submitting this project plan, I certify that my CIO unit currently does not maintain a comparable FOA related to a Capacity Building Assistance program. submit data	*You will be directed to a confirmation screen upon successful save or submission.

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GENERAL INFORMATION

Grantee name	
Project title* (20 words maximum) Word count 11	Support for Vector-borne Disease Work in Local Health Departments Across the US
CIO*	NATIONAL CENTER FOR EMERGING AND ZOONOTIC INFECTIOUS DISEASES
Division*	OTHER Other division Division of Vector-Borne Diseases
CIO POC name(s)* Enter up to 3 names	Tracy Hasvold Separate 2 or more entries by a semicolon (e.g., John Doe; Jane Doe;)
CIO POC phone number(s)* Enter up to 3 names	970-221-6422 Enter complete phone number(s) and separate 2 or more entries by a semicolon (e.g., (404)555-1212; (404)555-0009)
CIO POC email address(es)* Enter up to 3 names	tab7@cdc.gov Enter complete email address(es) and separate 2 or more entries by a semicolon (e.g., johndoe@cdc.gov; janedoe@cdc.gov;)
Target population category*	Category A
Target population type*	☑ Local public health department ☐ State public health department ☐ Territorial public health department ☐ Tribal public health department
Target population description* (25 words maximum) Word count 26	Local Health Departments (LHDs) across the United States, to include LHD leaders (i.e., local health officials or Chief Executive Officers (CEOs)) and LHD employees
Proposed project funding*	$250,000
Funded	Unfunded

PROJECT DETAILS

Project description* (Narrative including goals, expected outputs, outcomes, and general or sample activities; maximum of 1,000 words) Word count 395	

The Division of Vector-borne Diseases (DVBD) mission is to improve the prevention, treatment and control of medically important vector-borne diseases, particularly West Nile (WN), St. Louis encephalitis (SLE), Eastern equine encephalitis (EEE), Western equine encephalitis (WEE), La Crosse (LAC), Powassan (POW), Dengue (DEN), Chikungunya and Zika viruses.

As of December of 2016, locally acquired Zika virus cases have been reported in more than 35 countries and territories in the Americas, and over 4,500 cases of Zika virus have been reported in the US. Outbreaks of Zika have been reported in tropical Africa, Southeast Asia, the Pacific Islands, and most recently in the Americas. Because the mosquitoes that spread Zika virus are found throughout the world, it is likely that outbreaks will continue to spread.
CDC expects the number of cases of Zika virus disease across the US and around the world to increase substantially in the coming months. There have been reports of a serious fetal malformation called microcephaly (a condition in which a baby's head is smaller than expected when compared to babies of the same sex and age) and other poor pregnancy outcomes in babies of mothers who were infected with Zika virus. Anticipating increased cases of local transmission leading to an increased risk to pregnant women and their developing babies, the Centers for Disease Control and Prevention (CDC) activated its Emergency Operations Center and is mobilizing an extensive emergency response to the Zika virus disease.

Local Health Departments (LHDs) across the United States, to include LHD leaders (i.e., local health officials or Chief Executive Officers (CEOs) and LHD employees play a key role in formulating and influencing public health policy in public health practice. In order to respond to Zika virus disease, CDC requests assistance with the continuation of the following activities:

- Performing an assessment of current Zika preparedness and response challenges, needs, and gaps related to vector control and surveillance among local health departments, environmental agencies, and local vector control entities
- Providing guidance on appropriate coordination and response to Zika virus across state agencies
- Providing at least 50 hours of technical assistance to local health departments (LHDs)
- Representing perspectives, priorities, and work of LHDs at up to two conferences, meetings, or workshops
- Identifying and disseminate at least 15 vector control strategies, tools, resources, and targeted communication materials on Zika virus to local health officials and other local agencies
- Completion of a national vector control capacity assessment

Program strategies that relate to FOA*
(Check one or more)

- ☑ Public Health Systems and Organizational Improvement
- ☐ Public Health Workforce
- ☐ Public Health Data and Information Systems
- ☑ Public Health Practice and Services
- ☑ Public Health Partnerships
- ☑ Public Health Resources, Communication & Evaluation
- ☐ Other

Program outcomes that relate to FOA*
(Check two or more)

- ☐ Increased adoption of new or proven business improvements leading to management and administrative efficiencies or cost savings
- ☑ Increased availability and accessibility of continuing education and training focused on public health competencies and new skills, including the use of experience-based internships and fellowships
- ☐ Increased incorporation of core public health competencies into employee position descriptions and performance evaluations
- ☐ Increased integration of state-of-the-art technology into data collection and information systems
- ☑ Increased implementation of evidence-based public health programs, policies, and services
- ☑ Improved capacity to meet nationally established standards, such as those for health department accreditation
- ☐ Establishment and maintenance of diverse public health partnerships for meaningful cooperation and achievement of evidence-based public health strategies and interventions, such as the CDC Winnable Battles
- ☑ Improved quality, availability, and accessibility of public health education materials, training, and evaluation tools and resources
- ☐ Other

Applicant organizational capacity*
(Maximum of 500 words)

Word count
74

DVBD recognizes the need to further develop and support collaborative relationships with Local Health Departments (LHDs) across the United States, to include LHD leaders (i.e., local health officials or Chief Executive Officers (CEOs) and LHD employees and other public health partner organizations who can support national capacity building and disease prevention objectives. DVBD would like to partner with these programs to promote the development of robust vector-borne disease surveillance and control programs.

Applicant program experience* (Maximum of 500 words) Word count 121	DVBD seeks an applicant who has established relationships with CDC, Local Health Departments (LHDs) across the United States, to include LHD leaders (i.e., local health officials or Chief Executive Officers (CEOs) and LHD employees, and other partner organizations. Applicant must have proven ability to work with Local Health Departments (LHDs) to include LHD leaders (i.e., local health officials or Chief Executive Officers (CEOs) and LHD employees in developing and implementing activities to include: • Evaluating effective policies and practices in states • Providing guidance on appropriate coordination and response to Zika virus across state agencies including environmental agencies • Providing targeted communication materials on Zika virus to state health officials and other state agencies • Assisting the states implementing recommendations from the Zika CDC Interim Response Plan
COLLABORATIVE WORK	
Expectations for collaboration (If applicable, maximum of 300 words) Word count 39	The applicant would work in consultation and collaboration with CDC, Local Health Departments (LHDs) across the United States, to include LHD leaders (i.e., local health officials or Chief Executive Officers (CEOs) and LHD employees, and other partner organizations.
Expected subcontractual work and recommended criteria for identifying/selecting subcontractors (If applicable, maximum of 300 words) Word count 25	There may be a need to subcontract work; however DVBD wold work in consultation with receipient to identify any work for subcontracting purposes.
BUDGET INSTRUCTIONS	
General instructions for use of funds – as applicable (Maximum of 300 words) Word count 25	Funds will be used to cover personnel and benefit costs, travel expenses, supplies, equipment and consultant fees needed to cover work described above.
CIO CERTIFICATION*	
By submitting this project plan, I certify that my CIO unit currently does not maintain a comparable FOA related to a Capacity Building Assistance program. submit date	*You will be directed to a confirmation screen upon successful save or submission.

Office for State, Tribal, Local and Territorial Support
Partnership Support Unit
Final

FY 2016 CIO PROJECT PLAN
FOA OT13-1302
Building Capacity of the Public Health System
to Improve Population Health through National, Nonprofit Organizations

Project Plan Instructions

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GENERAL INFORMATION

Grantee name	
Project title* (20 words maximum) Word count 14	Responder Wellbeing Summit: Providing Strategic Leadership and Coordination for a Ready Global Workf...
CIO*	OFFICE OF PUBLIC HEALTH PREPAREDNESS AND RESPONSE
Division*	DIVISION OF EMERGENCY OPERATIONS Other division
CIO POC name(s)* Enter up to 3 names	Bobby Rasulnia; Sachiko Kuwabara Separate 2 or more entries by a semicolon (e.g., John Doe; Jane Doe;)
CIO POC phone number(s)* Enter up to 3 names	404-702-9184; 404-401-2796 Enter complete phone number(s) and separate 2 or more entries by a semicolon (e.g., (404)555-1212; (404)555-0009;)
CIO POC email address(es)* Enter up to 3 names	bba9@cdc.gov; ymf5@cdc.gov Enter complete email address(es) and separate 2 or more entries by a semicolon (e.g., johndoe@cdc.gov; janedoe@cdc.gov;)
Target population category*	Category A
Target population type*	☑ Local public health department ☐ State public health department ☐ Territorial public health department ☐ Tribal public health department
Target population description* (25 words maximum) Word count 24	Local health departments (LHDs) and partner organizations with knowledge and experience in staffing emergency responses, and supporting responder wellbeing across the deployment continuum.
Proposed project funding*	$75,000
Funded	Unfunded

PROJECT DETAILS

Project description* (Narrative including goals, expected outputs, outcomes, and general or sample activities; maximum of 1,000 words) Word count 127	The Ebola response created new expectations for the public health workforce to include the ability to rapidly deploy public health professionals to affected areas/localities. As a result, many organizations are strategizing and developing infrastructure, programs and services to support the needs of emergency response personnel – and anticipate and mitigate risks associated with this type of work. This one day Summit will provide an opportunity to identify best practices (partnerships, policy, program and science) external to CDC and coordinate emergency responder wellbeing programs for emergency response at the local level. The Summit leverages opportunities for partnership to support responder wellbeing with local health departments (LHDs) and partner organizations. The Summit will be held in association with preparedness summit in 2017 addressing local health responder wellbeing.

Program strategies that relate to FOA* (Check one or more)	☐ Public Health Systems and Organizational Improvement	☑ Public Health Workforce
	☐ Public Health Data and Information Systems	☑ Public Health Practice and Services
	☑ Public Health Partnerships	☑ Public Health Resources, Communication & Evaluation
	☐ Other	

Program outcomes that relate to FOA* (Check two or more)	☐ Increased adoption of new or proven business improvements leading to management and administrative efficiencies or cost savings ☐ Increased availability and accessibility of continuing education and training focused on public health competencies and new skills, including the use of experience-based internships and fellowships ☐ Increased incorporation of core public health competencies into employee position descriptions and performance evaluations ☐ Increased integration of state-of-the-art technology into data collection and information systems ☑ Increased implementation of evidence-based public health programs, policies, and services ☑ Improved capacity to meet nationally established standards, such as those for health department accreditation ☑ Establishment and maintenance of diverse public health partnerships for meaningful cooperation and achievement of evidence-based public health strategies and interventions, such as the CDC Winnable Battles ☐ Improved quality, availability, and accessibility of public health education materials, training, and evaluation tools and resources ☐ Other
Applicant organizational capacity* (Maximum of 500 words) Word count 58	• Organizational capacity to develop and execute meetings in the area of local and national public health emergency preparedness and response. • Ability to provide logistical and administrative support for local and national meetings. • Ability to convene local governmental and non-governmental leaders in emergency response and responder support for the health and safety of a public health ready workforce.
Applicant program experience* (Maximum of 500 words) Word count 52	• Experience in coordinating and convening local and national meetings for local artners. • Experience in designing and executing local emergency preparedness and response programs, policies and meetings at the national and international levels. • Experience in providing leadership and input to emergency response programs and policies affecting responder wellbeing at the local and national level.
COLLABORATIVE WORK	
Expectations for collaboration (If applicable, maximum of 300 words) Word count 20	To provide logistical and administrative support for the Responder Wellbeing Summit as a pre-meeting a 2017 Preparedness Summit
Expected subcontractual work and recommended criteria for identifying/selecting subcontractors (If applicable, maximum of 300 words) Word count 4	Not applicable
BUDGET INSTRUCTIONS	
General instructions for use of funds – as applicable	

(Maximum of 300 words) Word count 28	Funds would be use for travel arrangements (lodging, transportation, per diem) and meeting logistics (meeting space and AV equipment cost) of attendees for the one day meeting.

CIO CERTIFICATION*

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submit date:

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Office for State, Tribal, Local and Territorial Support
Partnership Support Unit
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FOA OT13-1302
Building Capacity of the Public Health System to Improve Population Health through National, Nonprofit Organizations

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GENERAL INFORMATION

Grantee name	
Project title* (20 words maximum) Word count 14	Technical Assistance for Local, State, and Federal Communication During Public Health Emergencies – part 2
CIO*	OFFICE OF PUBLIC HEALTH PREPAREDNESS AND RESPONSE
Division*	DIVISION OF EMERGENCY OPERATIONS Other division
CIO POC name(s)* Enter up to 3 names	Keri Lubell Separate 2 or more entries by a semicolon (e.g., John Doe; Jane Doe;)
CIO POC phone number(s)* Enter up to 3 names	404-639-0547 Enter complete phone number(s) and separate 2 or more entries by a semicolon (e.g., (404)555-1212; (404)555-0009)
CIO POC email address(es)* Enter up to 3 names	klubell@cdc.gov Enter complete email address(es) and separate 2 or more entries by a semicolon (e.g., johndoe@cdc.gov; janedoe@cdc.gov;)
Target population category*	Category A
Target population type*	☐ Local public health department ☑ State public health department ☐ Territorial public health department ☐ Tribal public health department
Target population description* (25 words maximum) Word count 11	State health departments' public health communicators and health educators
Proposed project funding*	$500,000
Funded	Unfunded

PROJECT DETAILS

Project description* (Narrative including goals, expected outputs, outcomes, and general or sample activities; maximum of 1,000 words) Word count 437	

CDC is seeking a applicant to provide technical assistance on public opinion to public health communicators at the state level during and after the current outbreak of Zika virus disease. Public opinion information includes public understanding/knowledge, values, attitudes and experiences with Zika virus disease and the protection steps required to prevent the spread of infection and its potential after-effects. The information provided by the grantee will be used to help public health communicators and other officials appropriately respond to the Zika outbreak through strategic health protection messaging for pregnant women, women of childbearing age, and other members of the public who might be at risk. The dynamic nature of the current outbreak and the uncertainties surrounding it warrants the use of rapid turn-around assessments of the public knowledge, attitudes, and practices (KAP).

Attitudes, perceptions, values, and behaviors substantially affect how people respond during emergency health events, including whether they understand and can follow complex health protection recommendations provided by public health agencies and how much they trust those agencies to provide credible guidance. Public health communicators must have robust data to use in developing communication strategies and addressing knowledge, attitude, and practice gaps. The information and technical assistance provided by the grantee to state and territorial public health communicators is essential to the design of effective communication strategy during the Zika response.

CDC recommends that the applicant consider working with an experienced subcontractor to meet the requirements of the project. The applicant and subcontractor should have extensive experience and a proven track record of providing KAP-related insights grounded in scientifically valid public opinion data to state and territorial public health communicators for communication planning and strategy during public health emergencies such as Zika. CDC expects that one or more collections of opinion data from one or more affected groups may be required to successfully complete the project.

Expected outputs include summaries of existing public opinion assessment data related to the Zika outbreak, especially findings pertaining to pregnant women and women of reproductive age, as well as other affected groups and the general population in the US and affected territories. Where the applicant determines additional data is needed, the grantee will develop instruments in accordance with accepted scientific practices; collect data using standard methodology as supported by the American Association of Public Opinion Research; provide data summaries ("toplines"), interpretation of results and recommendations for risk communication messaging to public health communicators at all levels of government as well as the public; produce press releases and conduct media interviews with experts who can explain findings; and publish findings in influential public health journals, with CDC and other collaborators as appropriate.

Program strategies that relate to FOA*
(Check one or more)

- ☐ Public Health Systems and Organizational Improvement
- ☐ Public Health Workforce
- ☐ Public Health Data and Information Systems
- ☑ Public Health Practice and Services
- ☑ Public Health Partnerships
- ☑ Public Health Resources, Communication & Evaluation
- ☐ Other

Program outcomes that relate to FOA*
(Check two or more)

- ☐ Increased adoption of new or proven business improvements leading to management and administrative efficiencies or cost savings
- ☐ Increased availability and accessibility of continuing education and training focused on public health competencies and new skills, including the use of experience-based internships and fellowships
- ☐ Increased incorporation of core public health competencies into employee position descriptions and performance evaluations
- ☐ Increased integration of state-of-the-art technology into data collection and information systems
- ☑ Increased implementation of evidence-based public health programs, policies, and services
- ☐ Improved capacity to meet nationally established standards, such as those for health department accreditation
- ☐ Establishment and maintenance of diverse public health partnerships for meaningful cooperation and achievement of evidence-based public health strategies and interventions, such as the CDC Winnable Battles
- ☑ Improved quality, availability, and accessibility of public health education materials, training, and evaluation tools and resources
- ☑ Other

If other, please specify* (Maximum 100 words) Word count 52

Increased integration of scientifically-based evidence about information needs of the public and affected populations into public health messaging during public health emergencies

Applicant organizational capacity*
(Maximum of 500 words)

Word count
453

	The applicant must have the ability to • Coordinate with state and territorial public health communicators during public health emergencies and include CDC in discussions • Convene conference calls, as appropriate, with state and territorial emergency communication subject matter experts • Solicit and manage input from state and territorial public health communicators about the type of public opinion assistance required to address the information needs of the public and affected groups • Convene and coordinate conference calls, as appropriate, to share findings and recommendations emerging from public opinion information with state public health communicators The applicant, with a potential subcontractor, must • Possess a thorough knowledge of emergency risk communication theories and approaches including CDC's Crisis and Emergency Risk Communication (CERC) • Demonstrate organizational connections to and collaboration with the target audience of state-level public health communicators • Have extensive scientific knowledge about determining appropriate methods to provide information about how the public and specific risk groups have, are, or will likely respond to public health emergencies, including Zika • Have thorough knowledge of processes for developing public health emergency public opinion data collection tools that are appropriate to the specific audiences and threats • Demonstrate capacity to conduct archival public opinion research to inform communication needs • Demonstrate ability to determine when additional public opinion information is required Where the applicant/subcontractor determine additional public opinion information is required, they must demonstrate • A deep and thorough understanding of instrument development including o Creating instruments of an appropriate length o Ensuring the cultural appropriateness of language used o Incorporating effective methods for reducing social desirability and other potential biases o Use of rigorous, probability-based sampling methods • Substantial expertise and experience conducting public opinion polls adhering to scientific standards supported by the American Association of Public Opinion Research in the public health context, including specifically o Conducting polls to understand public opinion of and response to major public health emergencies, such as anthrax, H1N1, and SARS o Specific experience conducting polls to understand public opinion of and response to mosquito-borne disease inside the United States, including West Nile Virus o Extensive experience conducting polls in the public health sphere domestically and internationally o Gathering input from public health communicators about communication information needs • Expertise in determining appropriate sampling methods and sample frames; utilizing randomized probability samples where possible and adhering to standards supported by the American Association of Public Opinion Research • Collecting information from the public or affected groups using scientifically valid interview methods • Analyzing public opinion data • Providing results in as little as 3-5 days • Providing public health communicators with actionable information and recommendations for health protection messages that are based on available public opinion data and a thorough understanding of emergency risk communication principles • Developing press releases and other materials for the media • Conducting press interviews to disseminate findings and implications • Capacity for and a proven track record of publishing findings in influential academic journals on these topics, working with CDC contributors as appropriate
Applicant program experience* (Maximum of 500 words) Word count 61	The applicant must have an established history of collaboration with state and and territorial public health communicators responding to large-scale public health emergencies, knowledge of how public health messaging is developed and disseminated during times of high uncertainty and concern; extensive expertise and experience with public polling gap analysis and the conduct of rapid-turnaround public polling for public health emergencies.
COLLABORATIVE WORK	
Expectations for collaboration (If applicable, maximum of 300 words) Word count 85	Given the technical complexity of parts of the project, CDC expects that the applicant may need to subcontract some of the activities, specifically those related to • Analysis of existing public opinion data • Development of instruments, sampling frames, and respondent samples in accordance with standards developed by the American Association of Public Opinion Research • Collection, analysis, and storage of additional public opinion information • Expertise in explaining complex data to the public and the media • Publishing findings in influential public health journals, as outlined in Applicant Organizational Capacity section

Expected subcontractual work and recommended criteria for identifying/selecting subcontractors (If applicable, maximum of 300 words) Word count 91	See criteria listed in Applicant Organizational Capacity. Potential subcontractors must demonstrate extensive scientific expertise and experience reviewing, developing, implementing, and analyzing public opinion data to support risk communication messaging during public health emergencies using standards that are consistent with American Association of Public Opinion Research. Subcontractors must also have a proven ability to share findings with public health communicators across multiple levels of government and publishing results in influential public health journals. Qualified subcontractors meeting all the required criteria may be found, for example, in academic schools of public health.

BUDGET INSTRUCTIONS

General instructions for use of funds – as applicable (Maximum of 300 words) Word count 0	

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