

Centers for Disease Control

Center for Surveillance, Epidemiology and Laboratory Services

CDC's Collaboration with Academia to Strengthen Public Health Workforce Capacity
CDC-RFA-OE17-17010201SUPP19
Application Due Date: 03/08/2019

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Part 1. Overview Information

Federal Agency Name:

Federal Centers for Disease Control and Prevention (CDC)

Notice of Funding Opportunity (NOFO) Title:

CDC's Collaboration with Academia to Strengthen Public Health Workforce Capacity

Announcement Type:

Revision - Type (Competitive Supplement) Additional funds are requested to support Target population and Part A - Core Curricular Enhancements of NOFO.

Agency Notice of Funding Opportunity Number:

CDC-RFA-OE17-17010201SUPP19

Assistance Listings (CFDA) Number:

93.967

Key Dates:

Due Date for Application: **03/08/2019**

Application must be successfully submitted to Grants.gov by 11:59pm Eastern Standard Time on the deadline date.

Additional Overview Content:

Executive Summary:

CDC announces a supplemental funding opportunity for the four national, non-profit organizations that previously were awarded funding under the Notice of Funding Opportunity (NOFO) CDC-RFA-OE17-1701 titled "CDC's Collaboration with Academia to Strengthen Public Health Workforce Capacity." The NOFO consists of three components (Parts A - Core Curricular Enhancements, B - Workforce Improvement Projects (WIPs), and C - Public Health Fellowship Programs). The four recipients are eligible to submit applications for this supplemental funding for Part A, for which they received initial funding in Fiscal Year 2017. These four organizations are as follows:

- American Association of Colleges of Nursing
- Association of American Medical Colleges
- Association for Prevention Teaching and Research
- Association of Schools and Programs of Public Health

This supplemental NOFO will enhance Part A - Core Curricular Enhancements. There are two projects in the NOFO:

Project 1 seeks to catalyze innovative efforts to provide public health professionals, students, and faculty with the competencies and knowledge to reduce the leading causes of death and illness as it relates to immunization practice, and for building workforce capacity to transform the health system and improve population health.

Project 2 seeks to to help CDC develop a greater understanding of neurological disorders and conditions to improve health and economic consequences for those who are affected, initially

by hosting a one-day listening session meeting with key patient organizations around CDC's National Neurological Conditions Surveillance System.

Measurable outcomes of the program will be in alignment with one (or more) of the following performance goal(s) for the CSELS:
Part A supports Healthy People 2020 goals related to immunization and infectious diseases. The awardee will assess need, development, implement, promote, revise, maintain and evaluate immunization education materials and resources for health professionals providing immunization services, specifically physicians, nurses, medical assistants and other allied health professionals.

Part A supports the goal of partnership to build capacity of health care professionals by creating credible immunization training and education resources based on recommendations by experts in immunization and training education resources to be able to efficiently and effectively handle, store and administer vaccines while addressing patient concerns.

This announcement is only for non-research activities supported by CDC. If research is proposed, the application will not be considered. For this purpose, research is defined at https://www.gpo.gov/fdsys/pkg/CFR-2007-title42-vol1/pdf/CFR-2007-title42-vol1-sec52-2.pdf. Guidance on how CDC interprets the definition of research in the context of public health can be found at https://www.hhs.gov/ohrp/regulations-and-policy/regulations/45-cfr-46/index.html (See section 45 CFR 46.102(d)).

Part 2. Full Text

Section I. Funding Opportunity Description

Statutory Authority

Section 317(k)(2) of the PHS Act (42 U.S.C. Section 247b(k)(2))

Background

N/A

Purpose

Part A supports Healthy People objectives related to immunization and infectious diseases, funding will assess need, development, implement, promote, revise, maintain and evaluate immunization education materials and resources for health professionals providing immunization services, specifically physicians, nurses, medical assistants and other allied health professionals.

The goal of the partnership is to build capacity of health care professionals by creating credible immunization training and education resources based on recommendations by experts in immunization and training education resources to be able to efficiently and effectively handle, store and administer vaccines while addressing patient concerns.

Program Implementation

Recipient Activities

PART A -- Core Curricular Enhancements

Strategic Direction A2 -- Promote educational enhancements that include transdisciplinary and interprofessional population health training

Project 1: Immunization Education and Training

Activity I: Medical Assistants Resources and Training on Immunization (MARTi)

MARTi is a website http://www.marti-us.org/ hosted and updated by the Association for Prevention Teaching and Research (APTR). MARTi was developed to provide a collection of immunization training, education, and resource materials for medical assistants and those responsible for their training, such as office managers or supervisors. The website provides reviewed and credible training and education programs and resources specifically developed for the education and reading level of medical assistants.

Activities will include the following:

--Manage and update the website content and resources as new vaccine recommendations and best practices become available and redesign the navigation of the website to feature resources offering continuing education (CE) credits

--Create newsletters and social media announcements

--Develop responsive design website to provide access through mobile devices

--Assemble a committee of experts to advance use of the website and recommend improvements. Committee will convene via conference call (3 or 4 times a year). The committee will consist of key groups including the American Association of Medical Assistants (AAMA) and the Professional Association of Healthcare Organization Management (PACHOM) as well as post-secondary institutions training future medical assistants. CDC will not direct or manage any aspects of the committee. Such involvement implicates the Federal Advisory Committee Act (FACA)

--Update display to exhibit MARTi at national conferences targeted to medical assistants - AAMA and PAHCOM - state and local meeting of medical assistant societies.

--Develop marketing template to report how materials are being used and by whom and provide ongoing utilization metrics

--Expand marketing of MARTi to educators training future medical assistants

Activity II: Immunization Resources for Undergraduate Nursing (IRUN)

The IRUN project seeks to improve the integration of immunization into undergraduate nursing curricula. A committee of experts provided recommendations to develop training and education materials and resources for future nurses in BSN programs. CDC will not direct or manage any aspects of the committee. Such involvement implicates the Federal Advisory Committee Act (FACA). The American Association of Colleges of Nursing (AACN) is a key partner.

The activities will include:

--Publish the IRUN Framework in a journal

--Develop and distribute immunization teaching resources including : PowerPoint decks, case studies in pdf and html formats and simulation scripts

--Convene committee as needed to review materials and/or make additional recommendations

Activity III: Teaching Immunization for Medical Education (TIME)

TIME is a print-based curriculum designed for use in medical schools to support immunization instruction. The materials provide student objectives, learning objectives, key teaching points, and resources. The case-based TIME modules provide ready-to-use instructional materials that can be integrated into existing medical curricula. The modules include vaccine indications and contraindications, immunization schedules, and recommendations on efficient ways to increase vaccination levels. The case-based modules were developed in the mid-1990s. In 2016 an environmental scan was conducted to assess effective teaching methods including current and effective technologies used at US medical schools with the goal of improving the TIME modules and advancing immunization teaching of future physicians. Recommendations from the environmental scan included transitioning the print-based case studies to e-learning modules. In 2018, detailed recommendations to transition the print modules to e-learning modules were developed. The transition will be a major undertaking and will span multiple project years.

The activities will include:

--Review of the Association for Prevention Teaching and Research's (APTR) capacity to host a Learning Management System

--Assess APTR's and CDC's capacity to update and maintain the modules

Project 2: CDC's National Neurological Conditions Surveillance System Partner Engagement Meeting

Project Description / Need for the Project

Millions of people of all ages across the United States face the substantial and sometimes devastating consequences of neurological disorders and conditions. Many of these conditions are hard to diagnose. Unfortunately, there often are no simple tests to identify and diagnose them. There is so much we do not know that would help us to prevent, diagnose, and treat many neurological conditions effectively.

In 2016, as part of the 21st Century Cures Act, Congress authorized Centers for Disease Control and Prevention (CDC) to initiate development of a **National Neurological Conditions Surveillance System (NNCSS)**. Congress has appropriated $5 million for the NNCSS as part of the FY 2019 spending bill for the U.S. Department of Health and Human Services.

CDC looks forward to helping to develop greater understanding of neurological disorders and conditions to improve health and economic consequences for those who are affected. One way that CDC will accomplish this is by hosting a one-day listening session meeting with key patient organizations around CDC's National Neurological Conditions Surveillance System (NNCSS).

This type of meeting will allow CDC with valuable input and background as the participant organizations will share their insights, experiences, and efforts in the area of neurological disorders and conditions. There is value in CDC listening to those organizations who have worked in this area and have been personally impacted by neurological conditions – and for attendees to hear strategies and experiences from their peers.

Activities

The applicant must have proven and demonstrated success in handling planning and execution of successful professional meetings. Awardee will be responsible for coordinating all meeting logistics, including, but not limited to, invitations, registration, meeting planning, meeting material development and preparation, meeting minutes, travel for meeting participants, hotel reservation procurement (one night), and all ground transportation for attendees.

The applicant will work directly with CDC to identify meeting participants.

Key Outcomes

Key outcomes would include the following:

1. The presentation of a collaborative, comfortable environment (meeting) that allows all participants (patient advocates and relevant organizations currently working in the neurological conditions space) to share, engage, and discuss data, issues, challenges, and concerns on the topic of neurological conditions with relevant CDC leaders and scientists.
2. Opportunity for CDC to listen and determine how meeting participants can engage and support the three states of the NNCSS, which CDC will carry out in association with partners and stakeholders:
    1. **Demonstrations** using two neurological conditions, multiple sclerosis and Parkinson’s disease, to determine how we can have the biggest impact by exploring innovative methods and complex data sources, and capturing lessons learned, to determine which approaches will help efficiently extend the NNCSS to other neurological conditions
    2. **Building out the NNCSS** for multiple sclerosis and Parkinson's disease using successful approaches from the demonstration projects, and checking methods, costs, and opportunities, as resources allow
    3. **Using lessons learned to extend the NNCSS** to other neurological conditions, as resources allow

Contribution to the Public Health Workforce

One of CDC's strategic priorities is to strengthen public health and healthcare collaboration. CDC appreciates that Congress has allocated funding for our agency to use CDC's expertise in epidemiology and surveillance to shine a light on the incidence and prevalence of often neglected neurological conditions and the impact they have on the public's health. This meeting will be a first step for collaborating with key organizations and partners, who will be instrumental to the success of the NNCSS.

Review Criteria

- Applicant demonstrates expertise in the area of professional event planning and meeting

coordination.

- Applicant has strong and longstanding relationships and provides leadership with clinical and patient organizations in the United States.
- Applicant demonstrates an understanding of the scope and outcomes of the project.
- Applicant demonstrates familiarity with integration of public health and healthcare.

Other Information

https://www.cdc.gov/surveillance/projects/nncss/index.html

In a cooperative agreement, CDC staff is substantially involved in the program activities, above and beyond routine grant monitoring.

CDC Activities

CDC will provide ongoing technical assistance and support in implementing programmatic activities.

Awardees will receive support from CDC subject matter experts, as needed, to ensure successful program execution.

For Project 2, CSELS Office of the Director staff will be involved in overall strategic direction of the project. In addition to subject matter expertise, staff will provide monitoring activities to ensure the project remains on time and within scope. CSELS anticipates monthly or biweekly calls with the awardee.

Section II. Award Information

Type of Award: Cooperative Agreement
CDC substantial involvement in this program appears in the Activities Section above.

Award Mechanism: U36

Fiscal Year Funds: 2019

Approximate Total Supplemental Funding: $230,000
This amount is subject to availability of funds. Includes direct and indirect costs.

Approximate Number of Awards: 2
Supplemental funding will cover the project period, which ends June 30, 2019.

Approximate Average Award: $115,000
This amount is for the budget period only and includes direct costs and indirect costs as applicable.

Floor of Individual Award Range:	$130,000
Ceiling of Individual Award Range:	$230,000

This ceiling is for a 12-month budget period.
The total project period length is approximately 3 months.

Anticipated Award Date:	04/08/2019
Budget Period Length:	3 month(s)
Period of Performance Length:	1 year(s)

Section III. Eligibility Information

Eligible Applicants

The following recipients may submit an application:

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

There are two projects in this Notice of Funding Opportunity (NOFO). The organizations who are eligible to apply for each project are only the four organizations awarded under the initial NOFO CDC-RFA-OE17-1701 as follows:

American Association of Colleges of Nursing

Association of American Medical Colleges

Association for Prevention Teaching and Research

Association of Schools and Programs of Public Health

Project 1 of this NOFO supplemental seeks to implement, promote, assess and revise immunization educational programs based on recommendations by the Advisory Committee on Immunization Practices (ACIP) and will create reliable training materials and resources for health professionals. CDC will partner to build the capacity of immunization providers by providing educational programs that offer continuing education credit to meet licensing or credentialing requirements. Health care professionals will be able to efficiently and effectively handle, store and administer vaccines while addressing patient concerns.

To meet the goals of Project 1, the following are necessary criteria for the awardee's eligibility:

- National organization with interprofessional membership, specifically, physicians, nurses, public health and other allied health professionals.
- At least 5 years of expertise in the design, delivery and evaluation of training, education and resource materials for health care professionals who deliver immunization services.
- Demonstrated expertise in the development and evaluation of E-Learning modules, specifically immunization and vaccine-preventable diseases content implemented in medical education and residency programs.
- Demonstrated expertise in audience specific website design, management, evaluation, and distribution of information through newsletters and social media, specifically

immunization and vaccine-preventable disease content for medical assistants and other allied health professionals
- Demonstrated expertise in development of immunization curriculum framework and related teaching resources for baccalaureate level nursing students and other allied health professionals
- Established partnerships with American Association of Medical Assistants (AAMA), Professional Association of Healthcare Organization Management (PAHCOM), American Nurses Association (ANA), National League for Nursing (NLN), National Council of State Boards of Nursing (NCSBN), and academic institutions including community and junior colleges and technical programs.

Project 2 of this NOFO seeks to help CDC develop a greater understanding of neurological disorders and conditions to improve health and economic consequences for those who are affected, initially by hosting a one-day listening session meeting with key patient organizations around CDC's National Neurological Conditions Surveillance System.

To meet the goals of Project 2, the following are necessary criteria for the awardee's eligibility:

- Demonstrated expertise working with all the U.S. accredited medical schools, teaching hospitals, and academic medical societies
- Pre-existing relationships with medical schools and the academic medicine community, in addition to working knowledge of those whose curricula reflect innovative means of incorporating public health strategies
- Applied knowledge of clinical recommendations
- Demonstrated medical education and training, including how to implement public health strategies within this context

Required Registrations

System for Award Management and Universal Identifier Requirements
An organization must be registered at the three following locations before it can submit an application for funding at www.grants.gov.
a. Data Universal Numbering System: All applicant organizations must obtain a Data Universal Numbering System (DUNS) number. A DUNS number is a unique nine-digit identification number provided by Dun & Bradstreet (D&B). It will be used as the Universal Identifier when applying for federal awards or cooperative agreements. The applicant organization may request a DUNS number by telephone at 1-866-705-5711 (toll free) or Internet at http://fedgov.dnb.com/webform/displayHomePage.do. The DUNS number will be provided at no charge. If funds are awarded to an applicant organization that includes sub-recipients, those sub-recipients must provide their DUNS numbers before accepting any funds.
b. System for Award Management (SAM): The SAM is the primary registrant database for

the federal government and the repository into which an entity must submit information required to conduct business as a recipient. All applicant organizations must register with SAM, and will be assigned a SAM number. All information relevant to the SAM number must be current at all times during which the applicant has an application under consideration for funding by CDC. If an award is made, the SAM information must be maintained until a final financial report is submitted or the final payment is received, whichever is later. The SAM registration process usually requires not more than five business days, and registration must be renewed annually. Additional information about registration procedures may be found at www.SAM.gov.

c. Grants.gov: The first step in submitting an application online is registering your organization through www.grants.gov, the official HHS E-grant website. Registration information is located at the "Applicant Registration" option at www.grants.gov. All applicant organizations must register with www.grants.gov. The one-time registration process usually takes not more than five days to complete. Applicants must start the registration process as early as possible.

Cost Sharing or Matching

Cost Sharing / Matching Requirement: No

Other

Special Requirements

Note: Title 2 of the United States Code Section 1611 states that an organization described in Section 501(c)(4) of the Internal Revenue Code that engages in lobbying activities is not eligible to receive Federal funds constituting a grant, loan, or an award.

Maintenance of Effort

Maintenance of Effort is not required for this program.

Section IV. Application and Submission Information

Address to Request Application Package

Applicants must download the application package associated with this funding opportunity from Grants.gov. If access to the Internet is not available or if the applicant encounters difficulty accessing the forms on-line, contact the HHS/CDC Office of Grants Services (OGS) Technical Information Management Section (TIMS) staff at (770) 488-2700 for further instruction. CDC Telecommunications for the hearing impaired or disable is available at: TTY 1-888-232-6348.

If the applicant encounters technical difficulties with Grants.gov, the applicant should contact Grants.gov Customer Service. The Grants.gov Contact Center is available 24 hours a day, 7 days a week, with the exception of all Federal Holidays. The Contact Center provides customer service to the applicant community. The extended hours will provide applicants support around the clock, ensuring the best possible customer service is received any time it is needed. You can reach the Grants.gov Support Center at 1-800-518-4726 or by email at

support@grants.gov. Submissions sent by email, fax, CD's or thumb drives of applications will not be accepted.

Content and Form of Application Submission

Unless specifically indicated, this announcement requires submission of the following information:

Applicants must download the applicant package associated with the funding opportunity from Grants.gov. If access to the Internet is not available or if the applicant encounters difficulty access the forms on-line, contact the HHS/CDC Office of Grants Services (OGS) Technical Information Management Section (TIMS) staff at (770) 488-2700 for further instructions. CDC Telecommunications for hearing impaired or disable is available at TTY 1-888-232-6348.

If the applicant encounters technical difficulties with Grants.gov, the applicant should contact Grants.gov Customer Service. The Grants.gov Contact Center is available 24 hours a day, 7 days a week, with exception of all Federal Holidays. The contact Center provides customer service to the applicant community. The extended hours will provide applicants support around the clock, ensuring the best possible customer service is received any time needed. You can reach the Grant.gov Support Center at 1-800-518-4726 or by email at support@grants.gov. Submissions sent by email, fax, CDs or thumb drives of applicants will not be accepted.

A Project Abstract must be completed in the Grants.gov application forms. The Project Abstract must contain a summary of the proposed activity suitable for dissemination to the public. It should be a self-contained description of the project and should contain a statement of objectives and methods to be employed. It should be informative to other persons working in the same or related fields and insofar as possible understandable to a technically literate lay reader. This abstract must not include any proprietary/confidential information.

A Project Narrative must be submitted with the application forms. The project narrative must be uploaded in a PDF file format when submitting via Grants.gov. The narrative must be submitted in the following format:

- Maximum number of pages: 10. If your narrative exceeds the page limit, only the first pages which are within the page limit will be reviewed.
- Font size: 12 point unreduced, Times New Roman
- Double spaced
- Page margin size: One inch
- Number all narrative pages; not to exceed the maximum number of pages.

N/A.

The narrative should address activities to be conducted over the entire Period of Performance and must include the following items in the order listed.

Additional information may be included in the application appendices. The appendices must be uploaded to the "Other Attachments Form" of application package in Grant.gov
Note: appendices will not be counted toward the narrative page limit.

In addition to the detailed line item narrative budget, the applicant is required to provide a detailed spend plan and time line for each project which provide details of how proposed activities will be accomplished within the current budget period.

Additional information may be included in the application appendices. The appendices must be uploaded to the "Other Attachments Form" of application package in Grants.gov. Note: appendices will not be counted toward the narrative page limit. This additional information includes:

N/A.

Additional information submitted via Grants.gov must be uploaded in a PDF file format, and should be named:

The following documents are mandatory and are therefore required as part of your application submission. Please upload these documents under Mandatory Documents into Grants.gov.

SF424: Application for Federal Assistance
SF424B: Budget Information
SF LLL: Disclosure of Lobbying Activities

No more than 4 electronic attachments should be uploaded per application.

CDC Assurances and Certifications: *All applicants are required to sign and submit "Assurances and Certifications" documents indicated at* http://wwwn.cdc.gov/grantassurances/(S(mj444mxct51lnrv1hljjjmaa))/Homepage.aspx.
Applicants may follow either of the following processes:

- *Complete the applicable assurances and certifications with each application submission, name the file "Assurances and Certifications" and upload it as a PDF file with at www.grants.gov*
- *Complete the applicable assurances and certifications and submit them directly to CDC on an annual basis at http://wwwn.cdc.gov/grantassurances/(S(mj444mxct51lnrv1hljjjmaa))/Homepage.aspx*

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

Risk Assessment Questionnaire Requirement
CDC is required to conduct pre-award risk assessments to determine the risk an applicant poses to meeting federal programmatic and administrative requirements by taking into account issues such as financial instability, insufficient management systems, non-compliance with award

conditions, the charging of unallowable costs, and inexperience. The risk assessment will include an evaluation of the applicant's CDC Risk Questionnaire, located at https://www.cdc.gov/grants/documents/PPMR-G-CDC-Risk-Questionnaire.pdf, as well as a review of the applicant's history in all available systems; including OMB-designated repositories of government-wide eligibility and financial integrity systems (see 45 CFR 75.205(a)), and other sources of historical information. These systems include, but are not limited to: FAPIIS (https://www.fapiis.gov/), including past performance on federal contracts as per Duncan Hunter National Defense Authorization Act of 2009; Do Not Pay list; and System for Award Management (SAM) exclusions.

CDC requires all applicants to complete the Risk Questionnaire, OMB Control Number 0920-1132 annually. This questionnaire, which is located at https://www.cdc.gov/grants/documents/PPMR-G-CDC-Risk-Questionnaire.pdf, along with supporting documentation must be submitted with your application by the closing date of the Notice of Funding Opportunity Announcement. If your organization has completed CDC's Risk Questionnaire within the past 12 months of the closing date of this NOFO, then you must submit a copy of that questionnaire, or submit a letter signed by the authorized organization representative to include the original submission date, organization's EIN and DUNS. When uploading supporting documentation for the Risk Questionnaire into this application package, clearly label the documents for easy identification of the type of documentation. For example, a copy of Procurement policy submitted in response to the questionnaire may be labeled using the following format: Risk Questionnaire Supporting Documents _ Procurement Policy.

Duplication of Efforts

Applicants are responsible for reporting if this application will result in programmatic, budgetary, or commitment overlap with another application or award (i.e. grant, cooperative agreement, or contract) submitted to another funding source in the same fiscal year. Programmatic overlap occurs when (1) substantially the same project is proposed in more than one application or is submitted to two or more funding sources for review and funding consideration or (2) a specific objective and the project design for accomplishing the objective are the same or closely related in two or more applications or awards, regardless of the funding source. Budgetary overlap occurs when duplicate or equivalent budgetary items (e.g., equipment, salaries) are requested in an application but already are provided by another source. Commitment overlap occurs when an individual's time commitment exceeds 100 percent, whether or not salary support is requested in the application. Overlap, whether programmatic, budgetary, or commitment of an individual's effort greater than 100 percent, is not permitted. Any overlap will be resolved by the CDC with the applicant and the PD/PI prior to award. Report Submission: The applicant must upload the report in Grants.gov under "Other Attachment Forms." The document should be labeled: "Report on Programmatic, Budgetary, and Commitment Overlap."

Submission Dates and Times

This announcement is the definitive guide on application content, submission, and deadline. It

supersedes information provided in the application instructions. If the application submission does not meet the deadline published herein, it will not be eligible for review and the recipient will be notified the application did not meet the submission requirements.
This section provides applicants with submission dates and times. Applications that are submitted after the deadlines will not be processed.
If Grants.gov is inoperable and cannot receive applications, and circumstances preclude advance notification of an extension, then applications must be submitted by the first business day on which grants.gov operations resume.

Application Deadline Date

Due Date for Applications: **03/08/2019**

Explanation of Deadlines: Application must be successfully submitted to Grants.gov by 11:59pm Eastern Standard Time on the deadline date.

Intergovernmental Review

Executive Order 12372 does not apply to this program.

Pilot Program for Enhancement of Employee Whistleblower Protections
All applicants will be subject to a term and condition that applies the terms of 48 CFR section 3.908 to the award and requires that recipients inform their employees in writing (in the predominant native language of the workforce) of employee whistleblower rights and protections under 41 U.S.C 4712.

Copyright Interest Provisions
This provision is intended to ensure that the public has access to the results and accomplishments of public health activities funded by CDC. Pursuant to applicable grant regulations and CDC's Public Access Policy, Recipient agrees to submit into the National Institutes of Health (NIH) Manuscript Submission (NIHMS) system an electronic version of the final, peer-reviewed manuscript of any such work developed under this award upon acceptance for publication, to be made publicly available no later than 12 months after the official date of publication. Also at the time of submission, Recipient and/or the Recipient's submitting author must specify the date the final manuscript will be publicly accessible through PubMed Central (PMC). Recipient and/or Recipient's submitting author must also post the manuscript through PMC within twelve (12) months of the publisher's official date of final publication; however the author is strongly encouraged to make the subject manuscript available as soon as possible. The recipient must obtain prior approval from the CDC for any exception to this provision.

The author's final, peer-reviewed manuscript is defined as the final version accepted for journal publication, and includes all modifications from the publishing peer review process, and all graphics and supplemental material associated with the article. Recipient and its submitting authors working under this award are responsible for ensuring that any publishing or copyright agreements concerning submitted articles reserve adequate right to fully comply with this provision and the license reserved by CDC. The manuscript will be hosted in both PMC and the

CDC Stacks institutional repository system. In progress reports for this award, recipient must identify publications subject to the CDC Public Access Policy by using the applicable NIHMS identification number for up to three (3) months after the publication date and the PubMed Central identification number (PMCID) thereafter.

Federal Funding Accountability and Transparency Act of 2006 (FFATA), P.L. 109–282, as amended by section 6202 of P.L. 110–252 requires full disclosure of all entities and organizations receiving Federal funds including awards, contracts, loans, other assistance, and payments through a single publicly accessible Web site, www.USASpending.gov.

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

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

- http:// frwebgate.access.gpo.gov /cgi-bin/getdoc.cgi ?dbname= 109_cong_bills&docid= f:s2590enr.txt.pdf,
- https://www.fsrs.gov/documents/ffata_legislation_110_252.pdf

Funding Restrictions

Funding Restrictions:
Restrictions, which must be taken into account while writing the budget, are as follows:
In accordance with the United States Protecting Life in Global Health Assistance policy, all non-governmental organization (NGO) applicants acknowledge that foreign NGOs that receive funds provided through this award, either as a prime recipient or subrecipient, are strictly prohibited, regardless of the source of funds, from performing abortions as a method of family planning or engaging in any activity that promotes abortion as a method of family planning, or to provide financial support to any other foreign non-governmental organization that conducts such activities. See Additional Requirement (AR) 35 for applicability (https://www.cdc.gov/grants/additionalrequirements/ar-35.html).

- Recipients may not use funds for research.
- Recipients may not use funds for clinical care.
- Recipients may only expend funds for reasonable program purposes, including personnel, travel, supplies, and services, such as contractual.
- Recipients may not generally use HHS/CDC/ATSDR funding for the purchase of furniture or equipment. Any such proposed spending must be identified in the budget.
- The direct and primary recipient in a cooperative agreement program must perform a substantial role in carrying out project objectives and not merely serve as a conduit for an award to another party or provider who is ineligible.

Other than for normal and recognized executive-legislative relationships, no funds may be used for: publicity or propaganda purposes, for the preparation, distribution, or use of any material designed to support or defeat the enactment of legislation before any legislative body the salary or expenses of any grant or contract recipient, or agent acting for such recipient, related to any activity designed to influence the enactment of legislation, appropriations, regulation, administrative action, or Executive order proposed or pending before any legislative body.

See Additional Requirement (AR) 12 for detailed guidance on this prohibition and additional guidance on lobbying for CDC recipients.

The recipient can obtain guidance for completing a detailed justified budget on the CDC website, at the following Internet address:
http://www.cdc.gov/grants/interestedinapplying/applicationprocess.html

Other Submission Requirements

Application Submission
Submit the application electronically by using the forms and instructions posted for this funding opportunity on www.Grants.gov. If access to the Internet is not available or if the recipient encounters difficulty in accessing the forms on-line, contact the HHS/CDC Office of Grants Services (OGS) Technical Information Management Section (TIMS) staff at (770) 488-2700 for further instruction.
Note: Application submission is not concluded until successful completion of the validation process. After submission of your application package, recipients will receive a "submission receipt" email generated by Grants.gov. Grants.gov will then generate a second e-mail message to recipients which will either validate or reject their submitted application package. This validation process may take as long as two (2) business days. Recipients are strongly encouraged check the status of their application to ensure submission of their application package is complete and no submission errors exists. To guarantee that you comply with the application deadline published in the Notice of Funding Opportunity, recipients are also strongly encouraged to allocate additional days prior to the published deadline to file their application. Non-validated applications will not be accepted after the published application deadline date.
In the event that you do not receive a "validation" email within two (2) business days of application submission, please contact Grants.gov. Refer to the email message generated at the time of application submission for instructions on how to track your application or the Application User Guide, Version 3.0 page 57.

Electronic Submission of Application:
Applications must be submitted electronically by using the forms and instructions posted for this notice of funding opportunity at www.grants.gov. Applicants can complete the application package using Workspace, which allows forms to be filled out online or offline. All application attachments must be submitted using a PDF file format. Instructions and training for using Workspace can be found at www.grants.gov under the "Workspace Overview" option.

Applications submitted through www.Grants.gov, are electronically time/date stamped and assigned a tracking number. The Authorized Organizational Representative (AOR) will receive an e-mail notice of receipt when HHS/CDC receives the application. The tracking number serves to document submission and initiate the electronic validation process before the application is made available to CDC for processing.
If the recipient encounters technical difficulties with Grants.gov, the recipient should contact Grants.gov Customer Service. The Grants.gov Contact Center is available 24 hours a day, 7 days a week. The Contact Center provides customer service to the recipient community. The extended hours will provide recipients support around the clock, ensuring the best possible customer service is received any time it's needed. You can reach the Grants.gov Support Center at 1-800-518-4726 or by email at support@grants.gov. Submissions sent by e-mail, fax, CD's or thumb drives of applications will not be accepted.

After consulting with the Grants.gov Support Center, if the technical difficulties remain unresolved and electronic submission is not possible to meet the established deadline, organizations may submit a request prior to the application deadline by email to the Grants Management Specialist/Officer for permission to submit a paper application. An organization's request for permission must: (a) include the Grants.gov case number assigned to the inquiry, (b) describe the difficulties that prevent electronic submission and the efforts taken with the Grants.gov Support Center (c) be submitted to the Grants Management Specialist/Officer at least 3 calendar days prior to the application deadline. Paper applications submitted without prior approval will not be considered.

If a paper application is authorized, the recipient will receive instructions from OGS TIMS to submit the original and two hard copies of the application by mail or express delivery service.

Section V. Application Review Information

Eligible recipients are required to provide measures of effectiveness that will demonstrate the accomplishment of the various identified objectives of the **CDC-RFA-OE17-17010201SUPP19**. Measures of effectiveness must relate to the performance goals stated in the "Purpose" section of this announcement. Measures of effectiveness must be objective, quantitative and measure the intended outcome of the proposed program. The measures of effectiveness must be included in the application and will be an element of the evaluation of the submitted application.

Criteria

Eligible recipients will be evaluated against the following criteria:

i. Approach — Maximum Points: 30

The following criteria will be used to evaluate each project for which an applicant is applying:

- Applicant's proposed approach, including project goals, strategies and activities, are consistent with education and training best practices
- Applicant shows that the proposed use of funds is an efficient and effective way to implement the strategies and activities and attain the project period outcomes

- Applicant presents a work plan and project narrative that is aligned with the strategies/activities, outcomes, and performance measures in the approach and is consistent with the content and format proposed by CDC

ii. Evaluation and Performance Measurement — Maximum Points: 30

The following criteria will be used to evaluate each project for which an applicant is applying:

- Applicant describes clear monitoring and evaluation procedures and how evaluation and performance measurement will be incorporated into planning, implementation, and reporting of project activities
- Applicant describes how performance measurement and evaluation findings will be reported

iii. Applicant's Organizational Capacity to Implement the Approach — Maximum Points: 40

The following criteria will be used to evaluate each project for which an applicant is applying:

- Applicant provides evidence of relevant experience and capacity (management, administrative, and technical) to implement the activities and achieve the project outcomes
- Applicant provides evidence of having a broad national reach through its membership
- Applicant demonstrates experience and capacity to implement the evaluation plan

Budget — Maximum Points: 0

Budget must align with the proposed work plan.

Review and Selection Process

Review

Eligible applications will be jointly reviewed for responsiveness by **CSELS** and PGO. Incomplete applications and applications that are non-responsive will not advance through the review process. Recipients will be notified in writing of the results.

An objective review panel will evaluate complete and responsive applications according to the criteria listed in Section V. Application Review Information, subsection entitled “Criteria”.

The National Center for Immunization and Respiratory Diseases will also review the applications for Project 1.

The Center for Surveillance, Epidemiology and Laboratory Services will also review the applications for Project 2.

Selection

Applications may be funded out of rank order.

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

Anticipated Announcement and Award Dates

The anticipated awarded date is April 8, 2019.

Section VI. Award Administration Information

Award Notices

Successful recipients will receive a Notice of Award (NoA) from the CDC Office of Grants Services. The NoA shall be the only binding, authorizing document between the recipient and CDC. The NoA will be signed by an authorized Grants Management Officer and e-mailed to the program director. A hard copy of the NoA will be mailed to the recipient fiscal officer identified in the application.
Unsuccessful recipients will receive notification of the results of the application review by mail.

Administrative and National Policy Requirements

Administrative and National Policy Requirements, Additional Requirements (ARs) outline the administrative requirements found in 45 CFR Part 75 and the HHS Grants Policy Statement and other requirements as mandated by statute or CDC policy. CDC programs must indicate which ARs are relevant to the NOFO. All NOFOs from the Center for Global Health must include AR-35. Recipients must then comply with the ARs listed in the NOFO. Do not include any ARs that do not apply to this NOFO. NOFO Recipients must comply with administrative and national policy requirements as appropriate. For more information on the Code of Federal Regulations, visit the National Archives and Records Administration: https://www.archives.gov/federal-register/cfr. For competing supplements, ARs remain in effect as published in the original announcement.

Continuing Continuations -

The full text of the Uniform Administrative Requirements, Cost Principles, and Audit Requirements for HHS Awards, 45 CFR 75, can be found at:

https://www.ecfr.gov/cgi-bin/text-idx?node=pt45.1.75

Reporting

Federal Funding Accountability and Transparency Act of 2006 (FFATA), P.L. 109–282, as amended by section 6202 of P.L. 110–252 requires full disclosure of all entities and organizations receiving Federal funds including awards, contracts, loans, other assistance, and payments through a single publicly accessible Web site, http://www.USASpending.gov
Compliance with this law is primarily the responsibility of the Federal agency. However, two elements of the law require information to be collected and reported by applicants: 1) information on executive compensation when not already reported through the SAM, and 2)

similar information on all sub-awards/subcontracts/consortiums over $25,000.
For the full text of the requirements under the FFATA and HHS guidelines, go to:

- http:// frwebgate. access. gpo.gov /cgi-bin /getdoc.cgi ?dbname= 109_cong_bills &docid= f:s2590enr .txt.pdf
- https://www.fsrs.gov /documents /ffata_legislation_ 110_252.pdf

In accordance with the Paperwork Reduction Act, projects that involve the collection of information from 10 or more persons from the public and funded by a grant or a cooperative agreement may be subject to review and approval by the Office of Management and Budget (OMB).

Section VII. Agency Contacts

CDC encourages inquiries concerning this announcement.

For **programmatic technical assistance and general inquiries**, contact:

Susan McCarthy, Project Officer
Department of Health and Human Services
Centers for Disease Control and Prevention
2400 Century Center Boulevard

Atlanta, GA 30345

Telephone: 404.498.0518
Email: zcu0@cdc.gov

For **application submission** questions, contact:
Technical Information Management Section
Department of Health and Human Services
CDC Office of Grants Services
2920 Brandywine Road, MS E-14
Atlanta, GA 30341
Telephone: 770-488-2700
Email: ogstims@cdc.gov

Wanda Tucker, Grants Management Specialist
Department of Health and Human Services
Office of Grants Services
, GA
Telephone: (770) 488-5056
Email: kna9@cdc.gov

Section VIII. Other Information

Other CDC Notice of Funding Opportunities can be found at www.grants.gov.