**Director’s Letter**

As I reflect on Fiscal Year 2014 (FY14), it is obvious to us all that it has been a time of continued growth and advancement for CDC’s Procurement and Grants Office (PGO). We not only are growing into our organizational structure with concentrated focuses on acquisition and assistance, but we are continuing to advance our business practices and ensure our customers’ needs are met (visit our customer service pledges on the back cover for more details). We do this to assist CDC in its mission to keep Americans safe and healthy where they work, live, and play. Thanks to our dedicated staff, PGO is stronger and better equipped to meet the challenging needs of the current fiscal climate.

In FY14, PGO obligated more than $10 billion by awarding more than 25,000 procurement and grant actions to our partners throughout the world (see table at right). Within the following pages, you will see highlights and updates from FY14 that are based on our strategic priorities of efficiency, effectiveness, healthy enterprise, and customer service. You will see just a glimpse of the story of the dollars obligated and actions made by PGO employees.

This includes coverage on

➤ improving CDC’s grants management through the implementation of GrantSolutions;

➤ providing guidance and assistance around the globe through our site visits;

➤ helping the Prevention and Public Health Fund (PPHF) continue to invest in prevention, wellness, and public health activities; and

➤ saving CDC millions of dollars through our work with the Strategic National Stockpile initiative.

As we move into the new fiscal year, I am both hopeful and thankful. I am hopeful that we will exceed the work accomplished in FY14 and thankful that I have the team in place to do just that. I hope as you review this annual report, you will sense, as I do, that FY14 was an exceptionally productive time for PGO, and that the future looks bright indeed.

Sincerely,

Bill Nichols
Director, Procurement and Grants Office
PGO’s Strategic Plan for Fiscal Years 2014/15 provides a path for success for the office and is fully integrated into all of PGO’s performance measures.

PGO’s Strategic Focus and Performance Management

The better you understand where your organization is today, the better you will be able to guide where you want it to be tomorrow.

And with that in mind, PGO developed an FY14/15 Strategic Plan. In doing so, PGO assessed the progress on FY13 priorities, determined whether the FY13 priorities were still applicable, revised priorities to be more measurable and relevant, and developed new priorities.

Why was it created?

Simply, the purpose of this strategic plan is to guide PGO’s direction as it supports CDC’s critical public health priorities.

With more than 300 staff and an annual budget of approximately $38 million, PGO awards more than 25,000 acquisition and assistance actions each year, obligating more than $10 billion in federal funds. The Office allows public health funds to more quickly and effectively reach intended populations to maximize public health outcomes.

PGO has identified four goal areas aligned to CDC’s Office of the Chief Operating Officer (OCOO), which form the foundation of our strategic focus areas:

- **Efficiency** — Implement business practices and cost-effective strategies that ensure PGO is a model for efficient government operations
- **Effectiveness** — Improve acquisition and assistance effectiveness
- **Healthy Enterprise** — Be a desired employer that attracts, retains, and develops a skilled and diverse acquisition and assistance workforce
- **Customer Service** — Improve relationships with internal and external stakeholders

Within these four goal areas, the Strategic Plan outlines seven strategic initiatives and over 40 performance measures. The Plan aligns with and supports OCOO’s Strategic Framework, PGO’s Quarterly Program Review (QPR), and performance measures tracked by the Department of Health and Human Services (HHS) and the Office of Management and Budget (OMB).

PGO launched an online Performance Dashboard to track progress on the performance measures outlined in the Strategic Plan, and PGO incorporated measures from the Strategic Plan into the individual performance plans of PGO’s leaders and staff. Metrics will be updated each fiscal year to build on what was learned and accomplished the previous fiscal year.

So where will PGO be tomorrow?

Even stronger and better built to support CDC’s goal of: **Safer. Healthier. People.**
Major Accomplishments

PGO responded swiftly to support CDC’s Ebola response efforts. Following CDC’s Emergency Operations Center (EOC) activation in July, PGO’s EOC Cadre, led by Christine Godfrey, processed more than 100 procurement requests in less than 2 months. This work was in addition to the employees’ regular end-of-year workload. The total dollar value of these buys was just under $1.5 million. The purchases were largely for laboratory supplies and equipment, personal protective equipment, and office supplies. Ebola will continue to impact PGO’s operations into FY15. Not only has Congress appropriated $30 million, but in addition, the U.S. Presidential Administration submitted an emergency supplemental funding request to Congress in the amount of $6.18 billion specifically for CDC’s Ebola response. (See full story on page 11.)

PGO successfully launched the Announcement Module of GrantSolutions, the new comprehensive grants management system to which CDC is transitioning. This module-based service, already in use by 17 federal agencies, will ultimately eliminate the existing patchwork of manual and electronic grant systems currently used throughout CDC and provide better accountability and transparency of grants management for all of CDC and its grantees. (See full story on page 12.)

PGO significantly expanded acquisition services to the Division of Strategic National Stockpile (DSNS) within CDC’s Office of Public Health Preparedness and Response (OPHP). This initiative will result in a savings of $400 million to CDC over the five year contract period. (See full story on page 10.)

PGO’s team assigned to the Ebola response; from left to right: David Kelley, Christine Godfrey, Timothy Williams, and Kristopher Lemaster
During FY14, PGO dramatically increased the effectiveness of closeout procedures and the number of closeout actions completed for contracts, grants, and cooperative agreements. In partnership with CDC’s program offices, PGO undertook several new initiatives to increase the number of completed contract and grant closeout actions and resolve unliquidated obligations (ULO).

- PGO’s Office of Acquisition Services (OAS) worked with a contractor team to complete closeout actions for contracts awarded in 2009 and earlier.
- OAS initiated the automated closeout function in Integrated Contracts Expert (ICE), CDC’s contracting system, for contracts with dollar amounts that matched Unified Financial Management System (UFMS) expenditures.
- PGO’s Office of Grant Services (OGS) initiated a review of all recent and active grants and cooperative agreements, and identified excess funding that could be used for other actions to support CDC’s mission. The OGS review was so successful that nearly $70 million was reallocated to global health programs.
- Congress authorized CDC to establish a Working Capital Fund (WCF) in FY14. As a “no-year revolving fund,” money within the WCF, once earned through the provision of services, are not restricted for use within a period of time. The majority of CDC’s appropriated funds are only available for use within the fiscal year it was given, making large capital investments very difficult. This no-year condition allows the agency to establish a reserve fund that can address long-term needs (such as IT equipment and systems). In FY14, PGO’s contract closeout initiative resulted in nearly $14 million in de-obligated funds returned to the WCF.
- Through internal and external collaboration, PGO staff were able to quickly facilitate the acquisition and installation of water protection systems in 44 locations throughout New Mexico to protect communities from unsafe levels of arsenic in the water supply, thereby eliminating a hazardous and potentially fatal public health dilemma.
- OAS successfully completed a Procurement Management Review (PMR), working with an onsite team of 10 federal acquisition professionals from HHS. This accountability and compliance measure ascertained PGO’s compliance with federal and HHS acquisition regulations, policies, and procedure; identified areas for improvement; and collected information on best-practices to share across HHS acquisition offices. The review specifically categorized 10 areas of efficiency and effectiveness within OAS as “best practices,” suitable to share with other federal acquisition organizations.
- Of particular note were two very significant best practices highlighted by HHS personnel. These were the OAS standard operating procedure (SOP) for the Contractor Performance Assessment Reporting System (CPARS) and the Acquisition Requirements Roadmap Tool (ARRT) training program. The CPARS SOP established by OAS set aggressive standards for registering and evaluating contractors that far exceeded HHS acquisition standards for turnaround time. These best practices are already being implemented by OAS and help illuminate the office’s efforts to be “ahead of the curve.”

- PGO processed 141 Freedom of Information Act (FOIA) requests, helping to maintain a commitment to transparency and accountability in federal government business.
- PGO enhanced its electronic newsletter, PGO Pulse, for internal partners, which has resulted in the ability to track continuous growth in subscribers and maintain a high average open/read rate of 67 percent.
- PGO’s commitment to service excellence led to a successful and substantive customer service renaissance in FY14. With a constant flow of customer satisfaction surveys, the codifying of customer service standards, and systematic socializing of customer service expectations, service excellence continues to be the focus at PGO. (See inside back cover for PGO Customer Service Pledges). “We have made significant progress,” notes PGO Director Bill Nichols, “but we recognize we still have work to do.”
- PGO developed an online tool to streamline the waiver approval process for late actions. The new tool automated the approval workflow, provided program offices with real-time tracking, and captured all waivers in a single, online, searchable repository. By eliminating the need for manual routing and tracking, the tool provided administrative cost savings to both PGO and our internal customers. Additionally, PGO avoided IT development costs by using in-house staff and existing applications, such as SharePoint, InfoPath, and Nintex Workflow.
- PGO became the first CDC office to launch a SharePoint-based intranet site with over 400 resources updated and available to CDC employees.
PGO Employee Awards and Recognition

PGO employees continued to receive notable awards and acknowledgement throughout the year, including CDC Employee of the Month, OCOO Honor Awards, CDC-ATSDR Honor Awards, and two recipients of the OCOO Service Star Award, among others.

CDC Employee of the Month

With over 10,000 employees at CDC, being named Employee of the Month says a lot about the person. But when it happens three times in one year to employees at PGO, it says a lot about where they work. Matthew Williams (October 2013), Portia Johnson (January 2014), and David Serwitz (April 2014) all received this distinctive honor and are representative of the type of employee that contributes to PGO’s mission on a daily basis.

OCOO Honor Awards

The Office of the Chief Operating Officer (OCOO) held their first-ever honor awards ceremony on December 9, 2013 and included recognition of several PGO employees. Efficiency, effectiveness, and customer service were the order of the day, as the following PGO team members were recognized:

➤ David Kelley, Communications
➤ Patrick Gourley, Partnership
➤ Lisa Jordan, Motivator
➤ Jamie Legier, Director’s Award

Special Acknowledgement: OCOO Director’s Award

PGO’s Jamie Legier received the OCOO Director’s Award for her commitment and dedication in making PGO more efficient and effective and most recently, in leading PGO’s Global Health Grants Branch.

CDC/ATSDR Honor Awards

The 62nd Annual CDC & ATSDR Honor Awards Ceremony was held on May 13, 2014 at the Tom Harkin Global Communications Center on the Roybal Campus. The program recognizes employees for their outstanding contributions to CDC’s mission and goals. Of the employees recognized, Dr. Frieden said, “Their innovations have helped to improve the health of our nation and countries around the world.”

CDC-ATSDR Honor Award Recipients from PGO included Dale DeFilipps, Bonnie Kennedy, and Matthew Williams, who were all recognized for “outstanding service in managing the award of a highly complex acquisition for Achieving Public Health Impact through Research.” Kenneth Ivery was recognized for “Excellence in Environmental Conservation.”

Other Notable Achievements/Awards

➤ Matthew Williams, OAS Contract Specialist, was awarded the HHS Award for Excellence in Management on June 5, 2014. Presented annually at the HHS Honor Awards Ceremony, this award is the third highest honor award granted by the Department and is conferred by the Secretary. It acknowledges employees who significantly contribute to the improvement of their agency’s performance. In this case, Mr. Williams received the award for his outstanding efforts on Achieving Public Health Impact through Research Blanket Purchase Agreement (BPA).

➤ Nancy Norton, Deputy Director of OAS received special recognition from the Georgia National Guard, receiving the “Patriot Award,” being recognized as a Patriotic Employer.
### Domestic grant programs with the largest total funding amounts

Forty-five percent of CDC’s grant spending supports these top ten domestic public health priorities.

<table>
<thead>
<tr>
<th>Program</th>
<th>Grantees</th>
<th>Obligations</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hospital Preparedness Program (HPP) and Public Health Emergency</td>
<td>62</td>
<td>$834,824,421</td>
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<tr>
<td>Preparedness (PHEP) Cooperative Agreements</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Comprehensive HIV Prevention Programs for Health Departments</td>
<td>61</td>
<td>$339,663,834</td>
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<tr>
<td>Immunization and Vaccines for Children Program</td>
<td>64</td>
<td>$312,344,637</td>
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<tr>
<td>Cancer Prevention and Control Programs for State, Territorial and</td>
<td>79</td>
<td>$217,609,273</td>
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<tr>
<td>Tribal Organizations</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Preventive Health and Health Services Block Grant</td>
<td>61</td>
<td>$145,657,781</td>
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<tr>
<td>PPHF 2014 State Public Health Actions to Prevent and Control Diabetes,</td>
<td>51</td>
<td>$100,802,792</td>
</tr>
<tr>
<td>Heart Disease, Obesity and Associated Risk Factors and Promote School Health</td>
<td></td>
<td></td>
</tr>
<tr>
<td>PPHF 2014 Epidemiology and Laboratory Capacity for Infectious Diseases (ELC) — Building and Strengthening Epidemiology, Laboratory and Health Information Systems Capacity in State and Local Health Departments</td>
<td>64</td>
<td>$97,216,654</td>
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<tr>
<td>Improving Sexually Transmitted Disease Programs Through Assessment,</td>
<td>59</td>
<td>$95,235,813</td>
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<tr>
<td>Assurance, Policy Development, and Prevention Strategies (STD AAPPS)</td>
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<td></td>
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<tr>
<td>Tuberculosis Elimination and Laboratory Cooperative Agreements</td>
<td>62</td>
<td>$76,993,563</td>
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</table>
Grants

In FY14, PGO supported 4,251 grant awards to 3,545 grantees. These 4,251 awards generated 11,704 actions PGO processed and put more than $5 billion into public health programs and research across the world.

Comparison of FY13 and FY14 total grant actions and obligations processed by PGO.

<table>
<thead>
<tr>
<th></th>
<th>FY13</th>
<th>FY14</th>
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</thead>
<tbody>
<tr>
<td>Actions</td>
<td>11,735</td>
<td>11,704</td>
</tr>
<tr>
<td>Obligations</td>
<td>$4,934,622,137</td>
<td>$5,111,912,709</td>
</tr>
</tbody>
</table>

How CDC grant funds were obligated through CDC’s centers, institutes, and offices (CIOs)

<table>
<thead>
<tr>
<th>CIO</th>
<th>Grants</th>
<th>Actions</th>
<th>Obligations</th>
<th>% of Actions</th>
<th>% of Obligations</th>
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</thead>
<tbody>
<tr>
<td>ATSDR</td>
<td>48</td>
<td>94</td>
<td>$18,319,745</td>
<td>0.8%</td>
<td>0.4%</td>
</tr>
<tr>
<td>CGH</td>
<td>719</td>
<td>2,896</td>
<td>$1,597,423,454</td>
<td>24.7%</td>
<td>31.2%</td>
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<tr>
<td>CSELS</td>
<td>107</td>
<td>303</td>
<td>$45,470,734</td>
<td>2.6%</td>
<td>0.9%</td>
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<tr>
<td>NCBDDD</td>
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<td>446</td>
<td>$63,280,034</td>
<td>3.8%</td>
<td>1.2%</td>
</tr>
<tr>
<td>NCCDPHP</td>
<td>960</td>
<td>2,274</td>
<td>$790,222,872</td>
<td>19.4%</td>
<td>15.5%</td>
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<td>NCEN</td>
<td>185</td>
<td>331</td>
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<td>2.3%</td>
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<td>NCHHSTP</td>
<td>798</td>
<td>2,384</td>
<td>$760,600,596</td>
<td>20.4%</td>
<td>14.9%</td>
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<tr>
<td>NCCHS</td>
<td>1</td>
<td>1</td>
<td>$274,889</td>
<td>0.0%</td>
<td>0.0%</td>
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<tr>
<td>NCIPC</td>
<td>267</td>
<td>623</td>
<td>$87,400,656</td>
<td>5.3%</td>
<td>1.7%</td>
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<tr>
<td>NCIRD</td>
<td>248</td>
<td>601</td>
<td>$454,694,691</td>
<td>5.1%</td>
<td>8.9%</td>
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<tr>
<td>NIOSH</td>
<td>268</td>
<td>458</td>
<td>$97,757,170</td>
<td>3.9%</td>
<td>1.9%</td>
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<tr>
<td>OD</td>
<td>6</td>
<td>22</td>
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<tr>
<td>OHD</td>
<td></td>
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<td>ONHED</td>
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<td>$20,000</td>
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<td>OPHPR</td>
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<td>514</td>
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<td>16.5%</td>
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<td>OSTLTS</td>
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<td>306</td>
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<td>2.6%</td>
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<tr>
<td><strong>Total</strong></td>
<td>4,251</td>
<td>11,704</td>
<td>$5,111,912,709</td>
<td>100.0%</td>
<td>100.0%</td>
</tr>
</tbody>
</table>

CDC FY14 percentage of grants awarded by grantee type

- Foreign 12% (431)
- Government 61% (2,151)
- Profit 2% (88)
- Non Profit 23% (806)
- Other and Indian Tribes 2% (69)
- Total 3,545

CDC FY14 percentage of grants awarded by the type of government recipient

- Federal <1% (9)
- State 92% (1,973)
- County 3% (54)
- City 5% (110)
- Sponsored Organizations <1% (5)
- Total 2,151

Data for this chart was pulled from http://taggs.hhs.gov. This data is inclusive of obligated and de-obligated information, as well administrative and close-out actions. Thus, when reviewing funding totals in the aggregate, it does not match FY14 amount in other charts on this page.
## Contracts

In FY14, PGO processed 13,635 contract actions that totaled $5,280,893,735.

### Comparison of FY13 and FY14 total contract actions and obligations processed by PGO

<table>
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<tr>
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<th>Actions</th>
<th>Obligations</th>
</tr>
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<td>FY13</td>
<td>13,743</td>
<td>$5,099,467,429</td>
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<tr>
<td>FY14</td>
<td>13,635</td>
<td>$5,280,893,735</td>
</tr>
</tbody>
</table>

### CDC FY14 percentage of contract obligations by type

- Fixed Price 86%
- Time and Material 8%
- Cost Plus Fee 5%
- Cost Only 1%
- Labor Hour <1%

### CDC FY14 percentage of contract obligations by category

- Supplies and Vaccines 74%
- Services 23%*
- IT 2%
- Other <1%*

*Services includes some IT services; Other includes Equipment & Furniture, Construction, and Architect & Engineering services.

### How CDC contracts were allocated among CDC’s CIOs

<table>
<thead>
<tr>
<th>CIO</th>
<th>Actions</th>
<th>Obligations</th>
<th>% of Actions</th>
<th>% of Obligations</th>
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</thead>
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<td>ATSDR</td>
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<td>OID</td>
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<td>ONDIEN</td>
<td>40</td>
<td>$10,444,359</td>
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<td>8.0%</td>
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<td>OSSAM</td>
<td>833</td>
<td>$90,483,147</td>
<td>6.1%</td>
<td>1.7%</td>
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<td>OSTLTS</td>
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<td>$6,272,373</td>
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<td>PGO</td>
<td>117</td>
<td>$8,788,249</td>
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<td>0.2%</td>
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<tr>
<td><strong>Total</strong></td>
<td><strong>13,635</strong></td>
<td><strong>$5,280,893,735</strong></td>
<td><strong>100.0%</strong></td>
<td><strong>100.0%</strong></td>
</tr>
</tbody>
</table>
Supporting the Stockpile

PGO’s OAS is uniquely poised to support CDC’s vital public health mission.

Case in point: PGO’s acquisition expertise made a significant contribution to the Division of Strategic National Stockpile (DSNS) within CDC’s Office for Public Health Preparedness and Response (OPHPR).

CDC’s Strategic National Stockpile (SNS) is the national repository of critical medicines and medical supplies established to protect the American public following a public health emergency. The Division procures, stores, and delivers these assets across the U.S. in the event federal assistance is requested to supplement state and local public health supplies and resources.

The amount of physical goods acquired through contract actions for this stockpile is monumental. Until recently, these goods were procured through annual Inter-Agency Agreements (IAAs) with the Department of Veterans Affairs and the Defense Logistics Agency. In 2014, PGO sought responsibility for the $1 billion annual acquisition of these supplies, allowing the use of a 5-year contract. Soon PGO will execute, process, and monitor acquisition services for the entire stockpile program, which should result in a savings of $400 million to CDC over the five year period. In addition, the new arrangement can provide improved fiscal stability for the multiple contractors involved by significantly increasing their planning time.

While this substantially increases PGO’s performance profile (i.e., contract services provided by PGO’s acquisition team will increase by $1 billion per year), the $400 million in savings to CDC is significant, and PGO’s corps of business advisors are both trained and looking forward to the challenge.

When natural disasters or man-made public health emergencies happen, lives and communities are torn apart. Public services often come to a halt. Suddenly, vital medical supplies and pharmaceuticals may be out of reach to those who need them most. The SNS is available to step in and help bridge the gaps until normal services return. PGO is a critical part of the solution, and by saving millions of dollars, PGO only enhances CDC’s commitment to safer, healthier people.
Ebola Support: Behind the Scenes

Did you ever think the purchase of zippers would be crucial to CDC’s response to public health emergencies? And did you ever think a fading U.S. industry would provide life-saving services for CDC’s emergency response activities? In the case of CDC’s Ebola response, PGO’s work behind the scenes has a significant impact on keeping the world safe and healthy.

In response to the Ebola outbreak, PGO faced new challenges providing emergency support in FY14. With more than 150 CDC personnel in Africa, the agency needed to secure additional protective liners for the Aeromedical Biological Containment System (ABCS). The ABCS is a portable, tent-like device that provides a sterile environment for the patient and protects the flight crew and aeromedical teams from contamination when someone needs to fly home. This same device was used on private missions to transport two Americans infected with Ebola in Liberia to Emory University Hospital in Atlanta.

Within just a couple days of the first ABCS deployment, Jeff Napier, PGO’s director of the Office of Acquisition Services, visited a textile manufacturing company in rural Buffalo, MO, to buy additional ABCS liners. This textile company is a minority-owned small business and a remnant of an industry that has been leaving the United States. It was contracted more than five years ago to design and hand-craft these ABCS protective liners. Little did the factory workers know how their efforts would be displayed on the world’s stage. “I was quite moved by the seamstresses who shared their story with me,” Napier said. “Here they sat in rural America at a fading industry, handcrafting these liners that would be seen on news stations throughout the world. And I was there to acknowledge the importance of their work and request they make more.”

The women enthusiastically pulled out an old ABCS frame they had placed in storage after the first purchase. It was covered in dust, but they showed Napier how it is used to ensure the measurements were perfect even before the first stitch. It was their model, and they had a life-saving reason to make certain their product was flawless. According to Napier, it was obvious they took their craft seriously.

This textile manufacturing company was having a hard time delivering the liners because a special zipper it needed was no longer in production. The zippers were only available from a German manufacturer, and waiting on them was going to delay delivery of the completed liners by nine weeks. But PGO’s David Kelley, who had a personal contact at a USA-based manufacturer in Georgia, talked to company executives, and they were able to remove seven weeks from the overall production timeline. This creativity and dedication enabled CDC to have these additional protective liners on-hand, if needed.

PGO is proud to support CDC’s emergency response activities and is committed to doing whatever it can to further CDC’s vital public health mission.
GrantSolutions: The Future of CDC Grants Management

PGO awarded over $5 billion through grants to its public health partners around the globe in FY14. Yet many of the management procedures were paper-based or conducted in unconnected systems that required data entry multiple times, but that is going to change. GrantSolutions has been selected as CDC’s new grants management service in an effort to automate and streamline the patchwork of outdated and independent systems being used across CDC. GrantSolutions is a comprehensive web-based grants management service that provides tools for developing and processing a Funding Opportunity Announcement (FOA), making awards, closing out an existing grant, and more. It reduces paper processing which increases accuracy, reporting, and supports auditing by housing all grant and programmatic related documents in one official system of record from project concept approval to grant close-out.

The Administration for Children and Families developed GrantSolutions, and now it is used by over 17 federal agencies. With GrantSolutions, CDC will be able to retire some of the aged and expensive grants management systems still in use and respond to customers’ repeated requests for better operating procedures. In FY14, PGO made significant progress in implementing GrantSolutions, including completing phase one of implementation, training staff, piloting the new service, and planning for phase two of implementation.

Implementing GrantSolutions

CDC is implementing two GrantSolutions modules through FY16: the Announcement Module and the Grants Management Module. The Announcement Module is now in use for FOA development within the agency, as of September 24, 2014. This module automates the lifecycle an FOA from forecasting, developing, and posting to Grants.gov. FOA development is simpler and faster because of electronic clearance reviews and standardized templates for research, non-research, and supplemental announcements.

Grants Management Module implementation is the second and largest phase of the agency’s transition to GrantSolutions. The Grants Management Module will provide comprehensive, electronic end-to-end grants management capabilities that streamline and standardize processes for CDC and grantees. Demonstrations of this module will begin for internal staff in early 2015 and trainings will begin in the spring of 2015. This implementation is expected to take approximately two years and will happen in stages. PGO’s current plan is for the Grants Management Module to be in agency-wide use by FY17.

The Impact of This Investment

More than 1,000 people in CDC programs write, approve, or manage grants and cooperative agreements, and more than 120 employees in PGO’s Office of Grants Services assist them and act as liaisons between the agency and grantees to improve efficiency and effectiveness of the proposed programs. PGO staff processed 11,704 grant actions for 4,251 grants in FY14. The need for business process efficiencies has never been greater. GrantSolutions will streamline communications and correspondence between grantees and CDC post-award, and give grantees real-time access to the status of requests through the Grants Management Module. Eventually, it will allow everyone, internally and externally, who is working on a grant to access information online, see the current status of outstanding actions, and electronically process previously paper-based requests.

Partners and grantees will start receiving more information about GrantSolutions and the Grant Management Module in early 2015. For more information, email GrantSolutions@cdc.gov.

GrantSolutions Modules

- **Announcement Module**: Automates the funding opportunity lifecycle from forecasting through posting of FOAs, streamlining the process to build and publish FOAs.
- **Grants Management Module**: Comprehensive, electronic end-to-end grants management capabilities that streamline and standardizes processes for grantors and grantees.
- **Application Review Module**: Oversees the objective review process, including recruitment and management of reviewers, and the electronic management of panel review sessions, making possible remote reviews.
- **Audit Resolution and Tracking**: Manages the process of resolving and tracking audit findings to ensure Federal grant funds are being used appropriately.
- **Data Tracking**: Supports program-specific data collection instruments, such as performance progress reports and financial status reports.
- **Enterprise Reporting**: Robust reporting platform that provides for standard, ad-hoc, and custom reports as well as dashboards and analytics tools.

1Optional module CIO may purchase at their discretion.
2CDC is still researching the use of these modules.
Site Visits: On the Ground and On Mission

Where in the world was PGO in FY14?

PGO’s influence was felt all over the world in FY14.

Throughout the year, PGO conducts many international site visits, which afford valuable accountability and assistance for recipients of federal funding. These site visits provide on-the-ground technical assistance and are a key component to PGO’s support for international grantees who are fighting dire public health challenges every day.

During these visits, PGO provides instruction and guidance to grantees who are working in challenging environments to accomplish CDC’s global health mission. And this international work is in addition to a larger number of grantees that PGO Grants Management Officers assist remotely and locally throughout the year.

Perhaps most compelling were the site visits conducted by PGO in support of the President’s Emergency Plan for AIDS Relief (PEPFAR). This funding was created to fight the global HIV/AIDS pandemic, and in FY14 alone, more than $1.5 billion was administered by PGO in support of this life-saving initiative. So whether the PEPFAR funding manifests itself in the form of prevention, treatment, or care, PGO personnel strengthened this important initiative throughout the world by providing grants management and contracting expertise.

And it’s working….

According to a 2009 study published in *Annals of Internal Medicine*,1 the PEPFAR program had averted about 1.1 million deaths in Africa and reduced the death rate due to AIDS in the countries involved by 10 percent.2,3

“Accountability, transparency, and guidance are important, of course,” says Jamie Legier, PGO Branch Chief for the grants staff that support the Center for Global Health. “But the true measure is in the number of lives changed. PGO is a part of the solution, in every sense of the word.”

Footnotes

3) http://www.pepfar.gov/funding/results/index.htm
**Customer Service Pledges**

PGO continues to focus on improving our service to our colleagues and partners inside and outside of the agency. Over the past year, we’ve taken specific, tangible steps to drive improvements in customer service:

In addition to the standard CDC customer service performance elements, PGO added specific, objective standards for availability and responsiveness to the performance plan of every PGO employee.

PGO’s Customer Service Workgroup developed PGO Customer Service Pledges to articulate, in objective terms, expectations of employees and our commitments to customers. (Those Pledges are provided on the back cover.)

PGO launched a new monthly customer satisfaction survey based on a sample of actions awarded in the prior month. The survey measures our success against PGO’s Customer Service Pledges and is designed to pinpoint areas for improvement and gather actionable feedback.

PGO has developed — and will continue to develop — new systems, processes, tools, and information resources to improve our efficiency and effectiveness and enhance customer satisfaction.
We are Aligned to Serve You.

Office of the Director
Bill Nichols
Director

Office of Management Services
Kathy Kirkland
Management Officer
Cheryl Edwards
Deputy Management Officer

Information Technology (IT) Activity
Kevin Lyday
Director
Allison Dural
Deputy Director

Office of Policy, Performance, and Communications
Julie Armstrong
Acting Director

Risk Management and Compliance Activity
Curtis Bryant
Director

Office of Management Services
Kathy Kirkland
Management Officer
Cheryl Edwards
Deputy Management Officer

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Kevin Lyday
Director
Allison Dural
Deputy Director

Office of Policy, Performance, and Communications
Julie Armstrong
Acting Director

Risk Management and Compliance Activity
Curtis Bryant
Director

Office of Acquisitions Services
(VISA Purchase Card, Contracts Closeout)
Jeff Napier
Director
Nancy Norton
Deputy Director

Acquisition Branch 1
(OID, NCHHSTP, NCEZID, NCIRD, CGH, All CDC International Requirements, IAA)
Ed Schultz
Branch Chief

Acquisition Branch 2
(ONDIEH, NCBDDD, NCCDPHP, NCEH/ATSDR, NCIPC, OPHPR, OSELS, OSTLTS)
Carlos Smiley
Branch Chief

Acquisition Branch 3
(CDC OD, CDC Business Services Office)
Dale DeFilipps
Branch Chief

Acquisition Branch 4
(NIOSH, SAP)
Robin Solow
Branch Chief

Office of Grants Services
(Grants Closeout, TIMS)
Terrance Perry
Director
Gregory Crawford
Deputy Director

Infectious Disease Services Branch
(NCHHSTP, NCIRD, NCEZID, OID)
Carla Harper
Branch Chief

Chronic Disease & Birth Defects Services Branch
(NCCDPHP, NCBDDD)
Cheryl Maddux
Branch Chief

OD, Environmental, Occupational Health and Injury Prevention Services Branch
(OHPR, OSELS, NCHS, OSTLTS, NIOSH, NCIPC, NCEH/ATSDR)
Tracey Coleman
Branch Chief

Global Health Services Branch
(CGH)
Jamie Legier
Branch Chief

As of 09/23/2014
Our customer service pledges to you...

➤ **We will be knowledgeable and helpful business advisors.**
   - We will strive to understand your needs.
   - We will advise you on the best ways to achieve your objective.
   - We will explain processes, requirements, and timelines and refer you to applicable websites, guides, templates, tools, and resources.
   - We will advise and assist you with the required documentation.
   - If we are not able to fulfill your request, we will provide alternative solutions.
   - We will provide clear, plain language explanations based on statutes, regulations, and policy.
   - We will include citations for your reference.

➤ **We will be competent and accurate in our work.**

➤ **We will provide consistent guidance and information.**
   - We will provide a well-organized, user-friendly website with clear, accurate, and up-to-date information.
   - We will provide accurate, up-to-date, easy to find, user-friendly guides, tools, and templates.

➤ **We will consistently apply processes, guidelines, and policies.**

➤ **We will be courteous, professional, keep our commitments, and treat you with respect.**

➤ **We will be accountable and transparent.**

➤ **We will be available and responsive.**

➤ **Upon receipt of actions/requests, we will:**
   - Perform an initial review.
   - If incomplete or incorrect, we will provide a clear explanation of what is missing.
   - We will provide an acknowledgement, including the next steps and anticipated timeline.

➤ **We will provide you with the status of your actions.**
   - For major actions, we will proactively update you at major milestones.
   - For all actions, we will always provide updates upon request.

➤ **On average, we will complete actions within the standard cycle times.**
   - We will proactively communicate if we are unable to meet the cycle time for an action.

➤ **We will strive for efficiencies and continuous improvement in our processes.**

➤ **We will seek and use feedback from customers to improve our services and standards.**