

**State Public Health Actions to Prevent and Control Diabetes, Heart Disease,
Obesity and Associated Risk Factors and Promote School Health
CDC-RFA-DP13-1305**

Basic Component Checklist

- Application for Federal Assistance** [1 per application]-Did you download and complete the SF-424 application package associated with the funding opportunity from grants.gov?
- CDC Assurances and Certifications** [1 per application]-Did you sign and submit CDC Assurances and Certifications, name the file ‘Assurances and Certifications’, and upload as a PDF on www.grants.gov?
- Table of Contents** [separate per component]-Did you provide a detailed table of contents for the basic component that includes all of the documents being submitted in the application and headers in the project narrative section? Did you name the file “TableofContents.BasicComponent.nameofstate” and upload it as a PDF under “Other Attachment Forms”: on www.grants.gov?
- Project Abstract Summary** [1 per application]-Did you include a project abstract summary that provides a self-contained, brief description of the proposed project to include the purpose and outcomes, and stays to the limit of 2 paragraphs? Did you indicate if you are applying for the basic and enhanced components or the basic component only? Did you enter the “Project Abstract Summary” into the textbox on www.grants.gov?
- Project Narrative** [separate per component] - Did you submit a separate project narrative, no longer than 18 pages, for the basic component? The project narrative must include all of the bolded headers outlined under section D. Application and Submission Information; #10 Project Narrative. Did you name the file “Project Narrative Basic Component.name of state” and upload it on www.grants.gov? Applicants should note that under program strategy for the basic component:
 - The applicant must provide a clear and concise description of how each of the required activities will be implemented to meet the project period outcomes.
 - Applicants should describe how they will address synergy across and within domains to achieve the required outcomes.
- MOUs/MOAs/LOSs for key collaborations** [separate per component, if different; strongly encouraged for basic] – Applicants are strongly encouraged to submit MOUs/MOAs/LOSs for key collaborations for the basic component. Did you include these documents for the basic component and name the file: "MOUsMOAsLOSs.name of state" for upload to grants.gov?
- MOUs/MOAs between state health agency and corresponding education agency-** [strongly encouraged for basic] Applicants are strongly encouraged to submit a MOU/MOA between the state health agency and corresponding state education agency at the time of application for the basic component. Did you include this document for

the basic component and name the file: "MOUsMOAsLOSs.stateED.name of state" for upload to grants.gov?

- **Work Plan** [separate per component] - Maximum of 25 pages for the basic component. Did you provide a detailed one-year workplan that aligns with the program logic model on page 7? Did you provide a detailed work plan that covers the first year of the project period and a high level plan for subsequent years? A sample work plan template is available for use at www.cdc.gov/chronicdisease/about/statepubhealthactions-prevCD.htm. Applicants are not required to use the work plan template but are required to include all of the elements listed within the template. Did you utilize the workplan template or provide all of the elements listed within the template? Did you name the file: "Work Plan Basic Component.name of state" for upload to grants.gov? Additionally:
 - States applying for the basic component will be held accountable for work on all of the strategies and performance measures described in the Basic Component Table found on page 13. Does your workplan/application describe how you plan to address the 7 required strategies for the Basic Component and measure the accompanying performance measures for these strategies?
 - In support of the work on these required strategies and performance measures, applicants will be expected to conduct cross-cutting, core public health activities, as identified on page 12. Does your workplan/application reflect this?
- **Project Management, Organizational Charts, and CV's** [separate per component] – Did you describe core project management to execute the award for the basic component, including the roles and responsibilities of project staff, as described in FOA? Did you name CV's and organizational chart files: "CVs.Resumes.name of state" or "Organizations Charts.name of state" with the component designated and upload to www.grants.gov?
- **Evaluation and Performance Measurement** [separate per component] - Did you provide all of the components required in the Evaluation and Performance Measurement section on pages 37-38 of the FOA? Did you include a state-specific logic model describing the synergistic approach being proposed to work toward the outcomes specified on the overall CDC program logic model?
- **Budget Narrative** [separate per component] - Did you provide an itemized budget narrative and justification for the basic component? Is the proposed budget reasonable and consistent with the purpose, outcomes and program strategy outlined in the project narrative? Does the budget include the headers identified on page 38 of the FOA? Did you name this file "Budget.BasicComponent.nameofstate" and upload as a PDF file to www.grants.gov? Total budget amounts should not exceed the maximum levels listed on page 31 of the FOA for each state under the Basic Component. Applicants should note that under budget narrative for the basic component:
 - Applicants applying for the basic component will be required to attend two grantee meetings during the 5-year project period (an orientation meeting to be held in March, 2014 in Atlanta and one other program update meeting TBD); an estimated 3 training events, and participate in periodic training offered virtually.

Attendees to grantee meetings should include at a minimum representation by the state department of health leads for nutrition, physical activity, school health, heart disease, diabetes, and the Chronic Disease Director. The state education agency school health lead, FOA evaluator, and the communication lead for this integrated work can also attend (up to 9 participants).

- Applicants applying for the basic component will be required to conduct diabetes specific surveillance activities as part of the BRFSS as indicated in the work plan section on page 12. Applicants may request additional funding to administer the questions that are included as part of the optional BRFSS diabetes and pre-diabetes modules as part of their budget.
- Indirect Costs** [1 Indirect Cost Rate Agreement per application] - If you requested indirect costs in the budget, did you provide a copy of the indirect cost rate agreement? If the indirect cost rate is a provisional rate, the agreement should be less than 12 months of age. Did you name this file "Indirect Cost Rate" and upload to www.grants.gov?
- Did you check to ensure all of the required elements described on pages 33-38 of the FOA are included?

Evaluation Criteria for Basic Component

Applicants for Basic Component funding will be evaluated against the criteria below. Does your application describe/provide/propose the following?

Review Criteria—Basic Component

➤ **Approach**

- Purpose and Outcomes - The extent to which the applicant:
 - Describes how it will address the problem statement, required project period outcomes, and its approach to addressing the required program strategies by domain to achieve the outcomes, including identification of target populations and inclusion of populations who may otherwise be missed by the program.
 - Describes how it will address synergy across and within domains to achieve the required outcomes.
- Collaboration – The extent to which the applicant:
 - Describes how it will collaborate with CDC funded programs as well as programs external to CDC in implementing the basic program strategies.
 - Includes MOAs/MOUs/LOSs as described on pages 28-29. Applicants are strongly encouraged to include a MOU/MOA between the state health agency and corresponding state education agency with elements described on page 29.
- Workplan - The extent to which the applicant describes a detailed one-year work plan as outlined in the sample work plan template located at www.cdc.gov/chronicdisease/about/statepubhealthactions-prevCD.htm that:
 - Aligns with the program logic model (on page 7).

- Specifies the strategies and performance measures (from the Basic Component Table on page 13) the grantee will be working on, and provides a proposed data source, baseline, and target for each measure.
- Specifies the scope, setting(s), and population(s) of focus for work under each strategy.
- Lists appropriate activities that will be done to accomplish the work and achieve the performance measures for each strategy.
- Provides a general summary of activities for Years 2-5. Includes plans for identifying and accessing data for any short-term performance measures where data is currently unavailable (i.e., those measures on the work plan template that are missing information on data source, baseline, and target).

➤ **Organizational Capacity**

- **Organizational Capacity** – The extent to which the applicant:
 - Describes its organizational capacity to carry out the basic component strategies, including coordination with other federally and privately funded programs within the state in order to leverage resources and maximize reach and impact.
 - Describes its ability to address health equity.
 - Describes how it will minimize duplication of effort.
- **Project Management** – The extent to which the applicant:
 - Describes core project management to execute the basic component, including roles and responsibilities of project staff.
 - Describes who will have day-to-day responsibility for key tasks such as: leadership of the project; monitoring of the project’s on-going progress; preparation of reports; program evaluation; and communication with partners and CDC.
 - Describes any contractual organization(s) that will have a significant role(s) in implementing program strategies and achieving project outcomes.
 - Describes how any consultants and/or partners organizations will contribute to achieving project outcomes.

➤ **Evaluation** - The extent to which the applicant:

- Describes how key program partners will be engaged in the evaluation and performance measurement planning processes.
- Describes the type of evaluations to be conducted (i.e. process and/or outcome).
- Describes key evaluation questions to be answered.
- Describes potentially available data sources.
- Describes how evaluation findings will be used for continuous program and quality improvement.
- Describes how evaluation and performance measurement will contribute to our understanding of the advantages and challenges of working collaboratively across categorical programs to achieve overall health outcomes and disease- and risk factor-specific outcomes.
- Includes a state-specific logic model describing the synergistic approach being proposed to work toward the outcomes specified on the overall CDC program logic model.

