

May 15, 2020

**Centers for Disease Control and Prevention (CDC)
Notice of Funding Opportunity (NOFO) (CE20-2006)
Preventing Adverse Childhood Experiences: Data to Action
Frequently Asked Questions**

1. **Question:** For this NOFO, are we limited to the common list of ACEs or can we go beyond that to additional forms of adverse childhood experience?

Answer: Applicants may consider including other ACEs beyond the traditional measure of ACEs. For instance, historical traumas, experiences of racism, bullying, teen dating violence, peer to peer violence, witnessing violence in community or school, homelessness, and death of a parent, are some experiences not included in the traditional measure of ACEs.

2. **Question:** Are BRFSS and or YRBS costs allowed in this NOFO funding?

Answer: Costs to administer YRBS and BRFSS are not allowable for this funding.

3. **Question:** What if our State does not conduct the YRBS and instead do AYS? Do we still qualify?

Answer: Yes, another equivalent state-representative survey of adolescents will be accepted and considered if YRBS is not implemented in your state or another adolescent statewide survey is available.

4. **Question:** There were mainly references to adolescents, and the use of the YRBS. Is this the scope of the target for this award?

Answer: To date, it has been difficult to assess the incidence and prevalence of ACEs experienced by youth and adolescents –because the best surveillance data currently available for ACEs are collected retrospectively among adults. Therefore, one of the goals of this NOFO is to get a better understanding of ACEs prevalence among youth. As such, the NOFO calls for ACEs data collection through YRBS, other statewide surveys of youth, or innovative surveillance approaches.

5. **Question:** If YRBS is administered in my state/community, should I leverage this surveillance system?

Answer: The Division of Violence Prevention and the Division of Adolescence School Health within CDC will be offering financial incentives to YRBS sites who choose to include ACE questions on their surveys. We encourage recipients to inquire about how this YRBS information on ACEs may help them to leverage resources to advance the goals of the NOFO.

6. **Question:** Are city agencies eligible?

Answer: The following organizations are eligible to apply:

- State, county, and city or township governments

- Native American tribal governments (federally recognized)
- Native American tribal organizations (other than federally recognized tribal governments)
- Public housing authorities and Indian housing authorities
- Public and state-controlled institutions of higher education
- Private institutions of higher education;
- Nonprofits having a 501(c)(3) status with the IRS, other than institutions of higher education
- Nonprofits without 501(c)(3) status with the IRS, other than institutions of higher education
- Small businesses.

More information can be found in the notice of funding announcement (NOFO) under "Additional Information on Eligibility."

7. **Question:** Is the State Action Plan required to be submitted as a part of the application? What type of info is usually included in the state action plans?

Answer: A State Action Plan is a required document that must meet the requirements of the NOFO. It must be an existing statewide plan that expresses a shared vision to promote safe, stable, nurturing relationships and environments for children with strong cross-sector public and private commitments.

Please Note: Funding will be determined in accordance with the information described in the Phase II Review section of the NOFO. CDC will fund recipients based on the evaluation scores of complete, eligible applications in accordance with the criteria indicated throughout the NOFO.

8. **Question:** As there are 5 states already funded through Essentials for Childhood, will CDC give equal standing to all applicants (those with an action plan and those without)?

Answer: The CE20-2006 NOFO is a new funding opportunity that serves as a separate funding stream open to all eligible applicants who wish to apply.

9. **Question:** Can a non-profit State Association apply on behalf of our local community action agencies?

Answer: Per the federal guidance, there is no provision against multiple organizations being included in the application. If choosing to apply with multiple agencies, only one agency or organization would be considered the primary recipient. The primary recipient organization would be legally accountable for the performance of the award and the expenditure of funds. Any additional partners or nonprofits would be considered subrecipients or subawards. Please refer to the HHS Grants Policy Statement and the 45 CFR Part 75 for any additional guidance related to the requirements of both the primary recipient and any subrecipients.

10. **Question:** Is data collection and analysis expected, or just assistance with building out a data collection system?

Answer: This NOFO has three required foci, one being to enhance or build the infrastructure for the state-level data collection, analysis, and application of ACE-related surveillance data that can be used to inform and tailor ACE prevention activities. The work of these foci, and the infrastructure

and expertise exerted to accomplish that work, should be interdependent and should be planned and implemented as part of a comprehensive and coordinated ACE prevention dynamic system.

- 11. Question:** It is limited to 4 awards and will that be 4 different recipients, or could one recipient be awarded all 4 cooperative agreements?

Answer: The expected number of awards is four recipients. Funding will be determined in accordance with the information described in the Phase II Review section of the NOFO. CDC will fund recipients based on the evaluation scores of complete, eligible applications in accordance with the criteria indicated throughout the NOFO.

- 12. Question:** Is there a specific format or set of questions that must be answered in the Letter of Intent?

Answer: The Letter of Intent is a notice to the funding agency that the recipient intends to apply for the NOFO. There is not a specific format for this letter and it is optional.

- 13. Question:** "Evidence-based" and "best available evidence" are both used in the NOFO. Is the requirement that the programs/policies/practices implemented evidence-based or that they be based on the best available evidence?

Answer: Funded recipients are required to implement at least two out of three core prevention strategies identified as "Strengthen Economic Supports," "Promote Social Norms Change," and "Ensure a Strong Start for Children." The definition of "best available evidence" described in this NOFO is referring to the list of policies, programs, and practices outlined in CDC's ACEs Resource document entitled, "[Preventing Adverse Childhood Experiences: Leveraging the Best Available Evidence](#)". CDC will provide oversight and guidance to recipients regarding the appropriateness of specific policies, programs, and practices selected within each strategy. While we encourage innovative approaches to preventing ACEs, these approaches must be evidence-informed and have demonstrated efficacy.

- 14. Question:** Can recipients use the funding to expand a prevention program NOT included in the technical package?

Answer: Yes. If an alternate prevention program not included in the technical package is preferred, recipients may implement and evaluate this program. However, funded recipients are required to implement at least two core prevention strategies that have the potential to achieve population-level impact as implemented. These core prevention strategies are "Strengthen Economic Supports," "Promote Social Norms Change," and "Ensure a Strong Start for Children." Specific policies, programs, and practices selected for implementation within each strategy will need to be evidence based. CDC will provide oversight and guidance to recipients regarding the appropriateness of specific policies, programs, and practices selected within each strategy.

- 15. Question:** NOFO indicates a local-state data infrastructure for sharing and use of data for prevention strategies. Should eval focus on the 2 required prevention strategies as well as progress on the data infrastructure?

Answer: The evaluation should focus on assessing the process and outcomes of the collective activities of the NOFO initiative. This includes identifying and tracking indicators related to the implementation of ACE surveillance infrastructure and prevention strategies selected by the recipients. It also includes identifying and tracking indicators that measure the outcomes of the selected prevention strategies and other outcomes specified in the NOFO logic model. Please refer to the Performance and Evaluation Measurement Strategy section of the NOFO for more information about the evaluation.

16. Question: Can you explain a bit more about what you all are wanting to see in outcomes, see outcomes are laid out on page 6?

Answer: Applicants must clearly identify the outcomes they expect to achieve by the end of the project period. Once funded, recipients are expected to achieve short- and intermediate outcomes by the end of the project period, as identified in the logic model in the Approach section of the CDC Project Description. Outcomes are the results that the program intends to achieve and usually indicate the intended direction of change (e.g., increase, decrease).

17. Question: On page 13 of the NOFO it states, "An essential part of implementing a comprehensive approach to preventing ACEs involves the funded entity serving as a convener and coordinator of multi-sector partnerships focused on ACE prevention. As such, recipients are expected to build partnerships with other relevant stakeholders within the state (e.g., data managers, education sector partners, tribal healthcare workers, non-governmental youth-serving and family-serving organizations, policymakers, healthcare providers, local health departments, statewide domestic violence coalitions) in order to successfully execute the requirements of this funding announcement." Can you elaborate the role of convener and coordinator?

Answer: As part of the convener and coordinator role, funded entities are expected to engage and coordinate with public and private sector partners that are engaged in implementing these strategies within the state. Cross/multi-sector partnerships and resources to support implementation and sustainability of comprehensive ACE prevention efforts are required. The multi-sector collaborative entity should seek to prevent ACEs and include representation from sectors that support work in the community including, but not limited to education and youth-serving agencies, family and social services, civic, public safety and juvenile justice, mental health, labor, faith-based, healthcare, government, media, and business organizations.

18. Question: What is a comprehensive approach to adverse childhood experiences (ACEs) prevention?

Answer: For the purposes of this NOFO, a comprehensive approach to ACEs prevention is characterized by the following activities:

- 1) Prioritizing data to build/enhance an ACEs surveillance infrastructure that will support access to and analysis of ACEs surveillance and indicator data within the state to inform primary prevention activities/efforts and assess the impact of such activities/efforts.
- 2) Implementing ACEs primary prevention strategies.
- 3) Conducting foundational activities that promote data to action.
- 4) Collaborating with other CDC programs, CDC-funded programs and organizations, and organizations not funded by CDC.

19. Question: Will the recipients or the amount of funding change in years 2+?

Answer: CDC does not anticipate the recipients or the amount of funding to change in subsequent years; however, awards are based on the availability of funds, the evidence of satisfactory progress by the recipient (as documented in required reports), and the determination that continued funding is in the best interest of the federal government.

20. Question: Will a budget template be provided?

Answer: A budget template is not provided. See pages 32 and 33 of the NOFO for what to include in your budget.

21. Question: Can recipients fund policy-level interventions?

Answer: Public health entities can play an important role by gathering and synthesizing information to inform policy, raise awareness, and evaluate the effectiveness of various policies. Activities described in this NOFO may include consultation on the implementation of prevention programs and assessment of policies as part of a comprehensive ACEs prevention strategy (i.e., “Strengthening Economic Supports”). Applicants should refer to the Anti-Lobbying Restrictions for CDC Grantees to make sure their work is still within the legal bounds of policy work:
<https://www.cdc.gov/grants/documents/Anti-Lobbying-Restrictions.pdf>.

22. Question: Are there any activities/approaches that recipients cannot use CDC funding to do?

Answer: Yes. For this NOFO, CDC will not fund research activities. Funds also may not be used to support activities currently funded under other funding mechanisms. In addition, applicants proposing policy initiatives should refer to the Anti-Lobbying Restrictions for CDC Grantees to make sure their work is within the legal bounds of policy work:
<https://www.cdc.gov/grants/documents/Anti-Lobbying-Restrictions.pdf>. Funding Restrictions are located in the NOFO on page 34 and 35.

23. Question: Are Indian Health Service (IHS) facilities eligible to apply for this grant?

Answer: Yes. This NOFO is being competed openly, with eligible applicants including but not limited to Native American tribal governments (federally recognized), Indian Housing Authorities, Native American tribal organizations (other than federally recognized tribal governments), nonprofits with or without a 501(c)(3) status, for-profit organization, small businesses, and American Indian/Alaska Native tribal governments.

24. Question: Will paper applications be accepted?

Answer: The applicant must receive pre-approval to submit a paper application (see Other Submission Requirements section for additional details). If the applicant is authorized to submit a paper application, it must be received by the deadline provided by Office of Grants Services. For more information see Section D. Application and Submission Information of the NOFO.

25. Question: Will late applications be accepted?

Answer: If the application is not submitted by the deadline published in the NOFO, it will not be processed. Office of Grants Services personnel will notify the applicant that the application did not meet the deadline. For more information, see Section D. Application and Submission Information of the NOFO.

26. Question: Will late applications be accepted due to COVID-19?

Answer: You will find guidance about COVID-19-related delays on the CDC grants website: <https://www.cdc.gov/grants/public-health-emergencies/covid-19/faqs/index.html>.

The website states that, “When a delay occurs because the applicant or recipient is directly impacted by COVID-19, CDC will consider extending the application due date beyond the date specified in the NOFO on a case-by-case basis, in accordance with the Department of Health and Human Services (HHS) Grants Policy Statement “Submitting an Application,” Part I-25-26. Please submit your request to extend the NOFO deadline to the assigned grants management specialist/program official noted in the Notice of Funding Opportunity under Agency Contacts prior to the NOFO closing date. Your request should include enough detail about the delay so that CDC can determine whether circumstances justify extending the NOFO application submission deadline.”

27. Question: What does the word "complementary" mean in Focus 2?

- Complementary to each other?
- Complementary to existing initiatives?
- Other?

Answer: “Complementary” in the NOFO refers to the two strategies/approaches complementing each other. So, for example, if an applicant chooses the strategy “Strengthening Economic Supports” by assuring that eligible families are enrolled in Supplemental Nutrition Assistance Program (SNAP), their other chosen strategy, “Promote Social Norms Change,” may address destigmatizing seeking help from assistance programs.

28. Question: Does the logic model get submitted as an attachment?

Answer: Yes, the logic model should be submitted as a separate attachment

29. Question: If you are contracting with an entity to conduct a specific function, is a memorandum of understanding (MOU) still required?

Answer: The applicant determines the agreement type in accordance with its organizational policy. The agreement should explicitly articulate each party’s role, function, and responsibility as it relates to the CE20-2006 NOFO.

30. Question: Do we need to submit a certain number of MOUs/letters?

Answer: There is no definite number of MOUs/letters that must be submitted (refer to NOFO 12, b. With organizations not funded by CDC).

31. Question: Is CDC assistance with logic models intended for after funding is awarded?

Answer: Yes, CDC will be providing guidance materials about refining the logic model after funding is awarded. You can also find additional resources in the NOFO.