Talking Points for Pre-application Call
Funding Opportunity Announcement (FOA) CDC-RFA-DD16-1603

Improving the Health of People with Mobility Limitations and Intellectual Disabilities through State-based Public Health Programs

Agenda in Brief:

- **Introduction and Welcome** – Dr. Shannon Griffin-Blake
- **FOA Overview and Funding Description** – Dr. Arlene Vincent-Mark
- **Evaluation and Performance Measurement** – Dr. Shannon Griffin-Blake
- **Application Submission Requirements and Procedures** – Ms. Carmen Davis
- **Questions and Answers** – Dr. Arlene Vincent-Mark
- **Closing Remarks** – Dr. JoAnn Thierry

1. **Introduction and Welcome: Dr. Shannon Griffin-Blake**

Welcome to the pre-application call regarding CDC’s *Improving the Health of People with Mobility Limitations and Intellectual Disabilities through State-based Public Health Programs* Funding Opportunity Announcement (or FOA) DD16-1603. My name is Dr. Shannon Griffin-Blake. I am the Disability and Health Branch Chief in the Division of Human Development and Disability within the National Center on Birth Defects and Developmental Disabilities.

We hope this call and the information on the Disability and Health Branch website will help applicants prepare to submit their applications due on **April 19, 2016, by 11:59 p.m.** U.S. Eastern Standard Time at www.grants.gov. At the end of this call, you will have an opportunity to ask questions about the FOA. The answers to these questions and other Frequently Asked Questions (or FAQs) will be posted along with the script from today’s call in the next few days at www.cdc.gov/ncbddd/disabilityandhealth/funding-opportunity-announcements.html.

Before we begin, I will provide an overview of the agenda and introduce the speakers you will be hearing from today.

- Dr. Arlene Vincent-Mark, Project Officer on the Disability Policy, Intervention and Programs Team, will provide an overview of the FOA and funding description.
- I will discuss evaluation and performance measurement.
- Ms. Carmen Davis, Grants Management Specialist from the Office of Financial Resources/Office of Grants Services (OGS, formerly PGO), will discuss application submission requirements and procedures.
- Dr. Vincent-Mark will return to facilitate the question and answer process.
- Lastly, Dr. JoAnn Thierry, Team Lead for the Disability Policy, Intervention and Programs Team, will provide closing remarks.

Please mute your phone line at this time. Prior to the question and answer portion of the call, Arlene will alert you to when you should take the phone lines off mute. We suggest you write
down questions during the call, so you will be prepared when we open the phone lines at the end of the CDC presentations.

At this time, Dr. Vincent-Mark will discuss the FOA overview and funding description.

### 2. FOA Overview and Funding Description: Dr. Arlene Vincent-Mark

Thanks, Shannon. Welcome everyone to the call.

This FOA builds on 15 years of CDC-funded disability programs in chronic disease prevention and health promotion as well as the experience of national disability organizations and state programs nationwide. Specifically, this FOA is an extension of the lessons learned that support making programmatic, policy, systems, and environmental changes to impact the health and well-being of people with mobility limitations and/or intellectual disabilities (or ID).

Please note this FOA is limited to state governmental agencies or their bona fide agents, U.S. territories, and Native American tribal governments.

This announcement is only for non-research domestic activities supported by CDC. Funds awarded may not be used for research or clinical care.

This FOA will fund approximately 18 awards to develop and strengthen internal capacity and health-related disability programs in order to:

- Improve knowledge and awareness about the usefulness and effectiveness of programmatic, policy, systems and environmental changes for people with select functional disability types; and
- Support applicants to plan, implement, evaluate and disseminate non-research activities aimed at promoting inclusion and accessibility and reducing health disparities between people with and without disabilities, with a focus on cardiovascular disease and diabetes and their related risk factors.

Applicants may apply for funds to support either a **Capacity Building Program** or a **Core Implementation Program**. Additional funds will be provided to a subset of Core Implementation states that apply for **Enhanced Implementation Activities** and have the ability to complete advanced work by providing technical assistance, such as mentoring other awardees, and analyzing Medicaid data to identify patterns of health care utilization.

Organizations previously funded under **DD07-702 - Health Promotion for People with Disabilities, DD12-1204 and DD15-1502 - Improving the Health of People with Disabilities through State-based Public Health Programs** are not eligible to apply for Capacity Building Programs. They are only eligible to apply for Core Implementation Programs with or without Enhanced Implementation Activities.

The following is a description of the 2 categories of programs:
1. **Capacity Building Programs** support applicants with limited capacity or experience in developing, implementing, evaluating, and disseminating programmatic, policy, systems, and environmental changes for people with mobility and/or intellectual disabilities.

2. **Core Implementation Programs** support applicants who are “implementation ready” and have the existing infrastructure to implement, evaluate, and disseminate programmatic, policy, systems, and environmental changes for people with mobility and/or intellectual disabilities.

   CDC will provide additional funding to a subset of Core Implementation Programs that apply for **Enhanced Implementation Activities** and have the knowledge, skills, and ability to accomplish these additional activities:

   - mentoring a Capacity Building awardee to establish infrastructure and support disability-related activities through peer-to-peer networking; and
   - accessing and utilizing Medicaid data to identify patterns of health and health care utilization for people with intellectual and developmental disabilities.

   CDC will assist with matching a Capacity Building state (or mentee) with a Core Implementation state (or mentor) receiving additional funds for Enhanced Implementation Activities post award.

   Funded programs must include people with mobility limitations and/or intellectual disabilities in all aspects of the program, such as state advisory boards, planning committees, project staff, and consultants.

   Applicants’ activities will vary based on program requirements and should address the following health topics:

   - Cardiovascular disease, diabetes, physical activity, nutrition, healthy weight, tobacco use and exposure, hypertension, and oral health.

   **Capacity Building Programs** should address at least one of the health topic areas by the end of Year 3. **Core Implementation Programs** should address at least two health topic areas, one of which must be physical activity. Each health topic addressed should focus on 2 or more levels of influence, including individual, interpersonal, organizational, community, and societal.

   Funds should not be used to develop new interventions; however, funds can be used to tailor an existing intervention for people with mobility limitations and/or ID. CDC has developed a list of public health strategies in order to assist applicants in identifying potential interventions that may be modified or adapted for people with mobility limitations and/or ID. This list is available on the Disability and Health Branch website. A direct link to this document can be found in the FOA within the **CDC Project Description Section**.

   Annual funds will vary based on the program selected and are as follows:

   For **Capacity Building Programs**, CDC will fund awards up to $150,000.
For **Core Implementation Programs**, CDC will fund awards for up to $300,000. Additionally, a subset of the Core Implementation applicants will be selected and funded for **Enhanced Implementation Activities** up to an additional $150,000, for a total annual budget of up to $450,000.

Applicants should clearly state in their abstract whether they are applying for a **Capacity Building Program or a Core Implementation Program with or without Enhanced Implementation Activities**. Applicants can only submit one application.

It is expected that applicants will describe the specific target population, identify applicable health disparities, and strategies and activities to address these health disparities. The target populations for the proposed projects are people with mobility limitations and/or ID, their families, health care providers, organizations serving people with these disabling conditions, and the general public.

Collaborations with other CDC programs and CDC-funded organizations, such as State-based Disability and Health Programs supported by this award and with the National Centers on Health Promotion for People with Disabilities supported by CDC-RFA-DD16-1602 (known as National Centers on Disability), are expected. Additionally, collaborations with organizations not funded by CDC, such as consumer groups, states, national or community-based organizations, state chronic disease directors, clinicians, and researchers, are encouraged.

Applicants should include information on the current status of programs conducted by their organization, describe their understanding of the need for this program, and their agency's capacity in implementing and evaluating the strategies and activities within the application. Applicants must demonstrate their organizational capacity, including a staffing plan and project management structure, to sufficiently execute the strategies and activities to achieve project period outcomes.

Applicants must be capable of managing the required procurement efforts, including the ability to write and award contracts in accordance with applicable grants regulations, and meet reporting requirements related to federal programmatic, financial, and management benchmarks as required in the FOA. Applicants are encouraged to submit up to three 1-page success stories that demonstrate program accomplishments, in the appendix.

Now, I will turn this presentation over to Dr. Griffin-Blake to discuss evaluation and performance measurement, including the work plan.

3. **Evaluation and Performance Measurement: Dr. Shannon Griffin-Blake**

Thank you, Arlene.

This FOA is based on a National Logic Model designed to illustrate the intended strategies and activities as well as the short-term, intermediate, and long-term outcomes over the 5-year Project Period. Please follow the FOA Logic Model found in the **CDC Project Description** section when developing your project narrative, work plan, and evaluation plan. The list of
evaluation requirements is in the ** Applicant Evaluation and Performance Measurement Plan** section.

Each program, as described in the FOA Logic Model, involves some unique strategies, and all programs share some common strategies to achieve the identified outcomes. The bolded text of the FOA Logic Model indicates outcomes expected to be achieved by awardees during the 5-year Project Period. Applicants’ work plans must align with the FOA Logic Model.

Examples of outcomes include:

**For short-term outcomes:**
- Increased knowledge and awareness of health risk factors
- Improved data collection methods

**For intermediate outcomes:**
- Improved organizational capacity
- Improved monitoring of health and health care utilization

The Disability and Health Branch is responsible for addressing the long-term outcomes. As part of the Branch’s National Evaluation Plan, CDC will be responsible for estimating overall FOA impact based on performance monitoring and progress achieved by all awardees. CDC staff will conduct routine calls and ongoing performance monitoring activities through site visits and reviews of awardee reports, such as work plans, evaluation plans, and financial reports.

As part of the required reporting on Evaluation and Performance Measurement activities, an applicant should submit an evaluation and performance measurement plan. Details on what should be described in the evaluation plan can be found in the **Applicant Evaluation and Performance Measurement Plan** section. This plan must describe how performance measures will be collected and respond to the evaluation questions, how key program partners will participate in the evaluation and performance measurement planning processes, and available data sources. An awardee will be required to submit a more detailed plan within the first 6 months of the award after its proposed work plan has been finalized with CDC.

Similarly, the applicant’s work plan should include the components that are described in the **Work Plan** section. The work plan should provide details of strategies and activities that will be completed in the first budget year, including associated measures, target dates for completion, and person responsible for the activities. A high-level description for the remaining 4 years of the Project Period is also required.

CDC has provided a sample Work Plan table in the FOA. The work plan should include and be aligned with strategies and activities, short-term and intermediate outcomes, and appropriate measures as indicated in the logic model and narrative sections of the FOA. The work plan table should also be completed for each project period outcome.

As part of the application, the **Work Plan** will need to be submitted to www.grants.gov as a PDF. If selected for funding, CDC staff will work with awardees to finalize the proposed work plan post-award.
This concludes the Evaluation and Performance Measurement portion of the call.

I will now turn the line over to Ms. Davis to review application submission requirements and procedures.

4. Application Submission Requirements and Procedures: Ms. Carmen Davis

Thank you, Shannon.

Eligible applicants for this FOA include:

- State governments
- Native American or Alaska Native tribal governments
- Territorial governments or their bona fide agents

The award ceiling for this FOA is $450,000 per budget period. CDC will consider any application requesting an award higher than this amount as non-responsive and it will receive no further review.

Letter of Intent Deadline:
A letter of Intent is requested but optional as part of the application. If submitted, it must be emailed or postmarked to the address listed in the FOA by March 22, 2016.

Due date for Applications:

Please remember that an organization must be registered at the following three locations before it can submit an application for funding at www.grants.gov.

The websites I am about to mention are all in the Funding Opportunity Announcement and will be posted in the call script, so don’t worry if you are not able to write it all down as I am speaking.

The first is the Data Universal Numbering System or DUNS: All applicant organizations must obtain a DUNS number. A DUNS number is a unique nine-digit identification number provided by Dun & Bradstreet. 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-awardees, those sub-awardees must provide their DUNS numbers before accepting any funds.

The second is the System for Award Management or 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 an awardee. 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 must be found at www.SAM.gov.

The last is Grants.gov: The first step in submitting an application online is registering your organization at www.grants.gov, the official HHS E-grant Web site. Registration information is located at the “Get Registered” option at 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.

Applications will be objectively reviewed following CDC agency procedures.

The direct and primary recipient in a cooperative agreement program must perform a substantial role in carrying out project outcomes and not merely serve as a conduit for an award to another party or provider who is ineligible.

This award will be made in the form of a cooperative agreement. This means CDC will have substantial involvement throughout the project period.

Cost sharing or matching funds are not required for this program. Although no statutory matching requirement for this FOA exists, leveraging other resources and related ongoing efforts to promote sustainability is strongly encouraged.

The Anticipated Award Date for this award is **July 1, 2016**. The budget period length is 12 months, and the project period length is 5 years.

I will now turn the call back over to Dr. Vincent-Mark to facilitate the question and answer process.

| 5. Questions and Answers: Dr. Arlene Vincent-Mark |

Thanks, Carmen:

To the extent possible, we will try to answer your questions on the call today. In the event that we are not able to provide an immediate answer, all of the questions and answers from today’s call will be posted on the Disability and Health Branch website in the coming days. You should check the website frequently for new questions and answers. Questions can be submitted up to **April 5th**; no questions will be accepted and/or answered after this date. Before we go to the phones, I will read through some FAQs that we have developed to assist you in your application as well as questions that have been submitted since the FOA posting.

**Question:** The FOA implies that applicants need to submit an overall budget for all five years of the FOA, and a separate budget for Year 1. Do applicants only need to submit a more detailed budget for Year 1?
Answer: An overall budget should be submitted for the 5-year project period. In addition, applicants must submit a detailed budget for Year 1.

Question: Is there a page limit for the project narrative?
Answer: Yes, the project narrative is limited to 20 single spaced pages for Capacity Building Programs and Core Implementation Programs without Enhanced Activities. Applicants applying for Core Implementation Programs with Enhanced Implementation Activities are limited to a total of 25 single spaced pages. Content beyond these page limits will not be considered.

Question: Can an applicant develop its own logic model based on the one in the FOA rather than just using the one in the FOA?
Answer: Yes. An applicant may develop their own logic model; however, it should include the components outlined in the FOA Logic Model.

Question: The logic model is not one of the optional appendices listed in the FOA. Can it be included as an appendix, or does it need to be in the 20 pages?
Answer: The logic model does not have to be included in the 20 pages. It should be referenced and discussed in the narrative and uploaded as a PDF file as an appendix.

Question: Does an applicant need to submit position descriptions for every position or just key personnel?
Answer: An applicant should submit position descriptions for only key personnel, such as Principal Investigator and Program Manager.

Question: Can the NIH Bio sketch template be used for the C.V.’s?
Answer: Yes, the NIH Bio sketch is acceptable.

Question: Are any appendices allowed other than those specifically listed in the FOA?
Answer: Yes, in addition to those requested in the FOA, other appendices are allowed. However, material included in the appendix should be referenced and discussed in the narrative.

Question: Does the work plan need to be included in the narrative section of the application?
Answer: The work plan should be referenced and discussed in the narrative. However, the full work plan may be uploaded as an appendix. Applicants must name this file “Work Plan” and submit it as a PDF at www.grants.gov.

Question: Must an applicant register with all three systems: grants.gov, Dun & Bradstreet and SAM?
Answer: Yes, an applicant must be registered with all three locations before it can submit an application at www.grants.gov. The registration process takes up to 5 business days to complete. Applicants should begin the registration process as early as possible.
Question: How will applications be rated?
Answer: All applications will be objectively reviewed following CDC agency procedures. Potential applicants can examine the evaluation criteria that will be used to rate applications in the Review and Selection Process section of the FOA. It is important that FOA instructions are followed, and the application and related appendices are accurate, complete and well defined.

Question: Are indirect costs awarded in addition to the direct costs?
Answer: No, the total costs must include both direct and indirect costs.

Question: Are state institutions eligible to apply for this FOA?
Answer: The announcement is limited to state governmental agencies or their bona fide agents, U.S. Territories, and Native American tribal governments.

Question: Is there a process for submitting questions? Will a FAQ document be available?
Answer: Yes, all programmatic questions should be submitted in writing to Dr. Arlene Vincent-Mark at: DSZ4@CDC.GOV. Questions regarding financial or budgetary issues should be sent to Carmen Davis at: XBQ9@CDC.GOV. Questions can be submitted up to April 5. The FAQ document will be posted on the Disability and Health Branch website.

Question: Will there will be an Annual Awardee Meeting in the first year of this cooperative agreement?
Answer: Yes, there may be an Annual Awardee Meeting in Atlanta, GA in Year 1; applicants should plan accordingly.

Question: As part of personnel costs, are funds allowable to cover tuition expenses of PhD students?
Answer: Tuition costs may be requested; however, sufficient justification must be provided for this expenditure. Budget requests will be reviewed by OGS and program to determine which expenses will be permitted.

Question: Will applicants know what National Centers on Disability (CDC-RFA-DD16-1602) are being funded by CDC, so applicants know which ones to partner with?
Answer: Information about the new National Centers on Disability is not currently available; however, CDC staff will share information about awardees and facilitate information exchanges between awardees post award.

Question: Will CDC facilitate collaborations between state awardees, and if so, how and when?
Answer: CDC staff will assist with sharing information about and between awardees through routine conference calls and peer to peer exchanges post award.

Question: Does the FOA focus on intellectual disabilities also include developmental disabilities, or are applicants supposed to limit their focus to intellectual disabilities solely?
Answer: The FOA focus is on people with ID, but we understand that many people with developmental disabilities have ID. Therefore, an applicant requesting funding
for Core Implementation Program with Enhanced Implementation Activities may include both ID and DD in their Medicaid data analysis proposals. CDC will coordinate program focus of these Enhanced Implementation Activities across awardees post award.

**Question:** If applying for the Core Implementation Program, are applicants allowed to write in any planning time to shift from current programs to new ones?

**Answer:** Applicants requesting funding for Core Implementation Programs should be “implementation ready” and prepared to start activities within the scope of the FOA post award.

**Question:** Is there opportunity to continue current programs that are not specifically outlined in this cooperative agreement, or are applicants expected to stop all activities that do not fall within the scope of this FOA?

**Answer:** Applicants may be implementing a variety of programs and related activities within their organizations; however, only activities outlined in this FOA may be supported under this award.

**Question:** How can an applicant access the list of public health strategies in the FOA?

**Answer:** The document can be found at the Disability and Health Branch website, and a direct link can also be found in the FOA within the CDC Project Description section.

**Question:** Can an applicant modify the curriculum for Healthy Lifestyles (HL)? Would the modified curriculum be something that could be implemented and rigorously evaluated?

**Answer:** Applicants must be able to justify strategies and activities included within their work plans and ensure alignment with outcomes within the FOA Logic Model.

**Question:** In which section of grants.gov should the Letters of Support and/or MOUs and other attachments be uploaded?

**Answer:** The Letters of Support and /or MOUs and other attachments should be uploaded as appendices.

**Question:** Are efforts undertaken to “deploy evidence-based health promotion programs adapted for people with disabilities” limited to the people with ID, and similarly, are efforts to “promote evidence-based and innovative, programmatic, policy, systems and environmental changes” limited to people with mobility limitations?

**Answer:** Strategies and activities included within the work plan can be focused on people with ID and/or mobility limitations. Target population should be clearly identified by the applicant and based on intended outcomes.

**Question:** Are the Budget and Budget Justification excluded from the page limits?

**Answer:** Yes, the Budget and Budget Justification are excluded from the page limits.

Please take your phone lines off mute at this time. Who would like to ask the first question?
I will turn the call over to Dr. JoAnn Thierry to conclude the call.

6. Closing Remarks: Dr. JoAnn Thierry

Thank you, Arlene, and thanks to everyone for your interest in *Improving the Health of People with Mobility Limitations and Intellectual Disabilities through State-based Public Health Programs.*

In summary, please remember to:

1. Follow directions for font, type size and spacing requirements.
2. Limit your narrative to 20 pages for Capacity Building or Core Implementation programs without Enhanced Activities and 25 pages for Core implementation with Enhanced Activities. Appendices do not have a page limit.
3. Don’t wait until the last day to upload your files. Begin adding files to your application early to ensure success with grants.gov.
4. Register at the three websites mentioned on this call and ensure that your organization maintains the registrations at these sites. Remember, the SAM registration must be renewed annually.
5. Develop the application based on the logic model and match your proposed outcomes, work plan, and evaluation plan.
6. Remember that this application will be objectively reviewed, so strive to ensure that the reviewer will understand what you are proposing.
7. The last day to submit written questions will be April 5th. Answers will be posted on the Disability and Health website. Questions should be sent to Dr. Arlene Vincent-Mark at DSZ4@cdc.gov.

This concludes our call. Thank you for joining us.