

CDC RFA DP-13-1304  
National Innovative Partnership to Address Obesity through Environmental Supports for  
Nutrition and Physical Activity

Frequently Asked Questions

**Page length of Application**

1. There is confusion regarding the page limits for the application. Please clarify.
  - a. Answer: Page 22 cites the FOA work plan, page limit is 25 pages
  - b. Answer: Page 32 cites the detailed evaluation plan, page limit is 35 pages
  - c. Answer: Page 32 also cites the detailed first year work plan, page limit is 25 pages.

The evaluation plan and the first year work plan can be submitted as appendixes to the FOA.

2. How should I address the evaluation and work plan sections of the application as they have different page length requirements?

Answer: Though the evaluation plan and first year work plan should be discussed in the application, they can also be addressed in attachments with more specific, detailed information. Notwithstanding, the respective attachments cannot exceed the stated page limits.

3. Is the page limit adjusted if the applicant applies for more than one funding component?

Answer: No. The page limit is not adjusted for the funding components; however, applicants may submit more than one application, one for each funding component.

**Eligibility**

I. Type of Eligible Organizations

1. May for profit small businesses apply for this FOA?

Answer: Yes. This FOA is an open-competition opportunity. A list of eligible applicants is posted on pages 25-26 of the FOA.

2. My organization is creating a coalition of tribal organizations across the country, would our coalition be eligible for this funding opportunity?

Answer: Possibly. As long as the coalition is a business/corporate entity with representatives in each of the ten HHS regions then it may satisfy the criteria for an affiliate structure. The coalition members in each of the HHS regions can be the affiliate structure of the coalition.

3. Does my organization have to be a national nonprofit organization?

Answer: No, your organization does not have to be a nonprofit; but it must have affiliates in each of the 10 HHS regions.

4. Are CTG grantees disqualified from applying?

Answer: No, CTG grantees may apply.

5. May a broadcaster apply for this opportunity?

Answer: Yes, if the network television outlet, or other such entity, satisfies the requirement of having an affiliate in each of the 10 HHS regions they are eligible to apply for this funding.

## II. Affiliates

1. Are applicants required to have an affiliate structure in each of the HHS regions or may they just have affiliates in their own region?

Answer: Applicants are required to have an affiliate (council, chapter, members, practice groups) in each of the 10 HHS regions.

Answer: An affiliate differs from a partnership. An affiliate constitutes a recognized structure within the organization; it is the constituency of the organization. Organizations engage and coordinate, educate and communicate, and implement and report on strategies designed to improve practice for its constituencies. A partner is an organization that commits to pair its resources to work towards a common purpose.

2. Does distance learning qualify as reach into the 10 HHS regions?

Answer: Distance learning may qualify as a means to do virtual communication under the recipient activities category “educate and communicate”.

3. Do coalitions suffice as affiliates? Is coalition building acceptable?

a. Answer: The FOA is designed to promote collaboration between existing networks, with new partners, and existing CDC grantees so yes, “coalitions” suffice.

b. Answer: the FOA is not designed to build coalitions but can build upon and advance existing coalition work.

4. Is there a list of approved affiliates?

Answer: No, CDC did not review or pre approve a list of organizations to determine which would qualify for the FOA in advance of its release.

5. Is an affiliate a healthcare provider?

Answer: Though health care provider practice groups may qualify as affiliates for purposes of the FOA, CDC is not specifying or limiting eligibility to health care providers. CDC defines affiliates as chapters, councils, members, agencies and/or practice groups.

6. Can a coalition of a larger organization, which is active in all 10 HHS regions, implement activities on behalf of the larger organization?

Answer: Coalition is often used similarly to the term “council”. If the coalition is an organizational unit of the applicant than the coalition may satisfy the criteria to have an affiliate structure.

7. If the prospective applicant is a local agency of a larger organization should the applicant apply in partnership with the national organization or can they apply on their own?

Answer: As a local agency you may not satisfy the requirement of having an affiliate in each of the 10 HHS regions; it may be beneficial to speak with your national organization to determine their interest in applying for this opportunity. If they apply your local agency may serve as the site for your HHS region.

8. Please clarify, what is a council?

Answer: a council is similar to a coalition; it is not a reference to an elected official, but rather a stakeholder group.

9. Does the organization have to be in and/or do activities in the regional headquarter(s)?

a. Answer: Neither the affiliate location nor the activity site have to be in the regional headquarters. For instance, in HHS region 4 the regional headquarters is in Atlanta, GA; however, an applicant may propose an intervention site *anywhere* within that region.

b. Answer: It is important to note that the overall breadth and scope of this FOA supports activities on a national level so recipients must implement their strategies and conduct recipient activities within each HHS region.

### III. Evidence of Organizational Structure/Reach and Impact

1. Do I need letters of support and an organizational chart? One or the other?

Answer: Applicants must submit both an organizational chart and letters of support.

2. My organization cannot get letters of support from its members in states because as officers of the State they cannot submit a letter on our behalf. In lieu of letters of support can we submit evidence of involvement from states in all 10 HHS regions?

Answer: the letters of support from members who are representatives of other agencies do not need to come on the letterhead of those agencies *but* may come on the letterhead of the agency submitting the application. In addition, the letters of support must indicate the basis of the affiliation, ability to implement strategies, and indicate the specific role the affiliate will have with the project.

3. My organization is local but partners with a national organization, does this suffice to meet the requirements? Would we need letters of support from the partner organization to meet the eligibility requirement?

Answer: Applicants are required to demonstrate that they have affiliates in each of the 10 HHS regions; the applicant itself, not its partners, must meet this requirement. Prospective applicants who are interested in applying but do not meet this requirement may consider collaborating with organizations that do meet the requirements; the eligible organization must submit the application. Letters of support should come from the affiliates of the eligible applicant, and any planned partners or collaborators.

4. Please clearly describe what constitutes reach and representation

- a. Answer: Reach is how effectively the organization can influence practice and activities in a service/targeted area(s).

- b. Answer: Representation is how effectively the organization can account for the needs of the service/target area(S).

5. Does the applicant need to demonstrate existing organizational outreach and representation in the HHS regions?

Answer: Yes. The applicant needs to demonstrate that they have existing reach and representation in each of the HHS regions.

Answer: Applicants cannot simply have reach within their region, they do not qualify by doing work in the state in which they are located, but rather must also demonstrate reach in each of the HHS regions.

Answer: Applicants do not have to have an affiliate in every state in every region but must have an affiliate in each region.

6. What are the 10 HHS regions?

Answer: the HHS regions and a list of states within each region is available online at, <http://www.hhs.gov/about/regionmap.html> . Page 38 of the FOA also references the link.

## Recipient Activities

1. What is the intent of this FOA? Are you trying to get groups to collaborate on previously completed work?

Answer: The intent of this FOA is to support innovative collaborations involving public health and non public health, traditional and non traditional partners that lead to awareness and implementation of population-level health interventions at the national level.

2. Under this FOA do applicants have to target physical activity, weight status, nutrition, and maternal and infant child health? Must applicants focus on all three funding components?

Answer: No. Applicants must focus on one funding component (physical activity with informational outreach, healthy food and beverage access, or breastfeeding) but may elect to focus on multiple funding components. The applicant can mix and match as they choose. Remember, the applicant must identify one component with no fewer than two related strategies.

3. Under this FOA, can applicants propose individual level interventions (e.g., exercise classes and cooking demonstrations)

Answer: No. This FOA seeks population-level interventions, individual behavior approaches such as exercise classes and cooking demonstrations are inappropriate for this FOA. Further, exercise classes and cooking demonstrations are neither an enumerated strategy nor one of the required recipient activities. Establishing standards for physical education classes is an acceptable strategy but the activities would have to be those listed in the FOA, not conducting an exercise or cooking demonstration class.

4. What are the funding components?

Answer: Healthy food and beverage, breastfeeding, and physical activity with informational outreach.

5. Does distance learning qualify as reach into the 10 HHS regions?

Answer: Distance learning may or may not qualify under the affiliate eligibility criteria. Applicants are required to demonstrate that they have affiliates in each of the 10 HHS regions; the applicant itself, not its partners, must meet this requirement. Prospective applicants who are interested in applying but do not meet this requirement may consider collaborating with organizations that do meet the requirements; the eligible organization must submit the application.

6. Does the applicant have to include at least 10 states in the proposal?

Answer: Not necessarily. The applicant needs to conduct activities in a locale (regional, state-wide, intra-state area, or community) within each of the 10 HHS regions but applicants do not have to demonstrate that they are conducting an activity with the state.

7. Will grantees be expected to lead activities across their own state, across states in their HHS region, or across states in other HHS regions?

- a. Answer: CDC hopes to establish innovative, national partnerships so grantees will be required to conduct recipient activities in at least one state in each HHS region. The activity within any one region can be at the regional, state, or local level.
- b. Answer: Grantees will not be expected to conduct the recipient activities in all states, but in all HHS regions.

8. Can grantees conduct different activities in each region? Work with different partners in different regions?

Answer: Yes. The applicant should clearly describe how they will conduct the recipient activities for their selected strategies and where they will conduct those activities. Different partners may be necessary in different regions. The applicant should submit letters of support from all partners.

9. Do applicants have to conduct activities in each of the 10 HHS regions, or just have affiliates in the regions?

Answer: Applicants must conduct activities within each of the 10 HHS regions, not just have an affiliate in the region. Not in each state in each region, but in each region conduct recipient activities

10. Intertribal organizations across country, trying to get a coalition in place to work on activities like breastfeeding promotion. Will this FOA support these types of activities?

- a. Answer: If the coalition proposes to implement any 2 of the 3 strategies listed under the breastfeeding funding component then the application will be considered based on the stated review criteria.
- b. Answer: Applicants must first meet eligibility criteria i.e., does the organization have affiliates in each of the 10 HHS regions.

11. What does CDC mean by engage new partners? Bring in individuals or partner organizations?

- a. Answer: CDC is referencing three distinct tasks under the recipient activity category, "Engage and Coordinate" (FOA, page 10). One, work with existing affiliates. Two,

identify and engage new partner groups. Three, work with a CDC generated list of DNPAO grantees to coordinate and leverage efforts.

- b. Answer: An example of how a grantee may structure their efforts would be for them to partner their existing affiliates with a civic or any non-public health organization and then connect that partnership to DNPAO grantees to learn about and leverage momentum.
- c. Answer: The applicant should clearly outline the partners and use letters of support to demonstrate their commitment is to the overall project.

12. Should the partner organization be the same in each region?

- a. Answer: The partner(s) can be the same or differ across regions. The selected partners should be appropriate for the scope of work and population groups proposed in the application.
- b. Answer: Applicants may propose as many partners as they desire and/or need to conduct the work of the FOA. Be sure to document each partner's commitment to the project.

13. Since the funding is for three years, should the activities occur in each year or over the three years of the grant?

Answer: the FOA provides examples of activities that may occur in each year of the FOA; this is where the benefit of the one year work plan page limit is evident. Page 23 of the FOA, under the section titled "work plan", includes programmatic questions for years 1, 2 and 3. Applicants should develop their work plan so they can report on year specific outcome accomplishments.

14. All regions must have a contact person, correct?

Answer: Yes, that is correct.

15. Can the applicant work exclusively with the ITO (Inter Tribal Organization)?

- a. Answer: Yes, applicants can work solely with ITOs.
- b. Answer: Applicants can work with different ITOs in each region; however, the ITO in region 2, for instance, cannot be the proxy for any other region. There must be an ITO in each region. The applicant must demonstrate the support and active engagement of its affiliates.

16. Some affiliates are not strong but work is needed in their areas, can other affiliates proxy for them?

- a. Answer: All interested applicants need to consider their affiliates' strengths and weaknesses and propose activities where the resources will have best impact and reach.
- b. Answer: Hopefully within each region there is at least one strong site.

## **Infrastructure**

1. May a portion of the awarded funds be used to establish or strengthen the partnership?

Answer: CDC is hoping to find innovative projects that are ripe for investment; applications that demonstrate organizational experience, per the criteria section referenced throughout the FOA and specifically on page 31, will likely receive a higher score than organizations that do not demonstrate such experience.

2. Please provide an example of collective action

Answer: For purposes of this FOA, collective action is the effective working of stakeholders (public, private, and nonprofit organizations, community members, and constituencies) to improve the health outcomes of a service/target area through commitments to action on specific public health interventions.

## **Funding**

1. Is the F&A rate the applicant's HHS negotiated rate? Would the applicant use the "other sponsored activity" rate since this is not a research project?

Answer: Any grantee without an approved F&A rate will have to obtain one; this typically occurs during the notice of award period with the CDC Procurement and Grans Office (PGO). Organizations with an HHS approved F&A rate may use it for this FOA.

2. Please clarify, how is the floor \$50,000, the average range \$50,000 but the maximum \$400,000?
  - a. Answer: CDC will provide minimum funding of \$50,000 to grantees. Grantees may request no more than \$200,000 per year. If there are four grantees then each *could* receive an average of \$50,000. The average will vary depending on the number of grantees selected and the amount awarded to each.
  - b. Answer: The average award is \$50,000 to \$100,000.
  - c. Answer: CDC may let a maximum funding level of \$400,000 per year. If CDC lets \$400,000 per year for a total of three years than it would have funded \$1.2 million over the entire three year term of the cooperative agreement.

3. Are the award floor and ceiling direct dollars or total dollars?

Answer: The award amount will reflect total dollars.

4. What is the maximum funding for each grantee?

Answer: the maximum funding for each grantee is \$200,000, the floor is \$50,000. The funding opportunity is not designed for for a new start up activity; it is important that applicants be able to leverage existing networks and bring in key, strategic partners to work on the proposed activities.

5. Is the stated funding every year or over the three years?

Answer: Funding is per year, for three years. If awarded, the grantee would receive a floor of \$50,000 every year for three years, assuming availability of funds.

6. This FOA provides seed money for one or two activities, right? It is not a systematic resource for public health.

- a. Answer: This FOA is not considered as seed money; seed money is usually for start up projects. CDC is not committing to fund organizations over a long – 10 to 15 year – period of time. Instead, it is a three year effort to learn from national partners about creating and sustaining innovative practices. This FOA is not for infrastructure or capacity building.
- b. Answer: CDC will use the review criteria to score the applications on factors such as program success, existing infrastructure, and demonstrated ability of staff to implement population-level health interventions especially with disproportionately impacted populations.

7. Should the budget be submitted for all three years, or just for year 1 with a detailed work plan?

Answer: the budget should be submitted for year one with a detailed work plan.

## **FOA Structure**

1. Is this FOA annual or inaugural?

Answer: This is an inaugural FOA.

2. What is the term of this FOA?

Answer: The FOA has a three-year term.

3. How many grantees will be funded under this FOA?

Answer: CDC will fund 1 to 4 grantees under this FOA.

4. Are there sample grants that can be viewed for reference?

Answer: No. Many libraries carry samples of grants, but CDC does not have any to distribute.

5. Can one organization submit multiple applications?

- a. Answer: Organizations must apply for one funding component. Applicants may apply for more than one, or any combination, of components.
- b. Answer: For each component the applicant must select no fewer than two strategies of the listed strategies. For instance, if the applicant selects two funding components, then the applicant's work plan should reflect investment in no fewer than four strategies.
- c. Answer: Applicants may select more than two strategies for their selected funding component.

6. Given the amendment to the FOA (to account for the prospective applicant call) has CDC changed the deadline for applications?

Answer: No. The application data is due on June 24.

7. Target populations; FOA lists groups that are disproportionately impacted by obesity but may applicants consider other groups?

- a. Answer: The FOA lists examples based on CDC surveillance data. CDC recognizes that other data sources exist which may identify additional population groups. Applicants may propose activities with other target populations. For any target population, the applicant must identify the target population, submit data to show how that assessment was made, and indicate what, specifically, the applicant intends to do to address disparities within that group.
- b. Answer: Children in general may or may not be a justifiable target population; data support Hispanic children, for instance, as a target population for purposes of addressing obesity-related health disparities.

### **Contact information**

1. Contact information is found in the FOA for various issues:

- a. Answer: Page 36. Section, “d. Technical Difficulties”: For technical issues with grants.gov including troubleshooting how to download a copy of the FOA or upload material.
- b. Answer: Page 43. Section, “G. Agency Contact”: For programmatic assistance, or financial, awards management or budget assistance