



PS-23-0009

**Advancing Policy as a Public Health Intervention to Reduce Morbidity,
Mortality and Disparities in HIV, Viral Hepatitis, STDs, and Tuberculosis**

Informational Call #1

Monday, November 14, 2022

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Welcome and Opening Remarks

Cecily Campbell, JD

Associate Director for Policy, NCHHSTP, CDC

Welcome to the Informational Call

- **Logistical Details**

- Please hold all questions until the end of the presentation
 - Utilize the chat during the presentation

- **Roll Call via Chat**

- Please include name, organization, favorite month

- **Q/A**

- **Final review of important dates**

- **Closing**

Conference Call Purpose and Objectives

■ Purpose of Today's Call

- To present an overview of the Policy as a Public Health Intervention Notice of Funding Opportunity (NOFO) for prospective applicants to be informed and prepared to develop a strong application

■ Objectives for Today's Call

- To provide a forum for the discussion of NOFO details
- To provide clarification on eligibility and application requirements
- To discuss details of the procurement and grants process
- To provide an opportunity for applicants to ask questions or request clarification

Introduction and Overview

Anticipated Funding

- **Total Project Period: 5 years**
- **Approximate Total Project Period Funding: \$7,500,000**
- **Approximate Total Fiscal Year Funding: \$1,500,000**
- **Award Ceiling: no ceiling has been set per budget period**
- **Award Floor: no floor has been set per budget period**
- **Approximate Average Award per Component: \$750,000**
- **Applications due – February 1, 2023, 11:59pm ET**

**Award supplements are expected throughout the life of the
NOFO**

Eligible Applicants

- Unrestricted
- One or two applicants will be selected to carry out the strategies outlined in the NOFO



APP TIP #1

If your organization is applying to BOTH components – **which is allowed!** – you **MUST** submit two separate and distinct applications to www.grants.gov and all accompanying files must be named according to the component you are applying to.

Letter of Intent

- **Not required, not binding!**
- **But very helpful to CDC staff**



Please send to:

Michael Williams, MPH

Lead, Policy as a Public Health Intervention, NCHHSTP, CDC

xkk3@cdc.gov

Overview, Purpose, and Long-Term Outcomes

Purpose of the NOFO

This NOFO aims to strengthen the ability of leaders who make decisions in public health to identify, assess, and implement evidence-based policy interventions through:

- (Comp. 1) Grow breadth and depth of NCHHSTP-disease related longitudinal law and policy surveillance data sets and conduct comprehensive health and economic outcome assessments to inform public health practice.
- (Comp. 2) Conduct and facilitate legal and policy-related technical assistance among leaders who make decisions impacting NCHHSTP-related health outcomes; proactive technical assistance, regional meetings

Long-Term Outcomes

- **Reduced morbidity, mortality, and health disparities from HIV, viral hepatitis, STIs, & TB**
- **Increased evidence-based policy decision-making**

Components, Strategies, Activities, and Outcomes

Component 1

Grow the breadth and depth of longitudinal law and policy surveillance data sets and conduct comprehensive health and economic outcome assessments.

The recipient will use legal epidemiological methods to inform public health practice by:

- Identifying laws and policies
- Systematically collecting data
- Conducting analyses to determine the potential or actual impact of laws and policies on health and economic outcomes

APP TIP!

Component 1 –Grow the breadth and depth of longitudinal law and policy surveillance data sets and conduct comprehensive health and economic outcome assessments

The recipient will use legal epidemiological methods to inform public health practice by identifying laws and policies, systematically collecting data, and conducting analyses to determine the potential or actual impact of laws and policies on health and economic outcomes, including health equity.

Strategy 1.1 - Conduct a data-driven landscape assessment to determine policy topics for legal epidemiological analyses

The recipient will conduct a comprehensive legal and policy landscape assessment in collaboration with subject matter experts (SMEs) to identify priority federal, state, tribal, local, and territorial laws and policies that will advance the long-term outcomes of the NOFO. The landscape assessment should include cross-cutting syndemic topics (e.g., racial and ethnic disparities, social determinants of health, infectious disease consequences of the opioid crisis, safe and supportive school environments, and other health conditions).

APP TIP #2

STRATEGY 1.1

Component 1

Strategy 1

Activities are outlined under each strategy heading

Component 1, Strategy 1.1

Strategy 1.1

- **Conduct a data-driven landscape assessment to determine policy topics for legal epidemiological analyses**
 - Recipient will conduct a comprehensive legal and policy landscape assessment in collaboration with subject matter experts (SMEs) to identify priority **federal, state, tribal, local, and territorial** laws and policies that will advance the long-term outcomes of the NOFO.
 - The landscape assessment should include cross-cutting syndemic topics
 - Racial and ethnic disparities, SDOH, infectious disease consequences of drug use, safe and supportive school environments, and other health conditions

Component 1, Strategy 1.2

Strategy 1.2

- **Systematically collect legal data on policy topics and develop publicly available legal data sets**
 - Draft a framework documenting the replicable and scientifically rigorous methods that will be used for conducting legal epidemiological assessments
 - Data should be collected using established legal epidemiological methods and via appropriate legal and policy databases (e.g., Westlaw).
 - When applicable, the recipient should collect data over a specified time series to capture changes and trends in public health laws and policies over time.

Component 1, Strategy 1.3

Strategy 1.3

- **Conduct analyses to determine the impact of laws and policies on health and economic outcomes**
 - Leverage **scientifically valid methods** using the data collected in Strategy 1.2 to determine the impact of laws and policies on health and economic outcomes
 - The recipient should work closely with CDC to define analytical questions, generate hypotheses, conduct literature searches, and perform statistical analyses.
 - The recipient should generate materials, reports, and/or peer-reviewed journal manuscripts in collaboration with CDC staff.

Component 1, Strategy 1.2

Strategy 1.3 (cont'd)

“Scientifically Valid Methods”

Recipients should review “Table 1 - Example of Law and Policy Analyses” to review published analyses that employ statistical methods to assess law and policy data.

NOTE: The topics included within this table do not necessarily represent the topics the recipient will be required to address.

These are merely examples of what we are looking for

Component 1, Outcomes

Short-term Outcomes

- Increased knowledge of evidence-based laws and policies that reduce morbidity, mortality, and health disparities
- Increased awareness of and access to longitudinal law and policy surveillance data sets

Intermediate Outcomes

- Increased application of evidence-based laws and policies that are found to reduce morbidity, mortality, and health disparities
- Increased breadth and depth of available evidence demonstrating the impact that laws and policies have on health and economic outcomes

Component 2

Conduct and facilitate policy and legal-related technical assistance (TA) among leaders who make decisions in public health

The recipient will inform public health practice by **providing legal and policy-related TA** and developing evidence-based resources and tools for leaders who make decisions in public health.

Component 2, Strategy 2.1

Strategy 2.1

- **Develop a process to address incoming legal TA requests to formulate evidence-based responses to address jurisdiction-specific policy and legal barriers**
 - In consultation with CDC, the recipient will be required to develop a formal system to receive technical assistance (TA) requests, prioritize requests, and determine the appropriate person, partner, or entity to respond effectively.
 - The system should be designed to provide data for evaluation reports and success stories.
 - The recipient will be required to promote the availability of the technical assistance center.

Component 2, Strategy 2.2

Strategy 2.2

- **Identify solutions to policy and legal barriers by developing and using evidenced-based TA tools and resources**
 - Develop tools, resources, and other helpful aids
 - Tools and resources should (not should not be limited to):
 - Provide strategies and activities to support and promote evidence-based law and policy options
 - Promote a thoughtful approach to the consideration of consequences of law and policy changes for different stakeholders and communities

Component 2, Strategy 2.2

Strategy 2.2 (cont'd)

- Tools and resources should (but should not be limited to):
 - Use available legal and policy data sets (e.g., from Component One) to inform resource development and assess implications for changes in health outcomes that are related to policy implementation within a specific jurisdiction.
 - The recipient should maintain ongoing and consistent situational awareness of rapidly evolving issues (e.g., tracking introduced legislation) and be prepared to translate the information into easy-to-understand and person-first communication materials for various audiences, communities, and stakeholders.

Component 2, Strategy 2.2

Strategy 2.2 (cont'd)

Tools and resources should (but should not be limited to):

Use available legal and policy data sets (e.g., from Component One) to inform resource development and assess implications for changes in health outcomes that are related to policy implementation within a specific jurisdiction.

REACTIVE

The recipient should maintain ongoing and consistent situational awareness of rapidly evolving issues (e.g., tracking introduced legislation) and be prepared to translate the information into easy-to-understand and person-first communication materials for various audiences, communities, and stakeholders.

Component 2, Strategy 2.3

Strategy 2.3

- **Proactively disseminate TA-related resources to leaders who make decisions in public health**
 - Tailor and disseminate resources widely
 - Compile and format TA resources for use within a CDC-hosted dashboard
 - Plan, develop, implement, and evaluate stakeholder meetings in consultation with CDC to provide tailored technical assistance on legal/policy barriers and solutions generally, as well as on regional, jurisdiction, and population-specific approaches.
 - Convening jurisdictions in the same region to share best practices for addressing these issues or navigating similar environments is an effective approach to providing nuanced technical assistance and support to state officials and their partners.

Component 2, Strategy 2.3

Strategy 2.3

Proactively disseminate TA-related resources to leaders who make decisions in public health

Tailor and disseminate resources widely

Compile and format TA resources for use within a CDC-hosted dashboard

Plan, develop, implement, and evaluate stakeholder meetings in consultation with CDC to provide tailored technical assistance on legal/policy barriers and solutions generally, as well as on regional, jurisdiction, and population-specific approaches.

Convening jurisdictions in the same region to share best practices for addressing these issues or navigating similar environments is an effective approach to providing nuanced technical assistance and support to state officials and their partners.

PROACTIVE

Component 2, Outcomes

Short-term Outcomes

- Increased knowledge of evidence-based TA resources to address policy and legal barriers
- Increased awareness of and access to legal TA among leaders who make decisions in public health

Intermediate Outcomes

- Increased nationwide capacity for addressing policy and legal barriers to inform public health practice
- Increased application of legal TA tools and resources in advancing evidence-based laws and policies

Continuum of Work

Component 1

Component 2

Identify policy priorities

Collect & code law/policy data

Conduct health & economic outcome assessments

Create technical assistance tools

Provide legal technical assistance

Disseminate technical assistance resources

NCHHSTP's Policy as a Public Health Intervention Dashboard & Resource Center

Organizational Capacity

Both Components

- National leadership
- Adequate staffing with appropriate expertise in law, policy, and infectious diseases
- Demonstrated experience in carrying out similar strategies as this NOFO
- Current partnerships with other public health law and policy organizations
- Organizational knowledge and expertise in addressing SDOH and working to eliminate health disparities and inequities by advancing evidence-based laws and policies
- Ability to reach governmental and non-government leaders who make decisions in public health

APP TIP #3

All supporting documents providing evidence to these criteria **MUST** be uploaded to www.grants.gov with unambiguous filenames.

Component 1

Organizational Capacity

- **Prior success in conducting law and policy landscape assessments, describing lessons learned and challenges overcome**
- **Evidence (e.g., past legal epidemiological studies) of the organization's ability to leverage legal epidemiological methods to successfully code law and policy data for use in subsequent analyses**
- **Evidence (e.g., publications that include health and economic modeling) of the organization's ability to assess the impact of laws and policies on health and economic outcomes**

APP TIP #4

All supporting documents providing evidence to these criteria **MUST** be uploaded to www.grants.gov with unambiguous filenames.

Component 2

Organizational Capacity

- **Ability to develop a process to address incoming legal TA requests to formulate evidence-based responses to address jurisdiction-specific legal concerns and policy issues**
- **Ability to identify solutions to policy and legal barriers by developing and using evidenced-based TA tools**
- **Ability to disseminate resources to leaders who make decisions in public health**
- **Prior success in planning and convening multi-stakeholder meetings to include federal, NGO, state, tribal, territorial, and local partners and facilitating policy and law goal setting, action planning, and other strategic discussions and sessions, including the provision of public health law technical assistance and facilitation of peer-to-peer learning**

Component 2

Organizational Capacity

- **Translation of infectious disease-related policies at federal, state, tribal, territorial, and local levels into actionable resources**
 - Examples may include legal briefs, issue briefs, policy fact sheets, policy assessments, model laws/policies, and/or other translational tools created by the recipient
- **Evidence of prior experience evaluating policy training and technical assistance activities and outcomes**

APP TIP #5

All supporting documents providing evidence to these criteria **MUST** be uploaded to www.grants.gov with unambiguous filenames.

“Michael’sKitchen_Comp2_OrgCapacityEvidence”

Gaps in Organizational Capacity

Applicants who have identified a gap in their capacity - meaning they cannot provide evidence of their ability to perform a certain strategy or achieve a certain outcome - are required to submit a detailed narrative in the form of a Letter of Support from an organization who has the demonstrated ability to address this gap. This letter must clearly indicate the organization's willingness to participate in this activity and explicitly define their role.

There is no limit to the number of Letters of Support that an applicant can submit as part of their application. These partnerships can be with CDC funded or non-CDC funded entities.

Gaps in Organizational Capacity

Example:

If an applicant is applying to Component One and does not have the capacity to do health and economic assessment work, they will need to submit a Letter of Support from another organization who has sufficient experience in using law and policy data to inform health and economic outcomes assessment work.

The supporting organization must clearly demonstrate their intent to partner.

CDC will interpret these letters a signal to future subawards.

Collaborations

Collaborations

- **Recipients are strongly encouraged to work with CDC-funded state and local health department programs to inform aspects of their work throughout the duration of the NOFO.**
- **Recipients of both Component One and Component Two are expected to share information with one another.**

Collaborations

- **To help demonstrate experience and capacity to achieve NOFO outcomes, applicants to either or both components may submit letters of support from any of the three categories described below.**
 - Institutions of higher education
 - Graduate schools of public health, public policy
 - Schools of law
 - Public Health Organizations
 - Not-for profit/non-governmental organizations where advancing law and policy as a tool to improve health, reduce disparities, and/or improve whole communities is a central tenant, but not necessarily the primary activity, of the organization's mission
 - Law and Policy Organizations
 - Not-for profit/non-governmental organizations where advancing law and policy as a tool to improve health, reduce disparities, and/or improve whole communities is the primary purpose of the organization's mission

Reporting and Monitoring

Reporting & Monitoring

- **Annual Performance Reporting**

- Will serve as continuation application

	Outcomes	Performance Measures
Component 1: Short-Term	Increased awareness of and access to longitudinal law and policy surveillance data sets	1. Number of public health law data sets published 2. Number of downloads of public health law data sets
Component 1: Intermediate	Increased breadth and depth of available evidence demonstrating the impact that laws and policies have on health and economic outcomes	1. Number of analyses conducted to determine the impact laws and policies have on health and economic outcomes
Component 2: Short-Term	Increased awareness of and access to legal TA among leaders who make decisions in public health	1. Number of TA requests received 2. Number of legal TA products developed and publicly accessible
Component 2: Intermediate	Increased application of legal TA tools and resources in advancing evidence-based laws and policies	1. Number of TA recipients that used provided resources to advance evidence-based polices

- **Source of these data will be from annual performance reporting**

Application Dates, Deadlines, and Requirements

Application & Submission Information

- **Application Deadline: Wednesday, February 1, 2023, 11:59pm EDT**
- **Project Abstract (maximum of 1 page)**
 - Summary of the proposed activity suitable for dissemination
- **Project Narrative (maximum of 15 pages)**
 - This includes the work plan
 - Activities to be conducted over the entire project period
 - 12-point font, 1-inch margins, number all pages
 - Content beyond the specified page number will not be reviewed
- **Application Appendices (not part of 15 page max)**
 - These may include letters of support, resumes, CVs, org charts, other supporting materials

Application & Submission Information

■ Funding Restrictions

- Recipients may not use funds for research and/or clinical care.
- **Federally-funded lobbying, either directly or indirectly (i.e., grassroots lobbying), is prohibited by law.**
- Recipients may use funds only for reasonable program purposes, including personnel, travel, supplies, and services.
- Generally, recipients may not use funds to purchase furniture or equipment. Any such proposed spending must be clearly identified in the budget.
- Reimbursement of pre-award costs generally is not allowed, unless CDC provides written approval to the recipient.
- Other than for normal and recognized executive-legislative relationships, no funds may be used for:
 - Publicity or propaganda purposes, for the preparation, distribution, or use of any material designed to support or defeat the enactment of legislation before any legislative body.
 - The salary or expenses of any grant or contract recipient, or agent acting for such recipient, related to any activity designed to influence the enactment of legislation, appropriations, regulation, administrative action, or Executive order proposed or pending before any legislative body.

Application Review Information

■ Review and Selection Process

- Initially reviewed for completeness by Office of Grants Services (OGS)
- Eligible applicants jointly reviewed for responsiveness by the Program Office and OGS
- Technical Structured Review conducted by Program Office

■ Scoring Criteria

- Organizational Capacity to Implement the Approach (45 points)
- Approach (30 points)
- Evaluation and Performance Measurement (25 points)
- Budget and Budget Narrative (reviewed but not scored)

Award Administration Information

■ Award Notices

- Recipients will receive an electronic copy of the Notice of Award (NOA) from CDC OGS. The NOA shall be the only binding, authorizing document between the recipient and CDC. The NOA will be signed by an authorized GMO and a notification will be sent through GrantSolutions to the Recipients staff listed in the project assignment of the award.
- Any applicant awarded funds in response to this Notice of Funding Opportunity will be subject to annual SAM Registration and Federal Funding Accountability and Transparency Act Of 2006 (FFATA) requirements.
- Unsuccessful applicants will receive notification of these results by e-mail with delivery receipt.

■ Administrative and National Policy Requirements

- Recipients must comply with the administrative and public policy requirements outlined in 45 CFR Part 75 and the HHS Grants Policy Statement, as appropriate.

Resources

- **PS-23-0009 website**
 - <https://www.cdc.gov/nchhstp/funding/pphi>
- **Budget preparation guidance**
 - <https://www.cdc.gov/grants/documents/Budget-Preparation-Guidance.pdf>
- **Anti-Lobby Restrictions for CDC Grantees**
 - [https://www.cdc.gov/grants/documents/Anti-Lobbying Restrictions for CDC Grantees July 2012.pdf](https://www.cdc.gov/grants/documents/Anti-Lobbying_Restrictions_for_CDC_Grantees_July_2012.pdf)

Agency Contacts

■ Programmatic Technical Assistance

- Project Officer: Michael Williams
- Telephone: (404) 718-4516
- Email: xkk3@cdc.gov

■ Financial, Grants Management, or Budget Assistance

- Grants Management Specialist: Terrian Dixon
- Telephone: (770) 488-2774
- Email: TDixon@cdc.gov

■ Submission Difficulties Assistance

- Grants.gov Contact Center Phone: 1-800-518-4726
- Email: support@grants.gov

Participant Question and Answer Session