CDC’s Center for State, Tribal, Local, and Territorial Support (CSTLTS) announced a two-year funding opportunity for organizations to implement activities to strengthen governmental and nongovernmental components of the public health system. This program exemplifies CSTLTS’s commitment to advancing US public health agency and system performance, capacity, agility, and resilience.

**Purpose**
The purposes of this cooperative agreement are to 1) establish a pool of organizations capable of rapidly providing essential expertise to various parties involved in an emergency response and 2) fund select awardees to provide that support, when required, based on CDC’s determination of need.

This cooperative agreement is designed to collect qualified proposals from eligible applicants and retain them as “approved but unfunded” until a crisis occurs. CDC will make funding available to relevant organizations once the agency determines that a public health emergency response is needed.

This cooperative agreement complements CDC’s “Cooperative Agreement for Emergency Response: Public Health Crisis Response” (CDC-RFA-TP18-1802), which was announced by the Office for Public Health Preparedness and Response in October 2017 and launched this new funding approach.

**Recipient Strategies and Activities**
Recipients will provide assistance and expertise in two major areas, or strategies—

*Strategy 1: Effective Process Implementation*
Process is a critical success factor in response efforts, where lives may depend on the speed of a transaction, placement of personnel, or delivery of equipment. Therefore, awardees must have strength in and be able to effectively perform the activities associated with each of the following process areas:

- **Expedited procurement**: Superseding normal acquisition procedures to accelerate delivery
- **Agile administration and operations**: Reacting to requests, developing plans, deploying resources, and performing administrative actions quickly and with highly coordinated communication
- **Strategic partnering**: Rapidly engaging partners from multiple sectors to amplify, augment, or otherwise improve response efforts

*Strategy 2: Critical Content Expertise*
The recipient’s strength in process implementation (addressed by Strategy 1) serves as the foundation for delivering critical content expertise. Applicants must have demonstrated strength in and be able to provide support in one or more of the following content areas:

- **Administrative logistics**: Travel, transportation, shipping, printing, transcription, meetings and event planning, small purchases, etc.
- **Communications**: Situational awareness, risk communications, media support, project monitoring and reporting, cultural and lingual translation, graphics, writing/editing, training development and delivery, etc.
• **Human resources and specialized expertise:** Recruiting, hiring, general staff augmentation, payroll, onboarding, orientation, and acquisition of specialized expertise, including but not limited to epidemiology, entomology, infectious disease, environmental health, and emergency response, etc.

• **Direct services:** Performing specific emergency response activities on behalf of a third party because of a gap in that third party’s capabilities and because CDC has determined that this gap threatens the effectiveness of the response as a whole. (Note: “direct services” in this context does not mean “provision of care.”)

**Project Goal**
CDC will strengthen the US public health system’s response to public health or healthcare crises by funding qualified organizations to provide expert technical assistance and other forms of support to entities engaged in a public health or healthcare crisis.

**Funding Period**
- A total performance period of 24 months
- Two budget periods of 12 months each

**For More Information**
Email questions to CSTLTCrisisCoAg@cdc.gov.