

# Overview of the Cooperative Agreement: CDC-RFA-OT21-2101

## Strengthening the Public Health Systems and Services in US-Affiliated Pacific Islands

### Background

CDC's Center for State, Tribal, Local, and Territorial Support (CSTLTS) developed a five-year notice of funding opportunity (NOFO) for a regional, nonprofit organization to strengthen the quality, performance, and sustainability of US-Affiliated Pacific Islands (USAPI) governmental and nongovernmental components of the public health system through capacity-building assistance (CBA). The goal with this NOFO is to optimize quality public health business services, workforce, data and information systems, practice and services, partnerships, laws and policies, and resources.

### Strategies and Activities

The strategies below originate from national recommendations for CBA and are based on CDC and CSTLTS priorities, program experience, and evidence-based recommendations from the scientific literature and national reports published by federal councils and national public health organizations, such as the Department of Health and Human Services, *Healthy People 2020* and *2030*, the National Prevention Strategy, and the World Health Organization. The recipient will address these seven CBA strategies and activities:

1. **Public health workforce:** Activities to enable improvement of competencies and resources to strengthen leadership and workforce development
2. **Public health system and infrastructure:** Activities to strengthen system and agency needs and determine steps to improve operational capacity
  - a. **Sub-strategies:** Accountability performance management, quality improvement; business process improvement; communications; financial management; information technology systems
3. **Public health laws and policies:** Activities to improve the ability to interpret and inform laws, including statutes and regulations, and health policies
4. **Translation and implementation of evidence-based public health practices and services for USAPI population:** Activities to strengthen the delivery of essential public health services
5. **Public health monitoring and surveillance systems:** Activities to increase the capacity to support collection, integration, maintenance, dissemination, and interpretation of data across the public health system
6. **Communications:** Activities to improve the use of communications to affect health decisions and actions
7. **Partnerships:** Activities to improve the establishment and maintenance of results-driven partnerships

### Outcomes

This CBA initiative will demonstrate measurable progress of the USAPI public health system toward the following outcomes:

1. **Public health workforce**
  - Increased knowledge, skills, resource, support, and structure to enhance competencies among public health leadership and workforce
  - Strengthened workforce qualifications, performance, service delivery, and increase leadership capacity around policy formulation and program implementation
  - Improved multi-sectoral leadership action to strategically address population health needs and build workforce capacity and retention



## **2. Public health system and infrastructure**

- Increased implementation of processes and services that build operational efficiency and effectiveness
- Increased use of performance management systems to monitor and evaluate operational processes
- Improved operational efficiency and effectiveness

## **3. Public health laws and policies**

- Increased awareness of how laws and policies affect the public's health among public health practitioners, government and non-governmental agencies, and political leaders
- Increased practical, legal-and policy-centered tools and resources for public health practitioners, government and non-governmental agencies, and political leaders
- Increased implementation of evidence-based public health laws and policies by public health practitioners, government and non-governmental agencies, and political leaders

## **4. Translation and implementation of evidence-based public health practices and services for USAPI population**

- Increased capacity to assess evidence-based public health practices and services for cultural relevance
- Enhanced capacity to integrate and coordinate culturally relevant practices and services across multiple settings
- Increased ability to translate and widely implement evidence-based practices and services across multiple settings

## **5. Public health monitoring and surveillance systems**

- Increased knowledge and capacity to develop national health data systems and registries
- Improved collection, maintenance, interpretation, and dissemination of population health data
- Improved capacity to identify population health needs through data driven decision-making

## **6. Communications**

- Improve communication capacity to inform the public effectively and efficiently
- Strengthened capability to use communication to affect health decisions and actions
- Increased communication capacity through public health practitioners, government and non-governmental agencies, and political leaders

## **7. Partnerships**

- Improved capacity to establish and maintain partnerships within and across sectors to create a shared public health vision
- Strengthened capability to respond to public health priorities collaboratively and strategically
- Improved capacity to address public health priorities through collaboration and partnerships

## **Funding**

This cooperative agreement has a period of performance length of five years. All funded activities must adhere to the following period of performance and budget period:

- Period of Performance Length: 5 Years (August 1, 2021–July 31, 2026)
- Budget Period Length: 12 months, each year, (August 1–July 31)

## **For More Information**

Contact [USAPIPartnerCoAg@cdc.gov](mailto:USAPIPartnerCoAg@cdc.gov) for more information.