
DEPARTMENT OF
HEALTH AND HUMAN SERVICES
OFFICE OF THE
ASSISTANT SECRETARY FOR HEALTH

**Notice of Funding Opportunity: Promoting Vaccine Confidence in Local
Communities through Partnership with Regional Health Offices**

Opportunity Number: NV-VSR-21-001

Application Due Date:

August 17, 2021 at 6:00 PM Eastern

OVERVIEW

FEDERAL AGENCY NAME

Office of the Assistant Secretary for Health, Office of Infectious Disease and HIV/AIDS Policy

FUNDING OPPORTUNITY TITLE

Promoting Vaccine Confidence in Local Communities through Partnership with Regional Health Offices

ACTION

Notice

ANNOUNCEMENT TYPE

Initial Competitive Cooperative Agreement

FUNDING OPPORTUNITY NUMBER

NV-VSR-21-001

ASSISTANCE LISTING NUMBER AND PROGRAM:

93.344, Research, Monitoring and Outcomes Definitions for Vaccine Safety

DATES

Application Deadline: August 17, 2021 by 6:00 PM Eastern.

Technical Assistance: Webinar, July 22, 2021 at 4:00 PM Eastern.

EXECUTIVE SUMMARY

The Office of Infectious Disease and HIV/AIDS Policy (OIDP) announces the availability of funds for Fiscal Year (FY) 2021 cooperative agreements under the authority of sections 1702 and 1703 of the Public Health Service Act, (42 U.S.C. 300u-1 and 300u-2).

This initiative seeks to expand traditional immunization partnerships to plan, implement, and evaluate evidence-based practices and develop novel approaches to increase confidence in vaccines in local communities, particularly partnerships with minority-serving or other advocacy organizations that work with populations with low vaccination rates (e.g., African Americans and

residents in rural communities). The goal of these demonstration projects is to identify effective vaccination policies informed by evidence and best practice models to improve the public's confidence in the use of vaccines, particularly among racial and ethnic minority and other disadvantaged or disenfranchised populations. Practical solutions at local levels are needed to help support vaccination efforts in communities by healthcare providers, immunization program managers, immunization advocates, vaccine manufacturers, and other stakeholders. OIDP and the Office of Regional Health Operations (ORHO) are collaborating to implement this project. OIDP and ORHO are operational components in the Office of the Assistant Secretary for Health (OASH).

OIDP anticipates the availability of approximately \$750,000 for this funding opportunity to support 6 to 8 awards ranging from \$75,000 to \$125,000 per year for up to three years. OIDP and ORHO will support activities by selected minority-serving or other organizations--including public health departments, community organizations, academic institutions, professional or trade organizations, and immunization coalitions--that work with populations with low vaccination rates (e.g., African Americans, Hispanics, and Native Americans). If the applicant is not a local government public health agency or local community-based organization, the applicant should secure a partnership with such local government public health agency's immunization program or local community-based organization.

The narrative in the application should include a clear understanding of the challenges and needs related to each of the following in the community: 1) level of confidence in vaccine products, 2) level of confidence in vaccine providers (does not need to be exclusive to vaccine administration in private practice or traditional healthcare settings), and 3) level of confidence in policy decisions including but not limited to, the approval process, recommendations for who should and should not receive a vaccine, and when vaccines should be administered.

HHS/OASH encourages applicants to review all program requirements, eligibility information, application format and submission information, evaluation criteria, and other information in this funding announcement to ensure that its application complies with all requirements and instructions.

FUNDING OPPORTUNITY DETAILS

A. DATES

1. Application Deadline

Your application is due August 17, 2021 by 6 p.m. Eastern Time. To receive consideration, you must submit your application electronically via Grants.gov no later than this due date and time. If you do not submit your application by the specified deadline, we will return it to you unread. You must submit electronically via Grants.gov unless you obtain a written exemption from this requirement 2 business days in advance of the deadline from the Director, HHS/Office of the Assistant Secretary for Health (OASH) Grants and Acquisitions Management (GAM) Division. To obtain an exemption, you must request one via email from the HHS/OASH/GAM, and provide details as to why you are technologically unable to submit electronically through Grants.gov. Your request should be submitted at least 4 business days prior to the application deadline to ensure your request can be considered prior to 2 business days in advance of the deadline. If you request an exemption, include the following in your e-mail request: the HHS/OASH announcement number; your organization's DUNS number; your organization's name, address and telephone number; the name and telephone number of your Authorizing Official; the Grants.gov Tracking Number (for example, GRANT#####) assigned to your submission; and a copy of the "Rejected with Errors" notification from Grants.gov. Send the request with supporting documentation to OASH_Grants@hhs.gov. Note: failure to have an active System for Account Management (SAM) registration prior to the application due date will not be grounds for receiving an exemption to the electronic submission requirement. Failure to follow Grants.gov instructions to ensure software compatibility will not be grounds for receiving an exemption to the electronic submission requirement.

The HHS/OASH GAM will only accept applications via alternate methods (hardcopy paper via U.S. mail or other provider or PDF via email) from applicants obtaining prior written approval. If you receive an exemption, you must still submit your application by the deadline. Only applications submitted through the Grants.gov portal or alternate format (hardcopy paper via U.S. mail or other service or PDF via email) with an approved written exemption will be accepted. See Section F.8 ("Other Submission Requirements") for information on application submission mechanisms.

To ensure adequate time to submit your application successfully, HHS/OASH recommends that you register as early as possible in Grants.gov since the registration process can take up to one month. You must register an authorizing official for your organization. HHS/OASH does not determine your organization's authorizing official; your organization makes that designation. For information on registering for Grants.gov, refer to <http://www.grants.gov> or contact the Grants.gov Contact Center 24 hours a day, 7 days a week (excluding Federal holidays) at 1-800-518-4726 or support@grants.gov.

Your organization is strongly encouraged to register multiple authorized organization representatives in Grants.gov to ensure someone is available to submit your application.

2. Technical Assistance

A technical assistance webinar for potential applicants will be held July 22, 2021 at 4:00 PM Eastern. Login details will be posted at <https://www.hhs.gov/immunization>.

We recommend you review the entire announcement promptly so you can have any questions answered well in advance of the application due date. We also recommend you subscribe to this announcement in Grants.gov so you receive any amendments, question and answer documents, or other updates.

B. PROGRAM DESCRIPTION:

The Office of the Assistant Secretary for Health, Office of Infectious Disease and HIV/AIDS Policy (OIDP) announces the availability of funds for Fiscal Year (FY) 2021 under the authority of sections 1702 and 1703 of the Public Health Service Act, (42 U.S.C. 300u-1 and 300u-2).

OIDP oversees the National Vaccine Program that provides strategic leadership and coordination of vaccine and immunization activities among federal agencies and other stakeholders with the goal to help reduce the burden of preventable infectious disease. OIDP has maintained that vaccine confidence is critical to improving vaccination coverage rates and has prioritized its work on strengthening public trust in vaccines. This project aligns with the priority of the OASH to respond to and prevent the coronavirus disease (COVID-19) and other vaccine-

preventable diseases, and strategic goals of the HHS including “Goal 2: Protect the health of Americans Where they Live, Learn, Work, and Play” and “Goal 3: Strengthen the Economic and Social Well-being of Americans Across the Lifespan”.

Vaccines are among the most effective public health interventions to promote health and prevent diseases. According to the World Health Organization, vaccines prevent between two and three million deaths per year globally. An essential pillar of success for a national vaccine program is maintaining high rates of immunity in communities. To reach the necessary number of vaccinated individuals to achieve community immunity, a high level of public trust in the immunization systems, i.e., vaccine confidence, is needed. In the United States, vaccination coverage for adolescents and adults have generally remained persistently low. Even among children, where coverage rates are high at 90% or higher for most vaccines, nearly 12% of parents refuse at least one recommended vaccine for their children and approximately 30% delay one or more vaccines from being administered to their children. Additionally, non-medical exemptions from school immunization requirements have hindered higher vaccination coverage in children. These data suggest a deficiency in public trust in vaccines. If the national trend of reduced vaccine confidence continues, gains made over the past decades in preventing serious and potentially deadly diseases are threatened. Such erosion may result in more frequent and larger outbreaks of preventable diseases that strain the healthcare system and public health infrastructure and pose an increased threat to national security.

Vaccine confidence is defined as having confidence in 1) the safety and efficacy of a vaccine (confidence in the product), 2) the competence of the healthcare professional administering the vaccine (confidence in the provider), and 3) trusting the motivations of the policymakers deciding which vaccines are recommended and when (confidence in the policy). Given the direct relationship between vaccine confidence and vaccine decision making, there is a critical need to understand the determinants of and steps that can be taken to improve vaccine confidence.

Efforts to better understand vaccine confidence so that effective interventions can be implemented are ongoing. For example, the National Vaccine Advisory Committee (NVAC), a federal advisory committee of external experts that advises the Assistant Secretary for Health, HHS, is continuing its work to update the report on recommendations regarding determinants of

vaccination confidence (Assessing the State of Vaccine Confidence in the United States: Recommendations from the National Vaccine Advisory Committee. Public Health Rep. 2015 Nov–Dec; 130(6):573–595). NVAC recommended strategies to improve the public’s confidence in vaccines and provided guidance on the use of effective vaccination policies to promote evidence-informed best practices. However, practical solutions to engage healthcare providers, academicians, immunization program managers, vaccine advocates, vaccine manufacturers, and other partners in local communities are needed.

This initiative seeks to expand traditional immunization partnerships to plan, implement, and evaluate evidence-based practices and develop novel approaches to increase confidence in vaccines in local communities, particularly partnerships with minority-serving or other advocacy organizations that work with populations with low vaccination rates (e.g., African Americans, Hispanics, and Native Americans; residents in rural communities, medical assistants [when compared to other medical professions]; some immigrant and refugee communities; and young adults [when compared to older adults] and teens and adolescents [when compared to younger children]).

1. Objectives

This project centers around building partnerships with community stakeholders to increase confidence in the use of vaccines by the public, healthcare providers, and policymakers, especially in communities that have lower vaccination coverage rates. Its objectives are:

- a. identify a local community with low vaccination coverage rates and lagging confidence in vaccines, characterize the community, determine causes for the lack of vaccine confidence, and the magnitude of the problem;
- b. plan and implement targeted interventions in the community designed to increase confidence in vaccines and the community's willingness to be vaccinated;
- c. evaluate the intervention qualitatively and with quantitative measures (e.g., changes in numbers or percentages of vaccines administered compared to baseline), determine the value added by the intervention, and, if appropriate, recommend how the intervention should be used in other similar communities to increase vaccine confidence.

2. Approach

This project seeks to identify strategies to promote confidence in the use of vaccines in local communities that can be replicated in other local communities. It is dependent on building an advocacy team and collaboration among stakeholders. Collaborators could include community leaders in healthcare systems (e.g., healthcare providers and hospital administrators), community health centers, pharmacies, professional organizations, public health, academic institutions, vaccine manufacturers, businesses and chambers of commerce, faith-based communities, education systems, community service organizations, minority service organizations (e.g., Hispanic and Asian-Pacific Islander associations), media influencers, among others.

It is expected that the applicant has a foundational knowledge of the local landscape on the use of vaccines or has plans to assess such landscape. A community needs assessment may be a part of the project to characterize population characteristics, vaccination rates and trends, barriers to access to vaccines, and personal beliefs and behaviors associated with vaccines, particularly among disadvantaged and disenfranchised populations (e.g., racial and ethnic minorities, non-English speaking residents). The applicant should identify vaccine confidence issues and challenges associated with “the product, the provider, and the policy”; structural, administrative, financial, cultural, belief, behavioral, and other barriers that erode confidence in the use of vaccines; and populations for which interventions to increase vaccine confidence are indicated.

The applicant may develop specific, focused, and practical intervention plans to increase vaccine confidence in target populations to improve vaccine uptake, especially in minority, medically vulnerable, and hard-to-reach populations. This may include systems, administrative, and interpersonal practices that break down barriers to vaccination and promote vaccine-seeking behavior. The applicant should develop evaluation plans that measure effectiveness of implemented practices and strategies that can be reproduced in similar settings. In addition to periodic progress reports, at the end of the project period, a summary report with recommendations and presentation materials should be prepared.

3. Outcomes

By the end of the project period, the recipient will be expected to identify best practices that increase vaccine confidence that are realistic, measurable, and sustainable in the project area. Short- and intermediate-term outcomes should be completed within the project period. Long-term outcomes may or may not be achieved during the project period.

a. Short-term outcomes may include:

- Identified and engaged collaborators; convened and managed a consortium of stakeholders.
- Conducted needs assessments in local communities.
- Identified vaccine confidence issues and challenges (confidence with the product, the provider, and the policy) in local communities.
- Developed locally-tailored intervention plans to increase vaccine confidence in target populations and evaluation plans to track progress, including the baseline for outcome measures.
- Implemented prioritized intervention activities.

b. Intermediate-term outcomes may include:

- Tracked systematic, target community-specific qualitative and quantitative data to monitor effectiveness of implemented activities.
- Developed and implemented standards by which activities may be expanded, modified, or discontinued after the activity has started.
- Conducted interim evaluations and generated interim summary reports with recommendations for the remainder of the project period.
- Documented qualitative and quantitative changes in levels of confidence in vaccines (by product, provider, and policy) in targeted populations or communities, and recommendations for additional intervention activities or research.

c. Long-term outcomes may include:

- Confidence in the product, i.e., vaccines, is increased.

- Confidence in the provider, i.e., physicians, nurses, pharmacists, and other vaccination service providers including those in private practice, healthcare systems, community health centers, public health, and retail outlets, is increased.
- Confidence in the policy, e.g., recommended vaccination schedule, coverage for vaccines in health plans, and availability of “free” vaccines based on income, is increased.
- Increased vaccine confidence becomes a routine part of community vaccination programs, particularly those that target minority, medically vulnerable, and hard-to-reach populations.
- A greater degree of collaboration among health and other stakeholders to improve vaccine confidence in the community.

4. Substantial Federal Involvement

This award is a cooperative agreement that allows for substantial involvement by OIDP to ensure implementations of relevant, effective, and reproducible practices. In addition to the usual monitoring and technical assistance (e.g., assistance from assigned Federal project officer(s), recurring conference calls, possible site visits, ongoing review of plans and progress, participation in relevant meetings, provision of training and technical assistance), substantial programmatic involvement will include:

- Providing prior approval for change of time that Key Personnel are dedicated to the project and for replacement of Key Personnel. Key Personnel are those personnel whose expertise and experience may be so integrated to the conduct of the project that prior approval is necessary to protect the federal interest in the project. Key Personnel may include a project director, a project coordinator, a principal data analyst, and an evaluation coordinator. One person can function in more than one of these Key Personnel capacities.

- Assisting the awardee to establish, review, and update priorities, including the awardee's work plan, for activities conducted under this cooperative agreement.
- Serving as a resource to provide programmatic support during the implementation of the project by participating in the planning, implementation, and evaluation of activities.
- Identification of other organizations with whom the awardee may be asked to develop partnerships.
- Assisting the awardee to monitor the progress of the project, which includes but is not limited to collecting, reporting and analyzing data, and required reporting during the period of performance.
- Participating in the preparation of publications and public presentations of the data obtained and dissemination of products produced under this cooperative agreement.

C. AUTHORITY

Sections 1702 and 1703 of the Public Health Service Act, (42 U.S.C. 300u-1 and 300u-2).

D. FEDERAL AWARD INFORMATION

OIDP intends to make funds available for competing cooperative agreement awards.

OIDP will fund awards in annual increments (budget periods) and generally for a period of performance up to three years, although we may approve shorter periods of performance. Budget periods may also vary from the estimate indicated below due to timing of award issuance or other administrative factors. Funding for all approved budget periods beyond the first is generally level with the initial award amount and is contingent upon the availability of funds, satisfactory progress of the project, adequate stewardship of Federal funds, and the best interests of the Government.

Award Information

Estimated Federal Funds Available: \$750,000

Anticipated Number of Awards: 6-8

Award Ceiling (Federal Funds including indirect costs): \$125,000 per budget period

Award Floor (Federal Funds including indirect costs): None

Anticipated Start Date: September 30, 2021

Estimated Period of Performance: Not to exceed 3 years

Anticipated Initial Budget Period Length: 12 months

Type of Award: Cooperative Agreement

Type of Application Accepted: Electronic via Grants.gov ONLY unless an exemption is granted

E. ELIGIBILITY INFORMATION

1. Eligible Applicants.

Any public or private entity located in a state or territory (which includes one of the 50 states in the United States, District of Columbia, Commonwealth of Puerto Rico, U.S. Virgin Islands, Commonwealth of the Northern Mariana Islands, American Samoa, Guam, Republic of Palau, Federated States of Micronesia, and the Republic of the Marshall Islands) is eligible to apply for an award under this announcement. State and local governments, faith-based organizations and American Indian/Alaska Native/Native American (AI/AN/NA) organizations are eligible to apply.

2. Cost Sharing or Matching

You are not required to provide cost sharing or matching in your proposed budget. If you voluntarily include cost sharing in your application, you must include in your budget narrative a non-federal sources justification as described in Section F.3.b.1.t. Voluntary cost sharing is not expected for research applications. During the merit review of an application, cost sharing will

only be considered in the overall review of the adequacy of the total proposed budget (Federal and non-Federal share) to support the project proposed. Applications including cost sharing or matching, whether required or voluntary, that result in an award will include the cost sharing or matching commitment on the notice of award at the level proposed in the application. See Section F.3.b.1.s. Any change in the responsibility to provide cost sharing or matching at that level will require prior approval of the grants management officer.

3. Application Disqualification Criteria

If you successfully submit an application, we will screen it to ensure it meets the below requirements. If we determine your application fails to meet the criteria described below we will disqualify it, that is, we will **not** review it and will give it **no** further consideration.

- (a) You must submit your application electronically via www.grants.gov (unless an exemption was granted 2 business days prior to the deadline) by the date and time indicated in the DATES section (A.1) of this announcement.
- (b) If you successfully submit multiple applications from the same organization for the same project, we will only review the last application received by the deadline.
- (c) HHS/OASH/GAM deems your application eligible according to section E.1 Eligible Applicants.
- (d) You must complete the required forms in the application package: SF-424, SF-424A, SF-424B, SF-LLL, and Project Abstract Summary.
- (e) Your Project Narrative section of the application must be double-spaced, on the equivalent of 8 ½" x 11" inch page size, with 1" margins on all sides (top, bottom, left and right) and font size not less than 12 points.
- (f) Your Project Narrative must not exceed 30 pages. NOTE: The following items do not count toward the Project Narrative page limit: all

required forms, including SF-424, SF-424A, SF-424B, SF-LLL, Project Abstract Summary, and Budget Narrative (including budget tables).

(g) Your total application, including the Project Narrative plus Appendices, must not exceed 75 pages. NOTE: items listed in “(f)” immediately above do not count toward total page limit.

(h) Your Federal funds request including indirect costs must not exceed the maximum indicated in Award Ceiling.

F. APPLICATION AND SUBMISSION INFORMATION

1. Address to Request Application Package

You may obtain an application package electronically by accessing Grants.gov at <http://www.grants.gov/>. You can find it by searching on the CFDA number shown on page 2 of this funding opportunity announcement. If you have problems accessing the application or difficulty downloading, contact:

OASH Grants and Acquisitions Management Division

Phone: 240-453-8822

Email: OASH_Grants@hhs.gov

2. Content and Form of Application Submission

a. Application Format

Your application must be prepared using the forms and information provided in the online application package.

The Project Narrative, and total application including appendices, must adhere to the page limit indicated in Application Disqualification Criteria listed in Section C. The page limit does not include the Budget Narrative (including budget tables), required forms, assurances, and certifications as described in the Application Disqualification Criteria. Please do not number pages or include a table of contents. Our grants management system will generate page numbers once

your application is complete. If your application exceeds the specified page limits for the Project Narrative or Project Narrative plus Appendices when printed on 8.5” X 11” paper by HHS/OASH/GAM, we will not review it. We recommend you print out your application before submitting electronically to ensure that it is within the page limits and is easy to read.

You must double-space the Project Narrative pages.

You should use an easily readable typeface, such as Times New Roman or Arial. You *must* use 12-point font. You may single-space tables or use alternate fonts but you must ensure the tables are easy to read.

b. Appendices Format

Your Appendices should include any specific documents outlined in Section D.2.iii., under the heading “Appendices” in the Application Content section of this funding opportunity announcement. Your documents should be easy to read. You should use the same formatting specified for the Project Narrative. However, documents such as résumés/CVs, organizational charts, tables, or letters of commitment may use formatting common to those documents, but the pages must be easy to read. All of your appendices must be uploaded as a single, consolidated file in the Attachments section of your Grants.gov application.

c. Project Abstract Summary Format

You must complete the Project Abstract Summary form provided in the application package. The abstract will be used to provide reviewers with an overview of the application and will form the basis for the application summary in grants management and program summary documents. If your project is funded, HHS may publish information from your form; therefore, do not include sensitive or proprietary information.

d. Budget Narrative Format

The Budget Narrative should use the formatting required of the Project Narrative for the explanatory text. Budget tables may be single-spaced but should be laid out in an easily readable format and within the printable margins of the page.

3. Application Content

Successful applications will contain the following information:

a. Project Narrative Content

The Project Narrative is the most important part of the application, since it will be used as the primary basis to determine whether your project meets the minimum requirements for an award under this announcement. The Project Narrative should provide a clear and concise description of your project. HHS/OASH recommends that your project narrative include the following components:

1) Problem Statement

You should describe in this section, in both quantitative and qualitative terms, the nature and scope of the specific and particular problem or issue, and the proposed intervention it is designed to address. Provide evidence of your familiarity with challenges and issues related to vaccine confidence, and vaccine hesitancy, particularly in disadvantaged and disenfranchised communities such as racial and ethnic minority, limited English speaking, and rural communities. You should detail how the project will potentially affect the populations served, specific subgroups within those populations, and other interested stakeholders as identified. We recommend that you focus your problem statement on the specific aspects of the history, existing literature, current status, and policy considerations bearing on the program area, and the roles of the national, state, and local agencies responsible for their operation, rather than providing a broad or sweeping historical overview that is not directly related to the proposed interventions and activities.

It is recommended that your narrative include a clear understanding of the challenges and needs related to each of the following in the community: 1) level of confidence in vaccine products, 2) level of confidence in vaccine providers (does not need to be exclusive to vaccine administration in private practice or traditional healthcare settings), and 3) level of confidence in policy decisions, including but not limited to the approval process, recommendations for who should and should not receive a vaccine, and when vaccines should be administered.

2) Goals and Objectives

You should describe in this section your project's proposed goal(s) and major objectives using the specific, measurable, achievable, realistic, and time-bound (SMART) format

(https://www.cdc.gov/phcommunities/resourcekit/evaluate/smart_objectives.html) to the extent possible.

3) Proposed Intervention

You should provide a clear and concise description of the intervention you are proposing to use to address the need identified in the program announcement and the problem described in the “Problem Statement” above. You should explain the rationale for using a particular intervention and to present a clear connection between identified system gaps and needs and your proposed activities. Your proposal should detail the nature of the activities to be undertaken, how they address system gaps and identified issues, and how they will assist in achieving the overall project goals and objectives. You should provide detailed descriptions of intervention strategies and outcomes expected from your proposed activities; describe how technology will be incorporated to advance programs and services you propose; and if appropriate, include the role and expected contributions of potential subrecipients who may be involved in completing specific tasks.

4) Organizational Capability

You should describe your organization’s capability to successfully implement the proposed project. You should describe how your agency (or the particular division of a larger agency that will be responsible for the administration of this project) is organized, the nature and scope of its work, and the capabilities it possesses. Your description should cover capabilities of the applicant agency not included elsewhere in the program narrative, such as any current or previous relevant experience and the record of the project team in preparing cogent and useful reports, publications, and other products. If appropriate, include an organization chart in the Appendices to show the relationship of the project to the organization. Also include information about any contractual and supportive staff or organizations that will have a role in implementing the project.

5) Project Management

You should clearly identify the roles and responsibilities of project staff and subrecipients and how they will contribute to achieving the project’s objectives and outcomes. You should specify who would have day-to-day responsibility for key tasks such as leadership and oversight, progress monitoring, preparing reports, and communicating with partners and OIDP. You should

also describe the approach that will be used to monitor and track progress on the project's tasks and objectives. You should clearly identify the individual who will serve as the Project Director and his or her qualifications. The Project Director will have involvement in and substantial knowledge of all aspects of the project.

6) Outcomes

You should clearly identify the measurable outcomes that will result from your project. ODP will not fund any project that does not include measurable outcomes.

A measurable outcome is an observable end-result that describes how a particular intervention benefits program participants. It demonstrates the impact of the intervention. A change in a patient's financial, health, or functional status; mental well-being; knowledge; skill; attitude; awareness; or behavior is a measured outcome if it is quantified. It can also describe a change in how participants exercise choice that is available to them, their level of satisfaction with how a service is received, a change in the cost-effectiveness of a service delivery system, or a measurable increase in community awareness. While outputs are an important evaluation measure, note that a measurable outcome is not the same as a measurable output, e.g., the number of vaccines administered, the number of community meetings held, or the number of service units provided are measurable outputs; the extent to which these outputs increased vaccination coverage rates or quantifiably changed people's attitude towards vaccinations are measurable outcomes. In some cases, it may be appropriate to have a single outcome as a measure for a project. To measure changes in vaccine confidence, process measures may be indicated in addition to outcome measures.

7) Evaluation

You should describe the methods you will use to evaluate whether or not the proposed intervention achieves its measurable outcomes and assess and evaluate the impact of activities you propose. You should describe how you will measure and report on the outcomes of the project. You should describe the quantitative and qualitative tools and techniques that you will employ to measure outcomes and your recommendations on how the project could be improved.

8) Dissemination

You should describe the method you will use to disseminate the project's results and findings in a timely manner and in easily understandable formats to the population served, stakeholders, and the general public. OIDD reserves the right to publish findings and products associated with your project. You should propose other, innovative approaches to informing parties who might be interested in using the results of your project to inform practice, service delivery, program development, or policy-making, especially to those who are interested in replicating the project. OIDD expects a nationwide dissemination of the products associated with your project.

b. Budget Narrative Content

You must complete the required budget forms and submit a budget narrative with detailed justification as part of your application. You must enter the project budget on the Budget Information Non-construction Programs standard form (SF 424A) according to the directions provided with this standard form. The budget narrative consists of a detailed line-item budget that includes calculations for all costs and activities by "object class categories" identified on the SF-424A and justification of the costs. You must indicate the method you are selecting for your indirect cost rate. See Indirect Costs below for further information.

Project budget calculations must include estimation methods, quantities, unit costs, and other similar quantitative detail sufficient to verify the calculations. If matching or cost sharing is required, you must include a detailed listing of any funding sources identified in box 18 of the SF-424 (Application for Federal Assistance).

Please be sure to carefully review section F.7 Funding Restrictions for specific information regarding allowable, unallowable, and restricted costs.

You must provide an object class category budget using Section B, box 6 of the SF 424A for the first year of the proposed project. Provide a budget justification, which includes explanatory text and line-item detail, for the first year of the proposed project. The budget narrative should describe how the categorical costs are derived. Discuss the necessity, reasonableness, and allocation of the proposed costs.

For subsequent budget years, provide a summary narrative and line item budget. For categories or items that differ significantly from the first budget year, provide a detailed justification explaining these changes. Note, **do not** include costs beyond the first budget year in the object class budget in box 6 of the SF- 424A or box 18 of the SF-424; the amounts entered in these sections should only reflect the first budget year.

Your budget narrative should justify the overall cost of the project as well as the proposed cost per activity, service delivered, and/or product. For example, the budget narrative should define the amount of work you have planned and expect to perform, what it will cost, and an explanation of how the result is cost effective. For example, if you are proposing to provide services to clients, you should describe how many clients are you expecting to serve, the unit cost of serving each client, and how this is cost effective.

Use the following guidelines for preparing the detailed object class budget required by box 6 of the SF-424A. The object class budget organizes your proposed costs into a set of defined categories outlined below. Both federal and non-federal resources (when required) must be detailed and justified in the budget narrative. "Federal resources" refers only to the HHS/OASH funds for which you are applying. "Non-federal resources" are all other non-HHS/OASH federal and non-federal resources. We recommend you present budget amounts and computations in a columnar format: first column, object class categories; second column, federal funds requested; third column, non-federal resources; and last column, total budget.

Sample Budget Table

Object Class	Federal Funds Requested	Non-federal Resources	Total Budget
Personnel	\$100,000	\$25,000	\$125,000

Note, subrecipient/contract and consultant detailed costs should all be included in those specific line items, not in the overall project object class line items, i.e., subrecipient travel should be included in the Contractual line item not in Travel.

1) Object Class Descriptions and Required Justifications

(a) Personnel Description

Costs of staff salaries and wages, excluding benefits.

(b) Personnel Justification

Clearly identify the project director or principal investigator, if known at the time of application. Provide a separate table for personnel costs detailing for each proposed staff person: the title; full name (if known at time of application), time commitment to the project as a percentage or full-time equivalent; annual salary and/or annual wage rate; federally funded award salary; non-federal award salary, if applicable; and total salary. No salary rate may exceed the statutory limitation in effect at the time you submit your application (see F.7.2) Funding Restrictions, *Salary Rate Limitation* for details). Do not include the costs of consultants, personnel costs of delegate agencies, or of specific project(s) and/or businesses to be financed by the applicant. Contractors and consultants should not be placed under this category.

Sample Personnel Table

Position Title and Full Name	Percent Time	Annual Salary	Federally-funded Salary	Non-federal Salary	Total Project Salary
Project Director, John K. Doe	50%	\$100,000	\$50,000	\$0	\$50,000
Data Assistant, Susan R. Smith	10%	\$30,000		\$3,000	\$3,000

(c) Fringe Benefits Description

Costs of employee fringe benefits unless treated as part of an approved indirect cost rate.

(d) Fringe Benefits Justification:

Provide a breakdown of the amounts and percentages that comprise fringe benefit costs such as health insurance, Federal Insurance Contributions Act (FICA) taxes, retirement insurance, and taxes.

(e) Travel Description

Costs of travel by staff of the applicant organization only.

(f) Travel Justification

For each trip proposed for applicant organization staff only, show the date of the proposed travel, total number of traveler(s); travel destination; duration of trip; per diem; mileage allowances, if privately owned vehicles will be used; and other transportation costs and subsistence allowances. **Do not** include travel costs for subrecipients or contractors.

(g) Equipment Description

Equipment means tangible personal property (including information technology systems) having a useful life of more than one year and a per-unit acquisition cost which equals or exceeds the lesser of the capitalization level established by the non-Federal entity for financial statement purposes, or \$5,000. (Note: Acquisition cost means the cost of the asset including the cost to ready the asset for its intended use. Acquisition cost for equipment, for example, means the net invoice price of the equipment, including the cost of any modifications, attachments, accessories, or auxiliary apparatus necessary to make it usable for the purpose for which it is acquired. Acquisition costs for software includes those development costs capitalized in accordance with generally accepted accounting principles (GAAP). Ancillary charges, such as taxes, duty, protective in transit insurance, freight, and installation may be included in or excluded from the acquisition cost in accordance with the non-Federal entity's regular accounting practices.) See 45 C.F.R. § 75.2 for additional information.

(h) Equipment Justification

For each type of equipment requested you must provide a description of the equipment; the cost per unit; the number of units; the total cost; and a plan for use of the equipment in the project; as well as a plan for the use, and/or disposal of, the equipment after the project ends. An applicant organization that uses its own definition for equipment should provide a copy of its policy, or section of its policy, that includes the equipment definition; include this with your Budget Narrative file. Reference the policy in this justification and include the policy copy in your Budget Narrative file (not your appendices).

(i) Supplies Description

Costs of all tangible personal property other than those included under the Equipment category. This includes office and other consumable supplies with a per-unit cost of less than \$5,000.

(j) Supplies Justification

Specify general categories of supplies and their costs. Show computations and provide other information that supports the amount requested.

(k) Contractual Description

Costs of all contracts or subawards for services and goods except for those that belong under other categories such as equipment, supplies, construction, etc. Include third-party evaluation contracts, if applicable, and contracts or subawards with subrecipient organizations (with budget detail), including delegate agencies and specific project(s) and/or businesses to be financed by the applicant. This line item is not for individual consultants.

(l) Contractual Justification

Demonstrate that all procurement transactions will be conducted in a manner to provide, to the maximum extent practical, open, and free competition. Recipients and subrecipients are required to use 45 C.F.R. § 75.329 procedures and must justify any anticipated procurement action that is expected to be awarded without competition and exceeds the simplified acquisition threshold fixed by 41 U.S.C. § 134 and currently set at \$250,000. Recipients may be required to make pre-award review and procurement documents, such as requests for proposals or invitations for bids, independent cost estimates, etc., available to HHS/OASH.

Note: Whenever you intend to delegate part of the project to another agency, you must provide a detailed budget and budget narrative for each subrecipient/contractor, by agency title, along with the same supporting information referred to in these instructions. If you plan to select the subrecipients/contractors post-award and a detailed budget is not available at the time of application, you must provide information on the nature of the work to be delegated, the estimated costs, and the process for selecting the delegate agency.

(m) Other Description

Enter the total of all other costs. Such costs, where applicable and appropriate, may include but are not limited to: consultants; insurance; professional services (including audit charges); space and equipment rent; printing and publication; training, such as tuition and stipends; participant support costs including incentives, staff development costs; and any other costs not addressed elsewhere in the budget.

(n) Other Justification

Provide computations, a narrative description, and a justification for each cost under this category.

(o) Indirect Costs Description

Total amount of indirect costs. This category has one of two methods that you may select. You may only select one.

- i. Your organization currently has an indirect cost rate approved by the Department of Health and Human Services (HHS) or another cognizant federal agency. You should enclose a copy of the current approved rate agreement in your Budget Narrative file. If you request a rate that is less than allowed, your authorized representative must submit a signed acknowledgement that the organization is accepting a lower rate than allowed.
- ii. Per 45 C.F.R. § 75.414 (f) Indirect (F&A) costs, “any non-Federal entity [i.e., applicant] that has never received a negotiated indirect cost rate, ... may elect to charge a de minimis rate of 10% of modified total direct costs (MTDC) which may be used indefinitely. As described in § 75.403, costs must be consistently charged as either indirect or direct costs, but may not be double charged or inconsistently charged as both. If chosen, this methodology once elected must be used consistently for all Federal awards until such time as a non-Federal entity chooses to negotiate for a rate, which the non-Federal entity may apply to do at any time.”
This method only applies if you have never received an approved

negotiated indirect cost rate from HHS or another cognizant federal agency. If you are waiting for approval of an indirect cost rate, you may request the 10% de minimis rate. If you choose this method, costs included in the indirect cost pool must not be charged as direct costs to the award.

(p) Indirect Costs Justification

Provide the calculation for your indirect costs total, i.e., show each line item included in the base, the total of these lines, and the application of the indirect rate. If you have multiple approved rates, indicate which rate as described in your approved agreement is being applied and why that rate is being used. For example, if you have both on-campus and off-campus rates, identify which is being used and why.

(q) Program Income Description

Program income means gross income earned by your organization that is directly generated by this project if funded except as provided in 45 C.F.R. § 75.307(f). Program income includes but is not limited to income from fees for services performed or the use or rental of real or personal property acquired under the award. Interest earned on advances of Federal funds is not program income. Except as otherwise provided in Federal statutes, regulations, or the terms and conditions of the Federal award, program income does not include rebates, credits, discounts, and interest earned on any of them. See also 45 C.F.R. § 75.307, 2 C.F.R. §200.407 and 35 U.S.C. §§ 200-212 (applies to inventions made under Federal awards).

(r) Program Income Justification

Describe and estimate the sources and amounts of program income that this project may generate if funded. Unless being used for cost sharing, if applicable, these funds should not be added to your budget. This amount should be reflected in box 7 of the SF-424A.

(s) Non-Federal Resources Description

Amounts of non-federal resources that will be used to support the project as identified in box 18 of the SF-424. For all federal awards, any shared costs or matching funds and all contributions, including cash and third-party in-kind contributions, must be accepted as part of the

recipient's cost sharing or matching when such contributions meet all of the criteria listed in 45 C.F.R. § 75.306.

For awards that require matching by statute, you will be held accountable for projected commitments of non-federal resources in your application budgets and budget justifications by budget period or by period of performance for fully-funded awards, even if the justification by budget period, or by period of performance for fully-funded awards, exceeds the amount required. Your failure to provide the required matching amount may result in the disallowance of federal funds. If you are funded, you will be required to report these funds on your Federal Financial Reports.

For awards that do not require matching or cost sharing by statute or regulation, where "cost sharing" refers to costs of a project in addition to Federal funds requested that you voluntarily propose in your budget, if your application is successful, we will include this non-federal cost sharing in the approved project budget and you will be held accountable for the non-federal cost-sharing funds as shown in the Notice of Award (NOA). Your failure to provide voluntary cost sharing of non-federal resources that have been accepted by HHS/OASH as part of the approved project costs and that are shown as part of the approved project budget in the NOA may result in the disallowance of federal funds. If you are funded, you will be required to report these funds on your Federal Financial Reports. Note, you will not receive any preference, priority, or special consideration in the funding process for voluntarily including non-Federal cost sharing in your proposed budget.

(t) Non-federal Resources Justification

You must provide detailed budget information for every funding source identified in box 18. "Estimated Funding (\$)" on the SF-424. Provide this documentation as part of your Budget Narrative file, not your Appendices.

You must fully identify and document in your application the specific costs or contributions you propose in order to meet a matching requirement. You must provide documentation in your application on the sources of funding or contribution(s). In-kind contributions must be accompanied by a justification of how the stated valuation was determined. Matching or cost sharing must be documented by budget period (or by period of performance for fully funded awards). **If your application does not include the required supporting documentation for**

required or voluntary cost-sharing or matching, it will be disqualified from competitive review.

2) Plan for Oversight of Federal Award Funds

You must include a plan for oversight of federal award funds which describes:

- how your organization will provide oversight of federal funds and how award activities and partner(s) will adhere to applicable federal award and programmatic regulations. Include identification of risks specific to your project as proposed and how your oversight plan addresses these risks.
- the organizational systems that demonstrate effective control over and accountability for federal funds and program income, compare outlays with budget amounts, and provide accounting records supported by source documentation.
- for any program incentives proposed, the specific internal controls that will be used to ensure only qualified participants will receive them and how they will be tracked.
- organizational controls that will ensure timely and accurate submission of Federal Financial Reports to the OASH Grants and Acquisitions Management Division via the Payment Management System as well as timely and appropriate withdrawal of cash from the Payment Management System.

If your internal controls are available online, you may provide the link as part of your plan in the budget narrative. We have also included, in Appendix A, questions applicants may find useful to consider when developing their Plan for Oversight of Federal Funds.

c. Appendices

All items described in this section will count toward the total page limit of your application. You must submit them as **a single electronic file** uploaded to the Attachments section of your Grants.gov application.

1) Work Plan.

The application should include a detailed work plan for the project that includes goals, SMART objectives (specific, measurable, achievable, realistic, and time-framed), activities, timeline for the activities, lead person responsible for activities, and anticipated outcomes. The Work Plan should reflect, and be consistent with, the Project Narrative and Budget Narrative, and must cover all years of the proposed project period. You may propose multi-year activities, as well as activities that build upon each other.

2) Logic Model.

The applicant should include a detailed logic model to describe the overall project, including the inputs and activities of the project and the intended outputs and outcomes.

3) Curriculum Vitae (CV) for Key Project Personnel and Job Descriptions for Positions to be Hired.

You should submit with your application CVs of the Project Director and other Key Personnel. Key Personnel includes those individuals who will oversee the technical, professional, managerial, and support functions or assume responsibility for assuring the validity and quality of your organization's program, including Project Coordinator and Lead Data Analyst. We encourage individuals to use their full name (first, middle, last) on these documents to distinguish them for verification in the System for Award Management exclusion records. For positions that are vacant, you should include the position description for the vacant positions.

4. Unique Entity Identifier and System for Award Management (SAM)

Recently the General Services Administration (GSA) updated the links to its guidance materials on SAM registration.

You are required to provide a Dun and Bradstreet (D&B) Data Universal Numbering System (DUNS) number when applying for Federal awards through Grants.gov. It is a unique, nine-digit identification number, which provides unique identifiers of single business entities. The DUNS number is free and easy to obtain.

You will find instructions on the Grants.Gov web site as part of the organization registration process at <http://www.grants.gov/web/grants/applicants/organization-registration.html>.

Your organization must register online in the System for Award Management (SAM). Grants.gov will reject submissions from applicants with nonexistent or expired SAM Registrations.

If you are registering a new entity or renewing your registration, you must submit a notarized letter formally appointing an Entity Administrator to SAM.GOV For detailed instructions on the content of the letter and process for domestic entities see: https://www.fsd.gov/gsafsd_sp?sys_kb_id=8cfe46491b1cb8909ac5ddb6bc4bcbbb&id=kb_article_view&sysparm_rank=1&sysparm_tsqueryId=c6131c131bdcf0d0a7d7da49bc4bcbl1a.

A quick start guide for registrants is available at https://www.fsd.gov/sys_attachment.do?sys_id=80f49f211bdcfc909ac5ddb6bc4bc76. You should allow a minimum of five days to complete an initial SAM registration. Allow up to 10 business days after you submit your registration for it to be active in SAM. This timeframe may be longer if SAM flags the information you provide for manual validation. You will receive an email alerting you when your registration is active.

If your organization is already registered in SAM, you must renew your SAM registration each year. Organizations registered to apply for Federal awards through <http://www.grants.gov> will need to renew their registration in SAM.

You should make sure your SAM registration information is accurate, especially your organization's legal name and physical address including your ZIP+4. Should you successfully compete and receive an award, this information must be included on a Notice of Award. For instructions on updating this information see https://www.fsd.gov/sys_attachment.do?sys_id=d08b64ab1b4434109ac5ddb6bc4bcbbc.

It may take 24 hours or more for SAM updates to take effect in Grants.gov, so if you plan to apply for this funding opportunity or think you might apply, you should ensure your organization's registration is active in SAM well before the application deadline and will be active through the competitive review period.

If you are successful and receive an award, you must maintain an active SAM registration with current information at all times during which your organization has an active award or an application or plan under consideration by an HHS agency.

HHS/OASH cannot make an award until you have complied with these requirements. In accordance with 2 C.F.R. § 25.205, at the time an award is ready to be made, if you have not complied with these requirements, HHS/OASH:

- May determine that you are not qualified to receive an award; and
- May use that determination as a basis for making an award to another applicant.

Should you successfully compete and receive an award, all first-tier sub-award recipients must have a DUNS number at the time you, the recipient, make a sub-award.

5. Submission Dates and Times

You must submit your application for this funding opportunity by **the date and time indicated in Section A.1 of this announcement**. Your submission time will be determined by the date and time stamp provided by Grants.gov when you **complete** your submission.

If you fail to submit your application by the due date and time, we will not review it, and it will receive no further consideration. You are strongly encouraged to submit your application a minimum of 3-5 days prior to the application closing date. Do not wait until the last day in the event you encounter technical difficulties, either on your end or with <https://www.grants.gov>. Grants.gov can take up to 48 hours to notify you of a successful or rejected submission. You are better off having a less-than-perfect application successfully submitted and under consideration than no application.

If your submission fails due to a system problem with Grants.gov, we may consider your application if you provide verification from Grants.gov indicating system problems existed at the time of your submission **and that time was before the submission deadline**. A “system problem” does not include known issues for which Grants.gov has posted instructions regarding how to successfully submit an application such as compatible Adobe versions or file naming conventions.

As the applicant, it is your responsibility to review all instructions available on Grants.gov regarding successfully submitting an application.

6. Intergovernmental Review

This program is not subject to the Intergovernmental Review requirements of Executive Order 12372, “Intergovernmental Review of Federal Programs,” as implemented by 45 C.F.R. part 100.

7. Funding Restrictions

Direct and Indirect Costs proposed and, if successful, charged to the HHS/OASH award must meet the cost requirements of 45 C.F.R. part 75 “Uniform Administrative Requirements, Cost Principles, and Audit Requirements for HHS Awards,” Subpart E—Cost Principles. These requirements apply to you, the applicant, and any subrecipients. You should thoroughly review these regulations before developing your proposed budget.

Indirect costs may be included per 45 C.F.R. § 75.414. See the Budget Narrative section of this announcement for more information. To obtain a negotiated indirect cost rate with the Federal Government you may contact the U.S. Department of Health and Human Services Cost Allocation Services (CAS) regional office that is applicable to your State. CAS regional contact information is available at <https://rates.psc.gov/fms/dca/map1.html>.

1) Pre-Award Costs

Pre-award costs (per 45 C.F.R. § 75.458) are those incurred prior to the effective date of the Federal award directly pursuant to the negotiation and in anticipation of the Federal award where such costs are necessary for efficient and timely performance of the scope of work. Such costs are allowable only to the extent that they would have been allowable if incurred after the date of the Federal award and only with the written approval of the HHS awarding agency.

Pre-award costs are NOT allowed.

2) Salary Rate Limitation

Each year’s appropriations act limits the salary rate that we may award and you may charge to HHS/OASH grants and cooperative agreements. You should not budget award funds to pay the salary of an individual at a rate in excess of Federal Executive Pay Scale Executive Level II. As of January 2021, the Executive Level II salary is \$199,300. This amount reflects an individual’s base salary exclusive of fringe benefits and any income that an individual working on the award project may be permitted to earn outside of the duties to the applicant organization. This salary rate limitation also applies to subawards/subcontracts under an HHS/OASH award.

An example of the application of this limitation for an individual devoting 50% of their time to this award is broken down below:

Individual’s <i>actual</i> base full time salary: \$350,000 50% of time devoted to project, i.e., 0.5 FTE	
Direct salary (\$350,000 x 0.5)	\$175,000
Fringe (25% of salary)	\$43,750
Total	\$218,750
Amount that may be claimed on the application budget due to the legislative salary rate limitation: Individual’s base full time salary <i>adjusted</i> to Executive Level II: \$199,300 with 50% of time devoted to the project	
Direct salary (\$199,300 x 0.5)	\$99,650
Fringe (25% of salary)	\$24,913
Total amount allowed	\$124,563

Appropriate salary rate limits will apply as required by law.

8. Other Submission Requirements

a. Electronic Submission

HHS/OASH requires that all applications be submitted electronically via the Grants.gov portal unless an exemption has been granted. If you submit an application via any other means of electronic communication, including facsimile or electronic mail, it *will not* be accepted for review unless you receive an exemption as described in the DATES section of this announcement.

You may access the Grants.gov website portal at <http://www.grants.gov>.

Applications, excluding required standard forms, must be submitted as three (3) files (see acceptable file types below). One file must contain the entire Project Narrative, another the entire Budget Narrative including supporting documentation described in the Budget Narrative content section; and the third file must contain all documents in the Appendices. Any additional files submitted as part of the Grants.gov application will not be accepted for processing and will be excluded from the application during the review process.

Any files uploaded or attached to the Grants.gov application must be Adobe PDF, Microsoft Word, or image formats (JPG, GIF, TIFF, or BMP only) and must contain a valid file format extension in the filename. HHS/OASH strongly recommends that electronic applications be uploaded as Adobe PDF. If you convert to PDF prior to submission you may prevent any unintentional formatting that might occur with submission of an editable document. Please note, even though Grants.gov allows you to attach any file format as part of your application, HHS/OASH restricts this practice and only accepts the file formats identified above. Any file submitted as part of the Grants.gov application that is not in a file format listed above will not be accepted for processing and will be excluded from the application during the review process.

Any file submitted as part of the Grants.gov application that contains password protection will not be accepted for processing and will be excluded from the application during the review process. We will not contact you for passwords or resubmission of unprotected files. Unprotected information in the application will be forwarded for consideration but password protected portions will not. You should avoid submitting personally identifiable information such as personal contact information on résumés.

In addition, the use of compressed file formats such as ZIP, RAR, or Adobe Portfolio will not be accepted. We will not contact you for resubmission of uncompressed versions of files. Compressed information in the application will not be forwarded for consideration.

You must submit your application in a format that can easily be copied and read by reviewers. We do not recommend that you submit scanned copies through Grants.gov unless you confirm the clarity of the documents. Pages cannot be reduced resulting in multiple pages on a single sheet to avoid exceeding the page limitation. If you submit documents that do not conform to these instructions, we will exclude them from your application during the review process.

b. Important Grants.gov Information

You may access the electronic application for this program on <http://www.grants.gov>. You must search the downloadable application page by the Funding Opportunity Number or CFDA number, both of which can be found on page 1 of this funding opportunity announcement.

To ensure successful submission of your application, you should carefully follow the step-by-step instructions provided at <http://www.grants.gov/web/grants/applicants/apply-for-grants.html>. These instructions are kept up-to-date and also provide links to Frequently Asked Questions and other troubleshooting information. **You are responsible for reviewing all Grants.gov submission requirements on the Grants.gov site.**

You should contact Grants.gov with any questions or concerns regarding the electronic application process conducted through Grants.gov. See Contacts below. See Section F.4 for requirements related to DUNS numbers and SAM registration.

c. Program-Specific Requirements

There no additional program specific requirements.

G. APPLICATION REVIEW INFORMATION

1. Criteria

Federal staff and an independent review panel will assess all eligible applications according to the following criteria. Disqualified applications will not be reviewed against these criteria.

a. Understanding of and experience with addressing and increasing vaccine confidence among diverse populations (15 points)

- Demonstrates the extent to which the applicant understands issues on vaccine confidence and demonstrate an ability to develop specific, focused, and practical interventions to improve vaccine uptake, especially in minority, medically vulnerable, and hard-to-reach populations.
- Demonstrates the extent to which the applicant describes experiences in working with target populations and the need to develop appropriately expanded partnerships to increase vaccine confidence in target populations.
- Demonstrates the extent to which expanded partnerships can be utilized to plan, implement, and evaluate evidence-based practices (or to develop such evidence) and develop novel approaches to increase confidence in vaccines in target populations, particularly those with populations with low vaccination rates (e.g., African Americans, Hispanics, and Native Americans; residents in rural communities, medical assistants who have lower coverage rates compared to other medical professions; immigrant and refugee communities; and young adults and teens.

b. Need for the Proposed Project (20 Points)

- Demonstrates an understanding of the reasons for which the target populations has been identified for intervention and partnerships that are needed to apply interventions to achieve the goals of the proposed project.
- Demonstrates an understanding of the specific needs of the target audiences for which an increase in confidence in vaccines is indicated.

- Demonstrates the extent to which the proposed project will deliver culturally-sensitive, language-appropriate, and easy-to-understand facts and information on vaccines and vaccinations to targeted populations that are specifically designed to increase confidence in vaccines.
- Demonstrates the extent to which the proposed project will address gaps in awareness, knowledge, and understanding of vaccines and vaccinations among target populations to increase their confidence in vaccines.

c. Technical Approach and Organizational Capacity (20 Points)

- Demonstrates the extent to which the proposed project goals, objectives, major activities, outputs, and outcomes are clear, reasonable, and aligned with the goals of this NOFO.
- Demonstrates the extent to which the management plan presents a realistic approach to achieve the objectives of the proposed project on time and within budget, including clearly defined responsibilities, timelines, and milestones for accomplishing project tasks.
- Demonstrates the extent to which the proposed project will result in increasing the level of confidence in vaccine products (e.g., types of vaccines), vaccine providers (e.g., healthcare provider recommendations for and competency in vaccination), and vaccine policies (e.g., recommended vaccination schedules, vaccine approval process).
- Demonstrates the extent to which the applicant plans to strategically communicate and disseminate the activities, successes, and lessons learned from the project to increase vaccine confidence.

d. Project Implementation and Management (20 Points)

- Demonstrates the extent to which the proposed project to increase confidence in vaccine products, providers, and policy decisions will be implemented and managed for the target populations.
- Demonstrates the extent to which the proposed project will establish and coordinate linkages with other appropriate agencies and organizations to support and enhance the project.
- Demonstrates the extent to which the proposed staff have the necessary technical skills, knowledge, and experience to perform their responsibilities.

e. Evaluation (20 Points)

- Describes the extent to which the outputs and outcomes identified will measure the effectiveness of the project.
- Describes the extent to which the evaluation methodology will enable the applicant to measure progress and achievement of the project outcomes.
- Describes the extent to which a specific and detailed evaluation plan includes how data will be used to identify and make continuous improvements in the project.

f. Budget (5 points)

- Demonstrates complete, detailed, and reasonable budget and budget narrative that are aligned with the proposed technical approach and justify requested funding amount.

2. Review and Selection Process

Each HHS/OASH Program's office is responsible for facilitating the process of evaluating applications and setting funding levels according to the criteria set forth above .

An independent review panel will evaluate applications that meet the responsiveness criteria, if applicable, and are not disqualified. These reviewers are experts in their fields, and are drawn from academic institutions, non-profit organizations, state and local government, and Federal government agencies. Based on the Application Review Criteria as outlined under Section E.1, the reviewers will comment on and score the applications, focusing their comments and scoring decisions on the identified criteria. In addition to the independent review panel, Federal staff will review each application for programmatic, budgetary, and grants management compliance.

The Director of OIDP will provide recommendations for funding to the Grants Management Officer to conduct risk analysis. In providing these recommendations the Director of OIDP will take into consideration:

- Equitable geographic distribution.
- Populations with a demonstrated elevated need for additional interventions to increase vaccine confidence.

3. Review of Risk Posed by Applicant

The HHS/OASH will evaluate, in accordance with 45 C.F.R. § 75.205, each application recommended for funding by the program official indicated in Review and Selection Process for risks before issuing an award. This evaluation may incorporate results of the evaluation of eligibility or the quality of an application. If we determine that a Federal award will be made, special conditions that correspond to the degree of risk assessed will be applied to the Federal award. Such conditions may include additional programmatic or financial reporting or releasing funds on a reimbursable rather than cash advance basis. OASH will use a risk-based approach and may consider any items such as the following:

- a. Your financial stability;

- b. Quality of management systems and ability to meet the management standards prescribed in 45 C.F.R. part 75;
- c. History of performance. Your record in managing Federal awards, if you are a prior recipient of Federal awards, including timeliness of compliance with applicable reporting requirements, conformance to the terms and conditions of previous Federal awards, and if applicable, the extent to which any previously awarded amounts will be expended prior to future awards;
- d. Reports and findings from audits performed; and
- e. Your ability to effectively implement statutory, regulatory, or other requirements imposed on non-Federal entities.

Prior to making a Federal award with a total Federal share greater than the simplified acquisition threshold (currently \$250,000), we are required to review and consider any information about you that is in the designated integrity and performance system accessible through the System for Award Management (SAM) (currently the Federal Awardee Performance and Integrity Information System (FAPIIS)). You may, at your option, review information in SAM and comment on any information about yourself that a Federal awarding agency previously entered and is currently available through SAM. We will consider any comments by you, in addition to the other information in the designated system, in making a judgment about your integrity, business ethics, and record of performance under Federal awards when completing the review of risk.

If we do not make an award to you because we determine your organization does not meet either or both of the minimum qualification standards as described in 45 C.F.R. § 75.205(a)(2), we must report that determination to FAPIIS, if certain conditions apply. At a minimum, the information in the system if you are a prior Federal award recipient must “demonstrate a satisfactory record of executing programs or activities under Federal grants, cooperative agreements, or procurement awards; and integrity and business ethics.” 45 C.F.R. § 75.205(a)(2); see also 2 C.F.R. §200.212 for additional information.

4. Final Award Decisions, Anticipated Announcement, and Federal Award Dates

Upon completion of risk analysis and concurrence of the Grants Management Officer, HHS/OASH will issue Notices of Award. No award decision is final until a Notice of Award is issued. All award decisions, including level of funding if an award is made, are final and you may not appeal.

HHS/OASH seeks to award funds as much in advance of the anticipated project start date shown in Section B “Federal Award Information,” as practicable, with a goal of 10-15 days. Note this is an estimated start date and award announcements may be made at a later date and with a later period of performance start date.

H. FEDERAL AWARD ADMINISTRATION INFORMATION

1. Federal Award Notices

HHS/ OASH does not release information about individual applications during the review process. If you would like to track your application, please see instructions at <http://www.grants.gov/web/grants/applicants/track-my-application.html>. The official document notifying you that an application has been approved for funding is the Notice of Award (NOA), approved by a Grants Management Officer of the HHS/OASH GAM. If you are successful, you will receive this document via system notification from our grants management system (Grant Solutions) and/or via e-mail. This document notifies the successful recipient of the amount awarded, the purposes of the award, the anticipated length of the period of performance, terms and conditions of the award, and the amount of funding to be contributed by the recipient to project costs, if applicable.

If you receive an NOA, we strongly encourage you to read the entire document to ensure your organization’s information is correct and that you understand all terms and conditions. You should pay specific attention to the terms and conditions, as some may require a time-limited response. The NOA will also identify the Grants Management Specialist and Program Project Officer assigned to the award for assistance and monitoring.

If you are unsuccessful or deemed ineligible according to the disqualification criteria, you will be notified by HHS/OASH by email and/or letter. If your application was reviewed by the

independent review panel, you may receive summary comments pertaining to the application resulting from the review process. On occasion, you may receive a letter indicating that an application was approved but unfunded. These applications may be kept active for one year and may be considered for award without re-competing should funds become available during the hold period.

2. Administrative and National Policy Requirements

If you are successful and receive a Notice of Award, in accepting the award, you agree that the award and any activities thereunder are subject to all provisions of 45 C.F.R. part 75, currently in effect or implemented during the period of the award, other Department regulations and policies in effect at the time of the award, and applicable statutory provisions.

In addition, your organization must comply with all terms and conditions outlined in the Notice of Award, the U.S. Department of Health and Human Services (HHS) Grants Policy Statement (GPS), requirements imposed by program statutes and regulations and HHS grant administration regulations, as applicable, as well as any requirements or limitations in any applicable appropriations acts. The current HHS GPS is available at <http://www.hhs.gov/sites/default/files/grants/grants/policies-regulations/hhsgps107.pdf> Please note HHS plans to revise the HHS GPS to reflect changes to the regulations; 45 C.F.R. parts 74 and 92 have been superseded by 45 C.F.R. part 75 and 2 C.F.R. part 200.

You may only use award funds to support activities outlined in the approved project plan. If your application is funded, your organization will be responsible for the overall management of activities within the scope of the approved project plan. Please consult the HHS GPS Section II and 45 C.F.R. § 75.308 for aspects of your funded project that will require prior approval from the Grants Management Officer for any changes. Modifications to your approved project that will require prior approval include, but are not limited to: a change in the scope or the objective(s) of the project or program (even if there is no associated budget revision, such as reduction in services, closing of service or program site(s)); significant budget revisions, including changes in the approved cost-sharing or matching; a change in a key person specified in your application; reduction in time devoted to the project by the approved project director or principal investigator, either as percentage of full-time equivalent of 25% or more or absence for 3 months or more; or

the subawarding, transferring or contracting out of any work that was not described in the approved proposal.

3. Closeout of Award

Upon expiration of your period of performance, if we do not receive acceptable final performance, financial, and/or cash reports in a timely fashion within the closeout period, and we determine that closeout cannot be completed with your cooperation or that of the Principal Investigator/ Project Director, we must complete a unilateral closeout with the information available to us. (See H.14 Reporting below for closeout reporting requirements.) If you do not submit all reports within one year of the period of performance end date, we must report your material failure to comply with the terms and conditions of the award with the OMB-designated integrity and performance system (currently FAPIIS). As a result, we may also determine that enforcement actions are necessary, including on another existing or future award, such as withholding support or a high-risk designation.

4. Lobbying Prohibitions

You shall not use any funds from an award made under this announcement for other than normal and recognized executive legislative relationships. You shall not use funds for publicity or propaganda purposes, for the preparation, distribution, or use of any kit, pamphlet, booklet, publication, electronic communication, radio, television, or video presentation designed to support or defeat the enactment of legislation before the Congress or any State or local legislature or legislative body, except in presentation to the Congress or any State or local legislature itself, or designed to support or defeat any proposed or pending regulation, administrative action, or order issued by the executive branch of any State or local government, except in presentation to the executive branch of any State or local government itself.

You shall not use any funds from an award made under this announcement to pay the salary or expenses of any employee or subrecipient, or agent acting for you, related to any activity designed to influence the enactment of legislation, appropriations, regulation, administrative action, or Executive order proposed or pending before the Congress or any State government, State

legislature or local legislature or legislative body, other than for normal and recognized executive-legislative relationships or participation by an agency or officer of a State, local or tribal government in policymaking and administrative processes within the executive branch of that government.

The above prohibitions include any activity to advocate or promote any proposed, pending, or future Federal, State or local tax increase, or any proposed, pending, or future requirement or restriction on any legal consumer product, including its sale or marketing, including but not limited to the advocacy or promotion of gun control.

5. Non-Discrimination Requirements

Pursuant to Federal civil rights laws, if you receive an award under this announcement you must not discriminate on the basis of race, color, national origin, disability, age, and in some cases sex and religion. The HHS Office for Civil Rights provides guidance for complying with civil rights laws that prohibit discrimination. (<https://www.hhs.gov/civil-rights/index.html>).

HHS provides guidance to recipients of federal financial assistance on meeting the legal obligation to take reasonable steps to provide meaningful access to persons with limited English proficiency. See *Guidance to Federal Financial Assistance Recipients Regarding Title VI Prohibition Against National Origin Discrimination Affecting Limited English Proficient Persons*, 68 Fed. Reg. 47311, 47313 (HHS Office for Civil Rights, 2003, www.gpo.gov/fdsys/pkg/FR-2003-08-08/pdf/03-20179.pdf) You must ensure your contractors and subrecipients also comply with federal civil rights laws.

The *National Standards for Culturally and Linguistically Appropriate Services in Health and Health Care* (National CLAS Standards), 78 Fed. Reg. 58539, 58543 (HHS Office of Minority Health, 2013, www.gpo.gov/fdsys/pkg/FR-2013-09-24/pdf/2013-23164.pdf), provides a practical framework for applicants to provide quality health care and services to culturally and linguistically diverse communities, including persons with limited English proficiency. Compliance with the National CLAS Standards meets the legal obligation to take reasonable steps to provide meaningful access to persons with limited English proficiency.

6. Smoke- and Tobacco-free Workplace

The HHS/OASH strongly encourages all award recipients to provide a smoke-free workplace and to promote the non-use of all tobacco products. This is consistent with the HHS/OASH mission to protect and advance the physical and mental health of the American people.

7. Acknowledgement of Funding

Each year's annual appropriation requires that when issuing statements, press releases, requests for proposals, bid solicitations and other documents describing projects or programs funded in whole or in part with Federal money, all organizations receiving Federal funds, including but not limited to State and local governments and recipients of Federal research grants, shall clearly state— (1) the percentage of the total costs of the program or project which will be financed with Federal money; (2) the dollar amount of Federal funds for the project or program; and (3) percentage and dollar amount of the total costs of the project or program that will be financed by non-governmental sources.

You must also acknowledge Federal support in any publication you develop using funds awarded under this program, with language such as:

This [project/publication/program/website, etc.] was supported by [Award Number] issued by the Office of the Assistant Secretary for Health of the U.S. Department of Health and Human Services (HHS) as part of a financial assistance award totaling \$XX with 100 percent funded by the Office of Infectious Disease and HIV/AIDS Policy/OASH/HHS.

Recipients must also include a disclaimer stating the following

The contents are solely the responsibility of the author(s) and do not necessarily represent the official views of, nor an endorsement by, the Office of Infectious Disease and HIV/AIDS Policy/OASH/HHS, or the U.S. Government. For more information, please visit <https://www.hhs.gov/oidp/>.

8. HHS Rights to Materials and Data

All publications you develop or purchase with funds awarded under this announcement must be consistent with the requirements of the program. You own the copyright for materials that you develop under this award, and pursuant to 45 C.F.R. § 75.322 (b), HHS reserves a royalty-free, nonexclusive, and irrevocable right to reproduce, publish, or otherwise use those materials for Federal purposes, and to authorize others to do so. In addition, pursuant to 45 C.F.R. § 75.322 (d), the Federal government has the right to obtain, reproduce, publish, or otherwise use data produced under this award and has the right to authorize others to receive, reproduce, publish, or otherwise use such data for Federal purposes.

9. Trafficking in Persons

Awards issued under this funding opportunity announcement are subject to the requirements of Section 106 (g) of the Trafficking Victims Protection Act of 2000, as amended (22 U.S.C. § 7104) (<https://www.govinfo.gov/content/pkg/USCODE-2010-title22/html/USCODE-2010-title22-chap78-sec7104.htm>).

10. Efficient Spending

This award may also be subject to the HHS Policy on Promoting Efficient Spending: Use of Appropriated Funds for Conferences and Meetings, Food, Promotional Items, and Printing and Publications available at <http://www.hhs.gov/grants/contracts/contract-policies-regulations/efficient-spending/>

11. Whistleblower Protection

If you receive an award, you will be subject to a term and condition that applies the terms of 48 C.F.R. § 3.908 to the award, and requires that you inform your employees in writing of employee whistleblower rights and protections under 41 U.S.C. § 4712 in the predominant native language of the workforce.

12. Prohibition on certain telecommunications and video surveillance services or equipment.

As described in 2 C.F.R. § 200.216, recipients and subrecipients are prohibited from obligating or spending grant funds (to include direct and indirect expenditures as well as cost share and program) to:

- a. Procure or obtain;
- b. Extend or renew a contract to procure or obtain; or
- c. Enter into a contract (or extend or renew a contract) to procure or obtain equipment, services, or systems that use covered telecommunications equipment or services as a substantial or essential component of any system, or as critical technology as part of any system. As described in Pub. L. 115-232, section 889, covered telecommunications equipment is telecommunications equipment produced by Huawei Technologies Company or ZTE Corporation (or any subsidiary or affiliate of such entities).
 - 1) For the purpose of public safety, security of government facilities, physical security surveillance of critical infrastructure, and other national security purposes, video surveillance and telecommunications equipment produced by Hytera Communications Corporation, Hangzhou Hikvision Digital Technology Company, or Dahua Technology Company (or any subsidiary or affiliate of such entities).
 - 2) Telecommunications or video surveillance services provided by such entities or using such equipment.
 - 3) Telecommunications or video surveillance equipment or services produced or provided by an entity that the Secretary of Defense, in consultation with the Director of the National Intelligence or the Director of the Federal Bureau of Investigation, reasonably believes to be an entity owned or controlled by, or otherwise, connected to the government of a covered foreign country.

13. Human Subjects Protection

Federal regulations (45 C.F.R part 46) require that applications and proposals involving human subjects must be evaluated with reference to the risks to the subjects, the adequacy of protection against these risks, the potential benefits of the research to the subjects and others, and the importance of the knowledge gained or to be gained. If research involving human subjects is anticipated, you must meet the requirements of the HHS regulations to protect human subjects from research risks as specified in 45 C.F.R. part 46. You may find it online at <http://www.hhs.gov/ohrp/humansubjects/guidance/45cfr46.html>.

Applicants that plan to engage in research involving human subjects are encouraged to provide information regarding participation in research in their recruitment efforts and provide a link to www.hhs.gov/about-research-participation.

OASH may require, as part of any award, the submission of all IRB approvals within 5 days of the IRB granting the approval and before any work requiring IRB approval begins.

14. Research Integrity

An applicant for or recipient of PHS support for biomedical or behavioral research, research training or activities related to that research or research training must comply with 42 C.F.R. part 93, including have written policies and procedures for addressing allegations of research misconduct that meet the requirements of part 93, file an Assurance of Compliance with the Office of Research Integrity (ORI), and take all reasonable and practical steps to foster research integrity consistent with 42 C.F.R. § 93.300. The assurance must state that the recipient (1) has written policies and procedures in compliance with this part for inquiring into and investigating allegations of research misconduct; and (2) complies with its own policies and procedures and the requirements of part 93. More information is available at <https://ori.hhs.gov/assurance-program>.

15. Reporting

a. Performance Reports

You must submit performance reports on a quarterly basis. Your performance reports must address content required by 45 C.F.R. § 75.342(b)(2). The awarding program office may provide additional guidance on the content of the progress report. You must submit your performance reports by the due date indicated in the terms and conditions of your award via upload to our grants management system (GrantSolutions.gov), in the Grant Notes module.

You will also be required to submit a final performance report covering the entire period of performance 90 days after the end of the period of performance. You must submit the final report by upload to our grants management system (GrantSolutions.gov), in the Grant Notes module.

b. Performance Measures

A summary of needs assessment findings will be required as part of the third quarter progress report in the first year.

At the end of each funding year of this initiative, you should:

- Describe the process for partnership development with organizations and individuals.
- Describe collaborations with each partnering organization to heighten the need for and progress toward increases in vaccine confidence.
- Describe activities, including those associated with process and outcome measures, that are planned, have been instituted, or are under review that support the following:
 - increases in vaccine product confidence
 - increases in vaccine provider confidence
 - increases in vaccine-related policy confidence
- Describe accomplishments, challenges, and progress towards improving each of the vaccine confidence category identified above and

planned adjustments to improve effectiveness of or reduce or overcome barriers to project activities.

Describe plans for the activities to be sustained beyond the project period.

c. Financial Reports

You will be required to submit quarterly Federal Financial Reports (FFR) (SF-425). Your specific reporting schedule will be issued as a condition of award. You will also be required to submit a final FFR covering the entire period of performance 90 days after the end of the period of performance. You must submit FFRs via the HHS Payment Management System (PMS) FFR module. Quarterly cash reporting via PMS on the FFR is also required.

d. Audits

If your organization receives \$750,000 or greater in Federal funds, it must undergo an independent audit in accordance with 45 C.F.R. part 75, subpart F.

e. Non-competing Continuation Applications and Awards

Each year of the approved period of performance, you will be required to submit a noncompeting application which includes a progress report for the current budget year, and work plan, budget and budget justification for the upcoming year. Specific guidance will be provided via Grant Solutions well in advance of the application due date. HHS/OASH will award continuation funding based on availability of funds, satisfactory progress of the project, grants management compliance, including timely reporting, and continued best interests of the government. Additionally, failure to provide final progress or financial reports on other awards from HHS may affect continuation funding.

f. FFATA and FSRS Reporting

The Federal Financial Accountability and Transparency Act (FFATA) requires data entry at the FFATA Subaward Reporting System (<http://www.FSRS.gov>) for all sub-awards and sub-contracts issued for \$25,000 or more as well as addressing executive compensation for both recipient and sub-award organizations.

g. Reporting of Matters Relating to Recipient Integrity and Performance

If the total value of your currently active grants, cooperative agreements, and procurement contracts from all Federal awarding agencies exceeds \$10,000,000 for any period of time during the period of performance of this Federal award, then you must maintain the currency of information reported to the System for Award Management (SAM) that is made available in the designated integrity and performance system (currently the Federal Awardee Performance and Integrity Information System (FAPIIS)) about civil, criminal, or administrative proceedings described in paragraph A.2 of Appendix XII to 45 C.F.R. part 75—Award Term and Condition for Recipient Integrity and Performance Matters. This is a statutory requirement (41 U.S.C. § 2313). As required by section 3010 of Public Law 111-212, all information posted in the designated integrity and performance system on or after April 15, 2011, except past performance reviews required for Federal procurement contracts, will be publicly available. For more information about this reporting requirement related to recipient integrity and performance matters, see Appendix XII to 45 C.F.R. part 75.

h. Other Required Notifications

Before you enter into a covered transaction at the primary tier, in accordance with 2 C.F.R. § 180.335, you as the participant must notify HHS/OASH, if you know that you or any of the principals for that covered transaction:

- Are presently excluded or disqualified;
- Have been convicted within the preceding three years of any of the offenses listed in 2 C.F.R. § 180.800(a) or had a civil judgment rendered against you for one of those offenses within that time period;
- Are presently indicted for or otherwise criminally or civilly charged by a governmental entity (Federal, State or local) with commission of any of the offenses listed in 2 C.F.R. § 180.800(a); or
- Have had one or more public transactions (Federal, State, or local) terminated within the preceding three years for cause or default.

At any time after you enter into a covered transaction, in accordance with 2 C.F.R. § 180.350, you must give immediate written notice to HHS/OASH if you learn either that—

- You failed to disclose information earlier, as required by 2 C.F.R. § 180.335; or

- Due to changed circumstances, you or any of the principals for the transaction now meet any of the criteria in 2 C.F.R. § 180.335.

I. CONTACTS

1. Administrative and Budgetary Requirements:

For information related to administrative and budgetary requirements, contact the HHS/OASH grants management specialist listed below.

Duane Barlow

Grants and Acquisitions Management

1101 Wootton Parkway, Plaza Level

Rockville, MD 20852

Phone: 240-453-8822

Email: Duane.Barlow@hhs.gov

2. Program Requirements

For information on program requirements, please contact the program office representative listed below.

David Kim

Office of Infectious Disease and HIV/AIDS Policy

U.S. Department of Health & Human Services

200 Independence Avenue, S.W., Room 715-G

Washington, D.C. 20201

Phone: 202-795-7697

Email: David.Kim@hhs.gov

3. Electronic Submission Requirements

For information or assistance on submitting your application electronically via Grants.gov, please contact Grants.gov directly. Assistance is available 24 hours a day, 7 days per week.

GRANTS.GOV Applicant Support

Website: www.grants.gov

Phone: 1-800-518-4726

Email: support@grants.gov

J. OTHER INFORMATION

1. Awards under this Announcement

We are not obligated to make any Federal award as a result of this announcement. If awards are made, they may be issued for periods shorter than indicated. Only the grants officer can bind the Federal government to the expenditure of funds. If you receive communications to negotiate an award or request additional or clarifying information, this does not mean you will receive an award; it only means that your application is still under consideration.

2. Application Elements

The below is a summary listing of all the application elements required for this funding opportunity.

- Application for Federal Assistance (SF-424)
- Budget Information for Non-construction Programs (SF-424A)
- Assurances for Non-construction Programs (SF-424B)
- Disclosure of Lobbying Activities (SF-LLL)
- Project Abstract Summary
- Project Narrative – Submit all Project Narrative content as a single acceptable file, specified above.

- Budget Narrative – Submit all Budget Narrative content as a single acceptable file, specified above.
- Appendices – Submit all appendix content as a single acceptable file, specified above **in the Attachments section of your Grants.gov application.**
 - Work plan with objectives in SMART format,
 - Logic model describing the approach,
 - Evaluation plan based on the logic model.

Kaye Hayes, Acting Director Date

Office of Infectious Disease and HIV/AIDS Policy

Appendix

A. Considerations in Plans for Oversight of Federal Funds

To the maximum extent possible, the organization should segregate responsibilities for receipt and custody of cash and other assets; maintaining accounting records on the assets; and authorizing transactions. In the case of payroll activities, the organization, where possible, should segregate the timekeeping, payroll preparation, payroll approval, and payment functions.

Questions for consideration in developing a plan may include:

- Do the written internal controls provide for the segregation of responsibilities to provide an adequate system of checks and balances?
- Are specific officials designated to approve payrolls and other major transactions
- Does the time and accounting system track effort by cost objective?
- Are time distribution records maintained for all employees when his/her effort cannot be specifically identified to a particular program cost objective?
 - Do the procedures for cash receipts and disbursements include: Receipts are promptly logged in, restrictively endorsed, and deposited in an insured bank account?
 - Bank statements are promptly reconciled to the accounting records, and are reconciled by someone other than the individuals handling cash, disbursements and maintaining accounting records?
 - All disbursements (except petty cash or EFT disbursements) are made by pre-numbered checks?
 - Supporting documents (e.g., purchase orders, Invoices, etc.) accompany checks submitted for signature and are marked "paid" or otherwise prominently noted after payments are made?