Notice of Opportunity of Funding: CDC Workforce Improvement Project

Project Title:
Public Health Data Modernization Workshop

Application Deadline: <u>Monday, July 5, 2021 by 11:59 EST</u>

Workforce Improvement Projects (WIPs): WIPs are non-research domestic or international projects that provide workforce development opportunities in academic or public health practice settings. These public health practice projects are developed and funded by programs in CDC Centers, Institutes, and Offices (CIOs) and conducted by CDC's academic association partners or their members (e.g., colleges, universities) through the administration of extramural subawards. These academic association partners are currently funded under NOFO CDC-RFA-OE17-1701 as follows: Association for Schools and Programs of Public Health, Association for Prevention Teaching and Research, Association of American Medical Colleges, and American Association of Colleges of Nursing.

Funding CIO: Center for Surveillance, Epidemiology and Laboratory Services

Strategic Priority Areas:
- Increase the capability of the existing workforce.

<u>Award Information</u>

Budget: $300,000

Anticipated Award Date: September 01, 2021

Budget Period Length: 10 months (completion date: June 30, 2022)

Description: Public health agencies rely on timely, high quality data to understand and improve the health of their communities. CDC's Data Modernization Initiative and the Coronavirus Aid, Relief, and Economic Security (CARES) Act provide funding for state, local, and territorial public health jurisdictions to improve how they gather, manage, and use data to guide action. The volume of electronically available data, increasing connectedness, and powerful computing offer public health both opportunities and challenges. Modernizing data strategies, infrastructure, and the workforce requires a sound understanding of the technology and strategic, well-coordinated planning.

Need for Project: Through this project, the selected academic center will plan, organize, and convene a two-day Public Health Data Modernization workshop in Atlanta for two persons from each of the public health jurisdictions that receive funding through the Epidemiology and Laboratory Capacity (ELC) Cooperative Agreement, Activity C2 (CK19-1904). Data modernization includes workforce, technologies, processes, and strategies that accelerate improvements to data quality, exchange, management, and use. The purpose of the

workshop will be to convene the lead data modernization coordinators and possibly another scientist (e.g., informatician, epidemiologists, data scientist) to improve their ability to build data and informatics capabilities in their jurisdiction. The content of the workshop will be developed in coordination with CDC and should include training, sharing, and discussions about data modernization topics (e.g., data standards, analytics, shared services, effective technologies) and also include strategies for conducting workforce development in these areas.

Outcomes: A well-coordinated two-day workshop in Atlanta that advances jurisdiction abilities to build data and informatics capabilities and infrastructure, with an evaluation to measure impact.

Key Activities:
- The workshop will be geared to the recipients of the CDC ELC Cooperative Agreement – Activity C2. These recipients will have:
  - Identified a focal point to lead data modernization in their health departments.
  - Developed an assessment of their public health workforce and data and health information systems to identify opportunities for modernization.
  - Developed an overall strategy for modernizing their agency data infrastructure and workforce.
- The assessments and plans should be synthesized and used by the public health partner to plan and develop the content of the workshop.
- The workshop should include strategies and content for building the leadership and informatics capabilities of the jurisdictional leads for data modernization.
- Strategies for developing capabilities should include recommendations for additional and targeted learning and training after the workshop (e.g., plans for peer-to-peer learning).
- The workshop should be evaluated to assess learning by and relevance to attendees.
- Collaboration should include State, territorial and large local health departments that receive funding through the ELC Cooperative Agreement – Activity C2 and public health partner organizations that support the public health functions of these jurisdictions.
- Coordination with CDC's Center for Surveillance, Epidemiology and Laboratory Services (CSELS) is expected on workshop strategies and execution.

CSELS will collaborate with the recipient on workshop strategies and execution and will be a resource for information about jurisdiction modernization assessments and modernization plans. The recipient should plan to meet with CDC one to two times each month.

Contribution to Public Health Workforce:
- Increased understanding of data system, standards and technology, especially shared services and enterprise approaches, and their potential to advance public health.
- Increased capability to use data to inform decision-making and support evidence-based practices and policies.
- Well defined strategies to implement data modernization.

Eligibility: Recipient should have extensive knowledge of and expertise in public health information systems, including surveillance systems; general health information systems; public health informatics; public health

surveillance processes and practices; data exchange; data management; data analysis and presentation; and public health decision making. Recipient should have expertise and experience planning and hosting workshops and designing and implementing workforce development activities related to data, informatics, and health information systems (e.g., workforce assessments, training). Experience working with state health and local department staff on data and informatics topics is essential.

Review Criteria:
- Demonstrated expertise in public health informatics and understanding of public health data systems and data practices. (30 points)
- Demonstrated understanding of information technology opportunities and ability to assist public health in evaluating their potential impact. (30 points)
- Demonstrated success in developing and implementing workforce development and training activities for the public health sector. (25 points)
- Expertise and experience planning and hosting workshops. (15 points)

Additional Information: Project funding is intended to cover planning, materials, staff, the workshop, evaluation, follow-up, and meeting room costs. Workshop participants from public health agencies have their travel to and from the workshop covered through the terms of the ELC Cooperative Agreement – Activity C2. Link to information on [CDC's Data Modernization Initiative: Data Modernization Initiative](#).

Application Criteria:
- **Project Abstract:** The Project Abstract must contain a summary of the proposed activity suitable for dissemination to the public. It should be a self-contained description of the project and should contain a statement of objectives and methods to be employed. It should be informative to other persons working in the same or related fields and insofar as possible understandable to a technically literate lay reader. This abstract must not include any proprietary/confidential information.
- **Project Narrative:** A Project Narrative must be submitted with the application forms. The project narrative must be uploaded in a PDF file format. The narrative must be submitted in the following format:
  - 25: Maximum number of pages
  - Font size: 12 point unreduced, Times New Roman
  - Double spaced
  - Page margin size: One inch
  - Number of all narrative pages; not to exceed the maximum number of pages.

  The narrative should address activities to be conducted over the entire Period of Performance and must include the following items in the order listed.

  Please include these for each WIP for which the applicant is applying:
  - Summary
  - Approach
  - Evaluation and Performance Measurement
  - Organizational Capacity to Implement the Approach

Additional information may be included in the application appendices. Note: appendices will not be counted toward the narrative page limit.

- **Budget:** (See Budget Worksheet Form 424A and Guidelines for Budget Preparation): Applicants should provide a budget; this will be in addition to the pages in the Project Narrative.

$5000.0	*Administrative fee of 10% of the first $50,000 of the award (capped at $5,000)
$8900.0	Association indirect fee (This reflects the maximum fee. Final association indirect fee might be less, depending on the awardee.)
$286,100	**Amount to be awarded per awardee**
$300,000	Total anticipated cost per award

Note: A $5,000 AACN administrative fee will be subtracted from each of the awards for this project.

Funding Restrictions: Restrictions, which must be taken into account while writing the budget, are as follows:
- Recipients may not use funds for research.
- Recipients may not use funds for clinical care.
- Recipients may only expend funds for reasonable program purposes, including personnel, travel, supplies, and services, such as contractual.
- Recipients may not generally use HHS/CDC/ATSDR funding for the purchase of furniture or equipment. Any such proposed spending must be identified in the budget.
- The direct and primary recipient in a cooperative agreement program must perform a substantial role in carrying out project objectives and not merely serve as a conduit for an award to another party or provider who is ineligible.

Other than for normal and recognized executive-legislative relationships, no funds may be used for: publicity or propaganda purposes, for the preparation, distribution, or use of any material designed to support or defeat the enactment of legislation before any legislative body the salary or expenses of any grant or contract recipient, or agent acting for such recipient, related to any activity designed to influence the enactment of legislation, appropriations, regulation, administrative action, or Executive order proposed or pending before any legislative body.

See Additional Requirement (AR) 12 for detailed guidance on this prohibition and additional guidance on lobbying for CDC recipients.

The recipient can obtain guidance for completing a detailed justified budget on the CDC website, at the following Internet address: http://www.cdc.gov/grants/interestedinapplying/applicationprocess.html.

Electronic Submission of Application: Application must be successfully submitted to ajacobs@aacnnursing.org by 11:59pm Eastern Standard Time on the deadline date.

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For more information, contact:
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