

**SYNOPSIS**  
**Closing the Gap with Social Determinants of Health Accelerator Plans**  
**CDC-RFA-DP21-211**

**Due Date:** 7/05/21

**Total Funding Available:** \$2.5 Million

**Number of Awards:** 20

**Average Amount:** \$125,000

**Cost Sharing:** No

**Estimated Award Date:** September 30, 2021

**Project Length:** 12 mos.

**Eligible Grantees:** State, county, city, Native American governments, and Native American Tribal organizations

**Purpose:**

The purpose of this funding opportunity is to convene a diverse leadership team of public health officials and representatives from multiple sectors including housing, transportation, social services, private business, non-profit and community organizations and healthcare to develop a multisector plan to address the social determinants of health and accelerate improvements in health outcomes related to chronic disease among population groups experiencing health disparities and inequities.

Twenty applicants will be funded to collaborate with multisectoral partners to develop an implementation-ready SDOH Accelerator Plan to reduce disparities in health outcomes related to chronic disease in a tribal jurisdiction, community\*, or catchment\*\* area.

**Projected Outcome:**

- Increased collaboration and engagement across multisectoral partners
- Completed implementation-ready SDOH Accelerator Plan, including all required components

**Strategies and Activities:**

1. Convene and Coordinate a Leadership Team Consisting of Multisectoral Partners
  - a. Select minimum of 2 SDOH priority areas
    - i. Built Environment
    - ii. Community-Clinical Linkages
    - iii. Food and Nutrition Security
    - iv. Social Connectedness
    - v. Tobacco-Free Policies

- b. Identify Leadership Team
- 2. Develop an Implementation Ready SDOH Accelerator Plan
  - a. Create SDOH Accelerator Plan
    - i. Includes background
    - ii. Partnerships
    - iii. Identify Programs and Resources available for SDOH
    - iv. Describe Approach
    - v. Evaluation plan
    - vi. Data Integration
    - vii. Responsible Party
    - viii. Implementation Plan
    - ix. Sustainability/Funding Strategy
    - x. Success Story

**Collaborations:**

Recipients are required to collaborate with CDC-funded chronic disease prevention programs  
 Recipients are required to strengthen existing partnerships, id new partnerships and  
 collaborate with key partners

**SUBMISSION REQUIREMENTS:**

1. SF 424
2. SF-424A
3. Indirect Cost Rate
4. Resumes/CVs
5. Position Descriptions
6. Organization Charts
7. Letters of Support
8. Table of Contents
9. Project Abstract Summary (1 page)
10. Project Narrative (Maximum 6 pages and must include each of the following)
  - a. Background
  - b. Approach
    - i. Purpose
    - ii. Outcomes
    - iii. Strategies and Activities
      1. Collaborations
      2. Target Population and Disparities
  - c. Evaluation and Performance Measurement Plan
  - d. Organizational Capacity of Applicant to Implement the Approach
  - e. Work Plan
    - i. Must be consistent with CDC Project Description Work Plan section
11. Budget Narrative with approximate numbers

## **Review and Selection Process:**

### **Approach – 35 points**

- Describe achievable and appropriate strategies and activities that address SDOH to improve health outcomes for the selected population(s) and are consistent with the CDC Project Description, logic model, and short-term outcomes. (10 points)
- Propose an existing or newly established Leadership Team that meets requirements described in the CDC Project Description and Collaboration sections that will advise on the development of SDOH Accelerator Plan. (10 points)
- Describe the tribe, community, or catchment area and the selected population(s) disproportionately affected by disparities related to chronic disease. (5 points)
- Identify a minimum of two (2) social determinants of health (SDOH) priority areas (Required) and one Healthy People 2030 SDOH domain (Optional). (5 points)
- Are aligned with the NOFO strategies/activities, outcomes, and performance measures. (5 points)

### **Evaluation and Performance Measurement – 15 points**

- Describe an approach to ensure strategies and activities are implemented as planned. (5 points)
- Describe an approach to ensure strategy and activity progress is occurring. (5 points)
- Describe an approach to ensure performance measures are collected. (5 points)

### **Organizational Capacity to Implement the Approach – 50 points**

#### **Project Management Structure and Staffing – 10 points**

- Describes experience and expertise to manage and facilitate Leadership Team activities, including convening the Leadership Team in person or virtually to support attendance at recipient or CDC-sponsored trainings, meetings and events, and other training opportunities recommended by CDC. (6 points)
- In addition to the project narrative, provides a staffing plan, including an organizational chart, CVs/resumes, position descriptions and project management structure that will be sufficient to meet the goals of the proposed project. (4 points)

#### **Readiness – 40 points**

- Describes the ability to readily implement requirements upon receipt of award. (3 points)
- Describes previous experience of successfully working with multisectoral partnerships, including approach to engagement of subject matter experts. (5 points)
- Describes experience using data to identify populations and tribes, communities, or catchment areas most affected by chronic diseases and SDOH. (2 points)
- Describes experience implementing strategies and activities in collaboration with multisectoral partners to reduce health disparities and improve health equity. (3 points)

- Describes experience engaging a tribe, community, or catchment area in public health planning and implementation processes addressing SDOH activities that improve outcomes related to chronic disease, including current activities. (10 points)
- Describes ability to develop an SDOH Accelerator Plan, coordinating and integrating information from existing strategic planning resources, including community health needs assessment and/or state health needs assessment. (5 points)
- \_Describes budget management and administration capacity to establish financial procedures and track, monitor, and report expenditures. (2 points)
- *In addition to the narrative*, includes letters of support from the Leadership Team members (at least seven), a letter of collaboration from at least one (1) CDC-funded chronic disease program and at least one (1) CDC-funded program outside of chronic disease. (10 points)

### **Funding Restrictions:**

Recipients may not use funds for research.

- Recipients may not use funds for clinical care except as allowed by law.
- Recipients may use funds only for reasonable program purposes, including personnel, travel, supplies, and services.
- Generally, recipients may not use funds to purchase furniture or equipment. Any such proposed spending must be clearly identified in the budget.
- Reimbursement of pre-award costs generally is not allowed, unless the CDC provides written approval to the recipient.
- Other than for normal and recognized executive-legislative relationships, no funds may be used for:
  - publicity or propaganda purposes, for the preparation, distribution, or use of any material designed to support or defeat the enactment of legislation before any legislative body
  - the salary or expenses of any grant or contract recipient, or agent acting for such recipient, related to any activity designed to influence the enactment of legislation, appropriations, regulation, administrative action, or Executive order proposed or pending before any legislative body
- See [Additional Requirement \(AR\) 12](#) for detailed guidance on this prohibition and [additional guidance on lobbying for CDC recipients](#).
- The direct and primary recipient in a cooperative agreement program must perform a substantial role in carrying out project outcomes and not merely serve as a conduit for an award to another party or provider who is ineligible.

Informational Conference Call: May 19, 3:00 PM EST

Join ZoomGov Meeting

Meeting ID: 160 121 3142

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