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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

[Program Announcement 02003]

Community-Based Participatory Prevention Research

Notice of Availability of Funds

Changes from Amendment published April 12, 2002 in bold print

A. Purpose

The Centers for Disease Control and Prevention (CDC) announces the availability of fiscal year (FY) 2002 funds for a grant program for the Office of Extramural Prevention Research. This program addresses the "Healthy People 2010" focus area, Educational and Community-Based Programs. It is also related to the Department of Health and Human Services Strategic Plan Goal 6: "Strengthen the nation's health sciences research enterprise and enhance its productivity through the Prevention Research Initiative."

The purpose of the program is to stimulate investigator-initiated participatory research on community-based approaches to prevention. Findings from these projects should advance the practice of public health and policy in order to promote health and reduce disease, disability, and injury.

Specifically, this announcement seeks to support multi-disciplinary, multi-level, participatory research that will enhance the capacity of communities and population groups to address health promotion and the prevention of disease, disability and injury.

Multi-level research involves interventions directed at two or more levels, such as individual, family, neighborhood, organizational, broader community (e.g., city, county, state), environmental and/or policy or legislative levels. Community refers to populations that may be defined by geography, race, ethnicity, gender, sexual orientation, or disability or other health conditions, or to groups that have a common interest or cause, such as health or service agencies and organizations, practitioners, policy makers, or lay public groups with public health concerns.

Participatory research involves collaboration with the community being studied, at least in formulating the research questions and in interpreting and applying research findings, and, if the community so chooses, in selecting methods and analyzing data. This announcement is not limited to any particular model of participatory research.

While the direction of the research must be guided by the expressed needs and interests of the community engaged in the study, this program is especially targeted to supporting cross-cutting research (i.e., research that considers interventions or methods that would now or in the future be applicable to more than one health condition).

B. Eligible Applicants

Applications may be submitted by public and private nonprofit organizations and by governments and their agencies; that is, universities, colleges, research institutions, hospitals, other public and private nonprofit organizations, State and local governments or their bona fide agents, including the District of Columbia, the Commonwealth of Puerto Rico, the Virgin Islands, the Commonwealth of the Northern Mariana Islands, American Samoa, Guam, the Federated States of Micronesia, the Republic of the Marshall Islands, and the Republic of Palau,

federally recognized Indian tribal governments, Indian tribes, or Indian tribal organizations.

Note: Title 2 of the United States Code section 1611 states that an organization described in section 501(c)(4) of the Internal Revenue Code that engages in lobbying activities is not eligible to receive Federal funds constituting an award, grant, or loan.

Additional applicant requirements are:

1. A principal investigator who has conducted research, published the findings in peer-reviewed journals, and has specific authority and responsibility to carry out the proposed project.
2. Demonstrated experience (on the applicant's project team) in conducting, evaluating, and publishing prevention research in peer-reviewed journals.
3. Effective and well-defined working relationships within the performing organization and with partnering communities (including public health agencies) that will ensure implementation of the proposed activities.
4. The overall match between the applicant's proposed theme and research objectives, and the program's interests as described under the heading "Programmatic Interests."

C. Availability of Funds

Approximately \$13,000,000 is available in FY 2002 to fund approximately 30 awards. It is expected that the average award will be \$450,000, ranging from \$400,000 to \$500,000. It is expected that the awards will begin on or about September 30, 2002, and will be made for a 12-month budget period within a project period of up to three years. Funding estimates may change.

Continuation awards within an approved project period will be made on the basis of satisfactory

progress as evidenced by required reports and the availability of funds.

D. Program Requirements

1. Recipient Requirements

In conducting activities to achieve the purpose of this program, the recipient will be responsible for the following activities:

Specifically, because these projects are participatory and community-based and embrace both research and its application, program applicants are expected to maximize opportunities for information exchange between institutional researchers and community members (even if the institutional researchers are also community members). Additionally, applicants are required to provide "Measures of Effectiveness" that will demonstrate the accomplishment of the various identified objectives of the grant. Measures must be objective/quantitative and must measure the intended outcome. These Measures of Effectiveness (1) shall be submitted with the application and shall be an element of evaluation, and (2) shall be a data requirement to be submitted with or incorporated into the periodic progress reports. As part of this program, applicants must generate, on at least an annual basis, reports for community members that describe progress, community input and involvement, research project implementation, and relevant findings. Such reports must use plain language and accessible formats (e.g., print, Web, and readable from the Web by assistive technology, as specified by Section 508 of the Workforce Rehabilitation Act), so as to be easily comprehended and critiqued by community members. Applicants must budget for production and broad dissemination of such reports.

2. Programmatic Interests

Prevention research can be divided into phases that extend from (a) basic and descriptive research, to (b) intervention development and

testing for efficacy and effectiveness, through (c) research on dissemination, translation to other populations or health issues, and implementation of interventions found to be effective, to (d) research on development and maintenance of supportive policies and environments., to (e) research to develop and validate surveillance and evaluation methods and other mechanisms to monitor the health of the public and the quality and impact of public health programs, services, or other interventions. The main foci of this announcement are items (c), (d), and (e).

Applicants should use the Guide to Community Preventive Services as documentation of the need to test effectiveness of a specific population-based public health intervention. Applicants should also consult guidelines on participatory research, such as those provided at <http://www.ihpr.ubc.ca/guidelines.html>, and the campus-community partnership principles at <http://futurehealth.ucsf.edu/ccph/principles.html#principles>

Multi-disciplinary, multi-level, participatory research into prevention approaches that address complex health issues common to communities and population groups might include (but are not limited to) descriptive, methodological, experimental, or quasi-experimental studies such as:

- a. Research on how to enhance working relationships between researchers and community organizations (representing practitioners, policy makers, or diverse lay public groups with public health concerns), to promote appropriate, tailored, and effective public health practice and/or the development or enforcement of sound public health law or policy. For example, a descriptive retrospective case study might examine the factors that appear to account for the successful or unsuccessful efforts of

one or more communities in forming coalitions to bring about changes in local ordinances related to providing healthful food choices in cafeterias and vending machines in public schools. A quasi-experimental study might compare multiple community coalitions prospectively as they undertake such efforts with or without state or federal support. A methodological study might aim to identify and validate objective indicators of successful and unsuccessful community coalitions for use in survey instruments, surveillance, or evaluation.

b. Research on combining previously tested elements to produce multi-component, multi-level interventions that can improve health outcomes more efficiently; address social, environmental, and economic determinants of health; and/or reach more diverse populations.

c. Research on disseminating, translating (adapting), and applying effective, locally appropriate, and affordable interventions within or across communities defined by geography, interests, profession, race, ethnicity, gender, sexual orientation, or other health condition.

d. Research on developing new methods for enhancing surveillance, needs assessments, setting of priorities, program delivery, monitoring, evaluation, dissemination of information, translation of research, and/or distance learning including new uses of information technology.

e. Research on how to increase productive participation of practitioners, policy makers, citizens and/or lay leaders in defining the

research questions, conducting and analyzing the research, and interpreting and applying the research findings.

f. Research on how to build the capacity of organizations to mobilize community resources to achieve disease and disability prevention and health promotion.

g. Research on how to strengthen public health systems and services, public health infrastructure, and the community's readiness to respond effectively to threats or occurrences of disaster.

h. Research on institutionalizing or sustaining programs and/or collaborative relationships beyond their demonstration funding.

E. Content

1. Letter of Intent (LOI)

A non-binding LOI is requested for this program. The narrative should be no more than one, double-spaced page, printed on one side, with one inch margins, and un-reduced font. It should identify the announcement number, name of the proposed project director, name of the organization, descriptive title of the proposed research, and a brief description of the proposed project. Your letter of intent will be used to allow CDC to determine the level of interest in the announcement and to plan the review more efficiently.

2. Applications

Use the information in the Program Requirements, Other Requirements, and Evaluation Criteria sections of this announcement to develop the application content. Your application will be evaluated on the criteria listed, so it is

important to follow them in laying out your program plan.

The narrative should consist of items A to D in the Research Plan outlined on PHS Form 398. This agrees with items a to c described below.

In accordance with the instructions provided for the Research Plan on PHS Form 398, this narrative is not to exceed 25 single-spaced pages, printed on one side, with 1/2-inch margins, and standard size fonts (10 or 12 points).

The grant applications should include:

a. Justification of the research needs and explanation of the scientific basis for the research, the expected outcome, and the relevance of the findings to preventing disease, injury, and disability, and promoting health **(See Note 2)**.

b. Specific, measurable, and explicitly scheduled objectives **(See Note 2)**.

c. A detailed plan describing the methods by which the objectives will be achieved, including their sequence. A comprehensive evaluation plan is an essential component of the application **(See Note 2)**.

d. A description of the roles and responsibilities of the principal investigator and all co-investigators. **This requirement should be included as part of the section entitled "Description, Performance Sites, and Personnel" (See Note 1)**.

e. A description of all project staff and their roles in the proposed research, regardless of their funding source. The description should include their titles, qualifications, experience, and responsibilities in the

proposed research; percentage of time each will devote to the research; and the portion of their salaries to be paid by the grant. **This requirement should be included as part of the section entitled "Description, Performance Sites, and Personnel" (See Note 1).**

f. A description of any activities related to, but not supported by, the grant. **Item f should be included as a separate section after the section on "Resources" and should be labeled as "Item f." There is no corresponding section in the PHS Form 398 for this item (See Note 1).**

g. A description of how the specified community groups, organizations, and other entities will be involved in the proposed research. The description should include a clear statement of their roles. Letters of support from each group, organization, and entity should be included in the Appendices. **This requirement should be included as part of the section entitled "Description, Performance Sites, and Personnel" (See Note 1).**

h. A detailed first year's budget for the grant with projections for two additional years, if applicable. **This item should be included in appropriate sections identified in the Table of Contents for PHS Form 398. The "detailed first year's budget" should be included in the section entitled "Detailed Budget for Initial Budget Period." Budget projections for up to two additional years of support should be included in the section entitled "Entire Proposed Period of Support." If applicable, budgets pertaining to consortium/contractual arrangements should be included in the section**

entitled "Budgets Pertaining to Consortium/Contractual Arrangements."

Note One: Pay close attention to the detailed instructions provided for "Description, Performance Sites, and Personnel" in the Instructions for PHS 398 (Rev. 05/2001) entitled "Application for a Public Health Service Grant PHS 398: U.S. Department of Health and Human Services, Public Health Service Grant Application (PHS 398)."

Note 2: Include items A to D in the Research Plan.

The original application must include specific salary and fringe benefit amounts for individuals; however, applicant organizations have the option of omitting specific salary and fringe benefit amounts for individuals from the copies of the application that are made available to outside reviewing groups. To exercise this option: On the original and five copies of the application, the applicant must use asterisks to indicate those individuals for whom salaries and fringe benefits are not shown, but the subtotals must still be shown.

F. Submission and Deadline

Letter of Intent (LOI)

On or before **March 20, 2002**, submit the requested LOI to the Grants Management Specialist identified in the "Where to Obtain Additional Information" section of this announcement.

Application

Submit the original and five copies of PHS-398 (OMB Number 0925-0001) (adhere to the instructions on the Errata Instruction Sheet for PHS 398). Forms are available in the application kit and at the following Internet address:
www.cdc.gov/od/pgo/forminfo.htm.

In addition to sending the original and five copies of the proposal, please also enclose a copy of the proposal on a 3.5 diskette in WordPerfect, Word, or ASCII format. If you have access to an electronic version of PHS-398 (OMB Number 0925-0001), please include electronic forms on the diskette. If you do not have access or capability to use an electronic version, please ensure that the following items in narrative format are included on your diskette: Abstract, Biographical Sketches, Research Plan (items A-I as required in PHS-398), and Other Support Pages. Label the diskette with your name, operating system, software, and proposal title (example: John Doe, DOS, WordPerfect 6, Engaging the Community in Securing Emergency Preparedness). If the title is too long, please truncate.

On or before **April 30, 2002**, submit the application to the Grants Management Specialist identified in the "Where to Obtain Additional Information" section of this announcement.

Deadline: Applications shall be considered as meeting the deadline if they are either:

1. Received on or before the deadline date; or
2. Sent on or before the deadline date and received in time for submission to the independent review group. (Applicants must request a legibly dated U.S. Postal Service postmark or obtain a legibly dated receipt from a commercial carrier or U.S. Postal Service. Private metered postmarks shall not be acceptable as proof of timely mailing.)

Late: Applications which do not meet the criteria in 1.or 2. above will be returned to the applicant.

G. Evaluation Criteria

Application

Upon receipt, applications will be reviewed by CDC staff to assure that they are complete and comply with the section on Eligible Applicants. Incomplete applications and applications that are not in compliance will be returned to the applicant without further consideration. Applications that are complete and in compliance will be further evaluated by a dual peer review process.

The First Stage of the Peer Review Process

In the first stage of this process, applications will be evaluated by a Special Emphasis Panel (SEP) of researchers external to CDC who are known for their expertise in prevention research and participatory research.

Each application will be subjected initially to a streamlined review by the SEP to determine if the application is of sufficient technical and scientific merit to warrant further review. Applications judged to be noncompetitive will be withdrawn from further consideration and CDC will promptly notify the principal investigator/program director and the official signing for the applicant organization.

Competitive applications will undergo full review by the SEP and will be scored against the following criteria:

1. Significance - Does this study address an important problem related to the research goals outlined in the Purpose and Programmatic Interests sections of this document? If the aims of the application are achieved, how would scientific knowledge be advanced? What would be the effect of this study on the concepts and methods that drive this field?

2. Approach - Are the conceptual framework, design (including composition of study population), methods, and analyses adequately developed, well-integrated, and appropriate to the aims of the project? Does the applicant

acknowledge potential problem areas and consider alternative tactics?

3. Innovation - Does the project employ novel concepts, approaches, or methods? Are the aims original and innovative? Does the project challenge existing paradigms or develop new methodologies that can serve as models for future research?

4. Investigator - Is the investigator appropriately trained and well suited to carry out this work? Is the work proposed appropriate to the experience level of the principal investigator and other researchers, if any?

5. Environment - Does the scientific environment in which the work will be done contribute to the probability of success? Do the proposed experiments take advantage of unique features of the scientific environment or employ useful collaborative arrangements? Is there documentation of cooperation from necessary participants in the project, where applicable? Is there evidence of institutional support and availability of resources necessary to perform the project?

6. Human Subjects - If human subjects are involved, does the applicant adequately address the requirements of 45 CFR 46 for the protection of human subjects? (Not scored; however, an application can be disapproved if the research risks are sufficiently serious and protection against risks is so inadequate as to make the entire application unacceptable.)

7. The degree to which the applicant has met the CDC Policy requirements regarding the inclusion of women, ethnic, and racial groups in the proposed research. This includes:

a. The proposed plan for the inclusion of both sexes and racial and ethnic minority populations for appropriate representation.

b. The proposed justification when representation is limited or absent.

c. A statement as to whether the design of the study to measure differences when warranted.

d. A statement as to whether the plans for recruitment and outreach for study participants include the process of establishing partnerships with community(ies) and recognition of mutual benefits.

8. In addition to the above criteria, all applications will be reviewed with respect to the following:

a. Extent of community sanction/liaison. Rationale for selection of the targeted community and documentation of health needs and risk factors. Evidence of access to, interaction with, and participation of the community in development and conduct of the project. Establishment of collaborative interactions among all project participants. Extent to which the design demonstrates sensitivity to cultural and socioeconomic factors in the community where the public health program or problem resides.

b. Demonstration of effective communication channels between researchers and the community.

c. Plans for useful and practical dissemination of project activities and findings within the affected program(s). Active involvement of at least one community partner is a minimal requirement for responsiveness to this program announcement.

d. Appropriateness of the proposed budget, including that of the community

partner(s), and project duration in relation to the project's objectives.

e. Attempt to reduce health disparities by targeting various socioeconomic, racial, and ethnic groups.

The Second Stage of the Peer Review Process

A second programmatic review will be conducted by a chartered committee or a panel of senior federal officials. Awards will be made based on the priority score ranking determined by the peer review panel and the availability of funds.

H. Other Requirements

Technical Reporting Requirements

Provide CDC with original plus two copies of

1. Annual progress reports. These reports should be a maximum of five pages in length and should include a discussion, in plain language, of any changes made to the research plan from the funded proposal, progress to date, community input and involvement, project implementation, and relevant findings.

2. Annual "Measures of Effectiveness" reports for CDC. Annual reports that describe and evaluate progress toward objective/quantitative measures of effectiveness that demonstrate the accomplishment of the various identified objectives of the grant. These reports should be submitted to CDC with the annual progress reports.

3. Annual (or more frequent) reports for community members that describe progress, community input and involvement, project implementation, and relevant findings. Such reports must be in plain language and accessible formats, so as to be easily comprehended and critiqued by community members. These reports should be submitted to CDC with the annual progress reports.

4. Financial status report, no more than 90 days after the end of each budget period; and

5. Final financial and performance reports, no more than 90 days after the end of the project period.

Send all reports to the Grants Management Specialist identified in the "Where to Obtain Additional Information" section of this announcement.

The following additional requirements are applicable to this program. For a complete description of each, see Attachment I of the announcement.

AR-1 Human Subjects Requirements

AR-2 Requirements for Inclusion of Women and Racial and Ethnic Minorities in Research

AR-4 HIV/AIDS Confidentiality Provisions

AR-5 HIV Program Review Panel Requirements

AR-7 Executive Order 12372 Review

AR-8 Public Health System Reporting Requirements

AR-10 Smoke-Free Workplace Requirements

AR-11 Healthy People 2010

AR-12 Lobbying Restrictions

AR-15 Proof of Non-Profit Status

AR-22 Research Integrity

I. Authority and Catalog of Federal Domestic Assistance Number

This program is authorized under section 301 of the Public Health Service Act, [42 U.S.C. section 241], as amended. The Catalog of Federal Domestic Assistance number is 93.283.

J. Where to Obtain Additional Information

This and other CDC announcements can be found on the CDC home page Internet address - <http://www.cdc.gov>. Click on "Funding" then "Grants and Cooperative Agreements."

To receive additional written information and to request an application kit, call 770-488-2740. You will be asked to leave your name and address and will be instructed to identify the Program Announcement number of interest.

If you have questions after reviewing the contents of all the documents, business management technical assistance may be obtained from:

Juanita Crowder, Grants Management Specialist

Grants Management Branch, Procurement and Grants Office

Centers for Disease Control and Prevention

2920 Brandywine Road, Room 3000

Atlanta, GA 30341

Telephone number 770-488-2734

email address: jcrowder@cdc.gov

For program technical assistance, contact:

Cheryl A. Coble, Program Analyst

Office of Extramural Prevention Research

Public Health Practice Program Office

Centers for Disease Control and Prevention

4770 Buford Highway, MS K-56

Atlanta, GA 30341

Telephone number 770-488-8027

email address: ccoble@cdc.gov

ATTACHMENT I

AR-1

Human Subjects Requirements

If the proposed project involves research on human subjects, the applicant must comply with the Department of Health and Human Services (DHHS) Regulations (Title 45 Code of Federal Regulations Part 46) regarding the protection of human research subjects. All awardees of CDC grants and cooperative agreements and their performance sites engaged in human subjects research must file an assurance of compliance with the Regulations and have continuing reviews of the research protocol by appropriate institutional review boards.

In order to obtain an Assurance of Protection for Human Subjects, the applicant must register an Institutional Review Board (IRB) and complete the application for a Federalwide Assurance (FWA) located on the Office for Human Research Protection (OHRP) website or write to the OHRP for an application. OHRP will verify that the Signatory Official and the Human Subjects Protections Administrator have completed the OHRP Assurance Training/Education Module before approving the FWA. OHRP will also verify that the IRB Chairperson has completed the Training/Education Module when the IRB has been designated under the FWA. Existing Multiple Project Assurances (MPAs), Cooperative Project Assurances (CPAs) and Single Project Assurances (SPAs) remain in full effect until they expire or until December 31, 2003, whichever comes first.

To register the IRB and apply for a FWA contact the OHRP at:

<http://ohrp.osophs.dhhs.gov/irbasur.htm>

(Click on "Educational Materials" on the left side of the screen for the Training/ Education Module.) **OR**

If your organization is not Internet-active, please obtain an application by writing to:

Office for Human Research Protections (OHRP)
Department of Health and Human Services
6100 Executive Boulevard, Suite 3B01, MSC 7501
Rockville, Maryland 20892-7507

(For Express or Hand Delivered Mail, Use Zip Code 20852)

Note: In addition to other applicable committees, Indian Health Service (IHS) institutional review committees must

also review the project if any component of IHS will be involved with or will support the research. If any American Indian community is involved, its tribal government must also approve the applicable portion of that project.

AR-2

Requirements for Inclusion of Women and Racial and Ethnic Minorities in Research

It is the policy of the Centers for Disease Control and Prevention (CDC) and the Agency for Toxic Substances and Disease Registry (ATSDR) to ensure that individuals of both sexes and the various racial and ethnic groups will be included in CDC/ATSDR-supported research projects involving human subjects, whenever feasible and appropriate. Racial and ethnic groups are those defined in OMB Directive No. 15 and include American Indian or Alaska Native, Asian, Black or African American, Hispanic or Latino, Native Hawaiian or Other Pacific Islander. Applicants shall ensure that women, racial and ethnic minority populations are appropriately represented in applications for research involving human subjects. Where clear and compelling rationale exist that inclusion is inappropriate or not feasible, this situation must be explained as part of the application. This policy does not apply to research studies when the investigator cannot control the race, ethnicity, and/or sex of subjects. Further guidance to this policy is contained in the Federal Register, Vol. 60, No. 179, pages 47947-47951, and dated Friday, September 15, 1995.

AR-4

HIV/AIDS Confidentiality Provisions

Recipients must have confidentiality and security provisions to protect data collected through HIV/AIDS surveillance, including copies of local data release policies; employee training in confidentiality provisions; State laws, rules, or regulations pertaining to the protection or release of surveillance information; and physical security of hard copies and electronic files containing confidential surveillance information. Describe laws, rules, regulations, or health department policies that require or permit the release of patient-identifying information collected under the HIV/AIDS surveillance system to entities outside the public health department; describe also the measures the health department has taken to ensure that persons reported to the surveillance system are protected from further or unlawful disclosure.

Some projects may require Institutional Review Board (IRB) approval or a certificate of confidentiality.

AR-5

HIV Program Review Panel Requirements

Compliance with *Content of AIDS-Related Written Materials, Pictorials, Audiovisuals, Questionnaires, Survey Instruments, and Educational Sessions* (June 1992) (a copy is in the application kit) is required.

To meet the requirements for a program review panel, you are encouraged to use an existing program review panel, such as the one created by the State health department's HIV/AIDS prevention program. If you form your own program review panel, at least one member must be an employee (or a designated representative) of a State or local health department. List the names of the review panel members on the Assurance of Compliance form, CDC 0.1113, which is also included in the application kit. Submit the program review panel's report that all materials have been approved.

If the proposed project involves hosting a conference, submit the program review panel's report stating that all materials, including the proposed conference agenda, have been approved. Submit a copy of the proposed agenda with the application.

Before funds are used to develop educational materials, determine whether suitable materials already exist in the CDC National AIDS Clearinghouse.

AR-7

Executive Order 12372 Review

Applications are subject to Intergovernmental Review of Federal Programs, as governed by Executive Order (E.O.) 12372. The order sets up a system for State and local governmental review of proposed Federal assistance applications. Applicants should contact their State single point of contact (SPOC) as early as possible to alert the SPOC to prospective applications and to receive instructions on the State process. For proposed projects serving more than one State, the applicant is advised to contact the SPOC for each State affected. (The application kit contains a current list of SPOCs.) SPOCs who have recommendations about the State process for applications submitted to CDC should send them, in a document bearing the program announcement number, no more than 60 days after the application deadline date, to:

Juanita Crowder, Grants Management Specialist
Grants Management Branch
Procurement and Grants Office
Announcement Number 02003
Centers for Disease Control and Prevention (CDC)
2920 Brandywine Road, Room 3000

Atlanta, Georgia 30341-4146

Indian tribes must request tribal government review of their applications.

If Indian tribes are eligible for the program, change the sentence about SPOC recommendations as follows:

SPOCs or tribal governments that have recommendations about an application submitted to CDC should send them, in a document bearing the program announcement number, no more than 60 days after the application deadline date, to:

Juanita Crowder, Grants Management Specialist

Grants Management Branch

Procurement and Grants Office

Announcement Number 02003

Centers for Disease Control and Prevention (CDC)

2920 Brandywine Road, Room 3000

Atlanta, Georgia 30341-4146

CDC does not guarantee to accept or justify its nonacceptance of recommendations that are received more than 60 days after the application deadline.

AR-8

Public Health System Reporting Requirements

This program is subject to the Public Health System Reporting Requirements. Under these requirements, all community-based non-governmental organizations submitting health services applications must prepare and submit the items identified below to the head of the appropriate State and/or local health agency(s) in the program area(s) that may be impacted by the proposed project no later than the application deadline date of the Federal application. The appropriate State and/or local health agency is determined by the applicant. The following information must be provided:

A. A copy of the face page of the application (SF 424).

B. A summary of the project that should be titled "Public Health System Impact Statement" (PHSIS), not exceed one page, and include the following:

1. A description of the population to be served;

2. A summary of the services to be provided; and

3. A description of the coordination plans with the appropriate state and/or local health agencies.

If the State and/or local health official should desire a copy of the entire application, it may be obtained from the State Single Point of Contact (SPOC) or directly from the applicant.

If the program is not subject to the requirement, place the following in the section:

This program is not subject to the Public Health System Reporting Requirements.

AR-10

Smoke-Free Workplace Requirements

CDC strongly encourages all recipients to provide a smoke-free workplace and to promote abstinence from all tobacco products. Public Law 103-227, the Pro-Children Act of 1994, prohibits smoking in certain facilities that receive Federal funds in which education, library, day care, health care, or early childhood development services are provided to children.

AR-11

Healthy People 2010

CDC is committed to achieving the health promotion and disease prevention objectives of "Healthy People 2010," a national activity to reduce morbidity and mortality and improve the quality of life. For the conference copy of "Healthy People 2010," visit the internet site:

[http://www.health.gov/healthypeople.](http://www.health.gov/healthypeople)

AR-12

Lobbying Restrictions

Applicants should be aware of restrictions on the use of HHS funds for lobbying of Federal or State legislative bodies. Under the provisions of 31 U.S.C. Section 1352, recipients (and their subtier contractors) are prohibited from using appropriated Federal funds (other than profits from a Federal contract) for lobbying congress or any Federal agency in connection with the award of a particular contract, grant, cooperative agreement, or loan. This includes grants/cooperative agreements that, in whole or in part, involve conferences for which Federal funds cannot be used directly or indirectly to encourage participants to lobby or to instruct participants on how to lobby.

In addition no part of CDC appropriated funds, shall be used, other than for normal and recognized executive-legislative relationships, for publicity or propaganda purposes, for the preparation, distribution, or use of any

kit, pamphlet, booklet, publication, radio, television, or video presentation designed to support or defeat legislation pending before the Congress or any State or local legislature, except in presentation to the Congress or any State or local legislature itself. No part of the appropriated funds shall be used to pay the salary or expenses of any grant or contract recipient, or agent acting for such recipient, related to any activity designed to influence legislation or appropriations pending before the Congress or any State or local legislature.

Any activity designed to influence action in regard to a particular piece of pending legislation would be considered "lobbying." That is lobbying for or against pending legislation, as well as indirect or "grass roots" lobbying efforts by award recipients that are directed at inducing members of the public to contact their elected representatives at the Federal or State levels to urge support of, or opposition to, pending legislative proposals is prohibited. As a matter of policy, CDC extends the prohibitions to lobbying with respect to local legislation and local legislative bodies.

The provisions are not intended to prohibit all interaction with the legislative branch, or to prohibit educational efforts pertaining to public health. Clearly there are circumstances when it is advisable and permissible to provide information to the legislative branch in order to foster implementation of prevention strategies to promote public health. However, it would not be permissible to influence, directly or indirectly, a specific piece of pending legislation.

It remains permissible to use CDC funds to engage in activity to enhance prevention; collect and analyze data; publish and disseminate results of research and surveillance data; implement prevention strategies; conduct community outreach services; provide leadership and training, and foster safe and healthful environments.

Recipients of CDC grants and cooperative agreements need to be careful to prevent CDC funds from being used to influence or promote pending legislation. With respect to conferences, public events, publications, and "grassroots" activities that relate to specific legislation, recipients of CDC funds should give close attention to isolating and separating the appropriate use of CDC funds from non-CDC funds. CDC also cautions recipients of CDC funds to be careful not to give the appearance that CDC funds are being used to carry out activities in a manner that is prohibited under Federal law.

AR-15**Proof of Non-profit Status**

Proof of nonprofit status must be submitted by private nonprofit organizations with the application. Any of the following is acceptable evidence of nonprofit status: (a) a reference to the applicant organization's listing in the Internal Revenue Service's (IRS) most recent list of tax-exempt organizations described in section 501(c)(3) of the IRS Code; (b) a copy of a currently valid IRS tax exemption certificate; (c) a statement from a State taxing body, State Attorney General, or other appropriate State Official certifying that the applicant organization has a nonprofit status and that none of the net earnings accrue to any private shareholders or individuals; (d) a certified copy of the organization's certificate of incorporation or similar document that clearly establishes nonprofit status; (e) any of the above proof for a State or national parent organization and a statement signed by the parent organization that the applicant organization is a local nonprofit affiliate.

AR-22**Research Integrity**

The signature of the institution official on the face page of the application submitted under this Program Announcement is certifying compliance with the Department of Health and Human Services (DHHS) regulations in Title 42 Part 50, Subpart A, entitled "Responsibility of PHS Awardee and Applicant Institutions for Dealing with and Reporting Possible Misconduct in Science."

The regulation places several requirements on institutions receiving or applying for funds under the PHS Act that are monitored by the DHHS Office of Research Integrity's (ORI) Assurance Program.

For examples:

Section 50.103(a) of the regulation states: "Each institution that applies for or receives assistance under the Act for any project or program which involves the conduct of biomedical or behavioral research must have an assurance satisfactory to the Secretary (DHHS) that the applicant: (1) Has established an administrative process, that meets the requirements of this subpart, for reviewing, investigating, and reporting allegations of misconduct in science in connection with PHS-sponsored biomedical and behavioral research conducted at the applicant institution or sponsored by the applicant; and (2) Will comply with its own administrative process and the requirements of this Subpart."

Section 50.103(b) of the regulation states that: "an applicant or recipient institution shall make an annual submission to the [ORI] as follows: (1) The institution's assurance shall be submitted to the [ORI], on a form prescribed by the Secretary,...and updated annually thereafter...(2) An institution shall submit, along with its annual assurance, such aggregate information on allegations, inquiries, and investigations as the Secretary may prescribe."

An additional policy is added in the year 2000 that "requires research institutions to provide training in the responsible conduct of research to all staff engaged in research or research training with PHS funds."

**ERRATA SHEET (Revised April 12, 2002) for Program
Announcement 02003**

**Community-Based Participatory Prevention Research
Special Instructions for PHS-398 (Rev. 5/2001)**

INSTRUCTIONS FOR PHS 398

Special Instructions for PHS-398, Rev. 5/2001

ANNOUNCEMENT #02003

Community-Based Participatory Prevention Research

SECTION I - PREPARING YOUR APPLICATION

B. General Instructions (Page 3)

Use English only and avoid jargon and unusual abbreviations. Type the application. The narrative should be no more than 25 single-spaced pages, printed on one side, with 1/2 inch margins, and standard size fonts (10 or 12 points, black type only) that can be photocopied and easily read, do not use photo reduction or compressed print. Draw all graphs, diagrams, tables, and charts in black ink. Do not include photographs, oversized documents, or materials that cannot be photocopied in the body of the application; submit an original and five collated

sets of the application and appendix. The original and five copies must be submitted to **Juanita Crowder**, Grants Management Specialist, Procurement and Grants Office, Centers for Disease Control, 2920 Brandywine Road, Room 3000, Atlanta, Georgia 30341 as prescribed in the program announcement.

The **ONLY** item that should be used to keep the application together is a rubber band. Please do not use spiral binders, 3-ring notebooks, envelopes, binder clips, etc.

Do not submit an incomplete application. An application will be considered incomplete and returned if it is illegible, if it fails to follow the instructions, or if the material presented is insufficient to permit an adequate review. Unless specifically required by these instructions (e.g., human subjects certification, vertebrate animals verification, changes in other support), do not send supplementary or corrective material pertinent to the application after the receipt date without its being specifically solicited or agreed to by prior discussion with the Grants Management Specialist.

C.4-5. Specific Instructions-Budget (Page 11)

Disregard instructions regarding the dollar limitations. Form Page 4 and Form Page 5 are required to be submitted by all applicants regardless of the dollar amount requested.

C.8. Specific Instructions-Research Plan (Pages 17-18)

Please note and expressly **adhere to page limitations** under **Research Plan**, items A-D. Refer to Amendment to PA 02003 for clarification of inconsistencies between Section E. Content, 2. Application of the program announcement and items A to D in the research plan outlined on the latest PHS Form 398 (Rev. 05/01) and Program Announcement 02003. The amendment has been published in the Federal Register on April 12, 2002. The original PA 02003 was published in the Federal Register on Feb. 21, 2002.

C.8.e Specific Instructions-Research Plan-Human Subjects Research Section (Pages 17-18)

Please make sure that the application addresses the issue of Women and Minority Inclusion in Research Involving Human Subjects. **The application could be determined as non-responsive if this issue is not covered within the research plan.**

Research Plan 1.C:

Refer to amendment to PA 02003 for clarification of inconsistencies between Section E. Content, 2. Application of the program announcement and items A to D in the research plan outlined on the latest PHS Form 398 (Rev. 05/01) and Program Announcement 02003.

The amendment has been published in the Federal Register on April 12, 2002. The original PA 02003 was published in the Federal Register on Feb. 21, 2002.

SECTION II - SUBMITTING YOUR APPLICATION, (Page 31)

A. Instructions

Please disregard all instructions under A. Instructions **except** the sections entitled "The Original Application," "Five exact, single-sided copies of the original application" and "Five collated sets of Appendix Material."

Send the Application to the following address:

PLEASE **DO NOT SEND** THE APPLICATION TO THE NATIONAL INSTITUTES OF HEALTH.

Centers for Disease Control and Prevention
Procurement and Grants Office
ATTN: Juanita Crowder, Grants Management Specialist
Program Announcement 02003
2920 Brandywine Road, Room 3000
Atlanta, Georgia 30341-4146

B-D. Disregard items B-D (Pages 34-35)

Please refer to the Program Announcement, "Evaluation Criteria" section, for the applicable CDC review process.

Section 3 - Other Information

IMPORTANT: DISREGARD SECTION M, FIRST PARAGRAPH, PAGE 53; SECTIONS N AND O, PAGES 54-55; AND ALL PAGES FOLLOWING PAGE 55. ALSO, DISREGARD INSTRUCTIONS FOR MAILING LABELS FOR APPLICATION PACKAGES TO THE CENTER FOR SCIENTIFIC REVIEW (NIH).

For questions and answers regarding this announcement
you may visit the following website:
<http://www.phppo.cdc.gov/eprp/ProgramQA.asp>

CDC Home Page: <http://www.cdc.gov>
CDC Funding Web Page: <http://www.cdc.gov/od/pgo/funding/funding.htm>
CDC Forms Web Page: <http://www.cdc.gov/od/pgo/forminfo.htm>