

Funding Opportunity Informational Call Behavioral Risk Factor Surveillance System



Introductions

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Agenda

- Introductions
- Welcoming Remarks
- General Overview of the NOFO
- Performance Measures
- Application Content Highlights
- Questions and Answers
- Closing Remarks and Reminders

Welcome Remarks

Machell Town, Ph.D., MS.

Mathematical Statistician

Chief, Population Health Surveillance Branch

Division of Population Health

National Center for Chronic Disease Prevention and Health Promotion

Name: Behavioral Risk
Factor Surveillance
System (BRFSS): Impact
on Population Health

NOFO CDC-RFA-DP-24-0023

Type of Award: Cooperative Agreement

Type of
Award:
Cooperative
Agreement

A funding mechanism used by the Federal Government.

Reflects a relationship between the U.S Government and a recipient

A legal obligation between two parties

Federal employees participate more closely in project activities

Purpose And Overview Of NOFO

Local public health agencies

- Closely monitor health disparities
- Implement targeted preventive efforts
- Address emerging public health situations
- Highlight health disparities in underrepresented communities

Financial and Technical Aid

- In 50 States
- U.S. Territories
- Freely Associated States (FSM, American Samoa, Palau)

The aim is to increase reporting of health outcomes with a focus on advancing health equity.

Quarterly Submission of Sample Request



JAN.–MAR.



APR.–JUNE



JULY–SEP.



OCT.–DEC.

Targeted Sample Size

**Target: 2000 –
minimum 1500**

- Population: Less than 200,000

**Target: 4000 –
minimum 2500**

- Population: 200,001 – 900,001

**Target: 6000 – 4000
minimum**

- Population: More than 900,001

Important Dates

Letter of Intent:
March 1, 2024; 11:59
pm ET (Optional)

Application Due Date:
April 15, 2024; 11:59
pm ET

Expected Award Date:
July 1, 2024

Expected Start Date:
August 1, 2024

Period of
Performance: August
1, 2024 to July 31,
2029

Funding Cycle: 5 Years
with non-competitive
annual continuation
application

Eligibility

Who can apply?

State governments

County governments

City or township governments

Special district governments

Independent school districts

Public and state-controlled institutions of higher education

Native American tribal governments (Federally recognized)

Public housing authorities and Indian housing authorities

Eligibility, Cont. Who can apply?

Native American tribal organizations, other than Federally recognized tribal governments

Nonprofits having a 501(c)(3) status, other than institutions of higher education

Nonprofits without 501(c)(3) status, other than institutions of higher education

Private institutions of higher education

For-profit organizations other than small businesses

Small businesses

Note: This funding cannot be used for research

Funding Amounts

Awards and Range

Type of Funding:
Cooperative
Agreement

12-month budget
periods

5-year periods of
performance

Funding range:
\$70,000 to \$600,000
(*annually)

Average award range:
\$125,000 to \$450,000
(*annually)

Expected Awards: 57

Only one award will be
provided per state,
territory, or freely
associated state.

*Note: As funds are
available

Logic Model

Strategies and Activities	Short-term Outcomes	Intermediate Outcomes	Long-Term Outcomes
<p>Strategy 1. Collect data and develop the plan</p> <ul style="list-style-type: none"> • Collect BRFSS data: Collect and compile health-related data across their jurisdictions in 50 states, D.C., U.S. territories, and freely associated states. • Innovate the process: Adopt modernized processes and innovative sampling strategies. • Plan the surveillance: Develop guidelines for implementing a surveillance plan. <p>Strategy 2. Build community partnerships</p> <ul style="list-style-type: none"> • Collaborate with a community advisory group: Promote growth and stabilize partnerships with community stakeholders to tackle health-related priorities and prospects. • Grow strategic partnerships: Develop and expand strategic relationships with communities underrepresented in BRFSS data. <p>Strategy 3. Conduct outreach and education</p> <ul style="list-style-type: none"> • Share information with underrepresented communities: Conduct outreach activities in at least two communities. • Host community meetings: Hold annual meetings (in-person, virtual, or hybrid) to discuss BRFSS data strategies, access, and availability. 	<ul style="list-style-type: none"> • Increased monitoring of health-related risk behaviors, chronic health conditions, and use of preventive services. • More timely access to BRFSS data for local areas. • Increased knowledge and awareness of BRFSS data among underrepresented communities. • Expanded communication and marketing campaigns within underrepresented communities related to accessing the data. 	<ul style="list-style-type: none"> • Improved use of BRFSS data to guide public health actions and policies that promote healthy lifestyles among all population groups. • Greater sharing and use of data among partners who promote health equity within underrepresented communities. • Improved sharing and use of BRFSS data among traditional advocates. 	<ul style="list-style-type: none"> • Enhanced health-focused policies at local, state, and federal levels, with special attention towards underrepresented communities. • Enhanced policies at local, state, and federal levels aim to boost health outcomes.

Strategies and Outcomes

- **Strategies and Activities**
- Collect data and develop the surveillance plan
- Build community partnerships
- Conduct outreach and education
- **Outcomes and Performance Measures**
- More Timely access to BRFSS data for local areas
- Expanded communication and marketing campaigns
- Greater sharing and use of data among partners

Performance Measures and Evaluation Plan

Chaity Naik, MPH

Public Health Advisor/Project Officer

State and Program Coordination Team

Population Health Surveillance Branch

Division of Population Health

National Center for Chronic Disease Prevention and Health Promotion

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Performance Measure: Short-term outcome

- **Outcomes Performance measures**

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Outcome	Performance measures
<p>More timely access to BRFSS data for local areas.</p>	<p>Data processes</p> <ul style="list-style-type: none">• Number of data requests received for BRFSS data.• Percentage of requests that required additional BRFSS data processing and analysis to complete the received data requests within the last 60 days. <p>BRFSS data access</p> <ul style="list-style-type: none">• Percentage of data requests completed for BRFSS within the last 60 days.• Quantity and percentage of new participants from underrepresented groups requesting BRFSS data within the last 60 days.

Performance Measure: Short-term outcome

- **Outcomes Performance measures**



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Outcome	Performance measures
Expanded communication and marketing campaigns among underrepresented communities related to accessing the data.	<p>Marketing</p> <ul style="list-style-type: none">• Number and percentage of marketing tools and resources created and distributed with partners, and in underrepresented communities. <p>Communication</p> <ul style="list-style-type: none">• Number and percentage of publications by recipients and community partners citing BRFSS data, and in underrepresented communities.• Number and percentage of state reports by recipients and community partners applying BRFSS data, and in underrepresented communities.

Performance Measure: Intermediate-term outcome

- **Outcomes Performance measures**



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Outcome	Performance measures
Greater sharing and use of data among partners who promote health equity within underrepresented communities.	Partnerships <ul style="list-style-type: none">• Number and percentage of newly built partnerships, and in underrepresented communities. Dissemination of data <ul style="list-style-type: none">• Percentage of BRFSS data shared and disseminated within communities through partners.

Application Content Highlights

Application elements Page 37

Project Abstract: Page 38

Project Narrative: Page 38

Budget Narrative: Page 39

- CDC Budget Preparation Guideline: Page 31

Attachments: Page 40

Standard Forms: Page 42

Project Narrative

Background
Page 8

Approach

- Strategies and activities
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- Outcomes
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Evaluation and performance measurement plan

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Work plan

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Focus populations and health disparities

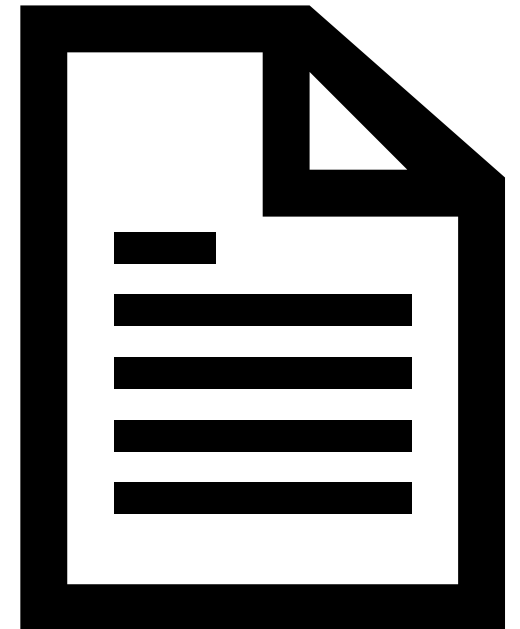
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Organizational capacity

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Collaborations

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Phase II Merit Review

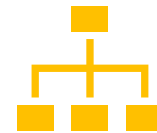


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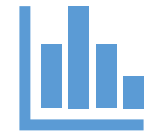
Background and approach

Logic Model
Work plan



Organizational capacity

Organizational capacity
MOU/MOA



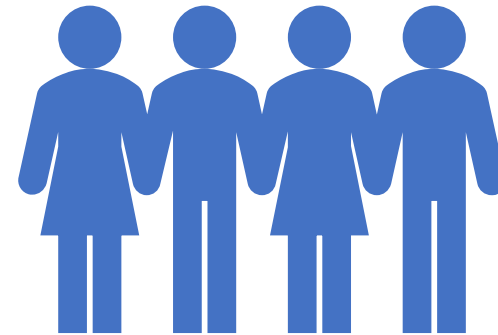
**Evaluation and performance
measurement**

Application checklist

Component	How to Upload	Page limit
<input type="checkbox"/> Project Abstract	Use the Project Abstract Summary Form.	1 page
<input type="checkbox"/> Project Narrative	Use the Project Narrative Attachment form.	20 pages
<input type="checkbox"/> Budget Narrative	Use the Budget Narrative Attachment form.	5 pages or less
Attachments (7 total)	Insert each in a single Other Attachments form.	
<input type="checkbox"/> 1. Table of contents		None
<input type="checkbox"/> 2. Indirect costs agreement		None
<input type="checkbox"/> 3. Resumes and job descriptions		None
<input type="checkbox"/> 4. Staffing plan		None
<input type="checkbox"/> 5. Organizational chart		None
<input type="checkbox"/> 6. MOU/MOA		None
<input type="checkbox"/> 7. Report on Overlap		None
Standard Forms (3 total)	Upload using each required form.	
<input type="checkbox"/> Application for Federal Assistance (SF-424)		No
<input type="checkbox"/> Budget Information for Non-Construction Programs (SF-424A)		No
<input type="checkbox"/> Disclosure of Lobbying Activities (SF-LLL), if applicable		No

Special Acknowledgement

All members of the Population
Health Surveillance Branch



Questions and Answers



Closing Remarks

For any questions, email
BRFSSNOFO@cdc.gov

Thank
you