

at risk for hepatitis A and B; (2) injection drug users (IDUs) who are in or out of treatment and who are at risk for hepatitis A, B, and C; (3) men, women and juveniles who are incarcerated and who are at risk for hepatitis A, B, and C; (4) minority populations disproportionately infected with hepatitis A, B, and/or C viruses; and (5) other populations at increased risk for viral hepatitis. In their application, applicants must show that they have expertise working with the population(s) they are addressing in their project proposal.

b. Indicate what type(s) of educational activities are considered to best reach the target audience. Based upon available data or data to be acquired by a needs assessment, develop, implement and evaluate a comprehensive approach to educational activities intended to reach the targeted audiences. This approach should have a strong KAP assessment component.

c. Describe what linkages with state or local hepatitis C and hepatitis B coordinators and STD, HIV, drug treatment, juvenile and adult corrections programs will be established and describe the best approaches for the delivery of viral hepatitis educational activities.

d. Describe how the activities developed in the proposal would incorporate information on viral hepatitis, which is consistent with published CDC guidelines on the prevention and control of hepatitis A, B, and C (see references in Attachment II).

e. Describe the plan for production and distribution of materials developed in the project.

f. Indicate the formative, process and outcome evaluations included for each educational activity.

Part B

a. Further develop an existing curriculum that could be used nationally to train health professionals, including those in training, in the prevention, management, and control of viral hepatitis.

b. Provide a curriculum that can be integrated into existing or ongoing training programs and that could be utilized in settings that provide services for patients who are at increased risk for viral hepatitis (e.g., STD clinics, HIV counseling and testing sites, drug treatment centers, community health centers). This curriculum should address viral hepatitis A, B, and C prevention and highlight client-centered counseling messages.

c. Formative, process and outcome evaluation methodologies should be

developed and applied to assess the utility and usability of the curriculum.

d. The curriculum should be produced and made available to governmental and non-governmental organizations nationwide.

Part C

a. Support education and training programs for health professionals who work with individuals at increased risk for viral hepatitis.

b. Develop and conduct training programs for health professionals related to the integration of viral hepatitis prevention and control into various public health and clinical settings that serve persons at increased risk of viral hepatitis.

c. Direct training programs to a wide range of health professionals (e.g., physicians, nurses, counselors) from both governmental and private entities.

d. Conduct the training programs using several formats (e.g., meetings, symposia, seminars, distance learning) and make the curriculum and training formats available nationwide through a Web site and/or through printed materials.

e. Evaluate the program(s) through formative, process and outcome measures.

Part D

a. Develop, implement and evaluate educational tools that promote hepatitis A and hepatitis B vaccination of children, adolescents and adults. These tools might include, but are not limited to, information brochures/booklets, newsletters, manuals, reports, videos, and Web site information. The educational tools should target health professionals and the general public.

b. Evaluate the tools using formative, process and outcome measures.

2. CDC Activities

a. Provide scientific and public health consultation and assistance in the development of educational activities related to the cooperative agreement.

b. Provide consultation and technical assistance regarding implementation of educational activities.

c. Provide technical assistance in the development and implementation of formative, process and outcome evaluation plans.

d. Assist in reporting and validating relevant information concerning viral hepatitis made available to Federal, State, local health agencies, health professionals, and volunteer organizations.

F. Content

Letter of Intent (LOI)

An LOI is optional for this program. The Program Announcement title and number must appear in the LOI. The narrative should be no more than five pages, double-spaced, printed on one side, with one-inch margins, and unreduced 12-point font. Your letter of intent will be used to assist CDC in planning and executing the evaluation of applications submitted under this announcement, and should include the following information: name and address of institution; name, address, and telephone number of the contact person; and a brief description of intended effort. This description should include to which Part(s) the applicant is applying and which primary target population(s) the applicant is addressing. Each applicant must submit a separate LOI for each Part.

Applications

The Program Announcement title and number must appear in the application. Use the information in the Program Requirements, Other Requirements and Evaluation Criteria sections to develop the application content. Separate applications for each Part must be submitted. 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 be no more than 25 pages, double-spaced, printed on one side, with one-inch margins, and unreduced 12-point font.

The narrative should consist of, at a minimum, a description of the overall plan to achieve the objectives, methods, evaluation and budget. The plan should address activities to be conducted over the entire project period. A detailed index to application contents, including appendices, as well as a one-page executive summary should be included at the front of the application and included in the 25 page limit.

G. Submission and Deadline

Letter of Intent (LOI) Submission

On or before June 5, 2003, submit the LOI to the Grants Management Specialist identified in the "Where to Obtain Additional Information" section of this announcement.

Application Forms

Submit the signed original and two copies of PHS 398 (OMB number 0925-0001). Adhere to the instructions on the Errata Instruction Sheet (posted on the CDC web site) for PHS 398. Forms are available at the following Internet