

work plan that addresses all of the points below. Only existing WISEWOMAN projects are required to provide WISEWOMAN-specific information requested below.

Applicants may apply for either the Standard Demonstration Project or the Enhanced Project, but not both.

1. *Background and Need.* Provide a brief description of the extent of the disease burden and the need among the priority populations and the background of the health care system to include:

a. The number of uninsured women living in the State/Territory/Tribal area by race/ethnicity by two age categories if possible, *i.e.* 40–49 years and 50–64 years.

b. The current health care system in which State, Territorial, or Tribal BCCEDP and WISEWOMAN sites operate (*e.g.* are the sites county health department clinics, community health centers, private providers, managed care organizations, etc.) and the appropriateness of the health care system for implementing effective interventions, adhering to program protocols, tracking difficult to reach women, and providing timely information on women who have high values of cholesterol and blood pressure.

c. Community involvement or engagement in the BCCEDP and/or WISEWOMAN project to include use of community health workers, use of community members, engagement in partnership activities with community agencies that serve financially disadvantaged women, use of referral systems to other community services, and so forth.

2. *Infrastructure.* Document the current State, Territorial, or Tribal BCCEDP and WISEWOMAN (if applicable) infrastructure including:

a. An organizational chart that shows the location of The WISEWOMAN Program in relationship to the agency's health promotion section, chronic disease section, minority, or women's health section, Breast and Cervical Cancer Early Detection Program, and to other programs that address chronic disease (*e.g.* cardiovascular health, tobacco, physical activity, nutrition, 5 A Day, diabetes, and obesity). Describe lines of communication between WISEWOMAN and the above-mentioned sections and programs.

b. The number of BCCEDP and WISEWOMAN sites in operation as of the January preceding the date of this application.

c. The total number of political subdivisions (*e.g.*, counties) and the number of these subdivisions that had a BCCEDP site and the number that had

a WISEWOMAN site as of January preceding the date of this application.

d. During the most recent program year include:

(1) The number of women served by BCCEDP and The WISEWOMAN Programs in the State, Territory, or Tribal area (provide data for each of the past 5 years, if available).

(2) The racial/ethnic characteristics of the population served (include educational Characteristics, if available).

(3) The percentage of women with a positive mammogram or pap test who did not go on for further diagnostics and reasons why women did not go on;

(4) The percentage of women with a WISEWOMAN alert value who did not go on for further diagnostics and reasons why women did not go on.

(5) The average length of time between a positive mammogram or Pap test and the receipt of a diagnostic test.

(6) The average length of time between detection of a WISEWOMAN alert value and the receipt of diagnostic test (*see* WISEWOMAN Guidance Document at <http://www.cdc.gov/od/ads/hsr2.htm> for the definition for alert values).

3. *Program Planning for Upcoming Year.* Describe how the program will decide or is currently conducting the following:

a. Site selection, the approximate number of sites to receive WISEWOMAN services, the characteristics of the sites, the proportion of State or Territorial BCCEDP sites that will receive WISEWOMAN services, and estimated number of women who are expected to receive such services during the upcoming year.

b. Screening and intervention services and start-up activities (if applying for Standard Demonstration Project funding level; see checklist of start-up activities in the WISEWOMAN Guidance Document at <http://www.cdc.gov/wisewoman> to be provided along with a time line for determining and implementing start-up activities, screening and intervention services [allowable screening and diagnostic procedures for the demonstration programs include resting pulse, blood pressure, serum total cholesterol, HDL-cholesterol, LDL-cholesterol, height and weight measurements, automated blood chemistry (to assess fasting blood glucose, potassium, calcium, creatinine, uric acid, triglyceride, or micronutrient levels), urine analysis (including urine cotinine), and paper and pencil tests, interviews, or computerized methods that measure level of physical activity, dietary intake, smoking, osteoporosis risk status, immunization status, or

other chronic disease risk factors or preventable health problems. The use of program funds for other tests will require substantial justification by the program. The schedule of fees/charges should not exceed the maximum allowable charges established by the Medicare Program for the same or similar laboratory tests. (Fees/charges for services covered by Medicare may vary by location, thus, States or Territories should determine the appropriate reimbursement rates for their areas.)

c. A pilot study to test proposed methods.

d. Inclusion of letters of support for WISEWOMAN from a substantial number of State/Territorial BCCEDP site directors and medical staff.

e. Methods for tracking women through the system and after they leave the system [(for the purpose of bringing them back for further screening and intervention)(Standard Projects should ensure that at least 60 percent of new women receive the complete intervention)], for flagging, tracking, and managing women who need immediate referral because of extremely high blood pressure (≥ 180 systolic blood pressure or 110 diastolic blood pressure), cholesterol (>400 mg/dL), or glucose levels (>375 mg/dL).

f. Program tracking to determine which women receive which interventions; routine reporting on the progress of the program (see suggested quarterly report format in WISEWOMAN Guidance Document at <http://www.cdc.gov/wisewoman> and reporting of minimum data elements. These minimum data elements will yield the performance measures that will determine whether a project qualifies for additional funding. The complete set of performance measures are detailed in Appendix B.

4. *Screening and Intervention.*

Document the ability of the program to screen and intervene upon women enrolled in the WISEWOMAN program including implementation of WISEWOMAN screening activities, the rationale and guidelines for implementing WISEWOMAN intervention activities, methods for reaching women from the State or Territorial BCCEDP for the purpose of WISEWOMAN screening and intervention and the use of outreach and community health workers to address barriers to program involvement, barriers to behavioral change, and barriers to maintaining contact for future health screenings and interventions.

5. *Evaluation—(Standard Program):*