

organizations, and follow back surveys of BRFSS respondents. Pharmacy data may also prove useful to better define the burden of arthritis within the State. All surveillance activities outside of BRFSS should be directly linked to programmatic activities.

Performance will be measured by the extent to which non-BRFSS data have been examined and have informed program decisions or enhanced existing activities.

2. *Interventions:* Implement two or more strategies from the State Arthritis Plan that is consistent with the Public Health Framework for Arthritis with a focus on Evidenced-Based Arthritis Education Programs and/or Health Communications. Capacity Building Level B programs may choose to implement and evaluate physical activity or self-management interventions other than ASHC, aquatics and PACE, that may be beneficial and effective in reducing arthritis related pain and disability and improving the quality of life among persons with arthritis. For these interventions, States must propose an implementation and evaluation plan. This plan should include a description of the program, expected program outcomes, implementation strategies, the role of partners and consultants in implementing and evaluating the program, and the evaluation plan. The evaluation should describe how impact will be measured, domains of interest, proposed data collection tools, and how data will be collected and analyzed. A time-line should be included.

Performance will be measured by:

a. The extent to which grantee can provide documentation that two or more evidenced-base interventions were implemented including: the process used for selecting the intervention, the target audience, the location of the intervention, the role of partners, and data used to support the decision to implement.

b. The extent to which non-evidence based programs have been implemented and evaluated.

Notes: All funded States are expected to adhere to the most current surveillance, intervention, and health communication recommendations that will be posted at <http://www.cdc.gov/nccddphp/arthritis/index.htm>.

2. CDC Activities

a. Provide consultation and technical assistance to plan, implement, and evaluate each component of the program.

b. Provide current information on the status of

c. National efforts as they relate to the implementation of recipient activities.

d. As needed, provide technical assistance in the coordination of surveillance efforts and the use of other data systems to measure and characterize the burden of arthritis, provide standard analyses of BRFSS data for States, and provide data for national level comparisons.

e. Facilitate communication among arthritis programs, other government agencies, and others involved in arthritis control and prevention efforts.

F.5. Content

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. Your application will be evaluated on the criteria listed, so it is important to follow them in laying out your program plan. Applications for Capacity Building Program Level A should be no more than 30 pages and Capacity Building Program Level B Programs no more than 40 pages excluding Federal forms, budget, justification, abstract, and appendixes. All applications should be double-spaced, printed on one side, with one-inch margins, and 12-point font. All applicants should also submit as appendices, resumes, job descriptions, organizational charts, and any other supporting documentation as appropriate. All graphics, maps, overlays, etc., should be in black and white and meet the above criteria. All submitted materials must be suitable for photocopying. Your application must be submitted unstapled and unbound.

1. *Abstract (All Applicants).* A one-page, single-spaced, typed abstract must be submitted with the application. The heading should include the title of the program, organization, name and address of the project director, telephone number, facsimile number, and e-mail address. The abstract should clearly state which level of activities the applicant is applying for: Capacity Building Program Level A, or Capacity Building Level B Program. The abstract should briefly list major program elements and activities. A table of contents that provides page numbers for each section should follow the abstract.

2. *Background/Current Status.* Capacity Building Program Level A Programs: Describe the burden of arthritis in the State. Identify what data sources are being used, the barriers the State currently faces in developing and implementing a program for arthritis, and identify the specific needs and resources available for arthritis activities.

Capacity Building Level B Programs:

a. Applicants for Capacity Building Programs Level B should provide evidence that they have significantly met the requirements specified in the Recipient Activities for Capacity Building Programs Level A (see Program Recipient Activities Section).

b. In addition, the applicant should adequately describe the burden of arthritis within the State including how the program defines arthritis using BRFSS and other data.

c. Include a description of the barriers the State currently faces in further developing and implementing programs for the control of arthritis.

3. *Work-Plan.* Provide a work plan that includes objective, methods, evaluation plans, and a time-line for each for the required elements cited in Recipient Activities above. Objectives should describe what is to happen, by when, by whom, and to what degree. Methods should describe the plan for achieving each of the objectives including a description of how partners will be involved. Also included should be a description of how progress toward attainment of the objectives will be monitored.

a. *Staffing (All Applicants).* Describe how proposed or existing staff has the relevant background, qualifications, and experience to manage a public health program. Include a description of their role in promoting an arthritis program within the State, their specific responsibilities, their role in coordinating activities between relevant programs within the State, how the organizational structure will support the staff's ability to conduct proposed activities, and the level of effort and time to be devoted to the arthritis program. Job descriptions, resumes if available, and an organizational chart should be included.

b. *Partnerships (All Applicants).* Include plans for developing partnerships with the local chapter(s) of the Arthritis Foundation, State and local agencies, Federal agencies, and others with an interest in arthritis. If partnerships have already been developed, the applicant should describe the process used, and the role of advisory groups, partnerships, or coalitions in the development and implementation of activities in the State Plan for Arthritis. Partnerships are expected to have been ongoing and viable. Applicants should include copies of agendas for all partnership meetings within the past two calendar years. Letters of support should be submitted and should describe the nature and extent of involvement by outside partners.