

interventions developed and/or tested as part of CAACP.

h. Participate annually in a CDC-organized meeting of CAACP grantees and key stakeholders.

## 2. CDC Activities

a. Provide technical assistance in the development of intervention strategies, communication and policy issues, and the interpretation of the scientific literature related to asthma management and control.

b. Provide liaison among grantees and identify potential sources of information and assistance.

c. Coordinate activities among sites, when appropriate.

d. Provide leadership in development of a comprehensive evaluation plan of CAACP as a whole and provide technical assistance to all grantee sites regarding appropriate evaluation strategies and specific evaluation tools.

e. Convene meetings among grantees, collaborators, and key stakeholders to discuss findings and improve outcomes.

f. Assist with the interpretation and dissemination of interim and final project findings and lessons. This may include coordinating one or more publishable reports related to project activities/findings.

g. If applicable, assist in the development of a research protocol for Institutional Review Board (IRB) review by all cooperating institutions participating in the research project. If applicable, the CDC IRB will review and approve the protocol initially and on at least an annual basis until the research project is completed.

## F. Content

### Applications

The Program Announcement title and number must appear in the application. Use the information in the Program Requirements, Other Requirements, Evaluation Criteria, and this Content section to develop the application content. Additional guidance/clarification is provided in Attachment III. The application will be evaluated on the criteria listed, so it is important to follow them in laying out the 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. In addition to the application forms, the application must contain the following in this order:

1. *Table of Contents*: A table of contents that provides page numbers for each of the following sections should be included.

2. *Project Narrative*: The narrative must contain the following sections:

a. Overview of the assets, attributes, and deficiencies of the communities of focus (*i.e.*, describing the public health and community environment in which CAACP is working, including a description of any community assessments or asset mapping done in the past three years).

b. Summary of asthma-related activities and issues unique to your communities of focus that directly or indirectly impact CAACP planning and implementation activities (*i.e.*, a description of asthma-specific activities not directly funded by CAACP that have occurred or are ongoing in the communities of focus).

c. Description of project organization, staffing, active collaboration, and community support.

d. Summary of the activities of the two-year planning period.

e. Description and justification of the community-based, intervention-phase asthma action plan to be implemented over the next five years.

f. Description of the comprehensive evaluation plan including a summary of the baseline data already collected during the planning phase.

## G. Submission and Deadline

### Application Forms

Submit the signed original and two copies of PHS 5161-1 (OMB Number 0920-0428). Forms are available at the following Internet address: [www.cdc.gov/od/pgo/forminfo.htm](http://www.cdc.gov/od/pgo/forminfo.htm).

If you do not have access to the Internet, or if you have difficulty accessing the forms on-line, you may contact the CDC Procurement and Grants Office Technical Information Management Section (PGO-TIM) at: 770-488-2700. Application forms can be mailed to you.

### Submission Date, Time, and Address

The application must be received by 4 p.m. Eastern Time, July 7, 2003.

*Submit the application to:* Technical Information Management-PA#03030, Procurement and Grants Office, Centers for Disease Control and Prevention, 2920 Brandywine Rd., Atlanta, GA 30341-4146.

Applications may not be submitted electronically.

### CDC Acknowledgement of Application Receipt

A postcard will be mailed by PGO-TIM, notifying you that CDC has received your application.

### Deadline

Applications shall be considered as meeting the deadline if they are received before 4 p.m. Eastern Time on

the deadline date. Any applicant who sends their application by the United States Postal Service or commercial delivery services must ensure that the carrier will be able to guarantee delivery of the application by the closing date and time. If an application is received after closing due to (1) carrier error, when the carrier accepted the package with a guarantee for delivery by the closing date and time, or (2) significant weather delays or natural disasters, CDC will upon receipt of proper documentation, consider the application as having been received by the deadline.

Any application that does not meet the above criteria will not be eligible for competition, and will be discarded. The applicant will be notified of their failure to meet the submission requirements.

## H. Evaluation Criteria

Applicants are required to provide measures of effectiveness that will demonstrate the accomplishment of the various identified objectives of the cooperative agreement. Measures of effectiveness must relate to the performance goals as stated in the purpose section of this announcement. Measures must be objective and quantitative and must measure the intended outcome. These measures of effectiveness shall be submitted with the application and shall be an element of evaluation.

A peer review group appointed by CDC may conduct site visits or reverse site visits, as a part of their review of the applications and, if conducted, will use the results of these visits as well as application content addressing the following criteria:

1. The Community-focused, Intervention-phase Asthma Action Plan (40 percent).

The aim of this plan should be to reduce the burden of asthma among children ranging from newborn to 18 years of age, throughout the pre-selected communities of focus. The plan will be evaluated on the following criteria.

a. The detail to which the plan is described.

b. The likely effectiveness of the individual intervention strategies as well as the plan as a whole. This includes the estimated efficacy of each intervention (how much it will reduce asthma morbidity and/or improve quality of life), the likely reach of each intervention (percentage of the community under 18 years of age likely to be engaged/impacted by the intervention), and the potential synergy created by the intertwining of interventions. While all are essential, the project is especially interested in determining the combined effectiveness