

in responding to public concerns about disease clusters.

iii. Barriers to implementing the linkage project such as limitations in data available including issues related to data quality (that includes a special focus on geo-coded data), timeliness and data collection practices; availability and use of data standards; compatibility of data and information technology standards and specifications across health and environmental systems; limitations of analytic methods, limits in legislative/regulatory authorities for state health/environmental agencies.

iv. Feasibility, utility and sustainability of incorporating linkage methods and tools into ongoing surveillance activities and into an integrated environmental public health tracking network.

v. Assessment of compatibility of data systems utilized with those being developed or enhanced under the CDC Public Health Information Network (includes Environmental Public Health Tracking, NEDSS, Bioterrorism-related surveillance activities at CDC, and the national vital statistics system) and EPA's National Environmental Information Exchange Network. (See Appendix III for the Internet addresses.)

vi. Effectiveness of communications strategies and messages, including an assessment of the program's ability to respond to public inquiries and to provide information to health department officials, health care providers, and the public regarding reported clusters.

vii. Recommendations for improvements in data collection, reporting, geo-coded linkages, and quality; development of new methodology; improvement in interoperability of databases; legislative/regulatory changes; improvements in data dissemination/communication strategies; and training needs of state and local staff on carry out data linkage and to effectively utilize data.

i. Participate in quarterly conference calls with other programs funded under this program announcement and with other Environmental Public Health Tracking Program partners including CDC state and local Tracking programs; CDC Centers of Excellence in Environmental Public Health Tracking (see Appendix IV); participating Centers, Institutes, and Offices at CDC such as the National Center for Birth Defects and Developmental Disabilities (NCBDDD); the National Center for Chronic Disease Prevention and Health Promotion; the National Center for Environmental Health; and the National Center for Health Statistics; and the

Agency for Toxic Substances and Disease Registry (ATSDR).

j. Attend workgroups and meetings with other Environmental Public Health Tracking (surveillance) Program partners to share lessons learned and participate in activities related to improving data system interoperability such as CDC's annual PHIN meeting.

2. CDC and ATSDR Activities

a. Provide technical assistance in work plan development, and the design and implementation of program activities, including analysis and dissemination of data. This will include individual consultation to funded programs via site visits, e-mail, and telephone and the provision of written guidance materials and references. Experts from the appropriate CDC Center will provide health effects technical assistance.

b. Provide coordination between and among recipient organizations by assisting in the sharing of information through the CDC Web sites (e.g. the National Birth Defects Prevention Network), the National Environmental Public Health Tracking Program web board, related stakeholders meetings, and direct interactions.

c. Coordinate activities at the national level among Centers, Institutes and Offices at CDC and the Agency for Toxic Substances and Disease Registry and with other Federal Agencies such as the Environmental Protection Agency.

d. Ensure involvement of other key governmental and non-governmental partners as needed. These may include the Council of State and Territorial Epidemiologists, the Environmental Council of States, the Association of Public Health Laboratories, the Association of State and Territorial Health Officials, the National Association of City and County Health Officers, the National Association of Health Data Organizations, the American Lung Association, the American Medical Association, the American Water Works Association, Chronic Disease Directors, the March of Dimes, American Academy of Pediatrics, the North American Association of Central Cancer Registries, the American Cancer Society, the National Birth Defects Prevention Network, and others.

e. Convene workgroups to discuss data system interoperability and develop enhancements to the PHIN architecture, standards, and conceptual and logical data models.

F. Content

Pre-application Conference Call

Two pre-application conference calls are scheduled for interested applicants. These will occur July 1, 2003, from 1 to 3 p.m. (eastern standard time (EST)) and July 2, 2003, from 3 to 5 p.m. (EST). The purpose of these calls is to discuss program requirements and to respond to any questions regarding the program announcement. Two calls are scheduled in order to provide all applicants the opportunity to gather information and ask questions. It is not necessary to participate in both calls, though applicants are welcome to do so if they desire. To confirm your intent to participate and receive a meeting agenda and call-in instructions, applicants should send an e-mail or write Toni Fleming at thf2@cdc.gov or 1600 Clifton Rd., NE., MS E19, Atlanta, GA 30333.

Letter of Intent (LOI)

A LOI is requested for this program. The Program Announcement title and number must appear in the LOI. The narrative should be no more than two pages, double-spaced, printed on one side, with one-inch margins, and unreduced 12-point fonts. Your letter of intent will be used to enable CDC to determine level of interest in the announcement and estimate potential review workload, and should include the following information:

a. Number and title of the announcement.

b. Name, organization, address, telephone number, fax number, and e-mail address of the Principal Investigator(s).

c. A brief description of the data linkage project(s) being proposed, including which surveillance/monitoring systems are to be linked.

Failure to submit a LOI will not preclude an applicant from submitting an application.

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. 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 35 pages, double-spaced, printed on one side, with one-inch margins, and unreduced 12-point fonts.

Applicants should also submit appendices including abbreviated curriculum vitas, letters of support,