

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.

An independent review group appointed by CDC will evaluate the application against the following criteria:

1. Project/Research Design and Methods (45 points): The design of the proposal's intervention(s), activities and methods to evaluate the outcomes or effectiveness of their proposed intervention strategies will be scored as follows:

(a) The extent to which the applicant provides Measures of Effectiveness that will demonstrate the accomplishment of the various identified objectives of the cooperative agreement. The degree to which the measures are objective/quantitative and adequately measure the intended outcome. Quality of the plan to evaluate the success (outcomes) of proposed strategies to improve service delivery and integrated services. This should include the appropriateness of the proposed evaluation method for the chosen intervention(s) or activities, the potential generalizability of the findings to other similar settings, and the impact of the intervention(s)/integration on other services being delivered at the site (e.g. HIV counseling and testing services). (20 points)

The following outcome measures are of specific interest:

(1) Changes in rate of persons seeking services in selected venues who truly have high risk behaviors for recommended services.

(2) Changes in rates of STD, HIV, HCV tests accepted by persons recommended for testing.

(3) Changes in rates of receipt of test results (with and without counseling).

(4) Changes in rates of HIV and HCV positive persons identified, co-infections identified (or confirmed negative for one disease or both).

(5) Changes in rates of new and chronic infections with other STDs (e.g., syphilis, herpes).

(6) Changes in rates of success and follow up (which may be direct or by referral) for persons infected with HIV or HCV (e.g., getting appropriate evaluation and treatment for HIV disease, getting medical evaluation for evidence of chronic liver disease in persons found to be HCV positive, getting into substance abuse treatment, or other appropriate services).

(7) Changes in rates of offering hepatitis A and hepatitis B vaccination to persons for whom vaccine is recommended.

(8) Changes in rates of vaccine acceptance among these clients (and reasons for refusal).

(9) Changes in rates of completion for each dose of hepatitis A and hepatitis B vaccine among clients recommended for and accepting vaccine.

(b) Consistency with the CDC Evaluation Framework for Evaluating Public Health Programs (see Appendix III as posted with this announcement on the CDC web site) and inclusion of a clear logic model (or other appropriate tool) for the proposed program that clearly identifies process and outcome measures (indicators). (5 points)

(c) Quality of methods to be used to evaluate the implementation of the interventions used in the proposed program (process evaluation). (5 points)

(d) Indication of how the evaluation will be used to improve program services. (5 points)

(e) Indication of how evaluation will be institutionalized as a normative, ongoing activity. (5 points)

(f) If research involving human subjects is proposed, the degree to which the applicant has met the CDC Policy requirements regarding the inclusion of women, ethnic, and racial groups in the proposed research. This includes: (1) the proposed plan for the inclusion of both sexes and racial and ethnic minority populations for appropriate representation; (2) the proposed justification when representation is limited or absent; (3) a statement as to whether the design of proposed studies is adequate to measure differences when warranted; and (4) a statement as to whether the plans for recruitment and outreach for study

participants include the process of establishing partnerships with community/ies and recognition of mutual benefits. The extent to which applicant describes the existence of or plans to establish partnerships. (5 points)

2. Background and Significance (30 points):

(a) Extent to which applicant demonstrates that one or more hepatitis prevention activities are provided to at least five percent of clients seeking services in the proposed setting for whom prevention services are currently recommended (e.g., at least five percent of STD clients receive hepatitis B vaccine; at least five percent of persons reporting IDU past or current receive anti-HCV counseling and testing). (10 points)

(b) Extent to which applicant demonstrates maximized use of existing resources and staff to integrate viral hepatitis prevention services, which clearly and appropriately addresses all "Recipient Activities" in the application; including (directly or through collaboration) adequately trained personnel (technical, administrative, and analytic), adequate facilities, research capacity including Institutional Review Board (IRB), adult vaccine supply (at least partial), and laboratory testing (at least partial) for beginning the project. (5 points)

(c) Extent to which the applicant demonstrates adequate numbers of clients or at-risk population, (based on risk factors or other denominators) to achieve the objectives of the proposed evaluation or intervention. Projects should be of a size that represents populations served annually in medium to large clinics (e.g. average at least 3000/year). (5 points)

(d) Extent to which applicant documents experience of proposed personnel, either direct or collaborating, in developing, implementing, and evaluating strategies to improve clinical prevention services for high risk adults and likely has the capacity to do so for viral hepatitis prevention and control activities and services (e.g., training, testing, counseling, vaccination, clinical services). (5 points)

(e) Evidence of existing quality assurance mechanisms to insure appropriate counseling and other services as recommended for the proposed setting, as provided by published CDC guidelines in various settings (e.g. STD, HIV, Substance Abuse Treatment). (5 points)