Veteran Suicide Prevention: Evaluation Demonstration Project
Outcome Evaluation Capacity Building Grants

Request for Proposals (RFP)

CDC Foundation
Non-Infectious Disease Programs

**RFP Release Schedule:**

RFP Date Issued: Wednesday, August 4, 2021

Applicant conference call (Optional): Tuesday, August 10, 2021, 11:00am EST

Proposals Due: **Wednesday, August 18, 2021; by 12:00pm EST**

**CDC FOUNDATION CONTACT**

VSPE Procurement Team
VSPEvaluation@cdcfoundation.org
1. CDC FOUNDATION

The CDC Foundation helps the Centers for Disease Control and Prevention (CDC) save and improve lives by unleashing the power of collaboration between CDC, philanthropies, corporations, organizations, and individuals to protect the health, safety and security of America and the world. The CDC Foundation is the go-to nonprofit authorized by Congress to mobilize philanthropic partners and private-sector resources to support CDC’s critical health protection mission. Since 1995, the CDC Foundation has raised over $1.2 billion and launched more than 1,200 programs impacting a variety of health threats from chronic disease conditions including cardiovascular disease and cancer, to infectious diseases like rotavirus and HIV, to emergency responses, including COVID-19 and Ebola. The CDC Foundation managed hundreds of programs in the United States and in more than 140 countries last year.

2. SUMMARY OF REQUEST

The National Foundation for the Centers for Disease Control and Prevention (CDC Foundation) was awarded a federal grant to work on the Veteran Suicide Prevention: Evaluation Demonstration (VSPE) Project in partnership with the Centers for Disease Control and Prevention (CDC)’s National Center for Injury Prevention and Control (Injury Center). The goal of the project is to build the capacity of veteran serving organizations (VSOs) to evaluate the effectiveness of their programs in helping to prevent suicide among veterans.

Over the past three years, the CDC Foundation has awarded and administered short-term, mini grants to VSOs that are implementing programs to facilitate an upstream public health approach to suicide prevention (i.e., approaches that serve to reduce risk factors and enhance protective factors). The funding allowed VSO grantees to develop and implement an evaluation plan and build their capacity for ongoing program evaluation. Year 04 of this project aims to further strengthen the ability of VSOs to use monitoring and evaluation to build evidence on the effectiveness of programs to address veteran suicide through an upstream prevention approach.

Through this Request for Proposal (RFP), the CDC Foundation will provide funding and support to previously funded VSO grantees (from Years 01-03) that have successfully completed process evaluation and are currently implementing programs aligned with an upstream approach to suicide prevention. The funding will build the capacity of VSOs to (1) implement outcome evaluations that measure how the program being evaluated affects intended outcomes; (2) understand the contextual and cultural factors impacting implementation for the population of focus; and (3) develop data dissemination resources and products as well as increased opportunities to share evaluation findings, including lessons learned.

3. BACKGROUND

Suicide is a leading cause of death for Americans overall, and has risen 33% between 1999 and 2019. Mental health conditions are often seen as the sole cause of suicide, but suicide is rarely caused by any single factor. In fact, many people who die by suicide are not known to have a diagnosed mental health
condition at the time of death. Other problems often contribute to suicide, such as those related to relationships, substance misuse, physical health, and job, money, legal, or housing stress\(^1\). Veterans are a particularly vulnerable population. According to data from the Department of Veterans Affairs (VA), the suicide rate was 1.5 times higher for Veterans compared to non-Veterans in 2018.\(^2\) The rate of suicide among younger veterans aged 18-34 far exceeds that of other age groups while the number of veteran deaths by suicide is highest among those aged 55-74 years.\(^3\) The good news is that preventing suicide is possible. Suicide is rarely caused by any single factor, which means there are multiple pathways for prevention.

Traditionally, suicide prevention has focused downstream on identifying and referring people at-risk of suicide to services. While that approach continues to be essential, CDC also focuses more on upstream approaches that reduce factors that promote risk and promote factors that decrease risk to help prevent the development of suicide risk in the first place. CDC is working to achieve broader community-level protection against suicide by supporting the implementation of its Suicide Prevention Technical Package of policies, programs, and practices that reflect the best available evidence for prevention. This technical package describes the benefits of a comprehensive approach to suicide prevention that includes approaches to prevent suicide risk as well as those to identify and support people at risk and to lessen harms for individuals, families, and communities who may have experienced a death by suicide or who have attempted.

Program evaluation is essential to understand and demonstrate if and to what extent programs are functioning as intended. Effective program evaluation is a systematic way to improve and account for public health actions by involving procedures that are useful, feasible, ethical, and accurate. The Framework for Evaluation in Public Health guides public health professionals in their use of program evaluation. It is a practical, nonprescriptive tool, designed to summarize and organize essential elements of program evaluation.

**Additional Resources**

Additional information on CDC’s public health approach to program evaluation:
https://www.cdc.gov/eval/framework/index.htm
https://www.safestates.org/general/custom.asp?PPEvalCourse

Additional information on CDC’s public health approach to suicide prevention:
https://www.cdc.gov/vitalsigns/suicide/index.html
https://www.cdc.gov/violenceprevention/suicide/index.html

\(^1\) Source: https://www.cdc.gov/vitalsigns/suicide/
\(^3\) Source: https://www.mentalhealth.va.gov/docs/data-sheets/OMHSP_National_Suicide_Data_Report_2005-2016_508.pdf
4. **SCOPE**

Organizations benefit a great deal from using data and feedback to continually assess and improve their work. An effective and well-implemented evaluation plan can help organizations make sure they reach the population(s) they intend to serve; help to assess the extent to which implementation of a program is bringing about the desired outcomes among the individuals or communities served; and help organizations better understand what is going well, what aspects of the program might need attention, and where to focus resources for program improvement.

**The goal of the project this round is to encourage and support increased use of outcome evaluation.** Before one can appropriately measure the effectiveness of a program, however, it is first important to ensure the program is being run as intended and is reaching the intended audience through process evaluation. To this end, **VSOs selected for funding must be previously funded VSPE project grantees that have successfully completed process evaluation** and are currently implementing programs aligned with an upstream approach to suicide prevention.

Outcome evaluation is used to measure the extent to which a program is aligned with the program’s objectives. This evaluation measures how well a program’s intended outcomes have been achieved. Before one can appropriately measure the effectiveness of a program, however, it is first important to ensure the program is being run as intended and is reaching the intended audience through process evaluation.

The project will monitor and provide funded veteran-serving organizations with resources and technical assistance to: (1) build their capacity to develop and implement outcome evaluations of their programs to prevent Veteran suicide; and (2) enhance their capacity to collect, analyze, and disseminate data.

**Note: the focus of this capacity building project is on evaluation, not on research.** Review the difference between program evaluation and research [here](https://www.cdc.gov/eval/index.htm). The capacity building approach will not only focus on the technical aspects of evaluation – methodology, data, analysis, etc., but will also emphasize strategy, dissemination, partnerships, and community. Ultimately, the goal is to build the evidence base around what works within existing VSO programmatic models aligned with an upstream approach to prevent and reduce veteran suicide.

Grantee organizations will conduct a comprehensive, length-of-project outcome evaluation of a current veteran-serving program that has not been evaluated for outcomes in support of CDC's Injury Center’s focus on a public health approach to veteran suicide prevention. Grantee organizations will receive ongoing technical assistance from the CDC Foundation and from CDC evaluation experts and suicide
prevention experts. The CDC Foundation and CDC expect an open dialogue with the grantee organizations, including regular calls (a schedule will be determined collaboratively by the CDC Foundation, CDC, and grantee organizations). In addition to regular calls, it is expected that the grantee will participate in either one (1) reverse site visit (to Atlanta, Georgia where both CDC and CDC Foundation are headquartered or one (1) virtual reverse site visit meeting (depending on COVID-19 travel restrictions). During this reverse site visit, the grantee organization attendee will prepare and present a final presentation for a multi-sector audience and submit a final, Outcome Evaluation Report that includes findings from the outcome evaluation—both of which are intended to showcase grantee evaluation projects to their organizational stakeholders.

Grantee Project outputs will include:

- Logic Model
- Evaluation plan
- Dissemination plan
- Final Outcome Evaluation Report
- Final Presentation
- A scientific product (e.g., abstract, brief, manuscript draft) for dissemination

5. KEY REQUIREMENTS

5.1 ELIGIBILITY

All applicants must be former VSPE grantees (funded at least once during Year 01-03) who are implementing programs that align with CDC’s upstream public health approach to suicide prevention. Former VSPE grantees must have been in good standing and in compliance with all aspects of their former contracts with the CDC Foundation to be eligible to respond to this RFP. The following organizations are eligible to apply (in alphabetical order):

<table>
<thead>
<tr>
<th>America's Warrior Partnership</th>
<th>Arizona Coalition for Military Families</th>
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<tr>
<td>Combined Arms</td>
<td>Forces United</td>
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<td>Nebraska Association of Local Health Directors</td>
<td>Objective Zero Foundation</td>
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<tr>
<td>Project Sanctuary</td>
<td>Stack Up</td>
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<tr>
<td>Swords to Plowshares</td>
<td>The Mission Continues</td>
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<tr>
<td>The Warrior Alliance</td>
<td>Vantage Point Foundation</td>
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<tr>
<td>Vets’ Community Connections</td>
<td>Volunteers of America of Illinois</td>
</tr>
</tbody>
</table>

These organizations are eligible as they were awarded funding at least once during a previous project period and have met the following criteria:

- Be a nonprofit, tax-exempt organization e.g., 501(c)3 or 501(c)19.
- Program implemented in the United States or its territories.
• Have ongoing veteran-focused programs and activities that align with either the previously described Community Integration Model or the Connectedness Model; and
• Have established relationships with veteran populations.

5.2 Funds Available

CDC Foundation intends to fund up to four (4) VSOs for a ten-month term (beginning mid-September-2021 through mid-July 2022). The total budget for all work related to the project must not exceed $50,000. The final award amount is contingent on submission of a detailed and reasonable budget to be approved by the CDC Foundation.

5.3 Funding Source

The agreement resulting from this RFP will be supported by Federal funding under the Strengthening Public Health Systems and Services through National Partnerships to Improve and Protect the Nation's Health grant with the award number 5 NU38OT000288-04-00 from the Centers from Disease Control and Prevention. The CDC foundation anticipates that award(s) resulting from this solicitation will meet the criteria of “subrecipient” as defined by 2 CFR 200.331; a final determination will be made at the time of award. Subrecipients must comply with the following federal regulatory requirements:

• Uniform Administrative Requirements, Cost Principles, and Audit Requirement for HHS Awards (45 CFR Part 75)
• Uniform Administrative Requirements, Cost Principles, and Audit Requirements, Cost Principles, and Audit Requirements for Federal Awards (2 CFR Part 200)

Additional subaward requirements will be communicated to successful proposers.

5.4 Performance Monitoring

The performance will be monitored in line with the agreed project plan. The selected VSOs will be expected to work in close collaboration and consultation with the CDC Foundation and the CDC. The plan for each deliverable will be an important part of the overall project plan. Furthermore, regular reviews/coordination, as agreed, will be undertaken, as work progresses.

6. INSTRUCTIONS TO APPLICANTS

Applicants should follow the instructions set forth below in the submission of their proposal to the CDC Foundation.

CDC Foundation will not be responsible for any proposal which does not follow the instructions in this RFP, and may, at its discretion, reject any such non-compliant proposal.
6.1 Communications during the RFP Period (Optional)

The CDC Foundation in collaboration with CDC will answer questions related to this RFP via conference call on Tuesday, **August 10, 2021 at 11:00 a.m. EST**.

Register in advance for this meeting:

https://cdcfoundation.zoom.us/meeting/register/tJIodOuorzMoHNWUJTvgfT3VBPodAPOweGfC

After registering, you will receive a confirmation email containing information about joining the meeting.

Applicants may submit questions ahead of time between August 4-10 by email. All questions are to be directed to the following e-mail address: **VSPEvaluation@cdcfoundation.org**. Please write “**EQuestions RFP Vet Suicide Prevention**” in the Subject line. In collaboration with CDC staff, CDCF will compile and answer the questions on the conference call. An RFP Supplement with a consolidation of responses to all questions (including an explanation of the query but without identifying the source of enquiry) asked by August 10, 2021 will be placed on our website and available on August 12, 2021.

6.2 Submission of Proposals

Proposals must be submitted at

https://app.smartsheet.com/b/form/f672c0a8f90e4f368baf36f953e2a37f

It shall be the Applicant’s responsibility to obtain a confirmation of receipt by the CDC Foundation of their submitted proposal. Any proposal received after the closing date for submission of proposals will be rejected.

**Proposal Requirements**

Proposals should be no more than six (6) pages, single spaced, 11-point font and one-inch margins, excluding appendices. Proposal narrative should address the following elements:

I. **Applicant Experience and Capacity:**

   Capability statement (page limit: three pages) that demonstrates your organization’s ability to implement the scope of work as described in the RFP.

   1. **Organizational history** - What is your organization’s mission and how will the proposed project help you to achieve your mission? Describe the need for the evaluation and how your service recipients will be impacted by this project.

   2. **Organizational evaluation experience** - What is your organization’s evaluation capacity (including existing data sources)? Briefly describe previous evaluation experience highlighting examples of any previous work (you may include a list or links to reports, published articles, briefs, bulletins, or PowerPoint presentations, etc.). Specific evaluation products should be provided in appendix B).
3. **Staff Bios** highlighting specific experience related to requirements of this solicitation. Only individuals listed in the budget (that will work on the project) should be described. At a minimum, the lead evaluator should have 1-2 years of demonstrated evaluation experience. They must also have the skill set necessary to perform the work. Note: Use of consultants/contractors are allowed but applicant must include a clear description of how increased capacity will be retained within the organization.

II. **Applicant Evaluation Approach:**

An approach that demonstrates a clear sense of what outcomes you aim to assess, justification, intended utility, and how you will do the analysis.

1. **Evaluation Approach** - How would your organization approach this evaluation project? Include the following:
   - A brief description of the program you plan to evaluate.
   - Proposed evaluation design, including evaluation questions, measures, data sources, analytic approach, and anticipated limitations.
   - Necessary tools or resources to perform the project (e.g., statistical software packages).
   - A draft logic model.

   Also explain to what extent this outcome evaluation will build on your previous/existing evaluation activities, to include but not limited to previous VSPE projects.

2. **Staffing Plan** - Description of the role and responsibilities of the specific personnel to be assigned to this project, including any consultants/contractors who may be used. Given the 10-month project scope, significant time will need to be allocated to perform project work. Staffing plans must include at least one (1) FTE (40 hours per week) of staff, including at least one staff person who has participated in previous funding. The lead evaluator must dedicate at least 50% (0.5 FTE) of time to this project.

III. **Project Description and Sustainability:**

1. Please describe how this project will contribute to the efficiency, sustainability, and resiliency of your organization.

Part Two - Appendices *(not included in the 6-page total described above)*:

1. **Appendix A: Detailed Budget and Budget Justification** *(Budget Preparation Guidelines and a Budget Narrative Template have been provided with the RFP to assist applicants with budget preparation. Please find additional guidelines on budget requirements below)*.

2. **Appendix B: Sample Evaluation Product** that demonstrates that you have the capacity to plan and implement an outcome evaluation. Please include previously developed logic model,
executive summary, or data presentation/visualizations from prior evaluations completed within the past three years, not to exceed ten pages.

3. **Appendix C: Curriculum Vitae (CV) or Resume** for project personnel. Please submit one resume or CV of no more than two pages for each of the key members of the team outlining relevant work history. All resumes and CVs should be combined into a single document when uploading the application. It is not necessary to submit resumes or CVs for all team members, only the key members of the evaluation project team (e.g., lead evaluator/data analyst, a person responsible for the overall management of the project, and a communications/dissemination lead staff person).

**Budget Guidelines:**

a) **Total project budget should not exceed $50,000.**

b) A detailed budget should be submitted with a supporting narrative for all anticipated costs. The budget narrative should conform with the attached CDC Office of Grants Services (OGS) budget preparation guidelines.

c) It is the intention of this solicitation to support expenses that are directly attributable to project outcomes. Proposed budget costs should be necessary for the appropriate and efficient performance of program activities specific to the goals and purpose of this evaluation capacity building project. Due to the limited amount funding available and the short duration of the project period, applicants are encouraged to refrain from budgeting indirect costs (costs of doing business that are not readily identified with the objectives of this grant - e.g., utilities, insurance, payroll taxes, capital expenditures for general purpose equipment, etc.) and include direct costs (e.g., salary, fringe benefits, supplies, travel (meal and incidental expenses), contractual, consultant costs, etc.) required to execute the grant instead. Costs should be broken down by task and supported by the appropriate narrative highlighting the alignment to the project.

d) **Salaries:** This category captures the costs of personnel assigned to work directly on the project. Costs identified under Personnel are only for project staff who are employees of the applicant organization. Costs for project staff who are not employees of the applicant organization should be included under Consultants/Contractors. **Ensure that budget period duration is adjusted to 10 months** (September 15, 2021 – July 15, 2022) for salary and fringe calculations.

e) **Travel for the reverse site visit** should be included in the budget. Up to two people, ideally the evaluation lead and a representative from the VSO leadership, would attend the reverse site visit for two days and one night. Programs funded by federal funds should follow the guidelines set forth in the Federal Travel Regulations. As such, applicants should refer to the [www.gsa.gov](http://www.gsa.gov) website where they can find information (e.g., per diem rates) that will be useful when budgeting for travel.
NOTE: Should travel and in-person meetings remain restricted due to COVID-19, the in-person meeting will be converted to a virtual meeting, and budgets will be adjusted post-award.

f) Contracts: The Foundation acknowledges you may not have complete information for any contract at the budget development stage. However, if you are using a sub-contractor, we would like to understand what is expected to be accomplished by each contract, and the estimated costs. In the cost calculation section, please provide the calculations used to derive the requested budget.

g) Grant funds may only be expended against any contract in your budget within the final approved grant period. If Foundation funds are the anticipated sole source of support for the project funded by your award, the contract start date should not be earlier than the start date of your award, and the end date should not be later than the end date of the award.

Budget negotiation: The budget narrative for applicants selected to move forward will be reviewed and negotiated to ensure that they meet the goals and objectives of the proposed project and that they are consistent with Foundation policies. Therefore, during budget negotiation, you may be asked to revise the budget and budget narrative before final budget is approved for funding.

<table>
<thead>
<tr>
<th>Submitting a Proposal</th>
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<tbody>
<tr>
<td>Application materials should be submitted by <strong>12:00pm EDT on Wednesday, August 18, 2021.</strong></td>
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<tr>
<td>Proposals will not be accepted after this date and time.</td>
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<tr>
<td><strong>Proposals must be submitted electronically at</strong></td>
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<tr>
<td><a href="https://app.smartsheet.com/b/form/f672c0a8f90e4f368baf36f953e2a37f">https://app.smartsheet.com/b/form/f672c0a8f90e4f368baf36f953e2a37f</a>.</td>
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<tr>
<td><strong>We recommend you begin to submit your proposal by 11:00 am EDT to allow sufficient time to address any unexpected technical issues.</strong></td>
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6.3 Timeline

<table>
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<tr>
<th>Date</th>
<th>Description</th>
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<tbody>
<tr>
<td>August 4, 2021</td>
<td>RFP Release</td>
</tr>
<tr>
<td>August 10, 2021, 11:00 am EDT</td>
<td>Applicant Conference Call (OPTIONAL)</td>
</tr>
<tr>
<td>August 12, 2021</td>
<td>RFP Supplement Release</td>
</tr>
<tr>
<td>August 18, 2021, 12:00 pm EDT</td>
<td>Proposal Submission Deadline</td>
</tr>
<tr>
<td>Late-August 2021</td>
<td>Interview (subject to change based on need)</td>
</tr>
<tr>
<td>Early September 2021</td>
<td>Anticipated Selection Notification</td>
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<tr>
<td>Mid-September 2021</td>
<td>Anticipated Project Implementation Start Date</td>
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<td></td>
<td>Implementation period of 10 months</td>
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*Please note that the timeline is subject to change*
7. SELECTION PROCESS AND REVIEW CRITERIA

The CDC Foundation will award grants to applicants based on the following multi-stage review process outlined below.

Level 1 Internal Review:

CDC Foundation will evaluate all applicants for completeness and minimum requirements. Basic requirements include timely receipt of application and submission of all required attachments. Applications with omissions of any required documentation will be subject to disqualification.

The CDC Foundation also reserves the right to conduct financial and due diligence reviews. As a public entity, the CDC Foundation has a responsibility to the public to ensure that the organizations that receive grant funds are financially stable and to evaluate each applicant's risk of noncompliance with Federal statutes, regulations, and the terms and conditions of the subaward for purposes of determining the appropriate subrecipient monitoring, per program year. Further written materials to assess risk may be requested during or prior to the review.

Level 2 External Review:

Applicants that pass Level 1 review will proceed to Level 2 review. A panel of three independent reviewers with evaluation and subject matter expertise will review and score written proposals. Reviewers will score applicants in accordance with review criteria listed below. The highest scoring applicants will proceed to Level 3 Review.

The following table outlines the criteria that reviewers will use to guide their evaluation of each written proposal.

<table>
<thead>
<tr>
<th>DOMAIN</th>
<th>CRITERIA</th>
<th>WEIGHT</th>
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</table>
| Applicant Experience and Capacity | Review will include an assessment of your organizational history, your capacity and experience as it relates to the requirements within this RFP, and evidence of previous evaluation work.  
  • Assessment of Need and Existing organizational evaluation capacity (including current access to data and existing data sources).  
  • Organizational Evaluation experience highlighting examples of any previous evaluation work. Sample Evaluation Product that demonstrates that you can do this work.  
  • Evaluation expertise on the proposed team (can include consultant/contractor). Bios (in narrative) and Resumes/CVs clearly show professional experience and/or education that reflects knowledge and ability in content expertise.  
  • At least one (1) FTE (40 hours per week) of staff, including at least one staff person who has participated in previous funding, and the lead evaluator at least 50% (0.5 FTE) of their time to this | 60%    |
<table>
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<tr>
<th>Strategic Thinking/ Planning Approach and Sustainability</th>
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<tr>
<td>Review will include an assessment of overall approach and strategy described/outlined in the proposal that demonstrates a clear sense of what outcomes you aim to assess, justification, intended utility, and how you will do the analysis within the specified timeframe.</td>
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<tr>
<td>• Clear inclusion of at least one evaluation question, a draft logic model, data sources, and anticipated limitations.</td>
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<tr>
<td>• Detailed explanation of the extent to which this outcome evaluation will build on your previous/existing evaluation activities, to include but not limited to previous VSPE projects.</td>
</tr>
<tr>
<td>• The proposed management and staffing available to initiate work immediately and to ensure high level involvement and timely delivery to meet the aggressive project timelines.</td>
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<td>• Details of how capacity remains within the organization if contractors are utilized.</td>
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<tr>
<td>• The appropriateness of the timeline for project implementation, inclusive of preparation and delivery.</td>
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<tr>
<td>• Plan for how evaluation will contribute to the efficiency, sustainability, and resiliency of your organization.</td>
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<tr>
<td>Proposed Budget, Budget Narrative</td>
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<tr>
<td>A budget and justification for all anticipated costs for a ten-month term (beginning mid-September 2021 through mid-July 2022). Budget is reasonable and detailed. Budget justification explains the rationale for the proposed budget.</td>
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**Level 3 Interview (subject to change based on need):**

The highest scoring applicants from the Level 2 Review may be invited for an interview. Only key personnel on the proposed RFP must attend the interview. The interview will provide an opportunity for reviewers and finalists to address any follow-up or clarifying questions. Content of the interview may be used to inform final award decisions.

All applicants will receive a notification of whether their proposal was selected for funding. The CDC Foundation will not provide scores or specific review feedback to unsuccessful applicants.

**Attachments:**

1. OGS Budget Preparation Guidelines
2. Budget Narrative Template