Request for Proposals
Veteran Suicide Prevention Evaluation (VSPE): Demonstration Project Evaluation Capacity Building Grants

RFP Issue Date: August 4, 2023
RFP Question Submissions Due: August 14, 2023 12:00 p.m. EST
RFP Bidders Call (optional): August 15, 2023 12:00 p.m. EST
Date Response Due: September 14, 2023, 12:00 p.m. EST

SUMMARY:
This grant opportunity is designed to serve community-based organizations working in veteran and military communities that provide upstream suicide prevention programming. Upstream interventions and strategies focus on improving fundamental social and economic structures in order to decrease barriers and improve support that allow people to achieve their full health potential. Upstream approaches to suicide prevention tackle the risk factors that contribute to suicide, such as exposure to trauma, financial stress, or limited access to healthcare. Some examples of upstream suicide prevention approaches that can alleviate these negative factors include promoting and enhancing social connections, strengthening economic support systems, engaging and supporting high-risk and underserved groups, and allocating resources to develop, implement, and evaluate interventions aimed at preventing suicide. This competitive grant program provides funds to support and strengthen the evaluation capacity of veteran serving organizations; improving their ability to conduct a formative or process evaluation of one of their veteran serving programs.

Please note the following requirements:

• Applicant must be an eligible U.S. based, non-profit, tax exempt, veteran serving organization – organization must solely serve veteran and military communities or the program to be evaluated must solely serve veteran and military communities.
• Propose a formative or process evaluation that will be completed with the support of this funding mechanism.
# CDC FOUNDATION

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<th>RFP Release Date</th>
<th>August 4, 2023</th>
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<tbody>
<tr>
<td>Proposal Due Date</td>
<td>September 14, 2023, by 12:00 p.m. EST</td>
</tr>
<tr>
<td>RFP Bidders Call</td>
<td>August 15, 2023 at 12:00 p.m. EST</td>
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<tr>
<td>Bidders call registration:</td>
<td><a href="https://cdcfoundation.zoom.us/meeting/register/tJIvduigrwjHdw6bzA4Uy9Ncx_bVKRdRs5#/registration">https://cdcfoundation.zoom.us/meeting/register/tJIvduigrwjHdw6bzA4Uy9Ncx_bVKRdRs5#/registration</a></td>
</tr>
<tr>
<td>RFP &amp; Questions</td>
<td>RFP questions may be submitted via the registration link for the RFP Bidders Call. Submit questions by <strong>August 14, 2023 at 12:00 p.m. EST</strong>. All responses for questions submitted prior to and during the call will be included in the RFP supplement. Questions not submitted through the registration link can be submitted by email, <a href="mailto:vspevaluation@cdcfoundation.org">vspevaluation@cdcfoundation.org</a></td>
</tr>
<tr>
<td>RFP Contact Information</td>
<td><a href="mailto:vspevaluation@cdcfoundation.org">vspevaluation@cdcfoundation.org</a></td>
</tr>
<tr>
<td>Anticipated Performance Term</td>
<td>October 2023 – June 2024 (9 months)</td>
</tr>
</tbody>
</table>
| Required Eligibility | Applicants **must** meet all of the following eligibility criteria:  
- Be a nonprofit, tax-exempt organization e.g., 501 (c)3 or 501 (c)19.  
- Organization must solely serve veteran and military communities or the program to be evaluated must solely serve veteran and military communities.  
- Veteran and military focused programs implemented in the United States or its territories.  
- Have established relationships with veteran populations.  
- Have ongoing veteran-focused programs and activities that align with upstream suicide prevention efforts.  
- Propose a Formative or Process Evaluation (**See Section 3: Background**). For process evaluations, program of interest should have been established for at least **one year** prior to application. |

**Important Notes:**

*For Returning Grantees*: Previous Veteran Suicide Prevention Evaluation: Demonstration Project (VSPE) recipients are eligible to apply and may be selected for **Component B** of this project, provided they have only participated and received funding for one (1) year or less of the VSPE program. Response to this RFP must include a different formative or process evaluation question than evaluated in previous years. For more information, please view the application criteria below.
* Applicant eligibility will take into consideration the extent of organizational evaluation capacity. Applicants are **not** expected to have extensive evaluation experience however applicants should be familiar and positioned to collect and analyze data that will be used for evaluation purposes.

* If the applicant is a subsidiary or affiliate of another organization, the relationship must be disclosed in the organizational experience and capacity section of the application.

* This will be a competitive grant program, which means not all qualifying and meritorious proposals will be funded.

* All costs incurred in responding to this RFP will be borne by the applicant.

| Anticipated Funding and Payment Structure | CDC Foundation intends to fund up to **seven (7) VSOs** for a nine-month term (October 2023 through June 2024) for awards ranging between **$20,000 and $40,000 per grantee**. The final award amount is contingent upon submission of a detailed and reasonable budget to be approved by the CDC Foundation.  
  
  - CDC Foundation will fund up to three (3) grantees for up to $40,000 per grantee for **Component A**.  
  - CDC Foundation will fund up to four (4) grantees for up to $20,000 per grantee for **Component B**.  
  
  *(See Section 2. Funding Opportunity for more information on Component Structure).* |
| Payment Structure | CDC Foundation will award each subrecipient a fee not to exceed a Maximum Payable Amount (MPA) or ceiling price. The MPA will be based on the submission of a detailed and reasonable budget to be approved by the CDC Foundation and awarded through the resulting contract. CDC Foundation requests offerors incorporate a cost reimbursable payment method in their proposal. CDC Foundation reserves the right to negotiate the fee structure. |
| 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 6 NU38OT000288-05-04 from the Centers for 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)  
  
  *(See Section 2. Funding Opportunity for more information on Component Structure).* |
- 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.

<table>
<thead>
<tr>
<th>Place of Performance</th>
<th>All activities will take place remotely other than the reverse site visit meeting. There may be an occasional opportunity to engage in person.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Performance Monitoring</td>
<td>Performance monitoring will be based on adherence to an approved and agreed upon project workplan. The selected grantees 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 workplan. Furthermore, regular reviews/coordination, will be undertaken, as work progresses.</td>
</tr>
</tbody>
</table>

| Required Documents | 1. Organization information  
A. Organization name  
B. Contact information EIN/ Tax ID number  
C. Unique Entity Identifier number  
D. DUNS number  
E. SAM registration and expiration  
F. Audited Balance Sheet and Income Statement. If the organization is 501 (c), they may submit an IRS 990 Tax form.  
2. Applicant Proposal  
A. Online response to all questions noted below  
B. Appendices:  
   i. OGS Budget Preparation Guidelines Budget Narrative Template  
   ii. Curriculum Vitae (CV) or Resumes  
   iii. Supplemental Materials (Optional) |

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, community-based organizations, and individuals to protect the health, safety and security of America and the world. We believe that people, groups, and organizations have greater positive impact and can accomplish more collectively than individually. The CDC Foundation is committed to galvanizing support for community-based organizations (CBOs) and to strengthening linkages between them and the public health sector through our existing and expanding network of relationships. 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, and supports more than 180 community-based organizations to increase uptake of COVID-19 vaccines in the last year.
2. FUNDING OPPORTUNITY

The CDC Foundation was awarded a federal grant to work on the Veteran Suicide Prevention: Evaluation Demonstration (VSPE) Project in partnership with the 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 five years, the CDC Foundation has awarded and administered 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). This funding has supported VSO grantees in the development and implementation of an evaluation plan and built capacity for ongoing program evaluation post-completion of the participation in the program.

Through this award with the assistance of the CDC Foundation, grantees will build capacity to (1) plan and implement formative or process evaluations of their suicide prevention programming; (2) understand the contextual and cultural factors impacting implementation of the program for the population of focus; (3) engage in opportunities to share evaluation findings, including lessons learned, and participate in a community of practice; and (4) contribute to the development of veteran specific evaluation resources by participating in piloting of VSPE Program Evaluation Toolkit.

This RFP will award two Components – A and B. CDC Foundation will assign each grantee to a component as part of the proposal review process. Applicant eligibility will take into consideration the extent of organizational evaluation capacity. Applicants are not expected to have extensive evaluation experience however applicants should be familiar and positioned to collect and analyze data that will be used for evaluation purposes.

Previous Veteran Suicide Prevention Evaluation: Demonstration Project (VSPE) recipients are eligible to apply for Component B of this project, provided they have only participated and received funding for one (1) year or less of the VSPE program. Responses to this RFP must include a different formative or process evaluation question than evaluated in previous years. For more information, please view the application criteria below.

Up to three (3) applicants will be funded for Component A (up to $40,000 per award)

Component A recipients will build evaluation capacity through the following required activities:

- Attendance at October 5 Kick-Off Call
- Participation in individual monthly technical assistance calls
- Development and submission of approximately ten (10) deliverables; with multiple iterations of each deliverable possible
- Participation in five (5) technical assistance webinars
- Participation in three (3) community of practice meetings
- Attendance and participation at the Reverse Site Visit Meeting, including summary project presentation
- Participate in piloting of the VSPE Program Evaluation Toolkit.
Up to four (4) applicants will be funded for Component B (up to $20,000 per award)
Component B recipients will build evaluation capacity through the following required activities:

- Attendance at October 5 Kick-Off Call
- Development and submission of approximately four (4) deliverables
- Participation in five (5) technical assistance webinars
- Participation in three (3) community of practice meetings
- Participate in piloting of the VSPE Program Evaluation Toolkit
- Attendance and participation at the Reverse Site Visit Meeting, including summary project presentation
- Optional participation in monthly group office hours.

3. BACKGROUND
Data from the Department of Veteran Affairs from 2019 show the veteran suicide rate was 1.5 times higher than non-veterans, which equates to an average of 17 veteran suicides per day.\(^1\)
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.\(^2\)
Suicide is preventable; while it is rarely caused by any single factor, this also means there are multiple pathways for prevention. 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.\(^3\)

Traditionally, suicide prevention has focused on providing services to individuals at the point of crisis. While this approach is essential to reducing suicide, CDC also focuses on upstream approaches that reduce risk factors and promote protective factors to prevent the development of suicide risk and potential crisis.\(^4\)

Upstream suicide prevention interventions and strategies focus on improving fundamental social and economic structures to decrease barriers and improve supports that allow people to achieve their full health potential. Upstream approaches to suicide prevention tackle the risk factors that contribute to suicide, such as exposure to trauma, financial stress, or limited access to healthcare. Some examples of upstream suicide prevention approaches that can alleviate these negative factors include promoting and enhancing social connections, strengthening economic support systems, engaging and supporting high-risk and underserved groups, and allocating resources to develop, implement, and evaluate interventions aimed at preventing suicide.

A comprehensive approach to suicide prevention offers benefits to the individual and community, including strengthening economic supports, creating protective environments, promoting connectedness, teaching problem-solving skills, strengthening access and delivery of suicide care, identifying and supporting people at risk, and lessening harms and preventing future risk of suicide. Programs that enhance protective factors for suicide while reducing risk of

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\(^1\) Source: 2021 US Department of Veterans Affairs National Veteran Suicide Prevention Annual Report
\(^3\) Source: https://www.cdc.gov/vitalsigns/suicide/
\(^4\) Suicide Prevention Resource for Action, Centers for Disease Control and Prevention:

Contact information: VSPEvaluation@CDCFoundation.org
suicide are also considered upstream suicide prevention approaches. Those that offer resources, support, and connection to the community, which decrease barriers and maximize health and wellbeing, prior to the point of crisis are considered upstream approaches.

Two strategies that emphasize upstream prevention and mitigation of risk factors are the Community Integration Model and the Connectedness Model.

1. **Community Integration Model (Figure 1):** This model, which relies on a collective impact framework, brings together veteran-serving organizations in one community to provide veterans with coordinated, streamlined access to a multitude of services and supports, including but not limited to employment, health, housing, benefits, recreation, education and/or social connection.

![Figure 1. Community Integration Model](image)

2. **Connectedness Model (Figure 2):** This model focuses on veteran to veteran, veteran to civilian, and veteran to community connectedness – through a range of activities from physical activity to community service to disaster response – and works to promote a veteran’s sense of belonging and sense of purpose.

![Figure 2. Connectedness Model](image)

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.
• Evaluation is defined as a systematic method for collecting, analyzing, and using data to examine the effectiveness and efficiency of programs and, as importantly, to contribute to continuous program improvement.5
• A formative evaluation can be used to identify program and community needs or to ensure that a program or activity is feasible, appropriate, and acceptable before being fully implemented.
• A process evaluation determines whether program activities have been implemented as intended. 6

Formative and process evaluations are foundational to ultimately determining if programs are effectively reducing suicide risk in their intended populations and contributing to the evidence-based strategies in the field. Completing formative and process evaluations ensures a data-driven approach to program implementation and improvement. Before one can appropriately measure the effectiveness of a program (outcome evaluation), it is important to ensure the program is meeting the existing need (formative evaluation) and is being implemented as intended with the appropriate audience (process evaluation).

4. SCOPE OF WORK
The goal of the project is to build VSO capacity to use formative and process evaluation and to sustain evaluation capacity of VSOs after the program period.

The focus of this project is on program evaluation, not on research. The capacity building approach will focus on the technical aspects of evaluation – planning, methodology, implementation of evaluation plans and utilization of evaluation findings. Ultimately, the goal is to equip VSOs with sustainable capacity to continue evaluating their programs, improving their approach to serving veterans, and contribute to the evidence base on the effectiveness of upstream veteran suicide prevention programs.

5 Program Evaluation, Centers for Disease Control and Prevention: https://www.cdc.gov/evaluation/  
6 Types of Evaluation, Centers for Disease Control and Prevention: https://www.cdc.gov/std/program/pupestd/types%20of%20evaluation.pdf
All grantees will conduct a comprehensive, formative or process evaluation related to a current upstream veteran-serving program. Please note that grantees may be coached to refine their proposed project evaluation scope to ensure feasibility of completion during the period of performance.

<table>
<thead>
<tr>
<th>Grantee project outputs will include but are not limited to: *</th>
<th>Component A</th>
<th>Component B</th>
</tr>
</thead>
</table>
| Meetings                                                      | • Monthly Individualized Technical Assistance  
• Webinars  
• Community of Practice | • Introductory & Close-out Calls  
• Group Office Hours *(optional)*  
• Webinars  
• Community of Practice |
| Deliverables                                                 | • Draft & Final Program Description  
• Draft & Final Logic Model  
• Draft & Final Evaluation Questions  
• Draft & Final Data Collection Plan  
• Draft & Final Data Analysis Plan  
• Draft & Final Evaluation Plan  
• Project Summary & Lessons Learned | • Draft Program Description  
• Draft Logic Model  
• Draft Evaluation Questions  
• Project Summary & Lessons Learned |
| Events/ Other                                                | • Participate in pilot of VSPE Program Evaluation Toolkit  
• One (1) Reverse Site Visit Meeting | |

* Please refer to Activities Timeline below for more information.

5. INSTRUCTIONS FOR APPLICANTS
Applicants should follow the instructions set forth below in the submission of their proposal to the CDC Foundation. Applications received by CDC Foundation which fail to adhere to the instructions provided in this RFP will be deemed unresponsive.

5.1 Submission of Proposals
Application materials should be Submitted by 12:00 p.m. EST on Thursday, September 14, 2023.

Proposals must be submitted electronically at: https://app.smartsheet.com/b/form/cb0567946d92419884618ad06ed08ee8

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. Applicants are encouraged to test connectivity and access early to ensure that submissions are received in advance of the deadline.
Proposal Requirements

Part One – Proposal Response:

I. Applicant History and Experience:

- **What is the history and mission of your organization?** Please provide context to the size of your organization, scope of services and community impact. Organization mission does not need to be related to suicide prevention, but it should be clear how your organization and the program you are intending to evaluate addresses this public health need.

- **What is the relationship between your organization and the veteran/military community?** Please provide context to the extent of experience, programming and developed relationships in serving the veteran and military community.

II. Program Background and Upstream Approach to Suicide Prevention:

- **What is the program you propose to evaluate?** Please describe the program you are proposing to evaluate including the stage of implementation (i.e., planning phase or implementation phase).

- **How does your program support upstream suicide prevention?** Describe how the program supports upstream suicide prevention efforts.

III. Applicant Evaluation Approach:

- **What is your proposed evaluation project?** Please provide a brief description of your proposed formative or process evaluation question(s) for this project.

- **What do you hope to learn from this evaluation and from participating in the VSPE program?** Describe what you hope to learn from a program evaluation and how that learning will impact or add to your program.

- **What is your organization’s history/ experience with data collection and evaluation, if any?** Please summarize your organization’s capacity and any experience with collecting different types of data, identifying data sources and conducting data analysis. Applicants are not expected to have extensive evaluation experience however applicants should be familiar and positioned to collect and analyze data that will be used for evaluation purposes. If applicable, briefly describe previous evaluation experience highlighting examples of any previous work.

- **How might evaluation capacity be sustained post participation in the project to improve program implementation?** Please describe how this project might contribute to the efficiency, sustainability and resiliency of this program and your organization, including how you plan to continue to build capacity for evaluation within your organization post completion of this project.

IV. Organizational Capacity

- **What staff do you propose to work on this project?** Description of the role and responsibilities of the specific personnel to be assigned to this project, including any consultants/contractors who may be used.
  
  - The staffing plan should identify a lead evaluator, program lead and decision maker for the project. Staff identified may fill more than one role. It is not required that all staff roles be reimbursed by this project.
Grantees selected for Component A will be recommended to have the minimum staffing requirement of an evaluation lead comprising at least 0.5 FTE.

- It is expected that all staff working on this project will be onboarded prior to the start of the performance period. Please include a hiring plan or job descriptions for roles you intend to fill to support this project.
- If any consultants or contractors are used to meet the staffing requirement, please detail how the knowledge and skill obtained through the contractor/consultant will be transferred internally after the completion of this project. Due to the shortened time frame any consultants or contractors should be onboarded at the start of the award.

- **Staff Bios** - Highlight experience related to requirements of this solicitation. Only staff listed in the budget should be described; include staff, like decision makers, that will work on the project but will be reimbursed from other sources. It is not required for staff to have evaluation experience; however, it is expected to have some knowledge of data collection, analysis, and program evaluation prior to participating in the program.

**Part Two - Appendices:**

**Appendix A: Detailed Budget and Budget Justification (Required).** 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.

**Appendix B: Curriculum Vitae (CV) or Resume (Required).** Please submit one resume or CV of no more than two pages for each of staff that will support the evaluation project including key members (evaluation lead, program lead and decision maker).

**Appendix C: Supplemental Materials (Optional).** Supplemental materials can include but are not limited to related logic model or theory of change, evaluation-based work products for related programs and existing program summaries.

**Budget Guidelines:** Budgets must meet all the criteria listed below. Please indicate "no costs associated" for any line items with no costs associated with this project. Budgets not submitted in the template provided will be deemed unresponsive.

1. **All new applicants should submit a total project budget not to exceed $40,000.** Please note that CDC Foundation may review budgets and final awards may be less than the requested amount.

2. **All returning grantees are only eligible for Component B and should submit a total project budget not to exceed $20,000.** Please note that CDC Foundation may review budgets and final awards may be less than the requested amount.

3. **A detailed budget should be submitted with a supporting narrative for all anticipated costs.** Any costs in the proposed budgets which will be covered by other funding sources must be noted in the budget narrative.
4. All budgets must include at minimum salaries and fringe benefits for all staff included in the project.
   a. 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 the budget period duration is adjusted to 9 months** for salary and fringe calculations.
   b. If you are submitting a $40,000 budget as an applicant for Component A, travel should be included for one (1) in-person reverse site visit meeting in the budget. Up to two people, ideally the evaluation lead and a representative from the VSO leadership, would attend the reverse site visit meeting 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.

5. 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. Costs should be broken down by task and supported by the appropriate narrative highlighting the alignment to the project.

6. The CDC Foundation acknowledges you may not have complete information for any contract at the budget development stage. **NOTE:** if you are using a subcontractor, 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.

7. Grant funds may only be expended against any contract in your budget within the final approved grant period. If 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.

8. 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 the CDC Foundation policies. Therefore, during budget negotiation, you may be asked to revise the budget and budget narrative prior to final funding approval. This includes if you submitted a budget for **Component A** and are awarded under **Component B**.

5.2 Communications During the RFP Period

RFP questions may be submitted via the registration link for the RFP Bidders Call. Submit questions by **August 14, 2023 at 12:00 p.m. EST**. All questions for responses submitted prior to and during the call will be included in the RFP supplement.

The Bidders call will be held on **August 15, 2023 at 12:00 p.m. EST**. It is optional to attend. The RFP supplement will be posted on the CDC Foundation website within 48 hours of the Bidders call.
Bidders call registration (optional):
https://cdcfoundation.zoom.us/meeting/register/tJIvduigrwjHdw6bzA4Uy9_Ncx_bVKRdrs5#/registration

Questions not submitted through the registration link can be submitted by email, vspevaluation@cdcfoundation.org
### 5.3 Anticipated Timeline*

<table>
<thead>
<tr>
<th>Month</th>
<th>Component A &amp; Component B</th>
<th>Component A Only</th>
<th>Component B Only</th>
</tr>
</thead>
</table>
| Oct   | • Kick-off Webinar - October 5, 2023, 2:30-4:30 p.m.  
      • TA Webinar #1 - October 19, 2023  
      • Draft Program Description – DUE October 30, 2023 | • Technical Assistance Call - October 6 -22, 2023 | • Introductory Call, October 6-22, 2023 |
| Nov   | • TA Webinar #2, November 2, 2023  
      • Draft Logic Model - DUE November 21, 2023 | • Monthly Individual TA Call  
      • Final Program Description – DUE November 21, 2023 | • Group Office Hours (optional) |
| Dec   | • TA Webinar #3, December 5, 2023  
      • Draft Evaluation Question - DUE December 21, 2023 | • Monthly Individual TA Call  
      • Final Logic Model - DUE December 21, 2023 | • Group Office Hours |
| Jan   | • Community of Practice #1 | • Monthly Individual TA Call  
      • Final Evaluation Questions | • Group Office Hours |
| Feb   | • TA Webinar #4 | • Monthly Individual TA Call  
      • Draft & Final Data Collection Plan and Data Analysis Plan | • Group Office Hours |
| Mar   | • TA Webinar #5 | • Monthly Individual TA Call  
      • Draft Evaluation Plan & Final Evaluation Plan | • Group Office Hours |
| Apr   | • Community of Practice #2 | • Monthly Individual TA Call | • Group Office Hours |
| May   | | • Monthly Individual TA Call | • Closing-out Call |
| Jun   | • Reverse Site Visit & Community of Practice #3  
      • Project Summary & Lessons Learned | | |

*Please note that the timeline is subject to change.*
6. SELECTION PROCESS AND REVIEW CRITERIA
The CDC Foundation will award grants to applicants based on the following multi-stage review process outlined below.

CDC Foundation will evaluate all applicants for completeness and minimum requirements. Applications with omissions of any required documentation will be subject to disqualification. To be considered an eligible application for this RFP:

- Application must be submitted on time, on or before September 14, 2023, by 12:00 p.m. EST.
- All required questions must be answered.
- The proposed evaluation project must be a formative or process evaluation.
- A budget must be submitted in the CDC Foundation template provided.
- All required appendices must be uploaded with the application.

Applicants will be reviewed based on the criteria below.
<table>
<thead>
<tr>
<th>Applicant Criteria</th>
<th>Total Possible Score</th>
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<tbody>
<tr>
<td><strong>Domain</strong></td>
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<tr>
<td><strong>Applicant History</strong> - Review will include an assessment of organizational history and sustained impact of evaluation from participating in this project.</td>
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<tr>
<td>• Proven organization history working specifically with veterans and military communities, implementing an upstream suicide prevention programming.</td>
<td>6</td>
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<tr>
<td>• Assessment of need and demonstration of how evaluation efforts through this program will impact your programming and organization.</td>
<td>6</td>
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<tr>
<td><strong>Program Background and Upstream Approach to Suicide Prevention</strong> - Review will include an assessment of organization’s upstream suicide prevention programming.</td>
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<tr>
<td>• Program has been implemented for at least one year. If proposing a formative evaluation, theory of concept and demonstrated community need should be clear.</td>
<td>6</td>
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<tr>
<td>• Clear connection and understanding of upstream suicide prevention efforts</td>
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<tr>
<td><strong>Evaluation Approach</strong> - Review will include an assessment of overall approach and strategy described/outlined in the proposal that demonstrates a clear sense of what 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>• Detailed explanation of the proposed evaluation project and how it will enhance your efforts for veteran suicide prevention.</td>
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<td>• Clear inclusion of at least one evaluation question</td>
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<tr>
<td>• Clear proposed strategy, and implementation of the evaluation project</td>
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<tr>
<td>• Experience with data collection, instrument development, and data analysis. Bios (in narrative) and Resumes/CVs clearly show professional experience and/or education that reflects knowledge and ability in content expertise.</td>
<td>6</td>
</tr>
<tr>
<td><strong>Organization Capacity</strong> - Review will include an assessment of overall organizational capacity and approach for sustaining evaluation efforts.</td>
<td></td>
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<tr>
<td>• Plan for how evaluation will contribute to the efficiency, sustainability, and resiliency of your organization.</td>
<td>6</td>
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<tr>
<td>• Details of how capacity remains within the organization post project period and if contractors are utilized as part of the staffing plan.</td>
<td>6</td>
</tr>
<tr>
<td>• The appropriateness of the timeline for project implementation, inclusive of preparation and delivery.</td>
<td>6</td>
</tr>
<tr>
<td><strong>Budget</strong> - A budget and justification for all anticipated costs for a nine-month term.</td>
<td></td>
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<tr>
<td>• Budget clearly allocated time and effort for all staff required of this project.</td>
<td>6</td>
</tr>
<tr>
<td>• Budget is reasonable and detailed.</td>
<td>6</td>
</tr>
<tr>
<td>• Budget justification explains the rationale for the proposed budget.</td>
<td>6</td>
</tr>
<tr>
<td>• Budget includes required travel for reverse site visit to Atlanta, GA (two-days, two staff).</td>
<td>6</td>
</tr>
<tr>
<td><strong>Total Score</strong></td>
<td>90</td>
</tr>
</tbody>
</table>
If necessary, applicant interviews will be held on September 19-21, 2023.

If necessary, interviews may be held with applicants prior to selection. Only the proposal contacts and designated evaluation lead listed as part of 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.

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.