Request for Proposals

Partnering for Vaccine Equity: Supporting Community-Based Organizations to Increase Vaccination Coverage Across Different Racial and Ethnic Adult Populations Currently Experiencing Disparities

DATE ISSUED: TUESDAY, MAY 31, 2022

DATE REVISED*: JUNE 10, 2022

SUBMISSION DUE DATE: WEDNESDAY, JUNE 22, 2022, AT 12:00 PM ET (NOON)

APPLICATION LINK: REQUEST FOR PROPOSALS

*Revised Date: JUNE 10, 2022. RFP reflects an update to Section 5.1 Eligibility, 6.1 Communication during the RFP Period, and Section 6.3 Anticipated Timeline. All updated areas are highlighted yellow for ease of reference.

CDC FOUNDATION CONTACT
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Program Officer
P4VEquestions@cdcfoundation.org
SUMMARY OF REQUEST

The CDC Foundation was awarded a federal grant to work in partnership with CDC’s National Center for Immunization and Respiratory Diseases’ (NCIRD) Immunization Services Division (ISD) Partnering for Vaccine Equity program. The goal of this Request for Proposals (RFP) is to support community-based organizations (CBOs) working to increase COVID-19 and influenza vaccine equity among adults (18 years of age or older) belonging to racial and/or ethnic minority groups and those living with disabilities, chronic health conditions, living in rural communities, and more. CBOs will implement evidence-based interventions to address vaccine misinformation and increase vaccine coverage among Black, Indigenous, People of Color (BIPOC) adults within their communities. CBOs will also prioritize establishing partnerships with vaccination providers (including state and local health departments, pharmacies, medical clinics, etc.) and local organizations (non-profits, workforce development, advocacy/outreach, local businesses, grocers, barbers/salons, food banks, housing, etc.) to expand vaccine opportunities available to their local community. By prioritizing vaccine equity and collaborative partnerships, the CDC Foundation aims to increase the capacity of CBOs to implement culturally competent health interventions, engage in community dialogue about COVID-19 and influenza ensuring community members make informed decisions about their health, increase COVID-19 and influenza vaccine confidence and acceptance among BIPOC populations, and expand the proportion of people who are vaccinated against COVID-19 and influenza.

BACKGROUND AND NEED

In February 2021, the U.S. Centers for Disease Control and Prevention (CDC) launched a grant program, Reducing Racial and Ethnic Disparities in Adult Immunization, providing funding and technical assistance to national, state, and local community-based organizations. Made available by CDC’s National Center for Immunization and Respiratory Diseases’ (NCIRD) Immunization Services Division (ISD), the program invests in partnerships to support tailored COVID-19 and influenza vaccine awareness, access, and confidence activities targeting adult BIPOC populations and communities in the U.S. The CDC Foundation was awarded a federal grant for a second year in April 2022 for the Partnering for Vaccine Equity (P4VE) program.

As efforts to vaccinate the U.S. population against COVID-19 continue, public health officials and community leaders are actively seeking effective approaches to address racial and ethnic disparities in the uptake of the COVID-19 vaccine. To date, BIPOC communities have borne the brunt of the COVID-19 pandemic in the U.S. and have received a smaller share of the available vaccine. Though vaccination gaps by race have narrowed, as of April 2022, nation-wide data analyzed by the Kaiser Family Foundation and CDC showed that Black populations received a smaller share of vaccinations compared to their makeup of the U.S. population and have lower rates of COVID-19 vaccinations compared to White individuals in 38 states.1 Ensuring that BIPOC communities have access to accurate vaccine information

and immunization services will help mitigate the disproportionate impact of the virus on these communities.

In addition to the COVID-19 vaccine, the influenza vaccine is another important way for vulnerable populations to protect themselves and their communities. The annual burden of influenza in the United States is significant, leading to 140,000-810,000 hospitalizations and 12,000-61,000 deaths each year since 2010, according to the U.S. Centers for Disease Control (CDC). In accordance with the CDC’s latest recommendations, influenza vaccination is recommended for all persons aged 6 months and older to prevent influenza infection and reduce the likelihood of severe complications and death. CDC analysis of flu hospitalization rates by race and ethnicity show that Black, American Indian or Alaska Native, and Hispanic or Latino persons have the top three highest rates for flu hospitalizations and lower flu vaccination rates. The 2021–22 influenza season is not over and continues to circulate with flu activity increasing in parts of the U.S. today, which is widely considered unusual for the virus.

Reaching vulnerable populations with vaccine information and services is made more challenging by rampant vaccine misinformation and longstanding disparities by race/ethnicity and access to health care. Access to health care disparity refers to differences between groups in health insurance coverage, access to and use of care, and quality of care. Such disparity creates mistrust in the overall medical system. Throughout the COVID-19 pandemic, disinformation campaigns and false narratives about the COVID-19 virus and vaccines spread quickly on social media. Lack of information from trusted providers and leaders can lead people to hesitate or decline to get a vaccine. Finding creative opportunities to engage community members in honest dialogue with trusted leaders and healthcare providers is critical to addressing these challenges.

The CDC Foundation (CDCF) believes that community-based organizations (CBOs) are essential partners in the public health system and integral to ensuring meaningful impact on health outcomes. CBOs are a trusted resource within communities to improve economic, social, physical, and emotional wellbeing. CBOs, especially those led by people of color with lived experience and an understanding of the communities in which they work, are vital to providing more equitable access to vaccine information and services. Supporting these organizations also contributes to the development of local leaders and leaders of color. CBOs that focus on vital community conditions such as health care, safe and affordable housing, economic development, quality education, safe and healthy neighborhoods, etc. are critical to advocating for the essential building blocks individuals and communities need to thrive. In Year 1 of the Partnering

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for Vaccine Equity program, the CDC Foundation worked with 100 CBOs, creating an aligned, integrated portfolio of CBO work that is built upon the Foundation’s overall health equity vision.

Despite this progress, the ongoing disparities in COVID-19 and influenza vaccination rates highlight the importance of continued efforts to increase vaccination coverage to address gaps in vaccination both geographically and racial/ethnic groups (KFF, 2022). Moreover, it will be important to prevent disparities in the uptake of COVID-19 booster doses and coadministration of COVID-19 and influenza vaccines for the 2022-23 flu season.

SCOPE OF WORK

The CDC Foundation seeks to support CBO efforts to increase access and acceptance of COVID-19 and influenza vaccines among adults (18 years of age or older) in racial and/or ethnic BIPOC populations experiencing disparities in the U.S. By building the capacity and resiliency of CBOs through partnerships and resource sharing, this project will expand the implementation of evidence-based interventions to address vaccine misinformation, expand vaccine opportunities, and increase vaccine coverage. See CDC’s Vaccinate with Confidence framework that details strategies to strengthen vaccine confidence and prevent outbreaks of vaccine preventable diseases in the United States. The framework advances three key priorities:

- **Protect communities** by supporting states, cities, and counties to find under-vaccinated communities and take steps to protect them.
- **Empower families** by expanding resources for health care professionals to support effective vaccine conversations with parents and community members.
- **Stop myths** by working with local partners and trusted messengers to improve confidence in vaccines among at-risk groups.

4.1 Program Objectives – There are five (5) eligible program objectives with proposed project activities outlined below. Applicants are encouraged to submit a proposal that includes all five (5) program objectives. Applicants may subcontract activities, as needed. Your organization may choose not to incorporate all 5 Objectives into your proposal.

**Objective 1: Increased range of trusted community voices supporting vaccine education and delivery.**

CBOs will plan to equip, train, and engage trusted community voices supporting vaccine education and delivery, supported by the following proposed project activities:

- Recruit, train, and empower trusted community messengers to deliver vaccine educational content, material, etc. to targeted BIPOC communities.
- Influential messengers include community-level spokespersons such as:
  - local celebrities, political figures, social media influencers, or other public figures

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[https://www.cdc.gov/vaccines/partners/vaccinate-with-confidence.html](https://www.cdc.gov/vaccines/partners/vaccinate-with-confidence.html)
• community health workers, health volunteers, and health ambassadors
• healthcare providers or healthcare professionals
• print media or radio/television personnel
• faith-based, spiritual, or cultural leaders, including staff at cultural centers
• representatives of regional community organizations,
• staff at community service centers such as food banks, youth centers, fitness & wellness centers, barbers/salons, or local shops and eateries.

• Develop a comprehensive resource guide to provide to influential messengers including how to respond and engage community members in a culturally competent way, actively listen to concerns,
• Community navigation protocol development to provide resources and linkages to further care such as to food banks, housing, childcare, interpretation services, or other necessary support systems.
• Explore other innovative and far-reaching approaches (e.g., social networking, webinars, outreach events) to expand community dialogue about COVID-19 and influenza vaccines, especially as it relates to dispelling vaccine myths and misinformation.

Objective 2: Increased availability of community or population-specific messages.
CBOs will develop and disseminate culturally competent and population specific communications products, supported by the following proposed project activities:
• Create and/or develop communication products to promote COVID-19 and influenza vaccines, dispel myths and misinformation, and highlight upcoming vaccination opportunities.
Communication products include the following:
  o Commercials or spots on television and radio
  o Outdoor advertisements (cardboard cutouts, billboards, bus wraps, lawn signs)
  o Phone call or mobile texting scripts
  o Print media (flyers, pamphlets, mail inserts)
  o Social media posts on Facebook, Instagram, Twitter, TikTok, LinkedIn, or other social media platforms
  o Email blasts, online or print articles, blogs, or website content
• Develop, adapt, and/or implement campaign strategies to mitigate and address COVID-19 and influenza vaccine misinformation and disinformation. Campaigns include the following:
  o Social media-based campaigns (through various online platforms such as Facebook, Instagram, LinkedIn, Twitter, TikTok)
  o Outdoor advertising campaign (two or more outdoor advertising products connected on a specific theme)
  o Broadcasting outlet-based campaign (complementary messaging on radio and television)
  o Any other type of campaign than connects two or more communication products
• Develop and tailor education and outreach materials and/or leverage materials from the program and other recipients and CBOs involved in the program.
• Plan, hold, and/or support online and in-person events to promote COVID-19 and influenza vaccinations, including vaccine educational/informational sessions or webinars, discussion
sessions or townhalls, community skill-building workshops (e.g., increase digital literacy, identify misinformation, etc.), or other types of promotional/outreach events.

- Host door-to-door outreach community canvassing to spread awareness about COVID-19 and influenza vaccines and connect community members to vaccination opportunities.
- Develop feedback mechanisms (surveys, assessments, focus groups, etc.) to ensure communication products and messages are meeting the needs of target community.

**Objective 3: Increased number and diversity of vaccination opportunities in communities experiencing disparities.**

CBOs will provide and/or link community members to vaccination opportunities, supported by the following proposed project activities:

- Host or support events to promote vaccinations and connect to upcoming vaccine opportunities.
- Develop new campaigns to promote vaccinations and connect to upcoming vaccine opportunities.
- Establish temporary or mobile vaccination sites or clinics in areas with like-minded partners.
- Identify and train trusted community-level spokespersons (e.g., faith leaders, teachers, community health workers, radio DJs, local business owners, barbers) to communicate the importance of staying up to date on COVID-19 vaccines/boosters and seasonal influenza vaccine through local media outlets, social media, faith-based venues, community events, and other community-based, culturally appropriate venues.
- Develop, adapt, and implement culturally competent social media strategies to engage target population and promote vaccination opportunities to increase vaccine uptake.
- Develop education and outreach materials and/or leverage materials from other partnering CBOs involved in the program to promote and connect target community to vaccine opportunities
- Build linkages to vaccine opportunities through social networking, texting groups, telehealth/telemedicine, in-person and online community events, and campaigns.
- Produce COVID-19 and influenza messaging on multiple online platforms (e.g., Facebook, Instagram, TikTok).

**Objective 4: Increased number and range of partnerships or collaborative activities between providers and community organizations.**

CBOs will expand collaborative partnerships in support of promoting vaccine information and vaccine opportunities, supported by the following proposed project activities:

- Collaborate with state and local health departments to assist in epidemiological data sharing, health promotion and outreach efforts.
- Connect with other community organizations, recreation programs, food banks/pantries, schools and colleges/universities, grocery stores, salons/barber shops, employers, and other key community establishments to set up information sharing and educational sessions, promotion, etc. regarding COVID-19 and influenza vaccine education or opportunities.
- Build partnerships with other entities for decentralized distribution points of vaccine educational information or upcoming vaccine opportunities.
Objective 5: Increased number and range of healthcare providers recommending influenza and COVID-19 vaccines to patients.

CBOs will work with healthcare providers to increase COVID-19 and influenza vaccine recommendations in a culturally competent way, supported by the following proposed project activities:

- Work with healthcare providers to expand the types of health professionals (e.g., community health workers, patient navigators, patient advocates) and administrative staff (e.g., front desk workers) engaged in promoting COVID-19 and influenza vaccination and increasing referrals of individuals to vaccination sites.
- Provide technology literacy trainings to support increased understanding of virtual technologies commonly employed to schedule vaccination appointments (e.g., how-to guides and events on using Zoom and other virtual meeting technologies).
- Collaborate with state and local health departments – immunization programs in particular – on mobile COVID-19 and influenza vaccination clinics, outreach campaigns, and other vaccination activities in communities experiencing disparities.
- Develop, create, and host educational campaigns for healthcare providers/professionals in building rapport and discussing/referring COVID-19 and influenza vaccines to target community/priority population in a culturally competent way.

PROJECT PROCESS MEASURES, OUTPUTS, AND OUTCOMES

Expected project outcomes include strengthening authentic community dialogue through CBO engagement activities that address vaccine misinformation and support individuals in openly weighing available options, risks, and benefits of getting vaccinated at both a personal and a community level, along with how their lived experiences factor into these decisions. The VRH will work towards strengthening these activities by increasing access to resources, toolkits, strategies, and information. CBOs will have increased capabilities and access to accurate, culturally relevant communication materials to better address vaccine hesitancy and health inequities among BIPOC communities.

The following is a list of eligible services, events, and/or products that the CBO Applicant may produce/deliver over the performance period.

<table>
<thead>
<tr>
<th>CBO Process Measures</th>
</tr>
</thead>
<tbody>
<tr>
<td>Participation in a Needs Assessment Survey administered by CDC Foundation or another national P4VE partner</td>
</tr>
<tr>
<td># of and type of influential messengers trained to support vaccine education</td>
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<tr>
<td># of and type of communication products developed to promote vaccinations</td>
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<tr>
<td># of and type of events held or supported to promote vaccinations</td>
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<tr>
<td># of people reached through social media platforms impressions/clicks and shares/reposts.</td>
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<tr>
<td># of people reached through outdoor or radio/broadcasting products.</td>
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<tr>
<td># of people who attend online and in-person events, especially those from the target community/priority population.</td>
</tr>
<tr>
<td>Various languages that products or events are translated or otherwise available in</td>
</tr>
<tr>
<td># of partnerships established with local organizations, coalitions, and/or community projects to promote vaccines</td>
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<tr>
<td># of new partnerships established with vaccine administrators (e.g., provider groups, health clinics, state and local health departments)</td>
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</tbody>
</table>
• # of temporary or mobile vaccination sites established
• # of adults who received a vaccine at any new or existing temporary/mobile vaccination sites, especially those from target community or priority population
• Detail common factors that contribute to disparities in vaccine uptake (barriers to vaccine confidence)
• Detail solutions or lessons learned that reduce barriers to vaccine confidence, access, or uptake
• Detail contributions to CBO’s project activities from collaborative partnerships

CBO Program Outputs
• 8-month project plan and timeline
• Development and dissemination of relevant communication products, tools, and resources for target community
• Participation in webinars, events, and other learning opportunities to build CBO capacity to meet project goals and outcomes
• Establishment of partnerships/collaborations with state and local health departments.
• Development of new collaborative partnerships with other vaccination providers (e.g., provider groups, health clinics, pharmacies, etc.)
• Development of partnerships with local organizations, coalitions, and/or community projects to promote vaccines (e.g., food banks, housing initiatives, local eateries/restaurants/grocers, local businesses, group meetings, etc.)
• Development of protocols or resource guides to train/equip influential messengers to engage community members
• Development of MOU/MOAs (formal or informal) agreements with partners to promote vaccines and/or administer vaccines
• Development community feedback mechanisms (surveys, assessments, focus groups, etc.) to gather ongoing feedback on project activities and insight for continuous quality improvement and implementation

CBO Project Outcomes
This program’s short-term/mid-term outcomes are to:
• Increase the number of CBOs engaged in creating community dialogue around COVID-19 and influenza vaccine decision-making.
• Increase the range of trusted community voices supporting vaccine education and delivery.
• Increase digital literacy among BIPOC communities experiencing immunization disparities.
• Increase the availability of BIPOC community or target population-specific messages.
• Increase capacity among CBOs to develop and implement culturally competent health messages and activities to increase vaccine acceptance among BIPOC communities.

The program’s long-term outcomes are to:
• Increase knowledge, engagement, vaccine confidence and acceptance rates in target BIPOC communities.
• Increase number of individuals visiting and downloading materials from the Vaccine Resource Hub.
• Increase the proportion of persons who are vaccinated annually against COVID and seasonal influenza

REQUIREMENTS AND ELIGIBILITY

5.1 Eligibility
Eligible applicants are CBOs inclusive of faith-based organizations, community health clinics/Federally Qualified Health Centers (FQHCs), immigrant/migrant support or advocacy organizations, community organizing/mobilization organizations, community coalitions/networking/partnership organizations, and social service organizations. Eligible applicants are also CBOs that are currently
• Serving communities (county, city, or zip code level) in U.S. states/territories where COVID-19 vaccination coverage for adults (18 years of age or older) is less than 69.9%. For the latest data, please visit the CDC’s COVID-19 Vaccinations data tracker. Use the “Fully Vaccinated” distinction in your search.
• Working to increase **health equity**, especially regarding COVID-19 and influenza vaccine confidence and uptake among adults, belonging to racial and/or ethnic (BIPOC) minority groups and those living with disabilities, chronic health conditions, living in rural communities, and others.

Priority consideration will be given to eligible CBOs that are minority-led⁸.

**Preferred Experience**

• Experience in providing evidence-based, tailored strategies addressing the health needs of priority populations. Specific expertise working with communities of long-standing systemic health and social inequities.

• Previous experience developing content materials and using innovative strategies, methods, influencers, messengers, and tools in health communications about health equity, especially COVID-19 and influenza vaccines.

• CBOs with experience working to improve economic, social, physical, and emotional wellbeing of BIPOC communities.

• Capacity to accomplish proposed activities on time at reasonable and appropriate cost.

**Organizations are ineligible for this CDC Foundation funding opportunity if they are:**

• State and local health departments.

• CBOs currently funded within the P4VE Partner Network. See the full list of 542 organizations through the [P4VE Partner Network](#).

**5.2 Funds Available**

CDC Foundation intends to make awards to up to **20 Community-Based Organizations** to implement the five (5) program objectives described above. The amount of funding requested should be directly related to the number of program objectives included and the level of effort and cost of provided services. The total amount available for each CBO is between **$75,000.00 - $100,000.00 USD** and the final award amount is contingent upon submission of a detailed and reasonable budget proposal and workplan to be approved by the CDC Foundation.

**5.3 Funding Source**

The resulting award will be supported, entirely or in part, by Federal funding through a cooperative agreement between the CDC Foundation and the Centers for Disease Control and Prevention. The award resulting from this solicitation is expected to meet the criteria of “Subrecipient” as defined by 2 CFR (Code of Federal Regulations) [200.331](#); a final determination will be made at the time of award. The Subrecipient must comply with the following federal regulatory requirements:

• Uniform Administrative Requirements, Cost Principles, and Audit Requirements for HHS Awards ([45 CFR Part 75](#))

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⁸ Minority-led is defined as an organization where 51% or more of overall staff, board members, and volunteers in all levels of the organization are people who identify as racial/ethnic minorities.
• 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 applicants.

5.4 Place of Performance
The awarded CBOs will carry out the program at their offices and work with the CDC Foundation virtually.

5.5 Performance Monitoring
Project performance will be monitored in line with the agreed-upon project plan, progress reports, and through scheduled, routine, check-in virtual meetings. The CBO will be expected to work in close collaboration and consultation with the CDC Foundation staff managing this project. The plan for each deliverable will be an important part of the overall project plan.

5.6 Payment
CDC Foundation anticipates using a deliverable-based payment schedule. An invoice template will be provided and explained during the award process.

5.7 Performance Period
The CBO will be expected to begin program implementation on September 1, 2022. Applicants are encouraged to submit a proposal and budget outlining project activities and expected expenditures for an 8-month performance period (September 1, 2022, to April 29, 2023) totaling between $75,000.00 - $100,000.00 USD.

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 or incomplete proposal.

6.1 Communications During the RFP Period
Applicants should review the RFP in its entirety along with the attachments that have been posted on the CDC Foundation website. The CDC Foundation will post a pre-recorded CBO Applicant Webinar to answer questions received about this RFP by Wednesday, June 15, 2022. Applicants may submit questions via email about this RFP until Tuesday, June 21, 2022. All questions should be emailed to P4VEquestions@cdcfoundation.org.

6.2 Submission of Proposals
Application materials must be submitted by 12:00 PM (Noon) ET on Wednesday, June 22, 2022. The application will not be accessible after the deadline. A system-generated notification of receipt of the application will be sent upon submission.
Applicants are encouraged to submit the online application form well in advance of the submission deadline. An applicant’s initial submission is considered final and any subsequent, revised application submissions will not be reviewed.

Google Chrome and Firefox are recommended internet browsers for submitting this application. **Please note that there is no option to save your work on the online form.** Applicants may want to copy and paste application responses from a Word document. There is also a character limit of 4,000 characters per question field.

Applicants are required to submit annual budgets, audits, annual reports, and/or Negotiated Indirect Cost Rate Agreements as supporting documentation for the application submission. CDC Foundation reserves the right to request additional supporting documentation as required during the award and contracting phase.

The online application link can be accessed [HERE](#). The information below is requested on the application form:

- **Organization Information**
  - Organization Name, Abbreviated Name, Address, Website, Mission, Year Established, Organization Type, and Business Classification
  - Organization Attestation to P4VE Partner Network
  - Organization Attestation regarding minority-led distinction
  - EIN/Tax ID
  - DUNS Number - To request a DUNS number, visit [https://www.dnb.com/duns-number/get-a-duns.html](https://www.dnb.com/duns-number/get-a-duns.html). It can take up to 2 business days to receive a DUNS number.
  - SAM Registration and Expiration

- **Proposal Description and Application Responses**
  - Answer all required application questions. Must use data to inform responses, as appropriate, and include citations/sources.
    - **Proposed Project Purpose:** Align your organizational mission, priority population(s), and service/program areas currently delivered to this funding opportunity.
    - Describe the organization’s prior and current experience as it relates to serving Priority Populations, engaging community stakeholders in project initiatives, and translating science to provide science-based health information to at-risk/priority populations.
    - Provide a project title, if applicable.
    - **Problem Statement:** describe the issue(s) that will be addressed with your proposal. Detail current data and understanding of the issue(s) that your project will address. Include citations/sources.
    - **Proposed Project Summary:** describe the project goals and core strategy or strategies that will be used to meet them.
Select all of the proposed priority populations from the list that your organization will work to serve on this project.

**Project Activities to meet Objectives 1-5 outlined in Section 4.1.**

- Priority consideration will be given to applicants whose proposals cover all 5 Objectives outlined in Section 4.1. Your organization may choose not to incorporates all 5 Objectives into your proposal.

- **Proposed Approach to meet Objectives 1-5:** describe the approach, strategies, and project activities that will be used to ensure project Objectives are met during the 8-month project period. Detail notable events, campaigns, or expected accomplishments.
  o Objective 1: Increased range of trusted community voices supporting vaccine education and delivery.
  o Objective 2: Increased availability of community or population-specific messages.
  o Objective 3: Increased number and diversity of vaccination opportunities in communities experiencing disparities.
  o Objective 4: Increased number and range of partnerships or collaborative activities between providers and community organizations.
  o Objective 5: Increased number and range of healthcare providers recommending influenza and COVID-19 vaccines to patients.

**Staffing Capacity:** Provide a brief description of how the proposed project will be staffed and managed over the grant term. List key staff or other personnel expected to deliver services or manage project objectives and activities as needed.

**Project Partnerships and Collaborations**

- Describe if and how the organization will collaborate or partner with local organizations, coalitions, and/or community projects (e.g., food banks, housing initiatives, local eateries/restaurants/grocers, local businesses, group meetings, etc.) to promote vaccines and to achieve project goals.
- Describe if and how the organization will collaborate or partner with vaccination providers/administrators including state and local health departments, pharmacies, medical clinics, etc. to provide vaccination opportunities and to achieve project goals.

**Project Deliverables and Outputs/Outcomes**

- Describe direct, tangible results of proposed project activities. Include any detailed deliverables (outputs) specific to the proposed project.
- Describe the changes or conditions anticipated to occur as a result of the activities and outputs by the end of the grant term.

**Expected Impact:** Describe the expected impact on the communities served because of project activities outlined in the proposal.

**Budget and Budget Narrative**
• Provide a detailed budget with supporting narrative for all anticipated costs between $75,000-$100,000.00 USD. Applicants are required to use the following attachments to submit their budgets:
  i. Attachment B: Budget Narrative Template (CDCF provided Word Document)
  ii. Attachment C: Excel Budget Template (CDCF provided Excel sheet)
• The requested project funds can include the following direct costs: Salary, Fringe, Supplies, Equipment, Travel (transportation, lodging, meals, and incidental expenses, etc.), Contractual, and Other Direct Costs.
• Indirect Costs are allowable. Applicants with an approved federally recognized and valid Negotiated Indirect Cost Rate (or Recovery) Agreement (NICRA) must charge indirect costs to projects based on their negotiated indirect cost rate and modified total direct cost (MTDC) base, both as listed in their NICRA. Entities that do not have a NICRA may elect a de minimis indirect cost rate of 10% of MTDC.
• The budget narrative should comply with the following:
  i. Attachment D: CDC Foundation’s How to Develop a Federal Grant Budget (PDF)
  ii. CDC budget preparation guidelines
• Supporting Documentation – Upload the following
  • Filled in and detailed 8-month Upcoming Project Activities Schedule (CDCF provided Word doc. Template)
  • Budget Narrative (CDCF provided Word doc. Template)
  • Excel Budget (CDCF provided Excel Template)
  • The organization’s approved NICRA, if applicable.
  • The organization’s annual budget.
  • The organization’s annual audited financial report or 990 form. If one is not available, upload a copy of your organization’s income statement or balance sheet from the financial system.

### Submitting Your Proposal

Application materials must be submitted by 12:00 PM (Noon) ET on WEDNESDAY, JUNE 22, 2022. Proposals will not be accepted after this date and time.

**Proposals must be submitted electronically. [CLICK HERE TO SUBMIT A PROPOSAL]**

We recommend you attempt to submit your proposal by 8:00am ET on Wednesday, June 22, 2022, to allow sufficient time to address any unexpected technical issues.

### 6.3 Anticipated Timeline

Please note that the timeline is subject to change based on CDC Foundation’s organizational and administrative capacity.
### May 27, 2022
RFP Release

### By June 15, 2022
A *Pre-recorded* CBO Applicant Webinar will be posted to the CDC Foundation website.

### June 21, 2022
Deadline to submit written inquiries to P4VEquestions@cdcfoundation.org

### June 22, 2022, 12:00pm ET (Noon)
Proposal Submission Deadline. Proposals must be submitted electronically. [CLICK HERE TO SUBMIT A PROPOSAL](#)

### July-August 2022
Selection Notifications sent to CBOs in July 2022. Negotiation and execution of awards begin in August 2022.

### September 1, 2022, to April 29, 2023
Project Period Implementation

### SELECTION PROCESS AND REVIEW CRITERIA

Completed applications submitted by the **12:00 PM ET on Wednesday, June 22, 2022**, deadline will be evaluated in accordance with the review criteria stated above. A review panel of CDC Foundation staff will score each application.

Awards will be made based on the highest proposal scores using the rubric below. Priority consideration will be given to applicants whose proposals cover all five (5) project objectives outlined in the application. Unsuccessful applicants will be notified, and technical review feedback will be provided upon request within 30 days of the request. The CDC Foundation reserves the right to fund proposals out of rank order in order to 1) ensure optimal coverage across the U.S. and 2) ensure adequate funding of the five (5) project objectives listed in Section 4.1 of this RFP.

The CDC Foundation 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 the 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.

The following table provides an outline of the selection criteria and scoring details for how proposals will be evaluated:

<table>
<thead>
<tr>
<th>Domain</th>
<th>Selection Criteria</th>
<th>Score</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Project Purpose</strong></td>
<td>Describe the Proposed Project Purpose by aligning the Organizational Mission, Priority Population(s), and current Service/Program Areas delivered. Must link this to the relatability of this project</td>
<td>15 Points</td>
</tr>
<tr>
<td></td>
<td>Describe the organization’s prior and current experience as it relates to serving Priority</td>
<td></td>
</tr>
</tbody>
</table>
### Well-defined Data-informed 8-month Project Plan including the Project Approach, Strategies, and Objectives 1-5

<table>
<thead>
<tr>
<th>Description</th>
<th>Points</th>
</tr>
</thead>
<tbody>
<tr>
<td>Provide a project title (if applicable), problem statement, and project goals and core strategy. Describe the Priority Populations the organization will work to serve with this project.</td>
<td>40</td>
</tr>
<tr>
<td>Describe proposed approaches and strategies to meet Objectives 1-5 (as applicable).</td>
<td></td>
</tr>
<tr>
<td>Upload an 8-month timeline detailing any notable events, campaigns, or expected accomplishments using:</td>
<td></td>
</tr>
<tr>
<td>• <em>Attachment A: Project Activities Schedule</em></td>
<td></td>
</tr>
<tr>
<td>List key staff (number and type(s)) dedicated to delivering services with experience in areas defined in the RFP.</td>
<td></td>
</tr>
<tr>
<td>Feasibility of proposed project plan.</td>
<td></td>
</tr>
<tr>
<td>Must use data to inform this section, as appropriate. Include citations and sources.</td>
<td></td>
</tr>
</tbody>
</table>

### Partnerships and Collaborations

<table>
<thead>
<tr>
<th>Description</th>
<th>Points</th>
</tr>
</thead>
<tbody>
<tr>
<td>Detailed description of any partnerships and/or collaborations with local organizations, coalitions, and/or community projects (e.g., food banks, housing initiatives, local eateries/restaurants/grocers, local businesses, group meetings, etc.) to promote vaccines and to achieve project goals.</td>
<td>20</td>
</tr>
<tr>
<td>Detailed description of any partnerships and/or collaborations with vaccination providers/administrators including state and local health departments, pharmacies, medical clinics, etc. to provide vaccination opportunities and to achieve project goals.</td>
<td></td>
</tr>
</tbody>
</table>

### Clear outputs, outcomes, and expected impact

<table>
<thead>
<tr>
<th>Description</th>
<th>Points</th>
</tr>
</thead>
<tbody>
<tr>
<td>Description of direct, tangible results of project activities.</td>
<td>15</td>
</tr>
<tr>
<td>Detailed deliverables (outputs) specific to the proposed project.</td>
<td></td>
</tr>
<tr>
<td>Description of changes or conditions anticipated to occur because of the activities and outputs by the end of the grant term.</td>
<td></td>
</tr>
<tr>
<td>Description of the expected impact of the communities because of project activities.</td>
<td></td>
</tr>
</tbody>
</table>
Detail the estimated number of individuals who will be reached by the proposed activities.

**Detailed Budget Narrative**

Budget Narrative must correspond to anticipated program activities detailed in section 4.1 and be reasonable in nature.

Upload a detailed Budget Narrative using both of the following:
- Attachment B: Budget Narrative Template
- Attachment C: Excel Budget Template.

Budget Narrative must comply with:
- Attachment D: CDC Foundation’s *How to Develop a Federal Grant Budget* (PDF)
- [CDC Budget Preparation Guidelines](#)

<p>| | | |</p>
<table>
<thead>
<tr>
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<tbody>
<tr>
<td><strong>Total</strong></td>
<td>100 points</td>
<td></td>
</tr>
</tbody>
</table>

**HELPFUL RESOURCES**

- Attachment A: Upcoming Project Activities Schedule (CDCF provided Word Document)
- Attachment B: Budget Narrative Template (CDCF provided Word Document)
- Attachment C: Excel Budget Template (CDCF provided Excel sheet)
- Attachment D: CDC Foundation’s *How to Develop a Federal Grant Budget* (PDF)
- [CDC Budget Preparation Guidelines](#)

**CDC FOUNDATION**

The CDC Foundation helps 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. The CDC Foundation manages hundreds of 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 will provide grant administration and oversight for the project, working closely with CDC, donors and partner organizations to coordinate the program as well as provide administrative and financial activities including:

- Convening meetings between program partners as necessary to ensure successful operations
- Preparing agreements with all partner organizations to ensure a strong foundation for the operation of the program
- Bringing on fellows or contractors as needed
- Administering and tracking project budgets and activities
- Processing program invoices and arranging payment to personnel and contractors
- Serving as a key collaborator between organizations and across subject matters
- Providing timely reporting on project progress to donors and key partners
- Communicating with partners and networks to share project news, outcomes and results
- Assuring compliance with generally accepted accounting and business practices

The Foundation will ensure that the program is implemented according to program goals and according to the established timetable and budget. It will provide financial and narrative reports in accordance with requirements. The CDC Foundation is a 501(c)(3) organization, and its Federal Identification Number is 58-2106707.

Charity Navigator is America’s premier independent charity evaluator, providing in-depth, objective ratings and analysis of the financial health of America’s largest charities. In earning Charity Navigator’s highest four-star rating, the CDC Foundation has demonstrated exceptional financial health, outperforming most of its peers in its efforts to manage and grow its finances in the most fiscally responsible way possible.