

# **Request for Proposals**

Supporting Community-Based Organizations
Implementing Strategies to Increase Equitable Vaccine
Access for People with Disabilities

Date Issued: November 16<sup>th</sup>, 2021 (REVISED November 29<sup>th</sup>, 2021)

Date Due: December 10<sup>th</sup>, 2021

## **CDC FOUNDATION**

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#### 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 support more than 180 community-based organizations to increase uptake of COVID-19 vaccines in the last year.

#### 2. FUNDING OPPORTUNITY

The CDC Foundation seeks organizations to support efforts to increase COVID-19 vaccine access for people with disabilities in the United States. The CDC Foundation will fund 3 disability-led, community-based organizations (CBOs) to: (1) increase vaccination opportunities for people with disabilities; (2) establish partnerships with state and local health departments to ensure inclusion and focus of people with disabilities (3) ensure prioritization of the unique needs of people with disabilities in state and local emergency preparedness and response planning

#### 3. BACKGROUND

Approximately 61 million Americans – 1 in 4 adults in the U.S have a disability. Some people with disabilities may be at increased risk for contracting COVID-19 based on where they live or may have difficulty complying with mitigation strategies. People with disabilities, including developmental, cognitive, and physical disabilities, vision, and hearing impairments, that live at home and in small-group settings (congregate settings) receiving services through community-based rehabilitation centers and long-term support networks are often behind on immunizations. Frequently, the presence of co-morbidities places these individuals at higher

<sup>&</sup>lt;sup>1</sup> Prevalence of Disabilities and Health Care Access by Disability Status and Type Among Adults (2016) https://www.cdc.gov/mmwr/volumes/67/wr/pdfs/mm6732a3-H.pdf

<sup>&</sup>lt;sup>2</sup>Vaccinating Older Adults and People with Disabilities (2021)

https://www.cdc.gov/vaccines/covid-19/clinical-considerations/older-adults-and-disability/access.html

risk for COVID-19 infection. Their increased reliance on caretakers makes social distancing difficult and increases the risk of COVID-19 complications and deaths for not only people with disabilities but their direct care workers and caretakers. Data on vaccinations for the SARS CoV2 virus among this population is not readily available as information on disability status is not routinely collected at the time of vaccine administration. In addition, individuals who identify as a racial/ethnic minority including, Black, Latino, American Indian/Native American, or Native Hawaiian/Pacific Islander, are at even higher risk of health inequities.<sup>3</sup>

Vaccinating people with disabilities poses unique challenges, including ensuring the physical accessibility of vaccination sites. Equitable access to vaccination for people with disabilities remains a significant imperative given the threat of severe illness and mortality from COVID-19 infection. In comparison to people who do not have a disability, people with disabilities have a higher likelihood of missed immunizations and lower rates of immunization uptake across a range of different vaccines, creating health disparities.

#### 4. SCOPE OF WORK

To address these challenges, this Request for Proposal (RFP) seeks disability-led organizations to support the implementation of vaccine programs, achieved through the successful collaboration with disability-led organizations that will serve as the subject matter experts and recognized leaders in their communities.

#### 4.1 Goals and Aims

The goal of this RFP is to support efforts to increase COVID-19 vaccine access for people with disabilities in the United States. The CDC Foundation will fund 3 community-based organizations (CBOs) to:

- 1) Increase vaccination opportunities for people with disabilities
- 2) Establish partnerships with state and local health departments to ensure inclusion and focus of people with disabilities
- 3) Ensure prioritization of the unique needs of people with disabilities in state and local emergency preparedness and response planning

The <u>National Strategy for the COVID-19 Response and Pandemic Preparedness</u> highlighted that "the COVID-19 pandemic has exposed and exacerbated severe and pervasive health inequities among communities defined by race, ethnicity, geography, disability, sexual orientation, gender

<sup>&</sup>lt;sup>3</sup> Prevalence of Disabilities and Health Care Access by Disability Status and Type Among Adults (2016) <a href="https://www.cdc.gov/mmwr/volumes/67/wr/pdfs/mm6732a3-H.pdf">https://www.cdc.gov/mmwr/volumes/67/wr/pdfs/mm6732a3-H.pdf</a>

identity, and other factors."<sup>4</sup> People with disabilities are more likely to be exposed and experience severe illness from COVID-19 when factors like race, gender, socioeconomic status, and geography intersect.<sup>5</sup>

This RFP aims to advance health equity for those individuals with all types of disabilities, including, but not limited to developmental, physical, vision, hearing, cognitive, and behavioral.

#### 4.2. Activity Partners

Below is a list of **required** partners supported under this funding opportunity:

• State or local health departments

Below is a list of example partners that might be supported under this funding opportunity:

- State and local area agencies on aging and disabilities
- Healthcare providers
- Community health liaisons (e.g., community health workers, patient navigators, patient advocates)
- Home health care providers
- Centers for independent living (CILs)

- Rural health agencies
- State immunization programs
- Local transportation and paratransit
- Housing agencies
- Faith-based leaders
- Respite care agencies
- Statewide Independent Living Councils

#### 4.3. Activity Sites

Below is a list of example program sites that might be supported under this funding opportunity:

- Elder housing locations (e.g., independent living and intermediate care facilities)
- Adult day service centers
- Board and care homes
- Homeless shelters
- Veteran centers
- Places of worship
- Recreation programs
- Food banks/pantries/meal delivery programs

<sup>&</sup>lt;sup>4</sup> National Strategy for the COVID-19 Response and Pandemic Preparedness (2021) https://www.whitehouse.gov/wp-content/uploads/2021/01/National-Strategy-for-the-COVID-19-Response-and-Pandemic-Preparedness.pdf

<sup>&</sup>lt;sup>5</sup> Prevalence of Disabilities and Health Care Access by Disability Status and Type Among Adults (2016) https://www.cdc.gov/mmwr/volumes/67/wr/pdfs/mm6732a3-H.pdf

• Other community locations frequently visited by people with disabilities, their families, and their caretakers

#### **4.4 Activities**

Below is a list of **required** activities supported under this funding opportunity:

Vaccination and Emergency Response Planning	Collaborate with state or local health departments to create vaccination and emergency response plans that prioritize people with disabilities
Vaccination and Emergency Response Implementation	Collaborate with state or local health departments to implement coordinated vaccination and emergency response plans at the state or local level

Below is a list of example activities that might be supported under this funding opportunity:

	Identify and train trusted community-level spokespersons
	and organizations to communicate the importance of COVID-
Communication and	19 vaccination through local media outlets, social media,
Messaging	faith-based venues, community events, and other culturally
	appropriate venues and modalities accessed by people with
	hearing, vision, and developmental disabilities
	Develop and/or adapt and implement accessible social
	media campaign strategies to increase awareness of COVID-
	19 vaccine locations and availability for individuals with
Marketing and Media	disabilities, including hearing and vision impairment.
Campaigns	Content should meet requirements set by Americans with
Campaigns	<u>Disabilities Act</u> , the Rehabilitation Act, <u>the Patient Protection</u>
	and Affordable Care Act, the Plain Language Act, and other
	applicable disability rights laws for accessibility <sup>6</sup>

<sup>&</sup>lt;sup>6</sup> National Strategy for the COVID-19 Response and Pandemic Preparedness (2021) <u>https://www.whitehouse.gov/wp-content/uploads/2021/01/National-Strategy-for-the-COVID-19-Response-and-Pandemic-Preparedness.pdf</u>

	Sample materials and communication products will be shared with the CDC Foundation for dissemination of project results via a resource clearinghouse, webinars, conference calls, or meeting presentations
Vaccination Sites	Support vaccination providers and trusted partners to set up temporary and/or mobile COVID-19 vaccination sites to deliver COVID-19 vaccines where people with disabilities and their caretakers are already seeking care or services for themselves or their family members
Healthcare Provider Training	Work with vaccination service providers to train and 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 vaccination and increasing referrals and scheduling accessibility for people with disabilities to COVID-19 vaccination sites
Transportation Access	Connect with local public transit and paratransit authorities to subsidize costs or reduce barriers for adults in homebound, congregate, and rural settings

## 4.5 Deliverables

All awardees will be expected to complete the following activities and deliverables below:

Activity/Deliverable	Date
Project workplan detailing execution of intended activities, partner/sub awardee collaboration, outputs/outcomes, and timelines	January 31 <sup>st</sup> , 2022
Interim progress report on basic activity metrics (see below list of potential indicators), successes, and challenges	March 31 <sup>st</sup> , 2022
Participate in monthly check-in calls with CDC Foundation Program Officer to discuss progress, challenges, and lessons learned over the program implementation period	Monthly

Submit final narrative report to describe: Stakeholder collaboration, successes, challenges, lessons learned, event and activity metrics (i.e., number of vaccinations scheduled, number of localized vaccination plans created vs. implemented, strategies and challenges to vaccine uptake in people with disabilities)

July 31<sup>st</sup>, 2022

#### 4.6 Potential Indicators

Below is a list of required indicators supported under this funding opportunity

- Number of inclusive, localized vaccination plans developed
- Number of inclusive, localized vaccination plans implemented

Below is a list of example indicators that might be supported under this funding opportunity:

- Number of partner outreach plans
- Number, types, roles of coordinating community organizations, health providers and professionals
- Number and types of local leaders, health providers and professionals trained
- Number and sub-populations (disability type, race, ethnicity, gender, geography, etc.) reached Number and types of audience-tested and culturally appropriate and accessible messages promoting COVID-19 vaccination
- Number and disability types reached by accessible social media messaging promoting COVID-19 vaccination

- Number of referred vaccination recipients
- Number of scheduled vaccination recipients
- Survey: Increased awareness of vaccine opportunities
- Number of mobile vaccination clinics implemented
- Number of vaccination venues supported
- Number of individuals reached by activities (i.e., number of individuals attending listening sessions, number of communications campaigns launched, etc.)
- Number of individuals vaccinated

#### 5. KEY REQUIREMENTS

#### 5.1 Eligibility

Applicants **must** meet all the following eligibility criteria:

- Must be nonprofit, tax-exempt 501(c)(3) or under an IRS code other than 501(c)(3).
- Must be disability-led organization
  - Disability-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 with disabilities
- Must identify as a community-based organization (CBO). Examples include:
  - Faith-based organizations
  - Vaccine advocacy organizations
  - Public health focused associations
  - Civic and social organizations with the capacity to educate and vaccinate people with disabilities across congregate settings, home settings, long-term service and support networks, and community rehabilitation and institutional centers
- Must describe experience effectively engaging with state or local public health departments
- Must describe experience effectively engaging with one or more of the following groups:
  - People with disabilities and their families
  - National and local disability serving organizations
  - Local community leaders
  - Healthcare providers and professionals
  - State and local agencies on disability and aging
- Must describe experience working with and managing subrecipients across multiple U.S. states and territories

Note: Colleges, universities, hospitals, or health systems or their fiscal sponsors are not eligible for funding under this project.

#### 5.2. Funds Available

CDC Foundation intends to make the following awards:

		Maximum	
Category	# of	Amount	Total per
	Awards	per Award	Category
Level 1: Programs serving 3 sites across 3 distinct	2	\$517,000	\$1,034,000
U.S. states and/or territories			
Level 2: Programs serving 4 sites across 4 distinct	1	\$689,000	\$689,000
U.S. states and/or territories			
Total	3		\$1,723,000

Organizations may submit only one proposal as either Level 1 or Level 2.

The final award amount is contingent on submission of a detailed and reasonable budget proposal to be approved by the CDC Foundation. Based on funding availability and performance, funded projects may be extended to continue activities beyond the current Year 1 end date of July 31<sup>st</sup>, 2022.

#### **5.3. Funding Source**

The resulting awards will be supported, entirely or in part, by federal funding through a cooperative agreement between the CDC foundation and the CDC. We anticipate that awards 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. Subrecipient 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 applicants.

#### **5.4. Place of Performance**

The contractor will carry out tasks at their offices and work with the CDC Foundation virtually.

#### 5.5. Performance Monitoring

The performance will be monitored in line with the agreed project plan, monthly progress reports, detailed financial reports on expenditures and through scheduled monthly check-ins. The sub awardee(s) will be expected to work in close collaboration and consultation with the CDC Foundation and CDC technical advisor(s).

#### 5.6. Payment

CDC Foundation will pay the contractor a fee not to exceed a Maximum Payable Amount (MPA) or ceiling price. The MPA will be based on the fee proposed and awarded and will be negotiated as part of the resulting contract.

CDC Foundation anticipates paying the contractor on a deliverable basis. An invoice template will be provided after the contract is awarded.

#### 6. INSTRUCTIONS FOR APPLICANTS

Applicants should follow the instructions set forth below in the submission of their proposal to the CDC Foundation. Applicants applying as a consortium must identify a lead organization to apply on their behalf.

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 Submission of Proposals**

Please click the following link to complete the RFP by 7:00pm (ET) on Friday, December 10th, 2021. Submissions after this date and time may not be considered.

RFP Link: <u>Implementing Strategies to Increase Equitable Vaccine Access for People with</u> Disabilities

Applicants may request alternative method of proposal submission by emailing <a href="https://example.com/heprograms@cdcfoundation.org">heprograms@cdcfoundation.org</a> or calling **(213) 475-6342** to coordinate an alternative method.

The below information will be requested on the application form:

#### I. Organization Information

- Organization Name
- EIN/Tax ID
- DUNS Number To request a DUNS number, visit https://www.dnb.com/duns-number/get-a-duns.html
- Organization Address, Phone Number, and Website
- Organization Mission and Year established
- Non-profit status
- Tax-exempt status
- Disability-led organizational criteria
  - Provide percentage of staff, board members, and volunteers who are people with disabilities
- Experience working with and managing subrecipients across multiple U.S. states and territories

#### II. Project Description

Project Title and Problem Statement

- Describe demographics and characteristics of the populations of individuals with disabilities in the community.
- Project and Issue Area focus
- Describe the proposed strategies, activities, and objectives.

#### III. Outputs and Outcomes

- Describe anticipated direct, tangible outputs of proposed activities.
- Describe anticipated short term and intermediate outcomes anticipated to occur in people or conditions as a result of the activities and outputs by the end of the grant term.
- Describe anticipated community impact as a result of the proposed activities
- Describe learning opportunities for your organization by engaging in the proposed activities

#### IV. Community and Partner Engagement

- Describe strategy for engaging state or local public health departments to develop and implement coordinated vaccination or emergency response plan(s)
- Describe strategy for engaging individuals with disabilities where they live or work to increase vaccine access.
- Describe strategy for engaging individuals with disabilities, especially those from diverse communities in the development of communitydriven, culturally appropriate initiatives
- Describe strategy for engaging the community of individuals with disabilities through the project planning and implementation.
- Describe with whom and how your organization will collaborate to achieve project objectives.

#### V. Project Implementation and Reach

 Geographical information (implementation cities, counties, states, zip codes/census tracts). See below section on Applicant Resources for additional data

Note: Level 1 applicants must indicate 3 distinct U.S. states or territories for implementing site activities. Level 2 applicants must indicate 4 distinct U.S. states or territories for implementing site activities.

• Estimate the number of individuals (race/ethnicity, age, special populations) who will be reached by the proposed activities.

 Describe how your proposed activities will reach individuals with disabilities who are also members of racial/ethnic groups or have gender identities that are associated with health inequities

#### VI. Budget and Budget Narrative

 Provide a detailed budget with supporting narrative for all anticipated costs not to exceed \$517,090 for Level 1 applicants and \$689,454 for Level 2 applicants

	Maximum Amount
Category	per Award
Level 1: Programs serving 3 sites across 3 distinct	\$517,000
U.S. states and/or territories	
Level 2: Programs serving 4 sites across 4 distinct	\$689,000
U.S. states and/or territories	

- Expected implementation period is January 1<sup>st</sup>, 2022, through July 31<sup>st</sup>,
   2022. If the proposed implementation period will start later, please develop your budget to accurately reflect activities based on your proposed start and end dates. Please note that budgets may not run past July 31<sup>st</sup>, 2022.
- The requested project funds can include the following direct costs:
  - Salary
  - Fringe Benefits
  - Supplies, Equipment
  - Travel (meal and incidental expenses)
  - Contractual
  - Reasonable accommodations as necessary
  - Other Direct Costs
- Proposed budget should include all costs necessary to implement the proposed program.
- The budget narrative should conform with the <u>CDC Budget Preparation</u> <u>Guidelines</u>.

#### VII. Required Attachments

- Internal Revenue Service 501(c)(3) Determination Letter
- A copy of your organization's annual budget
- Most recent audited Annual Financial Statement: if total expenditures associated with federal funding exceed \$750,000 a year, a Single Audit Report is required (Note: If one is not available, upload a copy of your most recent annual report).

#### 6.2 Communications During the RFP Period

Applicants are also encouraged to review the <u>Implementing Strategies to Increase Equitable Vaccine Access for People with Disabilities: Frequently Asked Questions (FAQ)</u> and <u>RFP Supplement</u> for any questions about the RFP eligibility requirements and submission process.

#### 6.3 Anticipated Timeline\*

November 16 <sup>th</sup> , 2021	RFP Release
November 30 <sup>th</sup> , 2021	RFP Supplement Release
December 3 <sup>rd</sup> , 2021 (REVISED)	RFP Question Deadline
December 6 <sup>th</sup> , 2021	Updated RFP Supplement Release
December 10 <sup>th</sup> , 2021 (REVISED)	Proposal Submission Deadline
Mid December, 2021	Selection Notification
January 1 <sup>st</sup> , 2022 – July 31 <sup>st</sup> , 2022	Implementation period of up to 7 months

<sup>\*</sup>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 Administrative Review:**

CDC Foundation will evaluate all applicants for completeness and minimum requirements. Basic requirements include timely receipt of application, meeting all eligibility criteria and submission of all required attachments. Applications with omissions of any required documentation may 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 Proposal 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 following table outlines the criteria that reviewers will use to guide their evaluation of each written proposal.

Domain	Selection Criteria	Score
	Project title, problem statement and objectives	25 Points
Organizational Mission, Populations Served and Past Experience	Description of demographics and relevant health characteristics of the populations with disabilities served in the community.	
	Demonstrated experience as a disability led organization (majority of overall staff, board members, and volunteers in all levels of the organization are people with disabilities	
	Description of experience working with and managing subrecipients across multiple U.S. states and territories	
Well-defined Community	Detailed proposed strategies, activities, and timeline for completing work.	25 Points
Engagement Approach and Activities (Project Plan)	Description of how your organization will engage state or local public health departments to develop and implement coordinated vaccination or emergency response plan(s)	
	Description of how organization will engage individuals where they live or work to increase vaccine access	
	Description of how organization will engage individuals with disabilities, especially those from diverse communities in the development of community-driven, culturally appropriate initiatives	

		100 points
Detailed Budget and Budget Narrative	Detailed budget and narrative that follows <u>CDC</u> <u>budget preparation guidelines</u> .	25 points
	Description of learning opportunities for the organization by engaging in the proposed activities	
	Description of community impact anticipated as a result of the implemented activities and outputs by the end of the grant term.	
	Description of direct, tangible outputs, short- term, and intermediate outcomes	
	Description of populations that will be reached (race/ethnicity, age, special needs)	
	Estimate number of partners who will be reached by the proposed activities (geographic location, organization type, etc.)	
(M&E)	Estimate number of individuals who will be reached by the proposed activities	
Clear outputs, outcomes, and impact	Detailed deliverables specific to the proposed project.	25 Points
	Description of how and with whom organization will collaborate to achieve project objectives.	
	Description of how your organization will engage the community partners and individuals with disabilities through all aspects of the project.	

### <u>Level 3 Interview (subject to change based on need)</u>:

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.

Completed eligible applications submitted by **7:00pm ET on Friday December 10<sup>th</sup>, 2021**, deadline will be evaluated first in accordance with the review criteria stated above. Selected applicants will receive a notification that their proposal was selected for funding. The CDC Foundation may not provide scores or specific review feedback to unsuccessful applicants.

#### 8. APPLICANT RESOURCES

The CDC Foundation encourages applicants to review the following resources to help inform and prepare an application:

- RFP Link for <u>Implementing Strategies to Increase Equitable Vaccine Access for People</u> with Disabilities
- Implementing Strategies to Increase Equitable Vaccine Access for People with Disabilities: Frequently Asked Questions (FAQ)
- <u>CDC Guidance for Vaccinating Older Adults and People with Disabilities: Ensuring Equitable COVID-19 Vaccine Access</u> Created to help community-based organizations, state representatives, and providers guiding vaccination planning for equitable access
- <u>CDC Toolkit for People with Disabilities</u> Guidance and tools to help people with disabilities and those who serve or care for them make decisions, protect their health, and communicate with their communities (Guidance and Planning Documents, Accessible Communication and Education Resources)
- Guidance for Vaccinating Older Adults and People with Disabilities at Vaccination Sites
- <u>Vaccinating Homebound Persons With COVID-19 Vaccine</u> Guidance on management of vaccines and vaccination for persons vaccinated at home or in small group settings (e.g., residential facilities, group homes).
- <u>Feedback from Jurisdictional Listening Sessions</u> Strategies for reaching people with limited access to COVID-19 vaccines
- <u>CDC Social Vulnerability Index</u> Uses 15 U.S. census variables to help local officials identify communities that may need support before, during, or after disasters. This resource can help CBOs identify vulnerable communities.
- <u>U.S. COVID Community Vulnerability Index (CCVI)</u> Surge Ventures created the COVID-19 Community Vulnerability Index to leverage the power of data to understand how and why communities are vulnerable. Site offers data on COVID cases, deaths, testing, hotspots, and the relationship to vulnerability.
- <a href="https://www.kff.org/medicaid/issue-brief/covid-19-vaccine-access-for-people-with-disabilities/">https://www.kff.org/medicaid/issue-brief/covid-19-vaccine-access-for-people-with-disabilities/</a>
- <a href="https://www.pewresearch.org/fact-tank/2021/09/10/americans-with-disabilities-less-likely-than-those-without-to-own-some-digital-devices/">https://www.pewresearch.org/fact-tank/2021/09/10/americans-with-disabilities-less-likely-than-those-without-to-own-some-digital-devices/</a>

#### **ATTACHMENTS**

- 1. Excel Budget Template
- 2. Budget Narrative Template
- 3. <u>Budget Preparation Guidelines</u>