



Request for Applications

National Association of Chronic Disease Directors (NACDD)
GIS Translation/Dissemination Capacity Building for State Health Departments:
Advancing the Translation and Dissemination of Maps for Heart Disease and Stroke Prevention

Key Dates

Application Open: Friday, January 25, 2019

Application Q&A Session: Thursday, January 31, 2019, 2-3 p.m. Eastern Time

Register for the session here:

<https://attendee.gotowebinar.com/register/6076987968821221889>.

This session will be recorded and posted on the [NACDD GIS Webpage](#) within 2 days following the webinar, along with Frequently Asked Questions.

Application Due Date: Friday, February 22, 2019

Notification Date: Friday, March 8, 2019

Eligibility: All State Health Departments (SHDs) are eligible to apply.

Acronyms/terms used in this RFA

CDC:	Centers for Disease Control and Prevention
CEHI:	Children's Environmental Health Initiative at Rice University
NACDD:	National Association of Chronic Disease Directors
SHD:	State Health Department
Guidance Team:	Project leads from CDC, NACDD, and CEHI
HBP:	High blood pressure
HBC:	High blood cholesterol
CVD:	Cardiovascular disease

Executive Summary

The goal of this project is to increase state health department capacity to use GIS products with partners in the surveillance, planning and evaluation of programs and policies related to the diagnosis and management of high blood pressure (HBP) and high blood cholesterol (HBC). The focus of this project is to develop translation and dissemination plans and products that incorporate maps and other GIS techniques to enhance the diagnosis and management, including medication adherence, of high blood pressure and high blood cholesterol.

This project defines translation and dissemination according to the CDC's Knowledge 2 Action (K2A) Framework¹. Translation is the process and steps needed and taken to ensure effective and widespread use of evidence-based programs, practices, and policies. Dissemination is the purposeful and facilitated process of distributing information and materials to organizations and individuals who can use them to improve health. Through this project, SHDs and their partners will participate in workshops and receive technical assistance regarding the development of GIS-related translation and dissemination products related to the diagnosis and management of HBP and HBC that will support on-going activities and priorities within each participating state health department. The GIS-related translation and dissemination activities will be geared towards advancing health systems, team-based care, and community-clinical linkages.

Improving high blood pressure and high blood cholesterol prevention and control is a priority for state health departments. In 2018, CDC awarded all fifty states with funding through *Improving the Health of Americans through Prevention and Management of Diabetes and Heart Disease and Stroke (CDC-RFA-DP18-1815)*. The funding for 1815 supports novel approaches aimed at improving prevention and control of diabetes and CVD in high-burden populations, and emphasizes the importance of working with SHD partners to improve community-clinical linkages related to blood pressure and cholesterol control, including medication adherence.

This RFA focuses on the development of at least one high quality GIS translation and dissemination product with clear and actionable messages related to HBP and/or HBC diagnosis and management (including medication adherence) and targeted to a specific audience(s). SHDs participating in this project will collaborate with partners/stakeholders in the development of at least one translation and dissemination product that advances the SHD's work in heart disease and stroke prevention. Potential project areas may include:

- Support engagement of non-physician team members (e.g., pharmacists, nurses, nutritionists) in hypertension and cholesterol management in clinical settings
- Promote the adoption of medication therapy management (MTM) between pharmacists and physicians for the purpose of managing HBP, HBC and lifestyle modifications
- Develop a statewide infrastructure to promote sustainability for Community Health Workers (CHWs) to promote management of HBP and HBC.
- Facilitate the use of self-measured blood pressure monitoring (SMBP) with clinical support among adults with HBP.
- Implement systems to facilitate systematic referral of adults with HBP and or HBC to community programs/resources

Staff from selected SHDs will 1) identify an existing map or GIS product developed by the SHD that will serve as the starting point for their translation/dissemination product(s); 2) participate in conference calls and webinars; 3) host a one-day in-person translation and dissemination workshop with their relevant partners (to be facilitated in collaboration with NACDD, CEHI and CDC); and 4) produce GIS-related translation and dissemination products that address improved prevention and/or management of high blood pressure and/or high blood cholesterol. Participating SHDs will be encouraged to share their final products, processes and lessons learned with other health departments through venues including but not limited to the Chronic Disease GIS Network, the CDC GIS Exchange, etc.

This GIS Translation/Dissemination Capacity Building project is funded by the Centers for Disease Control and Prevention (CDC) and provided in collaboration with the National Association of Chronic Disease Directors (NACDD) and the Children's Environmental Health Initiative (CEHI) at Rice University.

References:

1. Wilson KM, Brady TJ, Lesesne C, on behalf of the NCCDPHP Work Group on Translation. An organizing framework for translation in public health: the Knowledge to Action Framework. *Prev Chronic Dis.* 2011;8(2). http://www.cdc.gov/pcd/issues/2011/mar/10_0012.htm.

Terms of the RFA

State Health Departments that are selected will receive:

- **Pre-workshop assessments:** These assessments will support SHDs in selecting which map(s) of HBP/HBC to focus on for their GIS-related translation/dissemination product(s) and which partners and stakeholders to consider including in the translation/dissemination workshop.
- **Pre-workshop interactive webinars:** SHDs will attend up to three pre-workshop webinars. These webinars will provide information on translation and dissemination of GIS products, an overview of the Identify-Assess-Act framework, and guidance on the development and use of a translation/dissemination product related to HBP and/or HBC control. All proposed Core Team members must attend these webinars. Webinars will take place in March and April 2019.
- **1 day in-person translation and dissemination workshop:** The Guidance Team (representatives from NACDD, CDC and CEHI) will collaborate with SHD staff to plan and implement an in-person GIS-related translation and dissemination workshop with health department staff and partners. The workshop will be customized to the specific community-clinical and/or team-based care efforts and partnerships regarding HBP and HBC prevention and management of each selected SHD. These workshops will take place at each selected SHD in May or June 2019.
- **Ongoing consultation through the end of the project period** with CDC, NACDD, and CEHI.
- **Opportunity to share translation and dissemination activities for HBP and/or HBC management**
 - All participating SHDs will be considered to participate in a national webinar or other event to share lessons learned, products, and processes associated with this project with other state health departments. This opportunity will take place in July 2019.

State Health Departments will commit to the following:

- **Identification of a Core Translation/Dissemination Team.** This team will include staff working with blood pressure and/or cholesterol efforts, including staff with programmatic, epidemiology/surveillance and/or evaluation roles and experience. The Core Team should include 4-6 people (although the exact number will be decided by each SHD), and should include people who are committed to be involved in all aspects of this capacity building project. At least one Core Team member must have GIS skills to generate and design maps that will be used in the translation and dissemination product(s).
- **Identification of a Translation/Dissemination Team Lead.** This person must be a member of the Core Translation/Dissemination Team (described above). The Team Lead will serve as a lead point of contact for the Guidance Team (CDC, NACD, and CEHI) and will have primary responsibility for ensuring team participation in all work required by the project, including collaboration with NACDD for planning an in-person workshop.
- **Identification of an Extended Team.** There can be an unlimited number of people on the Extended Team. Extended Team members will provide input, feedback, support, and guidance to members of the Core Team as the translation/dissemination project is being developed. Members of the Extended Team may include key health department staff, external partners and stakeholders, and others likely to use the final GIS products.
- **Completion of a final GIS-related translation/dissemination product.** The SHD will commit to sharing a final or near-final translation/dissemination product with CDC, NACDD, and CEHI no

later than July 31, 2019. The final translation/dissemination product(s) must be related to HBP and/or HBC prevention, detection, and/or management (e.g., medication adherence), and should be designed to support community-clinical linkages and/or team-based care. During the course of the training, SHD teams should develop a well-vetted plan for how they will use their final translation/dissemination product to inform program planning, evaluation, and/or policy-making.

- **Supervisor approval for Core Team members is required for this project.** Conference calls, webinars, and the in-person meeting will take place during regular business hours and there will be work that must be completed throughout the project. Supervisor(s) must provide written confirmation of their approval for Core Team members to participate.
- **Sharing of copies of their translation/dissemination product.** SHDs will share copies of their translation/dissemination product(s), processes, and lessons learned with the Guidance Team, post maps to the CDC's web-based Chronic Disease GIS Exchange: (<http://www.cdc.gov/dhdsp/maps/gisx/>), consider submitting a Chronic Disease GIS Snapshot to CDC's Preventing Chronic Disease on-line journal (http://www.cdc.gov/pcd/issues/gis_toc.htm), and identify other opportunities to share their GIS-related translation and dissemination insights for HBP and HBC management with other health departments.

Evaluation Criteria:

State health departments will be competitively selected based on the following components:

- Knowledge of current activities, priorities, and resources within the health department that support the improvement of blood pressure and/or cholesterol management through community-clinical linkages and/or team-based care (25%)
- Vision and capacity for using GIS to address blood pressure and/or cholesterol management, including medication adherence, including at least one existing map related to HBP and/or HBC (25%)
- Potential for collaboration with internal and external partners (25%)
- Project commitment (25%)
 - Staff time and resources dedicated to the project

How to Apply:

Complete all application components as noted below. Instructions for completing this form are included with the accompanying instructions document. You must submit this application electronically --save your completed application and attach it, along with letters of approval (from supervisor(s) of Core Translation/Dissemination Team members), and examples of a map(s) to an e-mail, addressed to Joshua Tootoo at: jltootoo@rice.edu.

RFA Questions:

1. Core Translation/Dissemination Team Lead

a. Name and position

b. Contact information

Email

Phone

c. Unit within health department

d. GIS training and experience

e. Role and experience with community-clinical linkages and/or team-based care, especially related to high blood pressure and/or high cholesterol

2. Please describe current goals, objectives, activities and/or policies within your health department to document and improve blood pressure and/or cholesterol control, including medication adherence, through team-based care and/or community-clinical linkages.

3. Current data sources for measuring the detection, treatment, control and/or medication adherence of high blood pressure and/or high blood cholesterol. For each data source, please provide a brief description and indicate any Core or Extended Team member(s) with experience analyzing the data. Include information on the existence of a data use agreement or other approval in place related to these data sources.

4. Please describe existing collaborations with internal and/or external partners that support efforts to improve HBP and/or HBC management through team-based care and/or community-clinical linkages.

Internal collaborations with units/programs within your Health Department to improve blood pressure and/or cholesterol management through community-clinical linkages and/or team-based care	
Administrative Unit	Brief description of the focus of the collaboration(s)

External collaborations with partners to improve blood pressure and/or cholesterol management through community-clinical linkages and/or team-based care	
Name of Organization	Brief description of the focus of the collaboration(s)

5. Please describe potential collaborations that have not yet been established but would benefit from efforts related to blood pressure and/or cholesterol control through team-based care and/or community-clinical linkages.

Name of Organization	Brief description of the potential for collaboration

6. Please propose 2 ideas for GIS-related translation and dissemination products that could be developed based upon existing map(s) of HBP and/or HBC that staff within your health department have created. For each product, please provide the following information based upon your current vision:

Project Title:	
Relevant Partners:	Target Audience:
Description of translation and dissemination product(s) – include a vision for the final product(s). Refer to the Dissemination and Engagement Planning Checklist for assistance with translation/dissemination planning. https://www.cdc.gov/prc/pdf/dissemination-and-engagement-planning-checklist.pdf	
Data layers that will be used for the product (e.g., medication adherence, clinic locations, socioeconomic conditions)	
Please attach at least one existing map for each idea. If the existing map is part of a Story Map or other virtual communication, please provide the link here. Please explain how the map(s) has been or is currently being used, including any partners/venues with whom it has been shared.	
Please describe how participating in the Translation/Dissemination project will advance your work on this product.	

Project Title:	
Relevant Partners:	Target Audience:
<p>Description of translation and dissemination product(s) – include a vision for the final product(s). Refer to the Dissemination and Engagement Planning Checklist for assistance with translation/dissemination planning. https://www.cdc.gov/prc/pdf/dissemination-and-engagement-planning-checklist.pdf</p>	
<p>Data layers that will be used for the product (e.g., medication adherence, clinic locations, socioeconomic conditions)</p>	
<p>Please attach at least one existing map for each idea. If the existing map is part of a Story Map or other virtual communication, please provide the link here. Please explain how the map(s) has been or is currently being used, including any partners/venues with whom it has been shared.</p>	
<p>Please describe how participating in the Translation/Dissemination project will advance your work on this product.</p>	

7. Core Translation/Dissemination Team Members

Name/Position/Unit within Health Department	Email
	Phone
GIS Training and Experience	
Role and experience with community-clinical linkages and/or team-based care, especially related to high blood pressure and/or high cholesterol	
Rationale/Role for inclusion in the Core GIS Translation and Dissemination Team	



Name/Position/Unit within Health Department	Email
	Phone
GIS Training and Experience	
Role and experience with community-clinical linkages and/or team-based care, especially related to high blood pressure and/or high cholesterol	
Rationale/Role for inclusion in the Core GIS Translation and Dissemination Team	



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Rationale/Role for inclusion in the Core GIS Translation and Dissemination Team	



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GIS Training and Experience	
Role and experience with community-clinical linkages and/or team-based care, especially related to high blood pressure and/or high cholesterol	
Rationale/Role for inclusion in the Core GIS Translation and Dissemination Team	

8. Additional text

Agreement to the terms of this RFA

By checking the box below, our state health department commits to the following if selected for this GIS Translation/Dissemination Capacity Building Project:

1. Commit Core Translation/Dissemination Team members working with blood pressure and/or cholesterol efforts within the state health department to attend all pre-workshop calls and webinars and the in-person workshop.
2. Develop a final translation/dissemination product related to HBP and/or HBC diagnosis, management, or medication adherence, and designed with the intent to be used in team-based care and/or community-clinical linkage program planning and evaluation efforts.
 - Near-final draft must be completed no later than July 31, 2019.
3. Participate in the tracking and evaluation system built into the project, as well as in the development of manuscripts that document the impact of the training at the state health department and beyond.
4. Report on the development and status of GIS translation/dissemination activities within the state health department.
5. Share copies of the final translation/dissemination product with other public health professionals by:
 - Posting maps to the CDC's web-based Chronic Disease GIS Exchange: (<http://www.cdc.gov/dhdsp/maps/gisx/>)
 - Considering submitting a Chronic Disease GIS Snapshot to CDC's Preventing Chronic Disease on-line journal (http://www.cdc.gov/pcd/issues/gis_toc.htm)
 - Identifying other opportunities to share mapping approaches with other health departments.

Approvals

Core Translation/Dissemination Team Lead

Name:

Position:

Date:

Core Translation/Dissemination Team Lead's Supervisor

Name:

Position:

Date: