



## **Developing and Disseminating Programs to Build Sustainable Lupus Awareness, Knowledge, Skills and Partnerships**

### **REQUEST FOR APPLICATIONS**

The National Association of Chronic Disease Directors (NACDD) and the Lupus Initiative (TLI), a program of the American College of Rheumatology (ACR), with support from the Centers for Disease Control and Prevention (CDC), announce the availability of funding for state or local health departments and community based organizations grantees convene a diverse network of local, regional and statewide partners for a one-day workshop to develop a strategic plan that reflects the four strategic domains of the National Public Health Agenda for Lupus. Funds from this announcement will be used by contractors to schedule the workshop between January 1, 2018 and August 31, 2018.

The goals of this announcement are to: (a) support sustainable strategies to implement priority action items in the National Public Health Agenda for Lupus; and (b) build long-term partnerships between state or local public health departments, leaders in minority health and healthy equity and community based organizations that support persons living with lupus. These goals will be achieved by the contractor establishing a partnership with the state chronic disease director and convening a one-day workshop to initiate, expand, and/or sustain various partnerships to develop a strategic plan to address lupus and support its implementation.

#### **Informational Conference Call:**

September 15, 2017 at 1pm EST

Number: 866-707-2374 Access Code: 1303479#

**Applications due: November 1, 2017 no later than 8:00 pm (Eastern Time)**

#### **For further information:**

Please contact Leslie Best at [lbest@chronicdisease.org](mailto:lbest@chronicdisease.org)

## **A. PURPOSE, BACKGROUND, AND EXPECTATIONS**

### *1. Purpose*

This funding opportunity, offered through a collaboration of the National Association of Chronic Disease Directors (NACDD) and The Lupus Initiative (TLI), with funding from the CDC, is designed to develop sustainable strategies to support and build partnerships between state health departments and community based lupus organizations. Examples of partners include public health practitioners, offices of health equity, health statistics, health care providers, lupus organizations, faith based organizations and persons with lupus. The selected Contractor will be part of a network of lupus partnerships on national, state and local levels to implement recommendations of the state or national plan and to sustain those partnerships and activities.

### *2. Background*

Systemic Lupus Erythematosus (SLE) is an autoimmune disease in which the immune system produces antibodies to cells within the body leading to widespread inflammation and tissue damage. SLE may be characterized by periods of illness with a variety of clinical manifestations, that can affect joints, skin, brain, lungs, kidneys, and blood vessels, and periods of remission. People with SLE may experience fatigue, pain or swelling in joints, skin rashes, and fevers. SLE can occur at any age, but is primarily a disease of young women with peak occurrence between puberty and childbearing years. It has strong disparities in incidence, prevalence, and survival by both sex and race/ethnicity, with women affected 8 times more than men and many minorities affected at higher rates than whites. Estimates of the prevalence of SLE vary widely, and misdiagnosis is common.

Newer and more complete CDC-funded population-based SLE registries with a primary purpose of generating better prevalence (and incidence) estimates published results in 2014. Annual prevalence from 2002-2004 was much higher for blacks than whites in Michigan (Washtenaw and Wayne Counties) (111.6 vs. 47.5 per 100,000 persons) and in Georgia (DeKalb and Fulton Counties) (128.0 vs. 39.9 per 100,000 persons). Annual prevalence from 2007-2009 for American Indians/Alaska Natives was 178 per 100,000. Annual prevalence estimates were much higher among women than men in Michigan (128.7 vs. 12.8 per 100,000 persons), in Georgia (145.8 vs. 17.5 per 100,000 persons), and in the American Indian/Alaska Native population (271 vs. 54 per 100,000 persons).

In 2009, the Office of Minority Health and Office of Women's Health solicited an application from the ACR to develop resources for educating non-rheumatologists, both in training and in practice, to recognize the signs and symptoms of lupus and make appropriate referrals. The ACR created TLI to carry out this task. TLI has developed a robust platform to disseminate lupus-related research and training with the overarching goal of eliminating racial, ethnic and gender related health disparities in the diagnosis and treatment of lupus.

In 2014, the CDC provided funding to the NACDD to develop a National Public Health Agenda for Lupus, which was released in October 2015 (available online at <http://www.chronicdisease.org/?page=LupusHome>). The Agenda is organized and framed under the CDC Four Domains of Chronic Disease Prevention that include epidemiology and surveillance; environmental approaches; health care system interventions; and community

programs linked to clinical services. The Agenda also addresses health disparities and communication strategies and provides a broad public health approach to lupus diagnosis, disease management, treatment and research. The six priorities, 15 strategies and 63 recommendations set forth in the Agenda are intended as a guide to plan effective lupus initiatives, and will complement efforts in lupus biomedical research and clinical care. The National Public Health Agenda for Lupus defined six key public health priorities:

- Create better case definitions of lupus that are appropriate for clinical diagnosis, surveillance and research.
- Expand epidemiology, surveillance and public health research for incidence, quality of care, adverse outcomes and mortality, with a high priority for those studying health disparities.
- Develop, improve and increase the availability of evidence-based disease self-management programs and techniques.
- Enhance local, regional and national capacity to provide information and resources for people with lupus, their families, friends and caregivers, providers, public health practitioners and researchers.
- Support the development of robust care coordination models that facilitate collaboration between primary care providers and rheumatologists. This will help ensure people with lupus are diagnosed early and receive appropriate treatments, preventive health screenings and services and a smooth transition from pediatric to adult care.
- Implement public awareness campaigns clearly illustrating the complexities of lupus and the importance of early identification and diagnosis and effective disease management.

Public health agencies and private, non-profit, and governmental partners at the national, state, and local levels are encouraged to work together on those actions that best fit their missions, needs, interests, and capabilities.

### 3. Expectations

Contractors awarded funding are specifically expected to:

1. Convene a one-day workshop, attended by diverse state and local partners, to initiate, expand, and/or sustain state, regional and local partnerships to develop a state plan to address lupus;
2. The organization of the Plan is to reflect the four domains of the National Public Health Agenda for Lupus: epidemiology and surveillance; environmental approaches; health care system interventions; and community programs linked to clinical services (Attachment C);
3. The Plan shall include recommendations to address health disparities faced by populations at highest risk for developing lupus;
4. The Plan shall include a focus on sustainability by including realistic action steps to sustain partnership activities and partnerships beyond the funding period;
5. Participate in monthly conference calls among contractors, their partners, NACDD and TLI;
6. Assist NACDD and TLI in implementing an evaluation program to track results and impact, and;

7. Prepare and submit to NACDD quarterly progress reports and one final report describing the extent to which project goals and objectives have been met and lessons learned.

## **B. ELIGIBILITY**

Applications will be accepted from state health departments, community-based or faith-based organizations or academic institutions. Community coalitions and organized entities with a mission that supports healthy communities/reducing chronic disease and associated risk factors in communities, regions, organizations, and systems are also eligible to apply. Examples of eligible applicant organizations include, but are not limited to, groups, coalitions, community agencies or organizations that represent:

- State and Local Health Departments
- Aging service organizations and senior centers
- American Indian or Alaska Native tribal organizations
- Business, community, and/or faith-based leaders
- Chambers of Commerce
- City and county governments
- Community, health care, voluntary, and/or professional organizations
- Community health centers
- Existing community coalitions (especially those already focusing on lupus)
- Faith-based organizations
- Health care providers
- Parks and recreation departments
- Patient advocacy organizations
- Persons with disabilities
- Schools, school-based and school-linked clinics and organizations and other local education agencies
- Local YMCAs
- Universities, schools of public health and academic health centers

The following are ineligible for funding consideration:

- Individuals.
- Organizations applying for the sole purpose of acquiring funds to supplement existing programs without any plan for enlarging their scope of work.
- Organizations applying to purchase equipment.
- Organizations proposing activities not related to lupus health education.

To receive consideration for funding, applicants must:

- Be a public or private not for profit organization.
- Demonstrate a relationship with a state-level Office of Minority Health or Office of Health Equity through a required letter of commitment to participate in the planning workshop.

- Demonstrate a relationship with the Chronic Disease Director in the State Health Department through a required letter of commitment to participate in the planning workshop, if the applicant is not the State Health Department.

### **C. PROJECT PERIOD AND AVAILABILITY OF FUNDING**

Awards will be made for a project period of eight (8) months beginning January 1, 2018 and ending on August 31, 2018.

It is anticipated that one contract of \$11,000 will be made, depending on availability of funds.

#### *Resources and Tools*

NACDD will offer technical assistance (TA) to contractors. The TA will be delivered through monthly conference calls among the contractors, their partners, NACDD and TLI. These calls will provide an opportunity for grantees to raise questions, share lessons learned, and network with other grantees. Individual TA will also be provided via email and telephone on an as-needed and ongoing basis throughout the duration of the funding period. Staff members from TLI will be available to provide instruction on message delivery, community outreach and event planning. As part of the summit, TLI will provide the online version of a Lupus Awareness Toolkit.

The following resources and tools may also be useful to applicants:

- a. The National Association of Chronic Disease Directors: [www.chronicdisease.org](http://www.chronicdisease.org)
- b. The National Public Health Agenda for Lupus: A Blueprint for Action. [www.chronicdisease.org/?page=LupusHome](http://www.chronicdisease.org/?page=LupusHome)
- c. American College of Rheumatology /The Lupus Initiative – [www.thelupusinitiative.org](http://www.thelupusinitiative.org)
- d. National Association of State Offices of Minority Health - [www.nasomh.org](http://www.nasomh.org)
- e. [The National Association of Area Health Education Centers](http://www.nationalahec.org) – [www.nationalahec.org](http://www.nationalahec.org)
- f. Directors of Health Promotion and Education – [www.dhpe.org](http://www.dhpe.org)
- g. Centers for Disease Control and Prevention – [www.cdc.gov/lupus](http://www.cdc.gov/lupus)
- h. Lupus Foundation of America – [www.lupus.org](http://www.lupus.org)
- i. Lupus Research Institute – [www.lupusresearchinstitute.org](http://www.lupusresearchinstitute.org)

### **D. PREAPPLICATION INFORMATIONAL CONFERENCE CALL**

There will be a conference call on Monday, September 18, 2017 at 1pm for potential applicants to ask questions about this funding announcement and the application process. Please submit questions in advance to [lbest@chronicdisease.org](mailto:lbest@chronicdisease.org); questions will also be accepted during the call. To participate in the call, please use the following: Dial-in Number: 1-866-707-2374; Passcode 1303479#

## **E. SUBMISSION PROCESS DEADLINES**

**Application:** The application must be submitted electronically to Leslie Best at [lbest@chronicdisease.org](mailto:lbest@chronicdisease.org) no later than 8:00 pm eastern time on November 1, 2017. No hard copies or faxes will be accepted. Late submissions will not be accepted.

**Notification of awards:** Applicants will be notified of award decisions no later than December 5, 2017.

**Funding period begins: January 1, 2018**

## **F. PROJECT REQUIREMENTS**

### **1. Resource Allocation**

- **Matching funds:** Matching funds from applicants and partners are not required.
- **In-kind support:** In-kind contributions of staff time and other resources are expected both from the applicant and from project partners.
- **Fiscal agent:** Applicants may use a fiscal agent to accept funds.
- **Use of funds:** Funds may be used to support travel of invited partners, meeting room rental or AV support, meeting supplies and copying of materials. Funds may not be used to provide meals at the meeting.

### **2. Reporting and Information Sharing**

- Quarterly progress reports will be due to NACDD during the project period on April 10; and July 10, 2018.
- A final project report and final financial reports will be due to NACDD on September 10, 2018.
- All awardees must be willing to share information about their project and respond to reasonable requests for information after the project period has ended so that NACDD and its partners may continue to monitor the impact of the program.

### **3. Evaluation/Final Report**

Each contractor should keep records during the planning process in order to evaluate the process, their successes and challenges. The final report is due to [lbest@chronicdisease.org](mailto:lbest@chronicdisease.org) by September 10, 2018.

Grantees must address the following in the final report:

- **Background:**
  - Goal of the workshop
  - Date and location of the workshop
- **Methodology:**
  - How meeting participants were selected
  - How the meeting and the final plan were organized using the Four Domains of Chronic Disease Prevention and Control

- **Results:**
  - Main challenges related to convening the workshop and how these challenges were addressed.
  - Who were the key partners involved and what were their roles?  
Names of attendees and affiliations
  - Main findings from summit, including a copy of the written Plan.
- **Discussion:**
  - What lessons were learned about developing partnerships to address lupus?
- **Future Activities:**
  - To what extent will your organization continue activities related to the workshop outcomes in the next six months? Describe any planned or potential activities.
  - Describe plans for sustaining the partnerships and to implement recommendations of the Plan.

## **APPLICATION CONTENT**

Application is maximum five double-spaced pages - excluding the cover page, budget and appendices. Application should be prepared using Times New Roman, 12-point font and one-inch margins.

### **1. Cover Page** (one page, see Attachment A for template)

- Applicant name
- Contact names and information (including e-mail address and fax number) for the project lead.
- Project title
- Fiscal agent, if other than applicant
- Statement of Interest and summary of project objectives (maximum 50 words)

### **2. Project Overview: Background, Need and Strategy (10 points):**

- Document the need for the proposed project by providing a brief summary of lupus burden and intended audience for application. Describe opportunities for partnership development and/or expansion as a result of the workshop and partnerships. Describe any anticipated challenges and indicate your planned approach for overcoming these challenges.

### **3. Readiness and Partnerships/Coalitions (25 points):** Please provide the following:

- List of current or prospective partnerships or collaborations relevant to the application
- A concise plan to recruit new stakeholders for the workshop
- Describe current coalition or organizational entity's capacity and collaboration efforts with health issues specific to chronic disease prevention and health promotion, especially lupus.
- Description of how the coalition's demographics reflect the intended audience.
- All applicants should also include a description of current and past work in lupus, such as existing state plan, coalition, education and awareness, and specific successful outcomes as a result of those activities.

- Include a plan to collaborate with the state chronic disease director and how current partnerships will be sustained following the end of the project period.

**4. Project Objectives and Work Plan (30 points):** Clearly describe how:

- The project's objectives and the activities or steps that will be used to convene the workshop, invite attendees and mobilize partnerships. Describe how the planning for the workshop will be executed.
- Any current relationship with the state chronic disease director, or how a partnership with the chronic disease director will be developed to assist in initiating, expanding, and/or sustaining activities.
- Describe how resources and toolkits provided by the Lupus Initiative will be distributed and used during the workshop.
- Describe how the final plan will be prepared and reviewed following the meeting.
- Describe how the meeting discussions and final plan will reflect the Four Domains of Chronic Disease Prevention and Control.

**5. Evaluation and Sustainability (25 points):** Describe in as much detail as possible the plan to sustain or expand the project after the funding period has ended, how it will be done and who will be responsible. Sustainability plan should address partnership building as well as fiscal support for continuation. Use Attachment B, Activity Matrix, to include measurements and markers to evaluate progress and accomplishments

**6. Letters of Commitment** are required from the state health department Chronic Disease Director (if the applicant is not the state health department). Letters of commitment should include information about how the proposed activities fit within the ongoing efforts of the partner and expand current efforts of the group or coalition, and specific details about how the partner and state or local health department will collaborate to ensure mutual success. Letters of commitment are not scored, and are intended to demonstrate how collaborations may be cultivated and expanded with state health departments, Offices of Minority Health and other lupus grantees.

**SCORING AND TECHNICAL REVIEW**

Overview - Background, Need and Strategy: The extent to which:

- Need for proposed project and project's intended impact are articulated
- Challenges and opportunities related to convening the workshop and partnership development are described.
- How well data is used to describe disease burden

Readiness and Partnerships: The extent to which:

- How well the plan to convene statewide partners described.
- Preliminary or preparatory work related to implementation of the selected action item(s) is described, if applicable.
- Describe the applicant's organizational capacity to plan and implement the proposed work plan

- How well the applicant describes previous collaborative efforts to address chronic disease health issues.
- History of working with the state chronic disease director and/or any preliminary work that has been done to engage the chronic disease director in the proposed project is described.

Project Objectives and Work Plan: The extent to which:

- Objectives and work plan are realistic to meet established objectives.
- Detailed work plan describing project activities is included and matches with activity matrix.

Evaluation and Sustainability: The extent to which:

- The plan to maintain the partnerships developed through the workshop is described.
- The plan to obtain fiscal support to maintain and expand proposed activities

**Attachment A:** Application Cover Page

**Attachment B:** Sample Activity Matrix.

**Attachment C:** Four Domains of Chronic Disease Prevention and Control

**Attachment C:** Line-item budget and budget narrative. Not scored.

**Attachment D:** Letters of Commitment. Not scored.

The project described was supported by grant number 6 NU58DP006138; CFDA number 93.068, Developing and Disseminating Programs to Build Sustainable Lupus Awareness, Knowledge, Skills and Partnerships.

**Attachment A**

State:		Project Title:	
Amount requested:	\$		
<b>Applicant Name / Project Lead</b>		<b>State Chronic Disease Director</b>	
Name:		Name:	
Title:		Title:	
Agency:		Agency:	
Address:		Address:	
Phone:		Phone:	
Fax:		Fax:	
Email:		Email:	
Letter of Commitment		Letter of Commitment	
<b>State Office of Minority Health or Office of Health Equity</b>		<b>Fiscal Agent Contact (if applicable)</b>	
Name:		Name:	
Title:		Title:	
Agency:		Agency:	
Address:		Address:	
Phone:		Phone:	
Fax:		Fax:	
Email:		Email:	

Statement of Interest, project goals and objectives (50 words max):

**Attachment B: Activity Matrix Example**

<b>Activity Matrix</b>									
		<b><u>Key Staff Responsibilities</u></b>		<b><u>Time Line</u></b>					
	<b><u>Activity</u></b>	<b><u>Applicant</u></b>	<b><u>Partners</u></b>	<b><i>Month / Year</i></b>					
				<b>Feb 2018</b>	<b>April 2018</b>	<b>June 2018</b>	<b>August 2018</b>		
<b><u>Objective 1</u></b>	1.								
	2.								
	3.								
<b><u>Objective 2</u></b>	1.								
	2.								
	3.								

Attachment D and E: Budget and budget narrative, which should briefly explain (one page max) how the funds will be used in each of the budget categories. This section is not scored.