

**U.S. Department of Health and Human Services  
Centers for Disease Control and Prevention (CDC)  
American Recovery and Reinvestment Act of 2009  
*Communities Putting Prevention to Work (CPPW)***

**Category A (Obesity, Physical Activity, and Nutrition) Guidance Proposal**

Funding Opportunity Number: CDC-RFA-DP09-912ARRA09

Link to Funding Opportunity Announcement (FOA):

<http://www07.grants.gov/search/search.do;jsessionid=4KLQKKIHFV1K87dMQcM4Q76rBR3Tgw1gWYNJ1hfRnhvXr2kPc4Y!478192032?oppld=49571&mode=VIEW>

**In an effort to identify communities that are interested in applying as a state sponsored community, it is important that you complete this document in its entirety and provide all the requested information. The information provided in this document will assist the Department of Community Health, Division of Public Health in identifying communities that have the infrastructure, partnerships, and leadership commitment to successfully fulfill the requirements of this funding announcement. If you have questions regarding any of the information requested in this document, you may contact Kimberly Redding, M.D., at 404-657-6652, or by e-mail at [kredding@dhr.state.ga.us](mailto:kredding@dhr.state.ga.us)**

Guidance Proposal Deadline: The completed document must be received by the State Division of Public Health no later than **12:00 noon on October 28, 2009**.

Submit the completed document electronically to Babbett Willis at [bawillis4@dhr.state.ga.us](mailto:bawillis4@dhr.state.ga.us)

County Health Department Name:

Georgia Public Health District:

Local Health Department Contact Name:

Email:

Phone:

Fax:

**Note:** The information requested in this document is taken directly from the required recipient activities listed in the above referenced Funding Opportunity Announcement.

See FOA guidance pages 7 – 14 for Category A overview regarding: 1) program infrastructure, staffing, program management, and support; 2) fiscal management; 3) leadership team and community coalition; 4) intervention area and selection of interventions; 5) community action plan; 6) community-wide and school-based policy, systems, and environmental change strategies; 7) evaluation to monitor/measure progress; and 8) participation in programmatic support activities.

**Required Recipient Activities**

**I. Program Infrastructure and Fiscal Management (See pages 7-8 of FOA guidance)**

**A. Identify required staff, qualifications, and responsibilities**

- Provide a list of the proposed project staff
- Discuss roles of project staff related to implementation of CPPW; include percentage of time that will be committed to this project
- Describe staff experience with policy development, and working with political leaders and policy makers

**B. Fiscal management system(s) in place to fulfill Recovery Act reporting requirements outlined in Section VI.3**

- List the lead/fiduciary agency
- Describe your capacity/system to ensure accountability for expenditures related to performance for all partners
- Describe your capacity/system for meeting ARRA reporting requirements (as referenced in American Recovery and Reinvestment Act SEC.1512. Reports on Use of Funds)

**II. Leadership Team and Coalitions** (See page 9 of FOA guidance)

**A. Identify potential members of the Leadership Team**

- List of potential members
- Describe how leadership team members will actively participate in overseeing the strategic direction of project activities; be responsible for enacting selected policy changes; establish and maintain an organization structure and governance for the community coalition or coalitions; and participate in project-related local and national meetings
- Describe the specific roles leadership team members will play in meeting the goals of the initiative including amount of time team members are willing to commit to this project; indicate whether leadership team member is the leader of their particular organization or institution
- List resources leadership team members will contribute to this initiative

*(Note: if your community is included in the State application, letters of support from potential members of the leadership team must be submitted to the state for inclusion in the final application. Letters must detail the member's commitment to advance the broad-based policy changes selected from the menu of evidence-based MAPPs strategies or other proposed interventions. Letters will be included as part of State application appendices.)*

**B. Description of existing community coalition or coalitions**

- List any existing, established community coalition(s)
- Describe the coalition leadership, focus, community/agency representation
- Detail previous/current work of the coalition
- If applicable, how members of existing coalition(s) have successfully worked together and in collaboration with community leaders to implement broad-based

policy, systems, and environmental change initiatives include information on past successes

- Describe how linkages with other community-based efforts will be achieved

*(Note: If your community is included in the State application membership lists, minutes, MOAs may be requested for submission with final State application as an appendix.)*

**C. Letter of support – not applicable at this time** *(Note: letter of support from mayor, county executive that demonstrates their commitment to the supporting the CPPW Initiative and the reporting requirements does not need to be submitted with this guidance information. If your community is included in the State application, letters of support will be required for submission with the final State application.)*

**D. Other Federal ARRA collaborations**

- List other ARRA collaborations, if any
- How will you leverage other Federally-funded (including Recovery Act funded) and foundation activities *(See Attachment B of FOA guidance for examples)*

**III. Intervention Area and Populations of Need** *(See page 10 of FOA guidance)*

**A. Jurisdiction of the health department (intervention area)**

- Describe the geographic location and size of the intervention area, include any unique geographic characteristics of the intervention area
- Describe the target population including demographics, and location of the target population

**B. Local data**

- Include population size
- Population demographics
- Substantiate the existing burden
- Describe any existing disparities (for example: populations of highest need, (minority populations, low-income, medically underserved, persons with disabilities, etc.)
- Provide data on existing health risk behaviors and risk factors
- Describe assets and barriers to successful program implementation
- List any existing county level policy, systems, or environment changes that have been implemented

**C. Assets and barriers to successful program implementation.**

- Describe specific assets or barriers to successful program implementation

**IV. Selection of Risk Factors and Interventions** (See page 10 of FOA guidance. Includes table listing Media, Access, Point of Purchase, Price, and Social Support-MAPPS- interventions)

**A. Risk factors to be addressed**

- List the specific risk factors that will be addressed ( obesity, physical activity, nutrition)

**B. Intervention strategies across five evidence-based MAPPS strategies to be implemented.**

- Describe the selected interventions, including description of size and location of population(s) to be served and proposed intervention area
- Provide a justification for the selected intervention (*Note: must include a justification of why the interventions were selected including assessment of current needs and assets in the community related to obesity/physical activity/nutrition. Justification should reflect assets and needs of the community; decision to include or not include required interventions; and potential for broad reach and impact consistent with short and long-term goals of the initiative*)
- Describe how you will incorporate cultural and linguistic diversity in selected interventions and address the needs of specific populations disproportionately impacted by chronic diseases (i.e., low-income groups, racial and ethnic groups, persons with disabilities, and people with clinical and sub-clinical substance use and/or mental disorders).
- Describe your sustainability plan and how activities will be sustained when ARRA funds are no longer available
- Describe how other resources in the community have been leveraged (e.g., foundation funding, state funding, private sector funds etc.)

*(Note: If you are proposing an intervention not included in the prescribed menu of MAPPS interventions, you must explain why the intervention was chosen. You must provide justification for the choice of the intervention - e.g. identified need or opportunity - and demonstrate that the intervention has the potential for broad reach and impact not achievable with a listed intervention.)*

**D. Impact on the entire jurisdiction of the health department and how the interventions have the potential for broad reach and impact.**

- Describe how the selected interventions will impact the entire jurisdiction of the health department and the potential for broad reach and impact (must ensure

that the selection of interventions takes into account the gaps and opportunities that exist in the community)

**E. *Community Action Plan.*** (See page 11 of FOA guidance.)

- Provide a draft of your community action plan. Your community action plan should describe an overall integrated strategy that identifies the selected interventions; describes key activities; describes milestones and timelines on achieving intervention implementation; identifies anticipated policy outcomes; and includes SMART Objectives (Specific, Measurable, Achievable, Relevant, Time-Framed) for each intervention. If your community is included in the State application the Community Action Plans will be included as part of the appendix to the State application. Actions plans must be designed to impact entire jurisdiction and achieve short and long-term goals of the initiative
- Describe how proposed intervention strategies will build on and complement, but not duplicate, existing programs and the potential synergy created through multiple interventions:

**F. *Interaction with the state health department, national experts, foundations and CDC on the implementation of selected interventions.***

- Describe how proposed activities will be coordinated with state and community-level programs to prevent and control chronic disease

**V. *Evaluation to Monitor/Measure Progress*** (See page 12 of FOA guidance)

**A. *Overall plan to evaluate the initiative at the community level, including participation in the national evaluation strategy.***

- Describe your overall plan to evaluate this initiative at the community level
- Explain how you will collect required ARRA performance measures in the required format and according to the required reporting schedule
- Describe how you will collaborate fully in external, independently coordinated evaluation activities to evaluate the overall impact of the initiative, especially the national evaluation activities
- Describe how you will work with the state health department, national contractors, and CDC on evaluation activities

- Describe how you will collect YRBSS data according to the YRBSS standard protocol, including identification of a YRBSS lead who will attend a 3-day YRBSS training in August 2010

*(Note: communities included in the final State application will be required to provide letters of support from all public school districts within the intervention area indicating support for implementing the YRBSS survey using standard YRBSS protocol for baseline during the fall semester of the 2010-2011 school year and follow-up at the end of the project period. Letters of support will be included in the appendices of the final State application).*

***B. If engaged in biometric data collection and wish to improve efforts, describe current approach (e.g. target audience including which school-age populations (which ages/grades), method of data collection, frequency of data collection, and evidence of validity and reliability of data collected as well as plans for upgrading the current approach with these funds.***

- If applicable, plans to upgrade or expand biometric data collection
- Describe current activities to collect data in school-age populations

## **VI. Community Programmatic Support Needs** *(See page 13 of FOA guidance)*

***A. Description of support needed that could be addressed by CDC, national experts, and/or expert communities.***

- Describe opportunities, supports, and barriers to achieving intended outcomes
- Describe barriers to achieving broad reach and impact
- Specific topic areas where programmatic support will be needed