

Funding Opportunity Announcement: Influenza and Zoonoses Education among Youth in Agriculture Program

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PART I: OVERVIEW INFORMATION

Issuing Organization: Council of State and Territorial Epidemiologists (CSTE) at www.cste.org

Participating Organizations: CSTE and Centers for Disease Control and Prevention (CDC)– Cooperative Agreement number **1 NU38OT000297**.

Components of Participating Organizations

National Center for Immunization and Respiratory Diseases (NCIRD/CDC), at <https://www.cdc.gov/ncird/>

National Center for Emerging and Zoonotic Infectious Diseases (NCEZID/CDC), at <https://www.cdc.gov/ncezid/>

PART II: FULL TEXT OF ANNOUNCEMENT

Section I. Funding Opportunity Description

Statement of Purpose

The purpose of this notice of funding opportunity is to identify state or large city¹ public health agencies, or past participating institutions, to promote local, state, regional, and national partnerships that encourage One Health collaborations, activities, and community education on zoonotic diseases, as well as to adopt and adapt resources and best practices developed through this program. The Council of State and Territorial Epidemiologists (CSTE) will continue to support capacity building for prevention of influenza and other zoonotic diseases through collaborations between state and local public health and animal health departments, and civic and nonprofit youth agricultural organizations through this program.

Background

Zoonotic diseases are illnesses that spread between animals and humans. Zoonotic diseases may be caused by viruses, bacteria, fungi, and parasites. These diseases can cause many different types of illnesses in people and animals ranging from mild to serious, sometimes even resulting in death. Some animals can appear healthy even when they are carrying pathogens that can make people sick. It is estimated that 6 out of every 10 known infectious diseases in people originate in animals or animal food products, and 3 out of every 4 new or emerging infectious diseases in people are spread from animals.² From 2010 to 2015 in the United States, approximately 100 human infectious disease outbreaks involving animals in public settings were reported to the Centers for Disease Control and Prevention (CDC).³ Young people with close animal contact in the United States are at increased risk for infection and are more likely to have complications from zoonotic diseases, especially novel influenza A viruses, *Salmonella*, and *E. coli*.²

¹ Large city is defined as a population over 1 million.

² Taylor LH et al. Risk Factors for Human Disease Emergence. *Philos Trans R Soc Lond B Biol Sci.* 2001 July 29; 356(1411): 983–989

³ [Compendium of Measures to Prevent Disease Associated with Animals in Public Settings, 2017](#)

Reassortant influenza viruses can emerge when a single host (e.g., a pig or bird or human) is infected with different influenza viruses, and there is an exchange of cellular genetic material between those viruses. There may be little or no immunity against these new influenza viruses in the human population. A reassortant animal influenza virus could then be transmitted to humans and, if it readily spreads from person to person, could cause an influenza pandemic, as it did during the 2009 H1N1 pandemic. Influenza viruses that normally circulate in pigs are called “variant” viruses when they are found in humans as a novel human infection. Influenza A (H3N2) variant viruses (also known as “H3N2v” viruses) with the matrix (M) gene from the 2009 H1N1 pandemic virus were first detected in people in July 2011. This detection indicates that humans had transmitted the 2009 H1N1 pandemic virus back to swine. Swine influenza A (H3N2) virus with the matrix (M) gene from the 2009 H1N1 pandemic virus was first identified in U.S. pigs in 2010. In 2011, 12 human infections with H3N2v virus were detected in the US. The highest number of H3N2v human infections detected in one season was in 2012 when 309 confirmed cases across 12 states were identified. These outbreaks occurred primarily in children who reported close contact with swine or their environment at agricultural fairs, many of whom were exhibitors participating in 4-H events. Human infection with H3N2v viruses has continued, with cases associated with swine exhibits continuing to occur.⁴ This demonstrates the need to fill gaps in knowledge of infectious disease and disease processes, particularly in the context of diseases that are transmitted between animals and people, especially those who have close and prolonged contact with animals.

Each year in the United States, an estimated 450,000 illnesses, 5,000 hospitalizations, and 76 deaths in humans result from enteric infections linked to contact with animals or their environments.⁵ These enteric illnesses are caused by Salmonella, E. coli, Campylobacter, Cryptosporidium, Listeria and Yersinia enterocolitica. Animals such as livestock, poultry, and reptiles often carry these pathogens, and other animals can also carry pathogens and spread disease to humans. Other zoonotic diseases, such as brucellosis or Q fever, also pose a risk to people who have contact with infected livestock or consume certain animal products like raw milk.

The surveillance and reporting of animal contact outbreaks provide valuable insights into the pathogens, animal hosts, settings, and other factors related to these zoonotic illnesses. Knowing more about outbreaks increases our understanding of pathogens and their effects on human health, which can help strengthen prevention measures. These prevention measures are especially important in settings such

⁴ Andrew S. Bowman, Rasna R. Walia, Jacqueline M. Nolting et al. Influenza A(H3N2) Virus in Swine at Agricultural Fairs and Transmission to Humans, Michigan and Ohio, USA, 2016. *Emerg Infect Dis.* 2017;23(9):1551-1555.

⁵ Christa R. Hale, Elaine Scallan, Alicia B. Cronquist, John Dunn, Kirk Smith, Trisha Robinson, Sarah Lathrop, Melissa Tobin-D’Angelo, Paula Clogher, Estimates of Enteric Illness Attributable to Contact With Animals and Their Environments in the United States, *Clinical Infectious Diseases*, Volume 54, Issue suppl_5, June 2012, Pages S472–S479, <https://doi.org/10.1093/cid/cis051>

as youth agriculture programs and classrooms to prevent outbreaks of disease and transmission of illness between animals and people.

On March 11, 2020, the World Health Organization (WHO) declared the global outbreak of COVID-19, the disease caused by SARS-CoV-2 virus, a pandemic. All human coronaviruses have an animal origin, therefore some initial transmission of the virus from animals to humans occurred before human-to-human transmission became the most common method of disease spread.⁶ While the virus that causes COVID-19 spreads mainly from person to person through respiratory droplets from coughing, sneezing, and talking, recent studies show that people who are infected but do not have symptoms likely also play a role in the spread of COVID-19. A range of animal species, including pets, zoo animals, and wildlife, have been infected with SARS-CoV-2, but we don't yet know all the animal species that can be infected.⁷ At this time, there is no evidence that animals play a significant role in spreading the virus that causes COVID-19, although infected animals have been identified in more than 30 countries around the world.⁶ Based on the limited information available to date, the risk of animals spreading COVID-19 to people is considered to be low. Further investigations are needed to understand if and how different animal species could be affected by COVID-19. This novel pandemic coronavirus underscores the vulnerability of the human population to zoonotic diseases and provides yet another example of the need for a One Health approach to address issues at the human-animal-environment interface.

A One Health approach is needed to prevent, detect, respond, and control zoonotic diseases. One Health is a collaborative, multisectoral, and trans-disciplinary approach— working at the local, state, regional, national, and global levels— with the goal of achieving optimal health outcomes recognizing the interconnection between people, animals, plants, and their shared environment. The burden of human illness caused by zoonotic disease highlights the need to continue delivering disease prevention and control messages and creating innovative products, like training materials, educational curriculum, and games. Additionally, strengthening One Health networks and coordination mechanisms among local, state, and regional human, animal, and environmental health departments and agricultural communities across the country is crucial.

In addition to promoting zoonotic disease education for youth, family, and the community, key stakeholders at the state and national levels have identified the need for better collaboration between public health and animal health, especially members of the agricultural and other communities that have frequent contact with animals, such as farmers, 4-H and FFA organizations, veterinarians, the agritourism industry, and the animal industry. Programs funded by CSTE to address these needs in the last seven years have served not only to educate youth about diseases but have facilitated collaborative human case identification and public health outbreak response efforts. CSTE and its partners hope to

⁶ Ye, Z. W., Yuan, S., Yuen, K. S., Fung, S. Y., Chan, C. P., & Jin, D. Y. (2020). Zoonotic origins of human coronaviruses. *International journal of biological sciences*, 16(10), 1686–1697. <https://doi.org/10.7150/ijbs.45472>

⁷ COVID-19 and Animals, 2020. <https://www.cdc.gov/coronavirus/2019-ncov/daily-life-coping/animals.html>

build upon and enhance the reach and impact from these efforts and expand the evidence base for future animal and public health policy decision-making.

CSTE seeks to promote communication and increase collaboration between national, state, and local partners through this program and for future endeavors. The Centers for Disease Control and Prevention (CDC) is a key partner in this program. CDC has provided both financial and technical assistance to support public health and animal health departments collaborating with youth agricultural organizations to develop educational materials for zoonotic disease prevention and control since the inception of this program in 2012. This program also collaborates with the National Association of State Public Health Veterinarians (NASPHV). NASPHV is a professional organization of state public health veterinarians that addresses zoonotic disease issues of animal health and public health concern. CSTE and NASPHV partner to provide resources for national, state, and local regulatory bodies along with guidance on surveillance and public health practice using a One Health approach. Other partners for the program have included the U.S. Department of Agriculture's (USDA) Animal and Plant Health Inspection Service (APHIS)-Veterinary Services and the 4-H National Office in the National Institute for Food and Agriculture (NIFA).

Partnerships developed through this program have leveraged the experience and ability of human and animal health zoonotic disease experts in several organizations to create an integrated One Health approach to prevent and respond to zoonoses in people and animals. The motivating principles of this collaboration include reducing human morbidity and mortality due to zoonotic diseases and developing relationships among stakeholders to facilitate more effective and efficient responses to shared human and animal health threats.

Since 2014, CSTE has provided support to health departments and academic institutions for partnership work related to zoonotic diseases between human health and animal health departments and youth agriculture organizations at the state and local levels.⁸ CSTE aims to continue this work in 2022 by promoting local, state, regional, and national partnerships and encouraging regional collaboration between health departments and partners to adopt and adapt resources and best practices developed through this program. CSTE welcomes new and returning sites to apply to this funding opportunity.

Objectives

The partnership's motivating principles include facilitating prevention, monitoring, detection, response, and control of zoonotic diseases, especially emerging diseases, such as novel influenza with pandemic potential. Program objectives are to:

1. Develop relationships among One Health stakeholders to facilitate more effective and efficient animal health and public health responses, particularly during infectious disease outbreaks.

⁸ Note that most youth agricultural organizations also have public health and community focused activities as well as other educational focus areas.

- a. Work within or across state lines to create sustainable statewide, regional and/or national One Health partnership networks to prevent and respond to novel influenza infections and other zoonotic disease threats.
 - b. Establish One Health networks to strengthen the coordination, communication, and collaboration of One Health partners.
 - c. Improve preparedness and response to zoonotic disease outbreaks through development of One Health partnerships.
2. Implement or strengthen the use of a One Health approach towards the prevention and control of zoonoses in people and animals.
 - a. Facilitate a better understanding of the role that human and animal health have in disease prevention.
 - b. Increase participant awareness and knowledge of careers in human and animal health.
 3. Develop or expand the evidence base for animal and public health interventions and policies for prevention of animal influenza viruses and other zoonotic disease transmission to humans in public settings.
 - a. In a measurable way, improve participant awareness and knowledge of influenza and other zoonotic diseases, including disease transmission and prevention measures.
 - b. Evaluate the educational materials developed from this program and methods for delivery of those materials to inform animal health and public health in increasing awareness and uptake of practices and policies to prevent transmission of animal influenza and other zoonotic diseases.
 - c. Expand availability of educational resources (e.g., language translation to reach additional populations)
 - d. Develop guidance/resources to inform public health interventions for these settings that can be published or shared with the scientific community.
 4. Motivate participants and/or their communities to adopt positive behavior change, such as obtaining flu vaccinations, implementing hand washing and biosecurity measures, and risk mitigation measures (i.e., social distancing and masks) in the event of an epidemic or a pandemic, such as COVID-19, to prevent the spread of disease.

Deliverables

To meet the above-mentioned objectives, the awardee will be required to meet the following sets of deliverables:

- Identify a project coordination team or workgroup. This team should include:
 - Primary project coordinator(s) responsible for all project deliverables and communications with CSTE/CDC. Primary project coordinator(s) must be representatives of state public health or a previously participating institution/agency.
 - This project coordination team or workgroup should include but is not limited to:

- state or local public health department
- a youth agricultural organization
- state animal health or agriculture department
- additional contributors may include county/state/national fair board representative, commodity group representative, or academic institutions, as examples.
- Letters of support are required for all contributing agencies/institutions, including from the additional collaborating state.
- Contribution/responsibility to this project should be detailed for each project contributor.
- Propose methods to implement delivery and evaluation of zoonotic disease educational content targeting youth in agriculture in their jurisdiction, which can include COVID-19. The applicant should plan to use funding primarily to implement delivery of content already developed, though new material development is permissible under the award if a gap in content exists.
 - For the highest funding level, applicants should plan to conduct educational and evaluation activities in at least one other state that faces similar animal and novel influenza and other zoonotic disease challenges. For examples of materials that have already been developed, please visit the [Influenza and Zoonoses Education Among Youth in Agriculture Resource Repository](#).
- A plan for sustainability of the project after the funding period concludes, including opportunities to transfer successful elements of existing zoonotic and other animal and novel influenza programming to one or more other states.
- A description of impact and indicators to assess that impact (e.g., an estimate of the number of participants that proposed activities will engage).
 - A plan to evaluate the effectiveness of educational materials delivered during the project period.
 - A plan to evaluate One Health collaboration and communication.
- Communicating and sharing outcomes of the project
 - A plan to share the outcomes of the project (e.g., communicating with partners, presenting at meetings/conferences, publishing in a journal)
- Identify site representation at a two-day meeting, either in-person or virtually (Date and location TBD).
 - Participation should include at least one representative from each of the following collaborating entities: State Public Health Department (or primary project coordinator, as applicable) and Youth Agricultural Organization.
 - If in-person, CSTE will provide meeting logistics and travel support for up to two representatives from each participating state/institution (additional participants to be approved by CSTE and CDC, as funding allows).

Timeline

January 31, 2022	Release of funding opportunity announcement
February 18, 2022	Letter of intent due date
March 14, 2022	Applications due date
March 15 – April 1, 2022	Application review
By April 8, 2022	Notice of award
April 11-29, 2022	CSTE/Awardee contracting period
May 1, 2022	Project period begins
May 2022 – July 2023	Attend relevant conference calls and meetings (e.g., individual and all-site calls, two-day program meeting either in-person or virtual)
By August 31, 2022	Submit quarterly written progress report and drafts of educational materials/resources as relevant.
By November 30, 2022	Submit quarterly written progress report and drafts of educational materials/resources as relevant.
By March 31, 2023	Submit quarterly written progress report and drafts of educational materials/resources as relevant.
By July 31, 2023	Project period ends; submit final report and final deliverables.

**Please note that the timeline is subject to change*

Section II. Award Mechanism
Mechanism(s) of Support

CSTE will manage matters related to financial support for this project. Funding for this project will be firm-fixed. CSTE intends to commit up to one of the three tiers of funding as a subaward (see below). The final award amount is contingent on submission of a detailed and reasonable budget proposal, to be approved by CSTE, and the availability of funds.

- Tier 1: up to \$50,000
- Tier 2: up to a total of \$75,000
- Tier 3: up to a total of \$100,000

Funds Available

Funding is provided by CDC Cooperative Agreement number **1 NU380T000297**. All subawards are subject to the most recent award terms and conditions, *Uniform Administrative Requirements, Cost Principles, and Audit Requirements for HHS Awards* (45CFR part 75), and other laws and regulations affecting Federal Assistance.

All costs must be allowable in accordance with the Federal cost principles outlined in 45 CFR part 75.

Each applicant will be responsible for its own costs associated with the preparation and submission of this application. CSTE will not be liable for costs incurred by the respondent in preparation and

submission of a response to this funding opportunity, regardless of the outcome of the selection process.

This is not a research and development award.

CSTE intends to fund successful applicants up to one of three funding threshold tiers:

- Tier 1: up to \$50,000
- Tier 2: up to a total of \$75,000
- Tier 3: up to a total of \$100,000

Applicants are required to submit, at minimum, an application for the Tier 1 threshold (\$50,000). If applicants would like to be considered for funding at the Tier 2 and Tier 3 thresholds (up to a total of \$75,000 and \$100,000 respectively), methods and scalable budgets should be developed for the funding tier of interest, as well as the lower funding level(s). For example, if a site is applying for the Tier 3 threshold, they must also include methods, activities, and budgets for the Tier 1 (\$50,000) and the Tier 2 (\$75,000) thresholds. Sites who are interested in being considered for all the funding levels will be expected to submit three (3) budgets and workplans that together total no more than \$100,000. Because the nature and scope of each proposed project will vary, the size of each award may vary by site.

Proposals at the Tier 3 level (\$100,000) will be expected to demonstrate plans and capacity to function as a regional hub with the ability to administer technical assistance and educational programs in surrounding states that may not have the capacity to independently develop and implement an educational program. Applicants proposing the highest \$100,000 funding threshold must have (1) participated in and completed at least one (1) previous CSTE award cycle for youth in agriculture program and (2) demonstrated strong involvement from multiple partners during that award period.

Section III. Eligibility Information

Eligible Applicants

Eligible applicants are non-federal public health professionals (including, but not limited to, those from public health agencies and institutions of higher education) with advanced knowledge and experience with public health surveillance and prevention as it relates to zoonotic diseases.

CSTE must ensure that the selected applicant(s) are neither suspended nor debarred from receiving federal funds and that the applicant(s) meet any other funding eligibility requirement imposed by the Cooperative Agreement. CSTE's determination of whether the applicant is eligible to receive federal funding will be definitive and may not be appealed. In the event that CSTE determines that the selected applicant(s) is ineligible to receive federal funding, CSTE will nullify the subrecipient agreement or will cease negotiation of contract terms.

Section IV. Application and Submission Information

Content and Form of Application Submission

The application should be no longer than 15 pages (not including the budget), and should be written using a 12-point, double-spaced, unrounded, Times New Roman font, on 8.5x11 inch paged paper with one-inch margins. Additional pages or appendices that are not required may not be reviewed. Please include the headings below in the order listed and address all the issues included under each heading. CSTE intends to fund successful applicants up to one of three funding threshold tiers:

- Tier 1: up to \$50,000
- Tier 2: up to a total of \$75,000
- Tier 3: up to a total of \$100,000

Applicants should submit, at minimum, an application for the Tier 1 threshold (\$50,000). If applicants would like to be considered for funding at the Tier 2 and Tier 3 thresholds (a total of \$75,000 and \$100,000 respectively), methods and budgets should be developed for each funding level of interest as noted in Section 2.2 – Funds Available.

1. Contact Information (1-page limit)
 - a. Information for primary project coordinator(s) should include name, position, mailing address, email address, and phone number. Primary project coordinator(s) must be representatives from the public health department or past participating institution/agency, as applicable. Information for the following points of contact should also include email, position, mailing address, and phone number:
 - i. State or Local Health Department coordinator (or past participating institution, as applicable)
 - ii. Primary Youth Agricultural Organization coordinator
 - iii. Additional contributors such as: State Animal Health, State Public Health team members, Fair Board Representative, or University-affiliated participants not already included as primary project coordinator(s)
2. Project Coordination Team (1-page limit)
 - a. Identify the project coordination team by name, position, email address, and affiliation.
 - b. The Project Coordination Team must include representation from state public health department or past participating institution/agency, youth agricultural organization(s), state animal health, and state public health (if not already included as a primary project coordinator).
 - c. Project Coordination Team may include additional project contributors, including but not limited to, county/state/national fair board representative, relevant commodity group (e.g., National Pork Board, etc.).
3. Background (1-page limit)
 - a. Description of public/animal health problem in applicant's state.
4. Resources (2-page limit)

- a. Personnel and infrastructure available and necessary to support project and ensure sustainability (e.g., administrative personnel; source of matching funds, if available; existing platforms that can be leveraged to meet project objectives; description of prior collaboration with relevant partners at USDA or CDC on animal or novel influenza, other zoonoses, One Health, or public and animal health education projects).
5. Methods (maximum 4 pages per funding level project proposal)
 - a. The methods for the minimum funding threshold (Tier 1: \$50,000) according to the objectives outlined in “Section 1.2 – Objectives” must be fully described. Methods proposed for the Tier 2 threshold (\$75,000) should only include additional activities beyond the Tier 1 proposal. Methods proposed for the Tier 3 threshold (\$100,000) should only include additional activities beyond the Tier 2 proposal. Applicants must include the following:
 - i. a description of proposed project deliverables and content delivery
 - ii. desired impact (including description of how project helps to solve public/animal health problem identified above)
 - iii. project plan
 - iv. project timetable
 - v. plans for evaluation (CDC subject matter will be available during the project period to support evaluation of project activities if needed)
6. Letters of support (1-page limit per letter)
 - a. A letter of support is required from all contributing agencies/organizations/institutions (as applicable, see Section 1.3 – Deliverables).
7. Budget and justification (no page limit)
 - a. A detailed budget for each proposed funding tier level as well as budget justification must be provided. Proposed budget should be reasonable and include the amount of funding needed and line-item description of how it will be appropriated to:
 - i. Personnel Time
 - ii. Subawards
 1. Other supplemental costs needed to successfully implement this project (if any) including but not limited to travel costs (within and across state borders), supplies, purchased software, etc. All costs must be allowable, reasonable, and allocable per the Federal cost principle regulations outlined in 2 CFR part 200 Subpart E.

For further assistance, technical questions, or inquiries about the application, contact Beth Daly at edaly@cste.org. Representatives from CSTE will be available to speak to potential applicants to discuss technical or administrative questions. All questions and answers will be made available to all potential applicants upon request.

Submission Dates and Times

Submission, Review, and Anticipated Start Dates:

- Letter of Intent Receipt Date: **Submissions due by 11:59 PM EST February 18, 2022**
- Application Submission Receipt Date: **Submissions due by 11:59 PM EST March 14, 2022**
- Award Notification Date: **By April 8, 2022**
- Anticipated Start Date: **May 1, 2022**

Submitting an Application:

Application materials should be sent to **Beth Daly** at edaly@cste.org by **11:59 PM EST on March 14, 2022**. Applications submitted after this deadline may not be reviewed. Notification of successful receipt of the application will be sent to the applicant upon request.

Section V. Application Review Information

Criteria

The following criteria will be used to review all submitted applications:

Criteria and Prioritization for Tier 1 and Tier 2 Proposals (combined)	Maximum Points
<p>How well does the submission meet requirements with regards to completeness and appropriateness of the application?</p> <ol style="list-style-type: none"> 1. Completeness of application including all content in Sections 1.3, 2.2, and 4.1 and a separate workplan/budget for each funding tier applied split into Phases I and II (3 points) 2. Letters of support for all contributing agencies/institutions are included in the application (2 points) 	5
<p>To what extent will the proposal meet the primary objectives of the project? (5 points/question)</p> <ol style="list-style-type: none"> 1. How will the proposal improve participant awareness and knowledge of novel influenza and other zoonotic diseases, including disease transmission and prevention, and knowledge of careers in public and animal health? 2. Will the proposal motivate participants to adopt behaviors that can help prevent zoonotic disease transmission? 3. Will the proposal enhance One Health networks and partnerships within the jurisdiction? 4. To what extent are these impacts (e.g., local, regional, national) and outcomes measurable, and is there an evaluation plan? 5. Will the proposal address the likely contributions to the evidence base for policy and public health practice related to zoonotic disease prevention in community settings? 	25

To what extent does the proposal leverage existing resources that are currently being used to address public and animal health concerns in the state? **20**

(5 points/question)

1. Does the proposal utilize existing platforms for public and/or animal health within the state?
2. Are there any opportunities for cost sharing, matching, or cost participation?
3. If the proposal describes development of a new project, how sustainable is it once the funding provided by this announcement is exhausted (i.e., using only state or local resources)?
4. Does the proposal provide a plan for sustainability beyond the project period?

Does the applicant have a record of demonstrated success in a collaboration between human and animal health authorities with a youth agriculture organization? **15**

1. How much will the proposal develop relationships among One Health partners that could be used to facilitate more effective and efficient responses to important public and animal health issues? (3 points)
2. Does the proposal demonstrate previous work between state and/or local public health authorities and a youth agriculture organization? (2 points)
3. Does that previous collaboration provide a platform to use this award to expand the reach and impact of that existing collaboration? (2 points)
4. Does the applicant demonstrate the potential to “export” successful components of existing collaboration to one or more other states with the technical assistance of CSTE and CDC? (3 points)
5. Are partners at the state or local public health, state or local animal health, and youth agricultural organization levels and/or past participating institutions involved in the project and to what extent does the project include participation from these organizations? (5 points)

How feasible is the proposed implementation workplan, timeline, and budget? **25**

1. Does the proposal include a thorough description of project deliverables and an adequate project plan? (3 points)
2. Is there a clear and appropriate timeline for implementation? (2 points)
3. Are the staff roles clearly defined and as described, will the staff be sufficient to accomplish the program goals? (3 points)
4. Does the proposal include a project budget with line-item description of how funding would be allocated? Is the budget reasonable and consistent with the purpose of the announcement, the proposed objectives, and project timeline? (10 points)
5. Is there an evaluation plan for the program? (5 points)
6. Is there a plan for publications? (2 points)

To what extent does the applicant demonstrate a clear and comprehensive understanding of the underlying public health issue that this opportunity targets? **10**

1. Does the submission include a well-defined description of the public/animal health problem(s) that currently exist or are anticipated to exist in the state, including novel influenza threats and other zoonotic disease threats? (3 points)
2. Does the applicant have prior experience with One Health partnerships between animal and human health? (3 points)
3. Do the staff members have sufficient experience with public and animal health to develop a successful project? (4 points)

Grand Total **100**

Additional Criteria for Tier 3 Threshold (\$100,000) **25**

Applications at the \$100,000 threshold will also be scored upon the additional criteria below:

To what extent does the proposal demonstrate the ability to leverage resources to support interstate exchange of information to address public and animal health concern? **10**

Does the applicant have a record of demonstrated success regarding interstate collaboration among public health, animal health, a youth agricultural organization, and other key stakeholders? Does the proposal demonstrate applicant's capacity to serve as a lead/collaborator at a regional level? **10**

Do the methods and projected outcomes demonstrate scalability of program as a platform for varied public health priorities? **5**

Maximum Grand Total for Tier 3 Threshold (\$100,000) Applicants **125**

Review and Selection Process

Eligible applications that are complete will be evaluated for scientific and technical merit by CSTE in accordance with the review criteria stated above. A review panel of CSTE National Office staff, CSTE Steering Committee members, and subject matter experts may score the applications. Funding awards will be made based upon the quality of the submitted proposal and the ability of the applicant to meet the criteria stated above.

Section VI. Award Admission Information

Award Notices

All applicants will be notified via email no later than **April 8, 2022**. The successful applicant will receive funding through a subaward agreement.

Administrative Requirements

This funding opportunity will be governed by the sub-award agreement between CSTE and the applicant organization. Agreement with CSTE's contract terms and conditions is a requirement. CSTE reserves the right to accept or decline any proposed changes to the terms or conditions. Selected sites should be able to return a signed contract to CSTE within 30 days of receiving it. See Attachment A for CSTE's standard terms and conditions.

Risk Determination

In accordance with the requirements of the Cooperative Agreement, CSTE is responsible for evaluating each Subrecipient's risk of non-compliance with Federal statutes, regulations, and the terms and conditions of the Subaward Agreement. Upon award notification, CSTE will issue a brief survey to assess the subrecipients' internal organizational management and financial controls. This risk assessment will inform monitoring and technical assistance activities.

Award Recipient Responsibilities

The award recipient will have primary responsibility for the following:

- 1) Accomplishing the objectives and completing the deliverables listed in this announcement.
- 2) Providing written progress reports and invoices to CSTE as required in the contractual agreement.
- 3) Communicating through multiple avenues on a regular basis for feedback and discussion (e.g., conference calls, emails, etc.).
- 4) Actively engaging partners and stakeholders and providing management oversight for the overall project including collaborations with national, state, and local partners.
- 5) Ensuring that all funds are used solely for authorized purposes.
- 6) Obtaining the appropriate human subjects' clearances at local sites, if required.
- 7) Initiate an appropriate agreement with state animal health, youth agricultural organization, and other partners and to ensure participation.
- 8) Monitoring the terms of any contracts and/or agreements between subrecipient and other agency/institution. If Subrecipient disburses any funds received pursuant to this award, it must include all mandatory federal requirements in its subawards and contracts.
- 9) Participating in scheduled conference calls related to the project.
- 10) Send relevant representation to 2-day meeting, either in-person or virtually (Date and location TBD).

CSTE Responsibilities

CSTE will have the primary responsibility for the following:

- 1) Serving as the awardee's principal point of contact between participants, CDC, and other stakeholders.
- 2) Facilitating work and providing avenues for communication between awardee and stakeholders.
- 3) Monitoring the terms of the agreement.
- 4) Funding according to the terms of the subaward agreement.
- 5) Providing information about the progress of the program to the CSTE Executive Board and to CDC.
- 6) Reviewing and distributing progress reports and the final report with CDC.
- 7) Providing technical expertise.
- 8) Convening an independent review panel of experts to provide an objective review of the submitted applications.
- 9) Providing CSTE staff to support the day-to-day activities of the Influenza and Zoonoses Education Among Youth in Agriculture Program.

CDC Responsibilities

CDC will have the primary responsibility for the following:

- 1) Provide technical assistance in developing project plans and materials
- 2) Provide technical assistance on evaluation efforts, as requested
- 3) Assist with review of proposed project plans and materials
- 4) Assist, where feasible, with expansion of projects to other jurisdictions

Collaborative Responsibilities

CSTE and CDC Collaborative Partnership in conjunction with the recipient contacts for all awarded projects will continue participation in a Project Coordination Committee (PCC). Each recipient contact will be a member of the PCC and will participate in its activities. The PCC will function to:

- 1) Establish goals, promote collaboration, share best practices, and coordinate project activities among members of the PCC.
- 2) Provide guidance to project coordinators regarding project implementation and sustainability.
- 3) Evaluate monthly progress of all funded project activities.

For More Information

For more information, contact:

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