



## **BOARD OF SUPERVISORS AGENDA ITEM REPORT** **CONTRACTS / AWARDS / GRANTS**

☐ Award ☐ Contract ☒ Grant

Requested Board Meeting Date: 10/16/2018

\* = Mandatory, information must be provided

or Procurement Director Award ☐

**\*Contractor/Vendor Name/Grantor (DBA):**

Centers for Disease Control and Prevention (CDC)

**\*Project Title/Description:**

REACH Pima Partnership

**\*Purpose:**

The REACH Pima Partnership brings together entities with a history of successful collaboration on health and wellness issues among American Indian (AI) and Mexican-American (MA) populations throughout Pima County. The partners will build on existing Community Action Coalitions to develop and implement interventions that specifically engage MA and AI communities in Pima County by targeting families served by schools with a high percentage of students receiving free and reduced lunch. The project will design and implement programming designed to address tobacco use, poor nutrition and physical inactivity with a specific focus on school-aged children and their families. The project aims to improve health, prevent chronic diseases, and reduce health disparities among our population at the highest risk/burden of chronic diseases including hypertension, heart disease, Type 2 diabetes, and obesity.

**\*Procurement Method:**

Not Applicable - grant award

**\*Program Goals/Predicted Outcomes:**

Over the next 5 years, we propose to: 1) Develop and disseminate specific tobacco control, nutrition and physical activity messages through multi-media outlets; 2) Train tobacco retailers located near schools on preventing sales to minors; 3) Train community health representatives (CHR's) to increase referrals to tobacco cessation, nutrition services and chronic disease management/prevention resources; 4) Provide workshops on tobacco-free workplaces and housing; 5) Facilitate Farmer's Market vendors participating in SNAP; 6) Promote operator incentive program to incorporate healthy menu options; 7) Promote the Loop to support physical activity, recreation, and cultural learning for children and families served by adjacent schools; 8) Establish a school-based program targeting mothers in poverty that focuses on self-efficacy, increased knowledge of health care systems, and advocacy skills.

**\*Public Benefit:**

Reduction of chronic disease risk and health disparities in Pima County, particularly for the most at-risk populations.

**\*Metrics Available to Measure Performance:**

The project includes dedicated local and national evaluation of performance by an independent entity and will include a comprehensive review of the project and projected outcomes.

**\*Retroactive:**

Yes. Notice of award was received on 09/19/18 with an effective award date of 9/30/18.

**\*NOTE:** The award letter inaccurately references a *de minimis* indirect cost rate of 10%, this language will be corrected to a flat 10% indirect cost rate in the Budget modification documents that are due by November 15, 2018.

**Contract / Award Information**

Document Type: \_\_\_\_\_ Department Code: \_\_\_\_\_ Contract Number (i.e., 15-123): \_\_\_\_\_

Effective Date: \_\_\_\_\_ Termination Date: \_\_\_\_\_ Prior Contract Number (Synergen/CMS): \_\_\_\_\_

☐ Expense Amount: \$\* \_\_\_\_\_ ☐ Revenue Amount: \$ \_\_\_\_\_**\*Funding Source(s) required:**Funding from General Fund? ☐ Yes ☒ No If Yes \$ \_\_\_\_\_ % \_\_\_\_\_Contract is fully or partially funded with Federal Funds? ☐ Yes ☐ No**If Yes, is the Contract to a vendor or subrecipient?**Were insurance or indemnity clauses modified? ☐ Yes ☐ No*If Yes, attach Risk's approval.*Vendor is using a Social Security Number? ☐ Yes ☐ No*If Yes, attach the required form per Administrative Procedure 22-73.***Amendment / Revised Award Information**

Document Type: \_\_\_\_\_ Department Code: \_\_\_\_\_ Contract Number (i.e., 15-123): \_\_\_\_\_

Amendment No.: \_\_\_\_\_ AMS Version No.: \_\_\_\_\_

Effective Date: \_\_\_\_\_ New Termination Date: \_\_\_\_\_

Prior Contract No. (Synergen/CMS): \_\_\_\_\_

☐ Expense or ☐ Revenue ☐ Increase ☐ Decrease Amount This Amendment: \$ \_\_\_\_\_Is there revenue included? ☐ Yes ☐ No If Yes \$ \_\_\_\_\_**\*Funding Source(s) required:**Funding from General Fund? ☐ Yes ☐ No If Yes \$ \_\_\_\_\_ % \_\_\_\_\_**Grant/Amendment Information** (for grants acceptance and awards)☒ Award ☐ AmendmentDocument Type: GTAW Department Code: HD Grant Number (i.e., 15-123): 19\*0033Effective Date: 09/30/18 Termination Date: 09/29/19 Amendment Number: \_\_\_\_\_☐ Match Amount: \$ \_\_\_\_\_ ☒ Revenue Amount: \$ 762,865.00**\*All Funding Source(s) required:** Centers for Disease Control and Prevention (CDC)**\*Match funding from General Fund?** ☐ Yes ☒ No If Yes \$ \_\_\_\_\_ % \_\_\_\_\_**\*Match funding from other sources?** ☐ Yes ☒ No If Yes \$ \_\_\_\_\_ % \_\_\_\_\_**\*Funding Source:** \_\_\_\_\_**\*If Federal funds are received, is funding coming directly from the Federal government or passed through other organization(s)?**Directly from the Federal GovernmentContact: Donald GatesDepartment: HealthTelephone: 724-7843Department Director Signature/Date: Marcy M. [Signature] 10/09/2018Deputy County Administrator Signature/Date: [Signature] 10/10/18County Administrator Signature/Date: C. [Signature] 10/11/18  
(Required for Board Agenda/Addendum Items)

1. DATE ISSUED MM/DD/YYYY 09/16/2018  
2. CFDA NO. 93.738  
3. ASSISTANCE TYPE Cooperative Agreement

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

CDC Office of Financial Resources

2920 Brandywine Road  
Atlanta, GA 30341

NOTICE OF AWARD

AUTHORIZATION (Legislation/Regulations)  
317(K)(2) 42 USC 247B(K)(2)

1a. SUPERSEDES AWARD NOTICE dated

except that any additions or restrictions previously imposed remain in effect unless specifically rescinded

4. GRANT NO.

1 NUS8DP006600-01-00  
Formerly

5. ACTION TYPE

New

6. PROJECT PERIOD

MM/DD/YYYY  
From 09/30/2018

MM/DD/YYYY  
Through 09/29/2023

7. BUDGET PERIOD

MM/DD/YYYY  
From 09/30/2018

MM/DD/YYYY  
Through 09/29/2019

8. TITLE OF PROJECT (OR PROGRAM)

REACH Pima Partnership

9a. GRANTEE NAME AND ADDRESS

PIMA COUNTY  
Alternate Name: Pima County Health Department  
3950 S Country Club Rd Ste 100  
Tucson, AZ 85714-2226

9b. GRANTEE PROJECT DIRECTOR

Dr. Francisco Garcia  
3950 S COUNTRY CLUB RD STE 100  
TUCSON, AZ 85714-2666  
Phone: 5207247733

10a. GRANTEE AUTHORIZING OFFICIAL

Dr. Donald Gates  
3950 S Country Club Road  
COPE  
Tucson, AZ 85714-2666  
Phone: 520-724-7843

10b. FEDERAL PROJECT OFFICER

Zachary Harris  
4700 Buford Highway  
Chamblee, GA 30341  
Phone: 770-488-8177

ALL AMOUNTS ARE SHOWN IN USD

11. APPROVED BUDGET (Excludes Direct Assistance)

I Financial Assistance from the Federal Awarding Agency Only

I

II Total project costs including grant funds and all other financial participation

a. Salaries and Wages	231,136.00
b. Fringe Benefits	69,752.00
c. Total Personnel Costs	300,888.00
d. Equipment	0.00
e. Supplies	72,000.00
f. Travel	8,634.00
g. Construction	0.00
h. Other	53,400.00
i. Contractual	258,428.00
j. TOTAL DIRECT COSTS	693,350.00
k. INDIRECT COSTS	69,335.00
l. TOTAL APPROVED BUDGET	762,685.00
m. Federal Share	762,685.00
n. Non-Federal Share	0.00

12. AWARD COMPUTATION

a. Amount of Federal Financial Assistance (from item 11m)	762,685.00
b. Less Unobligated Balance From Prior Budget Periods	0.00
c. Less Cumulative Prior Award(s) This Budget Period	0.00
d. AMOUNT OF FINANCIAL ASSISTANCE THIS ACTION	762,685.00
13. Total Federal Funds Awarded to Date for Project Period	762,685.00

14. RECOMMENDED FUTURE SUPPORT

(Subject to the availability of funds and satisfactory progress of the project):

YEAR	TOTAL DIRECT COSTS	YEAR	TOTAL DIRECT COSTS
a. 2		d. 5	
b. 3		e. 6	
c. 4		f. 7	

15. PROGRAM INCOME SHALL BE USED IN ACCORD WITH ONE OF THE FOLLOWING ALTERNATIVES:

- a. DEDUCTION  
b. ADDITIONAL COSTS  
c. MATCHING  
d. OTHER RESEARCH (Add / Deduct Option)  
e. OTHER (See REMARKS)

b

16. THIS AWARD IS BASED ON AN APPLICATION SUBMITTED TO, AND AS APPROVED BY, THE FEDERAL AWARDDING AGENCY ON THE ABOVE TITLED PROJECT AND IS SUBJECT TO THE TERMS AND CONDITIONS INCORPORATED EITHER DIRECTLY OR BY REFERENCE IN THE FOLLOWING:

- a. The grant program legislation  
b. The grant program regulations.  
c. This award notice including terms and conditions, if any, noted below under REMARKS.  
d. Federal administrative requirements, cost principles and audit requirements applicable to this grant.

In the event there are conflicting or otherwise inconsistent policies applicable to the grant, the above order of precedence shall prevail. Acceptance of the grant terms and conditions is acknowledged by the grantee when funds are drawn or otherwise obtained from the grant payment system.

REMARKS (Other Terms and Conditions Attached -

☒ Yes

☐ No)

GRANTS MANAGEMENT OFFICIAL: Merlin Williams

17. OBJ CLASS 41.51	18a. VENDOR CODE 1866000543A2	18b. EIN 866000543	19. DUNS 144733792	20. CONG. DIST. 03
FY-ACCOUNT NO.	DOCUMENT NO.	ADMINISTRATIVE CODE	AMT ACTION FIN ASST	APPROPRIATION
21. a. 8-9390AG1	b. 18NUS8DP006600	c. DP	d. \$762,685.00	e. 75-18-0948
22. a.	b.	c.	d.	e.
23. a.	b.	c.	d.	e.

## NOTICE OF AWARD (Continuation Sheet)

PAGE 2 of 2	DATE ISSUED 09/16/2018
GRANT NO. 1 NU58DP006600-01-00	

## Direct Assistance

BUDGET CATEGORIES	PREVIOUS AMOUNT (A)	AMOUNT THIS ACTION (B)	TOTAL (A + B)
Personnel	\$0.00	\$0.00	\$0.00
Fringe Benefits	\$0.00	\$0.00	\$0.00
Travel	\$0.00	\$0.00	\$0.00
Equipment	\$0.00	\$0.00	\$0.00
Supplies	\$0.00	\$0.00	\$0.00
Contractual	\$0.00	\$0.00	\$0.00
Construction	\$0.00	\$0.00	\$0.00
Other	\$0.00	\$0.00	\$0.00
Total	\$0.00	\$0.00	\$0.00

## **AWARD ATTACHMENTS**

Pima County Health Department

1 NU58DP006600-01-00

- 
1. Terms and Conditions
  2. Summary Statement

## AWARD INFORMATION

**Incorporation:** In addition to the federal laws, regulations, policies, and CDC General Terms and Conditions for Non-research awards at <https://www.cdc.gov/grants/federalregulationspolicies/index.html>, the Centers for Disease Control and Prevention (CDC) hereby incorporates Notice of Funding Opportunity (NOFO) number **DP18-1813**, entitled **Racial and Ethnic Approaches to Community Health (REACH)**, and application dated **July 16, 2018**, as may be amended, which are hereby made a part of this Non-research award, hereinafter referred to as the Notice of Award (NoA).

**Approved Funding:** Funding in the amount of **\$762,685** is approved for the Year **01** budget period, which is **September 30, 2018** through **September 29, 2019**. All future year funding will be based on satisfactory programmatic progress and the availability of funds.

The federal award amount is subject to adjustment based on total allowable costs incurred and/or the value of any third party in-kind contribution when applicable.

Note: Refer to the Payment Information section for Payment Management System (PMS) subaccount information.

**Financial Assistance Mechanism:** Cooperative Agreement

**Substantial Involvement by CDC:** This is a cooperative agreement and CDC will have substantial programmatic involvement after the award is made. Substantial involvement is in addition to all post-award monitoring, technical assistance, and performance reviews undertaken in the normal course of stewardship of federal funds.

CDC program staff will assist, coordinate, or participate in carrying out effort under the award, and recipients agree to the responsibilities therein, as detailed in the NOFO.

CDC activities to ensure the success of the project will include the following:

- Provide ongoing technical assistance.
- Provide REACH implementation guidance to recipients on identifying and implementing strategies and activities.
- Facilitate collaborative opportunities with national partners.
- Information Sharing between recipients.
- Facilitate routine conference calls, webinars, and information exchange between recipients.
- Develop mechanism for documenting and sharing lessons learned.
- Convene recipient meetings.

CDC will:

1. Ensure that recipients have access to expertise found throughout NCCDPHP. For example, a team of subject matter experts could include, but is not limited to, the project officer, health scientists, epidemiologists, statisticians, policy analysts, communication specialists, health economists, and evaluators to provide technical assistance to recipients. Technical assistance teams will also work in collaboration with other programs and divisions across NCCDPHP to identify specific actions that improve efficiency and greater public health impact.

2. Collaborate with recipients to explore appropriate flexibilities needed to meet public health outcomes and goals. Flexibility in cooperative agreements includes recipient's ability to propose alternative methods to achieve the outcomes and goals of the cooperative agreement that align with recipient's opportunities for success, infrastructure, partner and stakeholder buy-in, demographics, and burden. This includes bringing together resources from multiple cooperative agreements to jointly advance the goals of each, and expanding the dialogue to bring in other CDC and recipient staff to reach a win/win solution.
3. Create greater efficiencies and consistency across NCCDPHP programs for recipients. Examples of how NCCDPHP divisions and programs work together to achieve this include but are not limited to:
  - Joint site visits that maximize the ability to do collaborative problem solving, offer insights and ideas to strengthen or augment recipient approaches, and increase understanding of recipient's context to accomplish chronic disease prevention and health promotion.
  - Jointly developed resources and tools that focus on cross-cutting functions, settings, domains, risk factors, conditions and diseases to ensure consistent messages and to meet recipient technical assistance needs.
  - Joint training and technical assistance opportunities that help recipients produce policies and programs that are more holistic and fully supportive of work in tobacco, nutrition, physical activity, chronic disease management and other strategies and topics, as appropriate. Continue and expand support for recipients to leverage NCCDPHP resources to address cross-cutting functions, domains, settings, risk factors and diseases.
4. Continue and expand support for recipients to leverage NCCDPHP resources to address crosscutting functions, domains, settings, risk factors and diseases.

**Objective Statement Response Requirement:** The review comments on the strengths and weaknesses of the proposal are provided as part of this award. A response to the weaknesses in these statements must be submitted to and approved, in writing, by the Grants Management Specialist/Grants Management Officer (GMS/GMO) noted in the Staff Contacts section of this NoA, no later than 45 days from the budget period start date. Failure to submit the required information by the due date, **November 15, 2018**, will cause delay in programmatic progress and will adversely affect the future funding of this project.

**Budget Revision Requirement:** By **November 15, 2018** the recipient must submit a revised budget with a narrative justification and work plan via [www.grantsolutions.gov](http://www.grantsolutions.gov).

The recipient must submit the following:

- **Total Budget:** Overall budget was reduced due to lack of available funding. Please provide a revised budget reflecting the proposed amount for each budget category based on the approved funding level of \$762,685.

Failure to submit the required information in a timely manner may adversely affect the future funding of this project. If the information cannot be provided by the due date, you are required to contact the GMS/GMO identified in the Staff Contacts section of this notice before the due date.

<b>FUNDING RESTRICTIONS AND LIMITATIONS</b>
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**Indirect Costs:** The recipient's indirect costs are approved and based on a de minimis rate of ten (10) percent of modified total direct costs (MTDC) as defined in 45 CFR Part 75.2, effective September 30, 2018.

## **REPORTING REQUIREMENTS**

Performance information collection initiated under this grant/cooperative agreement has been approved by the Office of Management and Budget under **OMB Number 0920-1132, "Performance Progress and Monitoring Report", Expiration Date 8/31/2019.** The components of the PPMR are available for download at: <https://www.cdc.gov/grants/alreadyhavegrant/Reporting.html>.

**Recipient Evaluation and Performance Measurement Plan:** Within 6 months from the start of the award, the recipient will submit a more detailed Evaluation and Performance Measurement Plan including a Data Management Plan (DMP), if applicable. CDC and recipients will use evaluation and performance measurement to determine if program activities are scalable and effective at reaching the priority populations. In developing evaluation and performance measurement plans, applicants are encouraged to use the following resource: CDC Framework for Program Evaluation in Public Health ([www.cdc.gov/eval](http://www.cdc.gov/eval)). CDC will work with recipients during the first six months to revise and finalize evaluation plans and performance measures.

### **Required Disclosures for Federal Awardee Performance and Integrity Information System**

**(FAPIIS):** Consistent with 45 CFR 75.113, applicants and recipients must disclose in a timely manner, in writing to the CDC, with a copy to the HHS Office of Inspector General (OIG), all information related to violations of federal criminal law involving fraud, bribery, or gratuity violations potentially affecting the federal award. Subrecipients must disclose, in a timely manner in writing to the prime recipient (pass through entity) and the HHS OIG, all information related to violations of federal criminal law involving fraud, bribery, or gratuity violations potentially affecting the federal award. Disclosures must be sent in writing to the CDC and to the HHS OIG at the following addresses:

CDC, Office of Grants Services  
Natasha Jones, Grants Management Officer/Specialist  
Centers for Disease Control and Prevention  
Office of Grants Services/Office of Financial Resources  
Chronic Disease and Birth Defects Services Branch  
2920 Brandywine Rd., MS E-09  
Atlanta, GA 30341  
Telephone: (770) 488-1649  
Fax: (404) 471.8415 (Include "Mandatory Grant Disclosures" in subject line)  
Email: [njones6@cdc.gov](mailto:njones6@cdc.gov) (Include "Mandatory Grant Disclosures" in subject line)

AND

U.S. Department of Health and Human Services  
Office of the Inspector General  
ATTN: Mandatory Grant Disclosures, Intake Coordinator  
330 Independence Avenue, SW  
Cohen Building, Room 5527  
Washington, DC 20201

Fax: (202)-205-0604 (Include "Mandatory Grant Disclosures" in subject line) or  
Email: [MandatoryGranteeDisclosures@oig.hhs.gov](mailto:MandatoryGranteeDisclosures@oig.hhs.gov)



Recipients must include this mandatory disclosure requirement in all subawards and contracts under this award.

Failure to make required disclosures can result in any of the remedies described in 45 CFR 75.371. Remedies for noncompliance, including suspension or debarment (See 2 CFR parts 180 and 376, and 31 U.S.C. 3321).

CDC is required to report any termination of a federal award prior to the end of the period of performance due to material failure to comply with the terms and conditions of this award in the OMB-designated integrity and performance system accessible through SAM (currently FAPIIS). (45 CFR 75.372(b)) CDC must also notify the recipient if the federal award is terminated for failure to comply with the federal statutes, regulations, or terms and conditions of the federal award. (45 CFR 75.373(b))

#### **PAYMENT INFORMATION**

*The HHS Office of the Inspector General (OIG) maintains a toll-free number (1-800-HHS-TIPS [1-800-447-8477]) for receiving information concerning fraud, waste, or abuse under grants and cooperative agreements. Information also may be submitted by e-mail to [hhstips@oig.hhs.gov](mailto:hhstips@oig.hhs.gov) or by mail to Office of the Inspector General, Department of Health and Human Services, Attn: HOTLINE, 330 Independence Ave., SW, Washington DC 20201. Such reports are treated as sensitive material and submitters may decline to give their names if they choose to remain anonymous.*

**Payment Management System Subaccount:** Funds awarded in support of approved activities have been obligated in a newly established subaccount in the PMS, herein identified as the "P Account". Funds must be used in support of approved activities in the NOFO and the approved application. All award funds must be tracked and reported separately.

The grant document number identified on the bottom of Page 1 of the Notice of Award must be known in order to draw down funds.

#### **PROGRAM OR FUNDING SPECIFIC CLOSEOUT REQUIREMENTS**

The final programmatic report format required is the following.

**Final Performance Progress and Monitoring Report (PPMR):** This report should include the information specified in the NOFO and is submitted 90 days following the end of the period of performance via [www.grantsolutions.gov](http://www.grantsolutions.gov). At a minimum, the report will include the following:

- Statement of progress made toward the achievement of originally stated aims.
- Description of results (positive or negative) considered significant.
- List of publications resulting from the project, with plans, if any, for further publication.

Additional guidance may be provided by the GMS and found at:

<https://www.cdc.gov/grants/alreadyhavegrant/Reporting.html>

Performance information collection initiated under this grant/cooperative agreement has been approved by the Office of Management and Budget under **OMB Number 0920-1132, "Performance Progress and Monitoring Report", Expiration Date 8/31/2019.**

#### **CDC Staff Contacts**

**Grants Management Specialist:** The GMS is the federal staff member responsible for the day-to-day management of grants and cooperative agreements. The GMS is the primary contact of recipients for

business and administrative matters pertinent to grant awards.

**GMS Contact:**

Natasha Jones

**Grants Management Specialist**

Centers for Disease Control and Prevention

Office of Grants Services/Office of Financial Resources

Chronic Disease and Birth Defects Services Branch

2920 Brandywine Rd., MS E-09

Atlanta, GA 30341

Telephone: (770) 488-1649

Email: njones6@cdc.gov

**Program/Project Officer:** The PO is the federal official responsible for monitoring the programmatic, scientific, and/or technical aspects of grants and cooperative agreements, as well as contributing to the effort of the award under cooperative agreements.

**Project Officer Contact:**

**David Guthrie**

Centers for Disease Control and Prevention

National Center for Chronic Disease Prevention and Health Promotion (NCCDPHP)

4770 Buford Hwy., NE Mailstop F-77

Atlanta, GA 30341

Telephone: (770) 488-1174

Email: dxg1@cdc.gov

**S**

**Grants Management Officer:** The GMO is the federal official responsible for the business and other non-programmatic aspects of grant awards. The GMO is the only official authorized to obligate federal funds and is responsible for signing the NoA, including revisions to the NoA that change the terms and conditions. The GMO serves as the counterpart to the business officer of the recipient organization.

**GMO Contact:**

Patricia French

**Grants Management Officer (GMO)**

Centers for Disease Control and Prevention

Office of Grants Services/Office of Financial Resources

Chronic Disease and Birth Defects Services Branch

2920 Brandywine Road, Mailstop E-09

Atlanta, GA 30341

Telephone: (770) 488-2849

Email: pff6@cdc.gov

# 2018 Racial and Ethnic Approaches to Community Health (REACH) Compilation

Application Number: NU58DP2018007185

Application Name: Pima County Health Department

State: AZ City: Tucson

## Scoring Criteria

### **Criterion 1: Approach**

#### **Strength:**

Page: 13

The applicant demonstrates the burden of disease for Mexican Americans and American Indians in Pima County. They will target moms with culturally tailored approaches through the school system along with the Mothers in Arizona moving ahead program.

The approach section of the application narrative is organized well and includes valuable and compelling data on the demographics, geography, and burden of chronic diseases among Mexican Americans and American Indians.

The applicant references a community health needs assessment conducted in 2015 that indicates the prevalence of preventable public health issues among the target populations.

To address the problem, the applicant suggests implementing and evaluating community-led interventions; linking community and clinical efforts to improve health; using community health workers; training and assisting community leaders to advocate for health policies to address chronic conditions; and using multi-media communication to promote healthy behaviors. These reflect an effort to address all 4 health outcomes.

The applicant will engage families and youth through existing school-based programs as well as through connections made by coalition members.

The applicant makes efforts to target youth for tobacco, nutrition, and physical activity behaviors.

Page: 13-32 (pdf pages)

The applicant describes a local assets mapping process that involves community members.

#### **Weakness:**

Page: 13-20

Representatives from the state health department are not listed as a part of the coalition.

The applicant is unclear about how schools will be selected and which target age groups will participate.

The application would be stronger if the applicant included evaluation findings confirming the success of the Mothers in Arizona Moving Ahead (MAMA) program and cancer patient navigation program(p. 16).

The outcome measure for physical activity (p.15) may be difficult to collect if it is not tracked over a long period of time.

## **Criterion 2: Evaluation and Performance Measurement**

### **Strength:**

Page: 20-24

The evaluation and performance measurement section reflected the thoughtful consideration of the indicators for the proposed activities.

The applicant proposes using a mixed methods approach to the evaluation that will include and engage the community coalition as well as Mexican American and American Indian communities.

The applicant included a communication strategy and data management plan.

Information dissemination is a vital part of program implementation and privacy is an important ethical concern associated with data collection.

The evaluation plan includes the use of focus groups, extensive training, a triangulation of data collection findings, and testing of the outreach team.

Page: 9

The REACH Pima Partnership will perform several community assessments and policy scans to document the evidence-based and practice-based system that may have an effect on local participants knowledge, attitudes, and behaviors related to physical activity, nutrition, and tobacco-free strategies.

The internal findings from this effort will be disseminated internally.

Year one of the project partnership will focus on organization, training from CDC, strategic planning with the local Community Action Coalitions (CAC), and initiating the proposed plans listed in the work plan.

### **Weakness:**

Page: 20-24

The applicant seems to confuse research methodology with the evaluation methodology.

The applicant does not demonstrate an understanding of when and how to use KI interviews and the target for those interviews is not specified.

It is not clear how GIS mapping will be used and it is not mentioned as part of the training intended for community health worker, community health representatives, certified breastfeeding counselors (p.22).

## **Criterion 3: Applicant's Organizational Capacity to Implement the Approach**

### **Strength:**

Page: 14

The CDC REACH project will be managed by the Community Outreach, Prevention, and Education Division of the Pima County Health Department, which is responsible for programs involving community outreach and

collaboration.

The REACH Pima partnership will utilize existing staff to streamline operations and maximize resources.

The applicant provided several local success stories where the Pima Health Department partnered with state and local coalitions to improve public health outcomes.

At present, the applicant has over 240 full-time employees capable of managing the CDC REACH project initiatives.

Page: 25-26

The Pima County Health Department has a long history of managing federal grants, works with other complimentary federal grant programs, and can immediately start working on the project, once funded.

Page: 25-26, 69-83 (pdf pages)

The proposal shows very strong staff expertise and relevant backgrounds.

**Weakness:**

None

## Non-Scoring Criteria

### Criterion 4: Budget

**Strength:**

Page: 46

Pima County is requesting \$866,687 for year 1.

This amount takes into account evaluation activities, personnel, fringe benefits, travel, and equipment.

The amount fits well with the proposed activities and objectives.

**Weakness:**

None

### Criterion 5: Recommendations

If funded, the applicant will be asked to address the weaknesses identified in this summary and revise the work plan as necessary in coordination with the assigned project officer.