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Part 1. Overview Information

Participating Organization(s)	Centers for Disease Control and Prevention (CDC)
Components of Participating Organizations	National Center for Injury Prevention and Control (NCIPC)
Funding Opportunity Announcement (FOA) Title	Grants for Injury Control Research Centers
Activity Code	Applications in response to this FOA will be funded using the R49 activity code.
Funding Opportunity Announcement Type	New
Funding Opportunity Announcement Number	RFA-CE-14-001
Catalog of Federal Domestic Assistance (CFDA) Number(s)	93.136, Injury Prevention and Control Research and State and Community Based Programs
Category of Funding Activity	Health
FOA Purpose	The National Center for Injury Prevention and Control (NCIPC) is seeking applications from qualified organizations for Injury Control Research Center (ICRC) grants. These centers will conduct high quality research and help translate scientific discoveries into practice for the prevention and control of fatal and nonfatal

	<p>injuries, violence, and related disabilities that support NCIPC's priorities and mission. ICRCs are expected to address important and relevant injury and/or violence prevention topic areas and to be a national leader in the area of injury and/or violence prevention.</p> <p>ICRCs are expected to have a high caliber of scientific and technical competency, be forward-looking, provide strong leadership, and collaborate with stakeholders and community partners (including state and local health agencies and non-profit, community and non-governmental organizations) in the development and delivery of relevant interventions to improve the prevention and control of injuries and/or violence. Center structure should take advantage of diverse scientific resources and focus on relevant and timely injury topic areas that have national significance. Center functions should include developing holistic approaches that link prevention, intervention, translation, outreach, education, and evaluation. The implementation of innovative, evidence-based solutions that address important injury and/or violence prevention and control problems in a collaborative manner is expected. Applicants must also describe the mission, structure, function and research focus area(s) of the proposed center and how these address the mission and priorities of NCIPC and address important and relevant injury and/or violence prevention topic areas. A specific center theme is not required; however applicants must describe why the particular research topic areas were chosen.</p> <p>This FOA will fund Injury Control Research Center (ICRC) applications in two categories: 1) comprehensive centers and 2) developmental centers. The comprehensive center awards are similar in scope to the currently funded ICRCs. The developmental center awards are smaller in scope than the comprehensive center awards and are designed to build capacity in core activities and infrastructure with a smaller portion of the award devoted to research activities.</p>
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Key Dates

Publication Date	To receive notification of any changes to RFA-CE-14-001 return to the synopsis page of this announcement at www.grants.gov and click on the "Send Me Change Notification Emails" link. An email address is needed for this service.
Letter of Intent Due Date	September 6, 2013
Application Due Date	November 4, 2013 On-time submission requires that electronic applications be error-free and made available to CDC for processing from eRA Commons on or before the deadline date. Applications must be submitted to and validated successfully by Grants.gov/eRA Commons no later than 5:00 PM U.S. Eastern Time. Note: HHS/CDC grant submission procedures do not provide a period of time beyond the application due date to correct any error or warning notices of noncompliance with application instructions that are identified by Grants.gov or eRA systems (i.e., error correction window).
Scientific Merit Review	February - April, 2014
Secondary Review	May - June, 2014
Estimated Start Date	August 1, 2014
Expiration Date	November 5, 2013
Due Dates for E.O. 12372	Executive Order 12372 does not apply to this program.

Required Application Instructions

It is critical that applicants follow the instructions in the [SF 424 \(R&R\) Application Guide](#) except where instructed to do otherwise in this FOA. Conformance to all requirements (both in the

Application Guide and the FOA) is required and strictly enforced. Applicants must read and follow all application instructions in the Application Guide as well as any program-specific instructions noted in [Section IV](#). When the program-specific instructions deviate from those in the Application Guide, follow the program-specific instructions.

Note: The Research Strategy component of the Research Plan is limited to **80** pages for comprehensive center applications and the Research Plan is limited to **40** pages for developmental center applications.

Applications that do not comply with these instructions may be delayed or not accepted for review.

Telecommunications for the Hearing Impaired: TTY 1-888-232-6348

Executive Summary

This FOA will fund applications in two separate categories: 1) comprehensive centers and 2) developmental centers. The comprehensive center awards are similar in scope to the currently funded ICRCs (Project period of 5 years, budgets of \$900,000 per year and an organizational structure consisting of an administrative core, outreach core, training and education core, and multiple research projects). The developmental center awards are smaller in scope and are designed to build capacity in core activities and infrastructure with a smaller portion of the award devoted to research activities.

- **Purpose** The National Center for Injury Prevention and Control (NCIPC) is seeking applications from qualified organizations for Injury Control Research Center (ICRC) grants. These centers will conduct high quality research and help translate scientific discoveries into practice for the prevention and control of fatal and nonfatal injuries, violence, and related disabilities that support NCIPC's priorities and mission.
- **Mechanism of Support.** Grant.
- **Funds Available and Anticipated Number of Awards.** NCIPC intends to commit approximately \$3,600,000 in FY 2014 to fund up to five applications: three (3) comprehensive center awards and two (2) developmental center awards.

Awards issued under this FOA are contingent upon availability of funds and a sufficient number of meritorious applications. Because the nature and scope of the proposed research will vary from application to application, it is also anticipated that the size and duration of each award may also vary. The total amount awarded and the number of awards will depend upon the number, quality, duration and cost of the applications received.

- **Budget and Project Period.** The maximum award amount will be \$900,000 per year for each of the three comprehensive centers, and the maximum award amount will be \$450,000 per year for each of the two developmental centers.

An applicant may request a project period of up to five years. The maximum total project funding amount is \$4,500,000 (including both direct and indirect costs), with a maximum of \$900,000 per year for each of the three comprehensive centers. The maximum total project funding amount is \$2,250,000 (including both direct and indirect costs), with a maximum of \$450,000 per year for each of the two developmental centers.

The project period will run from August 1, 2014 to July 31, 2019.

Throughout the project period, CDC's commitment to the continuation of awards will be conditional on the availability of funds, evidence of satisfactory progress by the recipient (as documented in required reports), and the determination that continued funding is in the best interest of the Federal government.

- **Application Research Strategy Length:** Page limits for the Research Strategy are clearly specified in "Section IV. Application and Submission Information" of this announcement.
- **Eligible Institutions/Organizations.** Institutions/organizations listed in Section III, 1. are eligible to apply.
- **Eligible Project Directors/Principal Investigators (PDs/Pis).** Individuals with the skills, knowledge, and resources necessary to carry out the proposed research are invited to work with their institution/organization to develop an application for support. Individuals from underrepresented racial and ethnic groups as well as individuals with disabilities are always encouraged to apply. NOTE: CDC does not make awards to individuals directly.
- **Number of PDs/Pis.** For this FOA, one individual must be designated as the center director. Co-center directors are not allowed. The center director's name must appear on the face page of the application as the Project Director/Principal Investigator.
- **Number of Applications.** Only one applicant per institution (normally identified by having a unique DUNS number) is allowed. Applicants and/or institutions may not apply for both a comprehensive and a developmental center award under this FOA. In the application, each applicant must clearly identify which type of award they are applying for (i.e., comprehensive center award or developmental center award).
- **Application Type.** New.
- **Special Date(s).** None.
- **Application Materials.** See **Section IV.1** for application materials.
- **Hearing Impaired.** Telecommunications for the hearing impaired are available at: TTY: (770) 488-2783.

Part 2. Full Text

Section I. Funding Opportunity Announcement Description

This FOA will fund Injury Control Research Center (ICRC) applications in two different categories: 1) comprehensive centers and 2) developmental centers. The comprehensive center awards are similar in scope to the currently funded ICRCs. The developmental center awards are smaller in scope than the comprehensive center awards and are designed to build capacity in core activities and infrastructure with a smaller portion of the award devoted to research activities. Core activities include administration, management, technical assistance, support services, training and education, and outreach to the community. The developmental center awards were added to this FOA because of the need to support new and developing centers. The two developmental center awards will be smaller in dollar amount (\$450,000 per year) than for the comprehensive (\$900,000 per year) center awards. The two developmental center awards will be made to applicants from institutions that have never been successfully funded under NCIPC's ICRC grant program. The developmental center applications will be reviewed separately from the comprehensive center applications. Descriptions of what is required for a comprehensive center and for a developmental center are contained later in funding announcement.

Statutory Authority

Section 301 (a) [42 U.S.C. 241(a)] of the Public Health Service Act, and section 391 (a)[42 U.S.C. 280 b(a)] of the Public Service Health Act, as amended.

1. Background and Purpose

Purpose:

The purpose of this program is to fund centers that conduct high quality research and help translate scientific discoveries into practice for the prevention and control of fatal and nonfatal injuries, violence, and related disabilities and serve as training centers as well as information centers for the public. This program addresses the "Healthy People 2020" focus area(s) of injury and violence prevention.

The purposes of NCIPC's ICRC program are to:

- Build the scientific base for the prevention and control of fatal and nonfatal injuries, violence, and related disabilities.
- Integrate, in the context of a national program, professionals from a wide spectrum of disciplines of epidemiology, behavioral and social sciences, medicine, biostatistics,

public health, health economics, law, criminal justice, and engineering to perform research and provide technical expertise in order to prevent and control injuries and/or violence more effectively.

- Encourage investigators to propose research that addresses topic areas relevant to NCIPC's mission and are in alignment with NCIPC's research focus areas: <http://www.cdc.gov/injury/about/focus.html> and/or the center's research agenda <http://www.cdc.gov/injury/ResearchAgenda/index.html>.
- Encourage investigators to propose research that address new or emerging topic areas or identify important gaps in the current research.
- Encourage investigators to propose research that involves intervention development and testing as well as research on methods to enhance the adoption, scalability, and maintenance of effective intervention strategies among individuals, organizations, or communities.
- Provide technical assistance to injury and/or violence prevention and control programs, including other researchers, universities, medical institutions, community groups, state and local government agencies, public health agencies, and policy makers.
- Disseminate their research findings widely and encourage the use of research results to inform policy and decision-making.
- Act as sources of injury and/or violence prevention and control information for their constituents and stakeholders at the local, state, tribal, national, and global levels.

Background:

An injury control research center functions as a multidisciplinary/interdisciplinary organization that provides outreach and training and conducts research in a cross-cutting and integrated manner that is intended to impact the field and improve the prevention and control of injury and violence. Centers should serve as centers of excellence and strive to strengthen the injury and/or violence prevention infrastructure by integrating resources at the local, state, and national levels.

ICRCs are expected to have a high caliber of scientific and technical competency, be forward-looking, provide strong leadership, and collaborate with stakeholders and community partners (including practitioners, community-based organizations, state and local governments, state and local health departments, and non-governmental organizations) in the development and delivery of relevant interventions to improve the prevention and control of injuries and/or violence. Center structure should take advantage of diverse scientific resources and address important, timely, and relevant injury and/or violence prevention topic areas. Center functions should include developing holistic approaches that link prevention, intervention, translation, outreach, education, and evaluation. The implementation of innovative, evidence-based solutions that address important injury and/or violence prevention and control problems in a collaborative manner is expected. A specific center theme is not required; however applicants must concisely describe the mission, structure, function and focus area(s) of the proposed

center and how these address the mission and priorities of NCIPC (please see <http://www.cdc.gov/injury/index.html>)

The ICRC program represents a long-term investment for NCIPC and is an established resource for the field of injury and/or violence prevention and control. NCIPC recognizes the significant time and effort needed for establishment and maintenance of an ICRC. Therefore, sustainability of the ICRCs is important to NCIPC. Plans for the sustainability and long-term management of the center should be included in the application, including the development and mentoring of replacements for key leadership (including the center director) and plans for the continued operation of the center. This includes plans for continued operation of the center after the period of support offered in this FOA is completed, and plans for the continuation of the center, if additional funding from CDC is not obtained.

Centers are expected to be able to document the impact of their activities. The use of suitable evaluation techniques/tools to help assess impact and outcomes is strongly encouraged. NCIPC is currently developing examples of possible indicators of impact that may be useful. If interested, applicants are encouraged to contact Paul Smutz (770-488-4850, wsmutz@cdc.gov) for a list of these examples.

Healthy People 2020 and other National strategic priorities

This program of research addresses the “Healthy People 2020” focus area(s) of injury and violence prevention for those FOAs where domestic organizations are applicable, available at <http://healthypeople.gov>. Healthy People 2020 requirements do not apply to foreign entities. This program is also in alignment with National Center for Injury Prevention and Control performance goal(s) to conduct a targeted program of research to reduce injury-related death and disability. For more information, see <http://www.whitehouse.gov/omb/mgmt-gpra/index-gpra>. For additional information about the CDC Injury Research Agenda, see <http://www.cdc.gov/injury/index.html>

Public Health Impact

Violence and injuries are a significant public health problem in the United States. Violence and injuries kill more people ages 1 to 44 in the US than any other cause and cost more than \$406 billion annually in medical care and lost productivity. Violence and injuries affect everyone, regardless of age, race, or economic status. In the first half of life, more Americans die from violence and injuries than from any other cause, including cancer, HIV, or influenza. Deaths are only part of the problem: Each year, millions of people are injured and survive; they are faced with life-long mental, physical, and financial problems. Violence and injuries are so common that we often accept them as a part of life; but they can be prevented, and their consequences reduced.

Relevant work

The National Center for Injury Prevention and Control (NCIPC) has been funding grants for Injury Control Research Centers for over 20 years. Information for current and previously funded centers is available at:

<http://www.cdc.gov/injury/erpo/icrc/index.html>.

2. **Approach**

Essential Components for a Comprehensive Center

Comprehensive center applications are expected to have the following components that together address the objectives of this announcement:

- Administrative Core
- Outreach Core
- Training and Education Core
- Research Projects

Administrative Core

The administrative core facilitates the leadership, guidance, and management of the center in accomplishing the stated objectives of the ICRC. It provides the infrastructure to promote cross-discipline interactions, programs and projects, helps ensure translation and dissemination of research findings, and informs policy. The administrative core has oversight for all of the center's activities.

The structure of the administrative core should provide a mechanism for:

- Planning, coordinating and monitoring research, prevention, intervention, education, outreach, translation, and evaluation efforts.
- Integrating cross-discipline expertise at the institution, state/local, and community level.
- Overseeing fiscal and resource management.
- Managing internal and external advisory committees.
- Planning and conducting seminars, meetings, workshops, advisory committee meetings or conferences.
- Preparing and publishing annual reports, scientific publications and policy manuscripts to inform science and policy.
- Integrating professionals from a wide spectrum of disciplines to perform injury and/or violence prevention and control research.
- Collecting and storing data from projects/programs, training, populations affected, outreach and policies informed.

The administrative core must have strong leaders committed to the program, who are capable of providing scientific leadership for the administration and integration of the program. Assessment of the ability of the center's director to lead a highly integrated program of research, prevention, intervention development, evaluation, and translation

projects will be a consideration in the evaluation of each application. The director of the center must devote no less than thirty five percent (35%) effort solely to this grant for each budget year. Applicants must clearly explain how the administrative core will achieve effective and efficient administrative functions. Clear lines of communication and mechanisms for ensuring integration and collaboration between projects, including evaluation, are expected.

The applicant should include information in the application that documents institutional support (financial and otherwise) and commitment to the administrative core. This support could include office space, shared facilities and equipment, and release time for the PI and/or participating faculty.

The administrative core supports the administrative infrastructure for the entire center and should not be duplicated within any other component.

Outreach Core

An important component of a successful ICRC is its outreach activities. This includes collaboration and technical assistance with institutions, businesses, community groups, agencies, state and local governments, and health departments. It also includes educating and engaging policy stakeholders. Effective outreach is necessary to ensure that evidence-based prevention or intervention findings, best practices, tools, approaches, technologies, guidelines or policies reach the people who can benefit from them. Outreach activities should address area needs and implement innovative strategies for meeting those needs with a focus on impacting the practitioner environment. Partnerships and collaborative relationships are encouraged. Centers should include plans to develop linkages and communication with other governmental and non-governmental bodies involved in injury and/or violence prevention and control. Outreach activities that facilitate the translation of research and training products into the hands of the practitioners and the community are highly encouraged. Marketing and other approaches that target important topics in injury and/or violence prevention and control at the community, state, or national level are a component of this core.

Collaboration with the center's stakeholders (e.g., practitioners, community-based organizations, state and local governments, state and local health departments, non-governmental organizations), currently funded grantees for CDC's Core Violence and Injury Prevention Program (<http://www.cdc.gov/injury/stateprograms/>) and the National Academic Centers for Excellence in Youth Violence Prevention Program (http://www.cdc.gov/violenceprevention/ACE/center_descriptions.html), and policy makers is essential to help provide an economy of effort, cost savings, and to maximize outreach efforts.

By the second year of the grant, the applicant must have established a working relationship with a currently-funded Core Violence and Injury Prevention Program

grantee. This could be either the CDC-funded Core Violence and Injury Prevention Program grantee in the applicant's state or a CDC-funded Core Violence and Injury Prevention Program grantee that has similar research interest with the applicant.

It is recommended that a Core Violence and Injury Prevention Program Regional Network Leader be a member of the center's external advisory board. This could be the Regional Network Leader from the region where the proposed center will be located or a Regional Network Leader that has similar research interests to the proposed center.

Outreach activities and materials should be culturally, linguistically, and educationally appropriate.

The applicant should include information in the application that documents institutional support (financial and otherwise) and commitment to the outreach core. This support could include office space, shared facilities and equipment, funds for curriculum development, release time for the PI and/or participating faculty, or any other creative ways to improve the establishment and growth of the outreach core programs.

Training and Education Core

ICRCs are expected to advance the injury and/or violence prevention field through training and education within the organization/institution, but also offering training to the community, decision-makers, and professional organizations. This core will help ensure there is an adequate supply of qualified professional injury and/or violence prevention practitioners and researchers and help train the next generation of leaders in the injury and/or violence prevention field. This core should include the development, implementation and evaluation of training and education materials and programs. The training and education should result in increased capacity, collaboration, skill development, research translation and cross-fertilization among the various disciplines.

Songer et al. (<http://ajph.aphapublications.org/cgi/content/full/99/4/600>) have developed a list of core competencies for injury and violence prevention that may prove useful when developing the training and education core.

The training and education core should provide:

- Innovative learning opportunities for students and professionals in the injury and/or violence field.
- Formal training of students (including degree programs such as Masters, Doctoral and Post-Doctoral and academic certificate programs).
- Continuing education for researchers and practitioners.
- Educational outreach to the injury and/or violence prevention research community.
- Educational opportunities (student stipends) within the Divisions of NCIPC, to work with intramural scientists.

The training can take the form of in-person courses, small group discussions, graduate seminars, distance learning sessions, teleconferences, webinars, newsletters, websites, and workshops. Course selection should be based on local as well as national needs and the applicant should provide a rationale for the courses that are offered. The courses should be structured so that higher educational institutions, public health agencies, professional societies or other appropriate agencies can utilize them. Training of community partners through workshops is also encouraged.

Collaboration with other departments, academic institutions, and injury control research centers is encouraged to minimize duplication of training and education programs and to maximize cost effectiveness.

The applicant should include information in the application that documents institutional support (financial and otherwise) and commitment to the goals of the training and education program. This could include, for example, space, shared facilities and equipment, funds for curriculum development, release time for the PI and/or participating faculty, support for additional trainees in the program, or any other creative ways to improve the establishment and growth of the training and education program(s).

Research Projects

Research projects must have a total budget (both direct and indirect cost) of between \$150,000 and \$250,000 per year and a project period of two to three years.

Each application may propose either three or four research projects (for the entire five year project period). A description of each research project must be included in the application. The research projects should be spread out over the entire funding period of the grant, but cannot be started in the last year of the grant.

At least one research project must address a component of translation research and at least one research project must address a component of policy research.

In addition, two of the research projects must also: 1) address one of NCIPC's current research focus areas (Motor Vehicle-related Injuries, Violence Against Children and Youth, Prescription Drug Overdose, or Traumatic Brain Injury) (<http://www.cdc.gov/injury/about/focus.html>); or 2) address a high burden injury and/or violence prevention and control topic area. If an applicant chooses option 2, the applicant must justify in the application how the topic addresses a high burden injury and/or violence prevention and control topic area and how the topic meets the following criteria:

- High cost of the injury
- Availability of solutions to reduce the number of injuries

- Severity of related injuries and their consequences

The remaining research projects must be in alignment with NCIPC's Injury Research Agenda (<http://www.cdc.gov/injury/ResearchAgenda/index.html>) and should focus on new or emerging topic areas or on identified gaps in the current research.

Injury and/or violence topics that address shared risk factors such as alcohol use, parenting, mental health, and vulnerable populations are highly encouraged.

Research topic areas that have the potential for real world impact and that offer practical solutions are also highly encouraged.

The research projects can be stand-alone investigations sufficient to yield results worthy of publication in a peer-reviewed journal and/or a technical report for a legislative body, governmental agency, or injury and/or violence control program or they can be conducted in preparation for larger investigations.

Because research projects can be carried out in a relatively short period of time with limited resources, the description of these projects in the application will not have the same level of detail as found in an R01 application. Appropriate justification for the proposed work can be provided through literature citations, data from other sources, or from investigator-generated data. Preliminary data are encouraged but not required.

Examples of research projects include:

- Pilot and feasibility studies.
- Secondary analysis of existing data.
- Small, self-contained research projects.
- Development of research methodology.
- Development of new research technology.
- Policy evaluation and analysis.
- Evaluation of proven interventions.
- Evaluation of promising or innovative interventions, practices, or policies.
- Evaluation of existing practices that have limited scientific basis and require expansion of the evidence base.

Research project funds cannot be used to support the routine treatment of patients or for clinical care. The research projects cannot be conducted outside of the United States.

The center director (principal investigator) of a developmental center application cannot also be the principal investigator of the research project.

Essential Components for a Developmental Center

The developmental center awards are smaller in scope than the comprehensive center awards and are designed to build capacity in core activities and infrastructure with a smaller portion of the award devoted to research activities. Core activities include administration, management, research development, technical assistance, support services, training and education, and outreach to the community. Each developmental center application is expected to have the capabilities to conduct injury and/or violence prevention research and to plan, manage, administer, and evaluate all of the activities of the center.

Applications for developmental centers are expected to have the following components:

- Administrative Core
- Training, Education and Outreach Core
- Research Project

Administrative Core

The administrative core facilitates the leadership, guidance, and management of the center in accomplishing the stated objectives of the ICRC. It provides the infrastructure to promote cross-discipline interactions, programs and projects, helps ensure translation and dissemination of research findings, and informs policy. The administrative core has oversight for all of the center's activities.

The structure of the administrative core should provide a mechanism for:

- Planning, coordinating and monitoring all activities of the center.
- Overseeing fiscal and resource management.
- Preparing and publishing annual reports and scientific publications.
- Integrating professionals from a wide spectrum of disciplines to perform injury and/or violence prevention and control research.
- Collecting and storing data from projects/programs, training, and outreach programs.

The administrative core must have strong leaders committed to the program. Assessment of the ability of the center's director to lead a highly integrated program of research, prevention, intervention development, evaluation, and translation projects will be a consideration in the evaluation of each application. The director of the center must devote no less than fifty percent (50%) effort solely to this grant for each budget year. Applicants must clearly explain how the administrative core will achieve effective and efficient administrative functions. Clear lines of communication and mechanisms for ensuring integration and collaboration between center activities are expected.

The applicant should include information in the application that documents institutional support (financial and otherwise) and commitment to the administrative core. This

could include office space, shared facilities and equipment, and release time for the PI and/or participating faculty.

The administrative core supports the administrative infrastructure for the entire center and should not be duplicated within any other component.

Training, Education and Outreach Core

Centers are expected to advance the injury and/or violence prevention field through the development, implementation and evaluation of training and education materials and programs as well as through its outreach activities.

The training and education portion of this core should provide:

- Innovative learning opportunities for students and professionals in the injury and/or violence prevention field.
- Formal training of students (including degree programs).
- Continuing education for researchers and practitioners and professional organization members.

The training can take the form of in-person courses, small group discussions, graduate seminars, distance learning sessions, teleconferences, webinars, newsletters, websites, and workshops. Course selection should be based on local as well as national needs and the applicant should provide a rationale for the courses that are offered. Training of community partners through workshops is also encouraged.

Another important component of this core is outreach activities. This includes collaboration and technical assistance with institutions, businesses, community groups, agencies, state and local governments, and health departments. Effective outreach is necessary to ensure that evidence-based prevention or intervention findings, best practices, tools, approaches, technologies, guidelines or policies reach the people who can benefit from them. Outreach activities should address area needs and implement innovative strategies for meeting those needs with a focus on impacting the practitioner environment. Partnerships and collaborative relationships are encouraged. Centers should include plans to develop linkages and communication with other governmental and non-governmental bodies involved in injury and/or violence prevention and control. Outreach activities that facilitate the translation of research and training products into the hands of the practitioners and the community are highly encouraged. Marketing and other approaches that target important topics in injury and/or violence prevention and control at the community, state, or national level are a component of this core.

While not required, it is suggested that the applicant establish a working relationship with a currently-funded Core Violence and Injury Prevention Program

(<http://www.cdc.gov/injury/stateprograms/>) grantee either in the applicant's state or region or with a grantee that has similar research interests with the applicant.

The applicant should include information in the application that documents institutional support (financial and otherwise) and commitment to the goals of the training and education program. This could include, for example, space, shared laboratory facilities and equipment, funds for curriculum development, release time for the PI and/or participating faculty, and support for additional trainees in the program.

Research Project

The research activities for the developmental centers will be more limited than for the comprehensive centers. The developmental centers will be required to have one research project during the award period. The research project must have a total budget (both direct and indirect cost) of between \$100,000 and \$200,000 per year and a project period of between three and four years. The total budget for the research project must be between \$400,000 and \$600,000 (both direct and indirect cost).

The research project must: 1) address one of NCIPC's current research focus areas (Motor Vehicle-related Injuries, Violence Against Children and Youth, Prescription Drug Overdose, or Traumatic Brain Injury) (<http://www.cdc.gov/injury/about/focus.html>); or 2) address a high burden injury and/or violence prevention and control topic area. If an applicant chooses option 2, the applicant must justify in the application how the topic addresses a high burden injury and/or violence prevention and control topic area and how the topic meets the following criteria:

- High cost of the injury
- Availability of solutions to reduce the number of injuries
- Severity of related injuries and their consequences

Injury and/or violence topics that address shared risk factors such as alcohol use, parenting, mental health, and vulnerable populations are highly encouraged.

Research topic areas that have the potential for real world impact and that offer practical solutions are also highly encouraged.

The research project can be stand-alone investigations sufficient to yield results worthy of publication in a peer-reviewed journal.

The research project funds cannot be used to support the routine treatment of patients or for clinical care.

The research project cannot be conducted outside of the United States.

The center director (principal investigator) of a developmental center application cannot also be the principal investigator of the research project.

For Both Comprehensive and Developmental Center Applications

Objectives/Outcomes

The National Center for Injury Prevention and Control (NCIPC) is seeking applications from qualified organizations for Injury Control Research Center (ICRC) grants. These centers will conduct high quality research and help translate scientific discoveries into practice for the prevention and control of fatal and nonfatal injuries, violence, and related disabilities that support NCIPC's priorities and mission.

Target population

Everyone in the United States that is susceptible to unintentional, intentional and/or violence-related injuries.

Collaboration/Partnerships

Applicants are expected to develop collaborations pertinent to the proposed research plan. Documentation of effective and well-defined working relationships with any organization and/or outside entity expected to participate in the proposed research that will ensure implementation and sustainability of the proposed activities. This should be documented by letters of support or memoranda of understanding or agreement detailing the nature and extent of the involvement from the performing organization and outside entities.

Evaluation/Performance Measurement

Centers are expected to exert a sustained, powerful (transformative) influence on injury and/or violence prevention and control. The focus of each center may vary based on its expertise, needs and priorities. Overall, the research, prevention, intervention, outreach, education, translation and evaluation efforts of all centers should be focused on improving injury and/or violence prevention and control. All levels of center efforts are expected to have a direct tie to measureable impacts. NCIPC strongly encourages the use of suitable evaluation techniques/tools and follow-up actions to help assess impact and outcomes. Evaluation techniques, tools, and metrics include:

- Annual reports.
- Number, quality and impact of researcher publications.
- Journal impact factor for the research publications.
- Number of students and practitioners trained.
- Annual reviews of research projects and center staff.
- Surveys of center researchers.
- External reviews.
- Identification of areas for growth.
- Leveraging of resources.

- Partnerships.

NCIPC is currently developing examples of possible indicators that may be useful in measuring the performance of a center. If interested, applicants are encouraged to contact Paul Smutz (770-488-4850, wsmutz@cdc.gov) for a list of these examples.

Translation plan

Research findings should be disseminated through publications, including articles in peer-reviewed journals and “Research Briefs” for diverse audiences, as well as presentations at professional conferences and other venues. An explanation for how the scientific findings will be translated into public health programs, policies or practice should be included.

Section II. Award Information

Funding Mechanism	Applications in response to this FOA will be funded using the grant mechanism.
Application Types Allowed	<u>New</u> - An application that is submitted for funding for the first time.
Funds Available and Anticipated Number of Awards	NCIPC intends to commit approximately \$3,600,000 in FY 2014 to fund up to five applications: Three (3) comprehensive centers and two (2) developmental centers Awards issued under this FOA are contingent on the availability of funds and submission of a sufficient number of meritorious applications.
Ceiling and Floor of Individual Award Range	The maximum award amount will be per year: \$900,000 for each of the three comprehensive centers and \$450,000 for each of the two developmental centers. An applicant may request a project period of up to five years. The maximum total project funding amount is \$4,500,000 (including both direct and indirect costs), with a maximum of \$900,000 per year for the three comprehensive center awards. The maximum total project funding amount is \$2,250,000 (including both direct and

	indirect costs), with a maximum of \$450,000 per year for the two developmental center awards.
Project Period Length	Five years Throughout the project period, CDC's commitment to continuation of awards will depend on the availability of funds, evidence of satisfactory progress by the recipient (as documented in required reports), and CDC's determination that continued funding is in the best interest of the Federal government.

HHS/CDC grants policies as described in the HHS Grants Policy Statement (<http://dhhs.gov/asfr/ogapa/aboutog/grantsnet.html>) will apply to the applications submitted and awards made in response to this FOA.

Section III. Eligibility Information

1. Eligible Applicants

Eligible Organizations

Higher Education Institutions:

- Public/State Controlled Institutions of Higher Education
- Private Institutions of Higher Education

The following types of Higher Education Institutions are always encouraged to apply for CDC support as Public or Private Institutions of Higher Education:

- Hispanic-serving Institutions
- Historically Black Colleges and Universities (HBCUs)
- Tribally Controlled Colleges and Universities (TCCUs)
- Alaska Native and Native Hawaiian Serving Institutions

Nonprofits Other Than Institutions of Higher Education

- Nonprofits (Other than Institutions of Higher Education)

For- Profit Organizations

- Small Businesses
- For-Profit Organizations (Other than Small Businesses)

Governments

- State Governments
- County Governments
- City or Township Governments
- Special District Governments
- Indian/Native American Tribal Governments (Federally Recognized)
- Indian/Native American Tribal Governments (Other than Federally Recognized)
- Eligible Agencies of the Federal Government
- U.S. Territory or Possession

Other

- Independent School Districts
- Public Housing Authorities/Indian Housing Authorities
- Native American tribal organizations (other than Federally recognized tribal governments)
- Faith-based or Community-based Organizations
- Regional Organizations
- Bona Fide Agents: a Bona Fide Agent is an agency/organization identified by the state as eligible to submit an application under the state eligibility in lieu of a state application. If applying as a bona fide agent of a state or local government, a legal, binding agreement from the state or local government as documentation of the status is required. Attach with "Other Attachment Forms" when submitting via www.grants.gov.
- Federally Funded Research and Development Centers (FFRDCs): FFRDCs are operated, managed, and/or administered by a university or consortium of universities, other not-for-profit or nonprofit organization, or an industrial firm, as an autonomous organization or as an identifiable separate operating unit of a parent organization. A FFRDC meets some special long-term research or development need which cannot be met as effectively by an agency's existing in-house or contractor resources. FFRDC's enable agencies to use private sector resources to accomplish tasks that are integral to the mission and operation of the sponsoring agency. For more information on FFRDCs, go to <http://ecfr.gpoaccess.gov/cgi/t/text/text-idx?c=ecfr&sid=512ff78311f427c00454772dcf21523a&rgn=div8&view=text&node=48:1.0.1.6.34.0.1.18&idno=48>.

Applicants from all ten Department of Health and Human Services (DHHS) regions are eligible to apply for this FOA. Geographic balance of the funded applications is not a requirement of this FOA. However, if a sufficient number of scientifically meritorious applications are received, geographic balance across states and regions of the United States **may** be taken into consideration when the final funding decisions are made.

Current recipients of awards under FOA CE12-001 "Grants for Injury Control Research Centers" are **not** eligible to apply for this funding announcement because the proposed activities of **CDC Research**

this FOA are the same as the current ongoing activities published under CE012-001. DHHS prohibits recipients from receiving Federal funds based on duplicated efforts.

All current and formerly-funded ICRCs are eligible to apply for this FOA (except for those applicants funded under FOA CE12-001 “Grants for Injury Control Research Centers”). However, it is anticipated that ICRCs that have been funded consecutively for 10 years or more by NCIPC will only be eligible for reduced amounts of funding in future ICRC funding announcements. NCIPC believes that after 10 years of continuous funding from CDC as a comprehensive center, the center should be well on its way to being self-sufficient and should have the ability to develop independence from CDC ICRC grant support by being able to attract funds from other sources.

Only applicants from institutions that have never been successfully funded under the CDC ICRC program will be eligible to apply for the two developmental center awards.

Applicants and/or institutions may not apply for both a comprehensive and a developmental center award under this FOA.

Each applicant must clearly indicate which type of award they are applying for (i.e., comprehensive center award or developmental center award).

2. Foreign Organizations

Foreign Organizations **are not** eligible to apply.

Foreign components of U.S. Organizations **are not** eligible to apply.

For this announcement, applicants **may not** include collaborators or consultants from foreign institutions. All applicable federal laws and policies apply.

3. Special Eligibility Requirements:

For this FOA, one individual must be designated as the center director. Co-center directors are not allowed. This center director’s name must appear on the face page of the application as the Project Director/Principal Investigator.

4. Responsiveness:

- The center director must have conducted injury and/or violence prevention and control research. For comprehensive center applications, the center director must have at least five peer-reviewed injury and/or violence-related publications for which they are a senior author. For developmental center applications, the center director must have at least three peer-reviewed injury and/or violence-related publications for which they are a senior author. The center director must also demonstrate evidence of having obtained injury and/or violence prevention and control research grant funding in the last 10 years. Applications where the center director does not meet these requirements will be considered nonresponsive.
- Applicants from institutions that have been successfully funded under the CDC ICRC program who apply for the two developmental center awards will be considered nonresponsive.
- Institutions that submit more than one application to this FOA will be considered nonresponsive.
- Applicants that exceed the page limits listed in this FOA (including the page limits for the appendices) will be considered nonresponsive.

5. Required Registrations

Applicant organizations must complete the following registrations as described in the SF 424 (R&R) Application Guide to be eligible to apply for or receive an award. Applicants must have a valid Dun and Bradstreet Universal Numbering System (DUNS) number in order to begin each of the following registrations.

- System for Award Management (**SAM**) – must maintain current registration in SAM (the replacement system for the Central Contractor Registration) to be renewed annually, http://www.grants.gov/applicants/org_step2.jsp.
- [Grants.gov](http://www.Grants.gov)
- [eRA Commons](http://www.eRA Commons)

All applicant organizations must register with **Grants.gov**. Please visit www.Grants.gov at least 30 days prior to submitting your application to familiarize yourself with the registration and submission processes. The “one-time” registration process will take three to five days to complete. However, it is best to start the registration process at least two weeks prior to application submission.

All Program Directors/Principal Investigators (PD/PIs) **must** also work with their institutional officials to register with the **eRA Commons** or ensure their existing eRA Commons account is affiliated with the eRA Commons account of the applicant organization. **All registrations must be successfully completed and active before the application due date.** Applicant organizations are strongly encouraged to start the registration process at least four (4) weeks prior to the application due date.

6. Universal Identifier Requirements and Central Contractor Registration

All applicant organizations **must obtain** a DUN and Bradstreet (D&B) Data Universal Numbering System (DUNS) number as the Universal Identifier when applying for Federal grants or cooperative agreements. The DUNS number is a nine-digit number assigned by Dun and Bradstreet Information Services. An AOR should be consulted to determine the appropriate number. If the organization does not have a DUNS number, an AOR should complete the [US D&B D-U-N-S Number Request Web Form](#) or contact Dun and Bradstreet by telephone directly at 1-866-705-5711 (toll-free) to obtain one. A DUNS number will be provided immediately by telephone at no charge. Note this is an organizational number. Individual Program Directors/Principal Investigators do not need to register for a DUNS number.

Additionally, all applicant organizations must register in the **System for Award Management (SAM)**, the replacement system for the Central Contractor Registration (CCR) database. Organizations must maintain the registration with current information at all times during which it has an application under consideration for funding by CDC and, if an award is made, until a final financial report is submitted or the final payment is received, whichever is later. SAM is the primary registrant database for the Federal government and is the repository into which an entity must provide information required for the conduct of business as a recipient. Additional information about registration procedures may be found at the SAM internet site at <https://www.sam.gov/index.html>.

If an award is granted, the grantee organization **must** notify potential sub-recipients that **no** organization may receive a subaward under the grant unless the organization has provided its DUNS number to the grantee organization.

7. Eligible Individuals (Project Director/Principal Investigator) in Organizations/Institutions

Any individual(s) with the skills, knowledge, and resources necessary to carry out the proposed research as the Project Director/Principal Investigator (PD/PI) is invited to work with his/her organization to develop an application for support. Individuals from underrepresented racial and ethnic groups as well as individuals with disabilities are always encouraged to apply for HHS/CDC support.

For this FOA, one individual must be designated as the center director. Co-center directors are not allowed. This center director's name must appear on the face page of the application as the Project Director/Principal Investigator.

The center director must have the specific authority and responsibility to carry out the project.

The center director must report to an appropriate institutional official, e.g., Dean of a School, Vice-President of a University, or Commissioner of Health.

For the comprehensive centers, the center director must devote no less than **thirty-five percent (35%)** effort solely to this grant for each budget year.

For the developmental centers, the center director must devote no less than **fifty percent (50%)** effort solely to this grant for each budget year.

For all applications, the center director must have conducted injury and/or violence prevention and control research. For comprehensive center applications, the center director must have at least five peer-reviewed injury and/or violence-related publications for which they are a senior author. For developmental center applications, the center director must have at least three peer-reviewed injury and/or violence related publications for which they are a senior author. This must be documented by listing the relevant publications under the “Selected peer-reviewed publications” section of the principal investigator’s Biographical Sketch page in the application.

The center director must have obtained injury and/or violence prevention and control research grant funding in the last 10 years.

Applications where the center director does not meet these requirements will be considered nonresponsive.

8. Cost Sharing

This FOA **does not** require cost sharing as defined in the HHS Grants Policy Statement (<http://dhhs.gov/asfr/ogapa/aboutog/grantsnet.html>). However, cost sharing is encouraged. NCIPC is encouraging cost sharing in this FOA to help build institutional commitment for the center and to foster long term sustainability of the center. The cost sharing amount provided by the institution may be in the form of matching funds or in the form of in-kind contributions. Matching funds must come from non-Federal sources. In-kind contributions are non-cash donations provided by institution. While they usually add real value to a project, they do not require an actual cash outlay. Some examples of in-kind contributions are salaries (usually faculty members), employee benefits, indirect costs not charged to the sponsor, third-party contributions, and donated labor, supplies, materials, and services.

Costs used for cost-sharing requirements are subject to the same policies governing allowability as other costs under the approved budget.

To the extent possible, funded ICRCs are encouraged to become self-sufficient and to develop independence from CDC grant support. Therefore, the ICRCs are encouraged to pursue additional funding sources to supplement or supplant CDC support where possible.

9. Number of Applications

Only one application per institution is allowed. The individual that signs and/or submits an application further certifies that the applicant organization will be accountable both for the appropriate use of all grants funds awarded and for the performance of the grant-supported project or activities.

Please remember that grants are awarded by CDC to the institution rather than to the individual.

As defined in the HHS Grants Policy Statement, (<http://dhhs.gov/asfr/ogapa/aboutog/grantsnet.html>), applications received in response to the same funding opportunity announcement generally are scored individually and then ranked with other applications under peer review in their order of relative programmatic, technical, or scientific merit. HHS/CDC will not accept any application in response to this FOA that is essentially the same as one currently pending initial peer review unless the applicant withdraws the pending application.

Applicants and/or institutions may not apply for both a comprehensive and a developmental center award under this FOA.

Section IV. Application and Submission Information

1. Address to Request Application Package

Applicants must download the SF424 (R&R) application package associated with this funding opportunity from www.Grants.gov.

If access to the Internet is not available or if the applicant encounters difficulty accessing the forms on-line, contact the HHS/CDC Procurement and Grants Office Technical Information Management Section (PGO TIMS) staff at (770) 488-2700 or pgotim@cdc.gov for further instructions. Hours: Monday - Friday, 7am – 4:30pm U.S. Eastern Standard Time. CDC Telecommunications for the hearing impaired or disabled is available at: TTY 1-888-232-6348.

2. Content and Form of Application Submission

It is critical that applicants follow the instructions in the SF424 (R&R) Application Guide (http://grants.nih.gov/grants/guide/url_redirect.htm?id=12000), except where instructed in this Funding Opportunity Announcement to do otherwise. Conformance to the requirements in the Application Guide is required and strictly enforced. Applications that are out of compliance with these instructions may be delayed or not accepted for review.

The forms package associated with this FOA includes all applicable components, mandatory and optional. Please note that some components marked optional in the application package are required for submission of applications for this FOA. Follow the instructions in the SF 424 (R&R) Application Guide to ensure you complete all appropriate “optional” components.

In conjunction with the SF424 (R&R) components, CDC grants applicants should also complete and submit additional components titled “PHS398.” Note the PHS398 should include assurances and certifications, additional data required by the agency for a complete application. While these are not identical to the PHS398 application form pages, the PHS398 reference is used to distinguish these additional data requirements from the data collected in the SF424 (R&R) components. A complete application to CDC will include SF424 (R&R) and PHS398 components.

These forms can be downloaded and uploaded as Attachment A from the following link:
<http://www.cdc.gov/od/pgo/funding/grants/foamain.shtm>

3. Letter of Intent

Although a letter of intent is not required, is not binding, and does not enter into the review of a subsequent application, the information that it contains allows CIO staff to estimate the potential review workload and plan the review.

By the date listed in Part 1. Overview Information, prospective applicants are asked to submit a letter of intent that includes the following information:

- Title of the application
- Name of the applicant institution
- Name, address, and telephone number of the PD(s)/PI(s)
- Number and title of this funding opportunity announcement
- Names of other key personnel
- Names of participating institutions
- Type of application that will be submitted (i.e., comprehensive center or developmental center)
- Descriptive title for each proposed research project

The letter of intent should be sent to:

Jane Suen, PhD
Scientific Review Officer
National Center for Injury Prevention and Control
Centers for Disease Control and Prevention (CDC)
4770 Buford Hwy, NE, Mailstop F-63
Atlanta, GA 30341
Telephone: 770-488-4281
FAX: 770-488-4422
Email: jxs3@cdc.gov

4. Required and Optional Components

A complete application has many components, both required and optional. The forms package associated with this FOA in Grants.gov includes all applicable components for this FOA, required and optional.

Essential Components of a Comprehensive Center Application

Budget Pages

You must complete a detailed budget for the overall application. In addition, you must complete a separate detailed budget for the Administrative Core, the Outreach Core, the Training and Education Core, and for each of the Research Projects. These budgets will be listed as subawards on the SF424 R&R form. You must complete a separate detailed budget for

each year of support requested for the overall application and for each subaward (Core or Research Project). The SF 424 R&R form will generate a cumulative budget for the total project period.

When completing the detailed budget component for either the overall application or for a subaward (Core or Research Project), the project roles listed in the budget component should be consistent with those used in the Senior/Key Personnel component.

PLEASE NOTE: For comprehensive centers, at least 40 percent of the budget each year must be dedicated to the research projects.

The following sections must also be included in the Research Strategy section of the application.

- Overall Description of the Proposed Injury Control Research Center
- Past Performance and Accomplishments
- Institutional Commitment to the ICRC
- Description of the Administrative Core
- Description of the Outreach Core
- Description of the Training and Education Core
- Descriptions of the Research Projects

Essential Components of a Developmental Center Application

Budget Pages

You must complete a detailed budget for the overall application. In addition, you must complete a separate detailed budget for the Administrative Core, the Training, Education and Outreach Core, and for the Research Project. These budgets will be listed as subawards on the SF424 R&R form. You must complete a separate detailed budget for each year of support requested for the overall application and for each subaward (Core or Research Project). The SF 424 R&R form will generate a cumulative budget for the total project period.

When completing the detailed budget component for either the overall application or for a subaward (Core or Research Project), the project roles listed in the budget component should be consistent with those used in the Senior/Key Personnel component.

The following sections must also be included in the Research Strategy section of the application.

- Overall Description of the Proposed Injury Control Research Center
- Past Performance and Accomplishments
- Institutional Commitment to the ICRC
- Description of the Administrative Core

- Description of the Training, Education and Outreach Core
- Description of the Research Project

5. PHS 398 Research Plan Component

The SF424 (R&R) Application Guide includes instructions for applicants to complete a PHS 398 Research Plan that consists of 16 components. Not all 16 components of the Research Plan apply to all Funding Opportunity Announcements (FOAs). Specifically, some of the following 16 components are for Resubmissions or Revisions only. See Part I, Section 5.5 of the SF 424 (R&R) Application Guide (http://grants.nih.gov/grants/guide/url_redirect.htm?id=12000) for additional information. Please attach applicable sections of the following Research Plan components as directed in Part 2, Section 1 (Funding Opportunity Announcement Description). Follow the page limits stated in the SF 424 unless otherwise specified in the FOA. As applicable to and specified in the FOA, the application should include the bolded headers in this section and should address activities to be conducted over the course of the entire project, including but not limited to:

1. Specific Aims – state the problem the proposed research addresses and how it will result in public health impact and improvements in population health.
2. Research Strategy –

Comprehensive Center Applications

The following sections must also be included in the Research Strategy section and are part of the **80 page** limit for that section.

- Overall Description of the Proposed Injury Control Research Center

ICRCs are to develop a range of activities that are designed to advance the field of injury and/or violence prevention and control and to ultimately reduce injuries and/or violence and their effects. These activities include development of new scientific or surveillance methods, expansion of the existing knowledge base, translation of knowledge into training, program and policy development, and the evaluation of research activities. In this section, applicants should provide an overall description of the proposed center, including its goals and objectives, and provide an overview for how the proposed activities are expected to have an impact on injury and/or violence prevention and control. Applicants should also articulate how the activities of their program are integrated within the center and with state and local health departments, community partners, and other non-governmental organizations. Letters of support detailing the nature and extent of the involvement of the interested parties should be included in the application. **Note: All letters of support are to be placed in the “Letters of Support” section of the application.**

- Past Performance and Accomplishments

For re-competing centers, provide a description of performance and accomplishments in the last project period. For new applicants, provide a description of the performance and accomplishments of the center director and other key personnel that are relevant to the success of an ICRC.

Examples of past performance and accomplishments include: development of pilot projects; completion of high quality research projects; publication of findings in peer reviewed scientific and technical journals; journal impact factor of the publications; number of professionals trained; awards received; ongoing provision of consultation and technical assistance; integration of disciplines; translation of research into implementation; and impact on injury and/or violence prevention and control outcomes including policy, regulation, treatment, and behavior modification interventions.

- Institutional Commitment to the ICRC

Applicants must provide evidence (including letters of support) of strong institutional commitment to the proposed or existing ICRC, including the ability to develop and maintain the necessary infrastructure for the center. Ensuring that an ICRC has the full support of, and access to, the diverse resources available at the parent institution is critical in synergizing the efforts, impacts and outcomes of NCIPC funding. Institutional commitment may take the form of office space, personnel, equipment, other resources, return of indirect costs, additional funding, resource allocation, faculty release time, acquisition of scientific equipment and supplies, capital improvements for program facilities, travel and meeting/conference support.

The direct salary limits for individuals funded under this FOA follow the NIH guidelines and are restricted to Executive Level I of the Federal Executive Pay scale (<http://grants.nih.gov/grants/guide/notice-files/NOT-OD-10-041.html>). If the institution decides to pay an individual's salary in excess of the salary cap, it must be paid with non-CDC funds.

- Description of the Administrative Core

Applicants must clearly explain how the administrative core will achieve effective and efficient administrative functions of the ICRC.

Applicants should include the following elements in the description of the Administrative Core section:

- Charts showing the proposed organizational structure of the ICRC and its relationship to the broader institution of which it is a part and, where

applicable, to affiliate institutions or collaborating organizations. These charts should clearly detail the lines of authority as they relate to the center, both structurally and operationally. The ICRC director should report to an appropriate organizational level (e.g., Dean of a School, Vice-President of a University, or Commissioner of Health), demonstrating strong institution-wide support of ICRC activities and ensuring oversight of the process of interdisciplinary activity.

- The qualifications of the center director and the planned percentage of time that he/she will devote to the ICRC should be included along with descriptions of other ICRC faculty and staff, their roles and planned percent of effort.
 - A description of the personnel and resources required to accomplish the goals and objectives of the center.
 - How the center will enhance ongoing programs, assist in the introduction of new programs, respond to future challenges and opportunities, promote collaborations, and achieve progress in prevention and control of injuries and/or violence.
 - How other disciplines will be integrated to achieve the ICRC's objectives.
 - Documentation of the public health agencies and other public and private sector entities to be involved in the proposed program, including letters of support that detail commitments of support and a clear statement of the role, activities, and participating personnel of each agency or entity.
 - Methods for documenting and evaluating the success of the center.
- Description of the Outreach Core

Applicants should provide a description of how the proposed outreach activities will be integrated into the goals and overall mission of the center.

Applicants should include the following elements in the description of the Outreach Core section:

- A description of how the center will collaborate with institutions, businesses, community groups, agencies, and other governmental and non-governmental bodies.
- A description of how the outreach activities will result in evidence-based prevention or intervention findings, best practices, tools, approaches, technologies, or guidelines reaching the people who can benefit from them.
- A description of how the center will provide technical assistance to institutions, businesses, community groups, agencies, and other governmental and non-governmental bodies.
- A description of the center's translation activities.
- A description of how the center's findings, methods, and tools will be disseminated and made available to different audiences, and how the center's

stakeholders (e.g., practitioners, community members, policy makers) will be kept abreast of accomplishments.

- A description of a communication and dissemination plan to share center accomplishments with partners and potential stakeholders.
- Methods for documenting and evaluating the success of the outreach core.

Awardees may not use funds for any kind of impermissible lobbying activity designed to influence proposed or pending legislation, appropriations, regulations, administrative actions, or Executive Orders (“legislation and other orders”). These restrictions include grass roots lobbying efforts and direct lobbying. See Additional Requirement (AR) 12 for further guidance on this prohibition: [AR-12: Lobbying Restrictions](#)

- Description of the Training and Education Core

Applicants should provide a description of how the proposed training and education activities will be integrated into the goals and overall mission of the center.

Applicants should include the following elements in the description of the Training and Education Core section:

- A detailed description of proposed training and education activities; including the curricula and degrees offered.
- Evidence of previous research training and education experience in the areas of injury and/or violence prevention and control.
- Experience in conducting mentoring and career development activities.
- Plans for cross-disciplinary training.
- Plans for outreach training activities and technical assistance with institutions, businesses, community groups, agencies, and other governmental and non-governmental bodies.
- Adequacy of the training facilities.
- Methods for documenting and evaluating the success of the training and education core.

- Description of the Research Projects

Provide a description of each research project including the project title, names of the PI and co-investigators including institutional affiliations, project period, total cost for the project (direct and indirect costs), cost per year, specific aims and a research plan section (significance, innovation, and approach).

The description of each research project should be similar in scope to that of an R03-type grant application. NIH defines the R03 grant mechanism as one that supports

small research projects that can be carried out in a relatively short period of time with limited resources.

If human subjects are involved in the research, a description of the protection of human subjects for that research project must be included in the Human Subjects section of the application. Place the human subjects Targeted/Planned Enrollment Tables for each research project in the Targeted/Planned Enrollment Table section of the application. Clearly mark each table with the title of the research project.

Place the references for each research project in the Bibliography & References Cited section of the application. It is suggested that you use subheadings (e.g., Administrative Core; Outreach Core; Research Project Title) to identify which references belong to which section of the application.

Developmental Center Applications

The following sections must also be included in the Research Strategy section and are part of the **40** page limit for that section.

- Overall Description of the Proposed Injury Control Research Center

ICRCs are to develop a range of activities that are designed to advance the field of injury and/or violence prevention and control through development of new scientific or surveillance methods, creation of new knowledge, and translation of knowledge into training, program and policy development and evaluation research/activities or other applications that will ultimately reduce injuries and/or violence or their effects. In this section, applicants should provide an overall description of the proposed center, including its goals and objectives, and provide an overview for how the proposed activities are expected to have an impact on injury and/or violence prevention and control. Applications should also articulate how the activities of their program are integrated within the center and with external partners. Letters of support detailing the nature and extent of the involvement of the interested parties should be included in the application. **Note: All letters of support are to be placed in the Letters of Support section of the application.**

- Past Performance and Accomplishments

Provide a description of performance and accomplishments of the proposed center director and other key personnel that are relevant to the success of establishing an ICRC. Examples of past performance and accomplishments include: development of pilot projects; completion of high quality research projects; publication of findings in peer reviewed scientific journals; number of professionals trained; awards

received; ongoing provision of consultation and technical assistance; integration of disciplines; translation of research into implementation; and impact on injury and/or violence prevention and control outcomes.

- Institutional Commitment to the ICRC

Applicants must provide evidence (including letters of support) of strong institutional commitment to the proposed ICRC, including the ability to develop and maintain the necessary infrastructure for the center. Ensuring that an ICRC has the full support of, and access to, the diverse resources available at the parent institution is critical in synergizing the efforts, impacts and outcomes of NCIPC funding. Institutional commitment may take the form of office space, personnel, equipment, other resources, return of indirect costs, additional funding, resource allocation, faculty release time, acquisition of scientific equipment and supplies, capital improvements for program facilities, travel and meeting/conference support.

The direct salary limits for individuals funded under this FOA follow the NIH guidelines and are restricted to Executive Level I of the Federal Executive Pay scale (<http://grants.nih.gov/grants/guide/notice-files/NOT-OD-10-041.html>). If the institution decides to pay an individual's salary in excess of the salary cap, it must be paid with non-CDC funds.

- Description of the Administrative Core

Applicants must clearly explain how the administrative core will achieve effective and efficient administrative functions of the ICRC.

Applicants should include the following elements in the description of the Administrative Core section:

- Charts showing the proposed organizational structure of the ICRC and its relationship to the broader institution of which it is a part and, where applicable, to affiliate institutions or collaborating organizations. These charts should clearly detail the lines of authority as they relate to the center, both structurally and operationally. The ICRC director should report to an appropriate organizational level (e.g., Dean of a School, Vice-President of a University, or Commissioner of Health), demonstrating strong institution-wide support of ICRC activities and ensuring oversight of the process of interdisciplinary activity.
- The qualifications of the center director and the planned percentage of time that he/she will devote to the ICRC should be included along with descriptions of other ICRC faculty and staff, their roles and planned percent of effort.

- A description of the personnel and resources required to accomplish the goals and objectives of the center.
 - How the center will respond to future challenges and opportunities and achieve progress in the prevention and control of injuries and/or violence.
 - How other disciplines will be integrated to achieve the ICRC's objectives.
 - Documentation of the public health agencies and other public and private sector entities to be involved in the proposed program, including letters of support that detail commitments of support and a clear statement of the role, activities, and participating personnel of each agency or entity.
 - Methods for documenting and evaluating the success of the center.
- Description of the Training, Education, and Outreach Core

Applicants should provide a description of how the proposed training, education, and outreach activities will be integrated into the goals and mission of the center and of the Training, Education, and Outreach Core.

The following elements should be included when describing the training, education, and outreach core activities:

- A detailed description of proposed training and education activities; including the curricula and degrees offered.
 - Evidence of previous research training and education experience in the areas of injury and/or violence prevention and control.
 - Experience in conducting mentoring and career development activities.
 - Plans for cross-disciplinary training.
 - Plans for outreach training activities and technical assistance.
 - Adequacy of the training facilities.
 - A description of how the center will collaborate with institutions, businesses, community groups, and other governmental and non-governmental bodies.
 - A description of how the center's findings, methods, and tools will be disseminated and made available to different audiences, and how the center's stakeholders (e.g. practitioners, community members, policy makers) will be kept abreast of accomplishments
 - Methods for documenting and evaluating the success of the training, education and outreach core.
- Description of the Research Project

Provide a description of the proposed research project including the project title, names of the PI and co-investigators including institutional affiliations, project period, total cost for the project (direct and indirect costs), cost per year, specific aims and a research plan section (significance, innovation, and approach).

If the research involves human subjects, a description of the protection of human subjects must be included in the Human Subjects section of the application.

Place the references for the research project in the Bibliography & References Cited section of the application. It is suggested that you use subheadings (e.g., Administrative Core; Training, Education, and Outreach Core; Research Project) to identify which references belong to which section of the application.

For Both the Comprehensive and Developmental Center Applications

Human Subjects Section

Note: This section must include the description of the protection of human subjects for all research projects that involve human subjects research.

3. Protection of Human Subjects
4. Inclusion of Women and Minorities
5. Targeted/Planned Enrollment Table

If you are applying for a comprehensive center grant, in this section also include a summary table of all of the research projects that involve human subjects research.

Include the PI's name, project title, project time period, performance sites, Federal wide assurance (FWA) numbers, and Institutional Review Boards (IRB) approval status.

6. Inclusion of Children

Other Research Plan Sections

10. Vertebrate Animals
11. Select Agent Research
12. Multiple PD/PI Leadership Plan.

For this FOA one individual must be designated as the center director. Co-center directors are not allowed. This center director's name appears on the face page of the application as the Project Director/Principal Investigator.

13. Consortium/Contractual Arrangements
14. Letters of Support

Letters of support should contain detailed information about the nature of relationships between that organization and the applicant. They should also include the anticipated extent of involvement and scope of work to which the organization is willing to commit. All letters of support are to be placed in the Letters of Support section of the application and not in the appendices.

15. Resource Sharing Plan(s)
16. Appendix

Follow the page limits in the SF 424 unless otherwise specified in the FOA.

All instructions in the SF424 (R&R) Application Guide

(http://grants.nih.gov/grants/funding/424/SF424_RR_Guide_General_Adobe_VerB.pdf)

must be followed along with any additional instructions provided in the FOA.

6. Appendix

Do not use the appendix to circumvent page limits. A maximum of **10** PDF documents are allowed in the appendix. Please note that the reviewers are not required to read the information provided in the appendices when reviewing the applications. Only the following information is allowed to be included in the appendices. **All other materials included in the appendices may be removed from the applications before the applications are sent to the reviewers.**

- Publications:

Applicants may submit up to **3** of the following types of publications.

- Manuscripts and/or abstracts accepted for publication but not yet published.
- Published manuscripts and/or abstracts **only** when a free, online, publicly available journal link is not available.
- Patent materials directly relevant to the project.

- Other:

Surveys, questionnaires, data collection instruments, and informed consent documents.

7. Page Limitations

All page limitations described in this individual FOA must be followed. For this specific FOA, the Research Strategy component of the Research Plan is limited to **80** pages for comprehensive center applications; the Research Plan is limited to **40** pages for developmental center applications. Supporting materials included as appendices may not exceed **10** PDF files with a maximum of **50** pages total for **all 10** appendices. These limits on appendices are for both comprehensive and developmental center applications.

PLEASE NOTE that these page limits will be strictly enforced. Applications that exceed these page limits will be considered nonresponsive and will not be reviewed.

8. Format for Attachments

Designed to maximize system-conducted validations, multiple separate attachments are required for a complete application. When the application is received by the agency, all submitted forms and all separate attachments are combined into a single document that is used by peer reviewers and agency staff. Applicants should ensure that all attachments are uploaded to the system.

CDC requires all text attachments to the Adobe application forms be submitted as PDFs and that all text attachments conform to the agency-specific formatting requirements noted in the SF424 (R&R) Application Guide (Part I, Section 2)

(http://grants.nih.gov/grants/guide/url_redirect.htm?id=12000).

9. Submission Dates and Times

Part I. Overview Information contains information about Key Dates. Applicants are encouraged to submit in advance of the deadline to ensure they have time to make any application corrections that might be necessary for successful submission.

Organizations must submit applications via [Grants.gov \(http://www.grants.gov/\)](http://www.grants.gov/), the online portal to find and apply for grants across all Federal agencies. The eRA Commons systems retrieve the application from Grants.gov and check the application against CDC business rules. If no errors are found, the application will be assembled in the eRA Commons for viewing by the applicant before moving on for further CDC processing.

If errors are found, the applicant will be notified in the eRA Commons. They must make required changes to the local copy of their application and submit again through Grants.gov. **Applicants are responsible for viewing their application in the eRA Commons to ensure accurate and successful submission.**

Once you can see your application in the Commons, be sure to review it carefully as this is what the reviewer will see. Applicants must then complete the submission process by tracking the status of the application in the eRA Commons (http://grants.nih.gov/grants/guide/url_redirect.htm?id=11123).

Information on the submission process is provided in the SF424 (R&R) Application Guide.

Note: HHS/CDC grant submission procedures do not provide a period of time beyond the grant application due date to correct any error or warning notices of noncompliance with application instructions that are identified by Grants.gov or eRA systems (i.e., error correction window).

The application package is not complete until it has passed the Grants.gov/eRA Commons validation process. This process and email notifications of receipt, validation or rejection may take two (2) business days.

Applicants are strongly encouraged to allocate additional time prior to the submission deadline to submit their applications and to correct errors identified in the validation process. Applicants are encouraged also to check the status of their application submission to determine if the application packages are complete and error-free. Applicants who encounter system errors when submitting their applications must attempt to resolve them by contacting the Grants.gov Contact Center (1-800-518-4726; support@grants.gov). If the system errors cannot be resolved, applicants must contact CDC PGO TIMS at 770-488-2700; www.pgotim@cdc.gov for guidance at least 3 calendar days before the deadline date.

After submission of your application package, applicants will receive a “submission receipt” email generated by Grants.gov. Grants.gov will then generate a second e-mail message to applicants which will either validate or reject their submitted application package. This validation process may take as long as two (2) business days. A third and final e-mail

message is generated once the applicant's application package has passed validation and the grantor has confirmed receipt of the application.

Unsuccessful Submissions:

If an application submission was unsuccessful, ***the applicant*** must:

1. Track his/her submission and verify the submission status (tracking should be done initially regardless of rejection or success).
 - a. If the status states "***rejected***," do #2a or #2b.
2. Check his/her emails from both Grants.gov and eRA Commons for rejection notices.
 - a. If the deadline has passed, he/she should email the Grant Management Specialist listed in the FOA (pgotim@cdc.gov) explaining why the submission failed.
 - b. If there is time before the deadline, he/she should correct the problem(s) and resubmit as soon as possible.

10. Intergovernmental Review (E.O. 12372)

This initiative is not subject to intergovernmental review (http://grants.nih.gov/grants/guide/url_redirect.htm?id=11142).

11. Funding Restrictions

All HHS/CDC awards are subject to the terms and conditions, cost principles, and other requirements described in the HHS Grants Policy Statement. Pre-award costs may be allowable as an expanded authority, but only if authorized by CDC.

For more information on expanded authority and pre-award costs, go to: <http://dhhs.gov/asfr/ogapa/grantinformation/hhsgps107.pdf> and speak to your GMS.

Funds relating to the conduct of research will be restricted until the appropriate assurances and Institutional Review Board approvals are in place.

12. Other Submission Requirements and Information

Application Submission

Applications must be submitted electronically following the instructions described in the SF 424 (R&R) Application Guide. PAPER APPLICATIONS WILL NOT BE ACCEPTED.

Applicants must complete all required registrations before the application due date. Section III. Eligibility Information contains information about registration.

For assistance with your electronic application or for more information on the electronic submission process, visit Applying Electronically (http://grants.nih.gov/grants/guide/url_redirect.htm?id=11144).

Important reminders:

All PD/PIs must include their eRA Commons ID in the Credential field of the Senior/Key Person Profile Component of the SF 424(R&R) Application Package. Failure to register in the Commons and to include a valid PD/PI Commons ID in the credential field will prevent the successful submission of an electronic application to CDC.

The applicant organization must ensure that the DUNS number it provides on the application is the same number used in the organization's profile in the eRA Commons and for the Central Contractor Registration (CCR). Additional information may be found in the SF424 (R&R) Application Guide.

Applicants are reminded to enter the approved Federal Wide Assurance (FWA) that the applicant has on file with the Office for Human Research Protections, if available. If the applicant has a FWA number, enter the 8-digit number. Do not enter the FWA before the number. If a Project/Performance Site is engaged in research involving human subjects, the applicant organization is responsible for ensuring that the Project/Performance Site operates under and appropriate Federal Wide Assurance for the protection of human subjects and complies with 45 CFR Part 46 and other CDC human subject related policies described in Part II of this Application Guide and in the HHS Grants Policy Statement.

See more resources to avoid common errors and submitting, tracking, and viewing applications: http://grants.nih.gov/grants/ElectronicReceipt/avoiding_errors.htm or http://grants.nih.gov/grants/ElectronicReceipt/submit_app.htm

Upon receipt, applications will be evaluated for completeness by the CDC Procurement and Grants Office (PGO) and responsiveness by PGO and the Center, Institute or Office of the CDC. **Applications that are incomplete and/or nonresponsive will not be reviewed.**

Section V. Application Review Information

1. Criteria

Only the review criteria described below will be considered in the review process. As part of the CDC mission (<http://www.cdc.gov/about/organization/mission.htm>), all applications submitted to the CDC in support of public health research are evaluated for scientific and technical merit through the CDC peer review system.

Determination of the Overall Impact Score

The overall impact score for the application will be an average of the overall scores assigned to the different parts of the application.

For comprehensive center applications, the scores will be weighted as follows: Administrative Core, Outreach Core, and Training and Education Core = 50% and Research Projects = 50%. The overall score for the Administrative, Outreach, and Training and Education Cores will be an average of the overall scores for those three Cores. The overall score for the Research Projects will be an average of the overall scores for the 3 or 4 individual Research Projects.

For developmental center applications, the scores will be weighted as follows: Administrative Core = 30%, Training, Education and Outreach Core = 30%, and Research Project = 40%.

Scored Review Criteria

Reviewers will consider each of the review criteria below in the determination of scientific merit, and give a separate score for each. These scores will be used to determine the overall score for the different cores and the research projects.

Review Criteria for a Comprehensive Center Application

Note: Each of the three cores (Administrative, Outreach, and Training and Education) will be given an overall score.

REVIEW CRITERIA FOR THE ADMINISTRATIVE CORE

Significance

Do the proposed activities of the center address important problems or critical barriers to progress in the field of injury and/or violence prevention and control? If the aims of the application are achieved, how will scientific knowledge, technical capability, and/or public health practice be improved? How will successful completion of the aims change the concepts, methods, technologies, treatments, services, or preventative interventions that drive the field of injury and/or violence prevention and control? What is the potential impact of the center in addressing local and national health needs related to injury and/or violence prevention and control? Does the creation or continuation of a particular center push forward the field of injury and/or violence prevention and control, and is it a resource to the nation?

Investigator(s)

Are the center director, key personnel, project PIs, collaborators, and other researchers appropriately trained and well suited to carry out the specific aims of this application? Are they qualified to plan and conduct research and administer a national center for injury prevention and control? Does the center director have adequate leadership ability, scientific stature, and commitment of time to adequately manage a national center? Does the center director report to an appropriate institutional official, e.g., Dean of a school, Vice-President of a University, or Commissioner of Health? Has the center director committed at least thirty-five percent (35%) effort devoted solely to this grant for each

budget year? Have the center director, key personnel, project PIs, and other investigators made significant contributions to the field of injury and/or violence prevention and control as demonstrated by their accomplishments and publications? Does the center director have at least five peer-reviewed injury and/or violence related publications on which they are a senior author? Has this been documented by listing the relevant publication(s) under the “Selected peer-reviewed publications” section of the principal investigator’s Biographical Sketch page in the application? Has the center director obtained injury and/or violence prevention and control research grant funding in the last 10 years? Do the investigators have complementary and integrated expertise; are their leadership approach, governance and organizational structure appropriate for the proposed activities? Is there a plan for succession of key personnel, including the center director?

Innovation

Does the application challenge and seek to shift current research or public health paradigms by utilizing novel theoretical concepts, approaches or methodologies, instrumentation, or interventions? To what extent are novel administrative models, research methods, research topics, or potentially synergistic project relationships proposed that may enhance the potential of the field of injury and/or violence prevention and control?

Approach

Do the proposed center activities adequately address the mission and priorities of NCIPC and of the proposed center? Are the overall strategy, methodology, and analyses well-reasoned and appropriate to accomplish the specific aims of the application? Are there appropriate administrative arrangements and facilities to stimulate collaboration? Are there adequate connections among the proposed research, intervention, and education projects to build a synergistic overall program? Do the goals of the center address policy and translation research? Are potential problems, alternative strategies, and benchmarks for success presented in the application? Is the proposed center more than the sum of its parts? What are the long term goals of the center? Are they appropriate?

Are there adequate overall plans for administration and management of the ICRC to support all facets of the operation of the center? Is the center director adequately supported? Is there adequate management depth to provide long-term continuity of center leadership? Does the administrative structure facilitate communication among the center leaders and the program directors?

Does the administrative core provide a mechanism for planning, coordinating and monitoring the research, prevention, intervention, and education activities of the center? Does the administrative core provide oversight of the center’s outreach, translation, and evaluation efforts? Does the administrative core provide a mechanism for integrating cross-discipline expertise at the institution, state/local, and community level? Does the administrative core provide a mechanism for overseeing fiscal and resource management?

Does the administrative core provide a mechanism for managing internal and external advisory committees? Does the administrative core provide a mechanism for planning and conducting seminars, meetings, workshops, advisory committee meetings or conferences? Does the administrative core provide a mechanism for preparing and publishing annual reports and scientific and policy publications? Does the administrative core provide a mechanism to integrate professionals from a wide spectrum of disciplines to perform injury and/or violence prevention and control research? Does the administrative core provide a mechanism for oversight of policy development? Does the administrative core provide a mechanism for collaboration with other CDC funded centers including the Core Violence and Injury Prevention Program and the National Academic Centers for Excellence (ACE) in Youth Violence Prevention Program? Does the administrative core provide a mechanism (e.g. database) for capturing indicators of success (e.g. number of publications, number of students trained, number of policies developed, etc.) of the center?

Environment

Are the institutional support, equipment and other physical resources available to the investigators adequate? Will the aims of the application benefit from unique features of the scientific environment, subject populations, or collaborative arrangements of the proposed center? Will the scientific environment in which the work will be done contribute to the probability of success? Is there strong Institutional commitment to the proposed center? Are there plans for institutional funding support beyond the five years of CDC support? Are there plans for sustainability of the center after the five years of CDC support if additional funding from CDC is not obtained?

REVIEW CRITERIA FOR THE OUTREACH CORE

Outreach

What is the potential impact of the outreach core in meeting the needs for injury and/or violence prevention and control both locally and nationally? Does the description of the outreach core adequately address activities that will impact the practitioner and other injury prevention constituents (e.g., other education and research institutions, businesses, community groups, community based organizations, state and local governments, state and local health departments, and other non-governmental organizations)? Does the program facilitate the translation of injury and/or violence prevention findings into practice and policy? Are appropriate injury prevention constituents (e.g., other education and research institutions, businesses, community groups, community based organizations, state and local governments, state and local health departments, and other non-governmental organizations) engaged in the program? Are there plans to collaborate with other CDC funded centers and programs? Will the proposed activities have an impact on the practitioner's ability to affect injury prevention and control? What is the potential impact of the outreach program in meeting the needs for injury and/or violence prevention and control both locally and nationally? What is the potential of the outreach component to implement effective interventions in injury and/or violence prevention and control? Are

the proposed outreach activities and materials culturally, linguistically, and educationally appropriate? Is the evaluation plan for impact appropriate?

REVIEW CRITERIA FOR THE TRAINING AND EDUCATION CORE

Significance

What is the potential impact of the training and education core in meeting the needs for injury and/or violence prevention and control both locally and nationally? What is the potential of the training component to train injury and/or violence prevention professionals?

Training Staff

What are the qualifications of the director and faculty in delivering academic and/or short course training in the proposed field? For doctoral and post-doctoral training programs, what are the accomplishments of the teaching staff and mentors as research investigators in injury and/or violence prevention and control? Do the faculty and staff have evidence of peer-reviewed publications and research grant support?

Innovation

Does the academic program involve new and innovative approaches to training and education relevant to the injury and/or violence prevention and control field?

Approach

Are the curriculum content and design, the formal training objectives, and the plans to meet the professional needs adequate to meet the training objectives of the center? Is the course content adequate to achieve the proposed degree? Are the courses, course sequence, time devoted to lecture, laboratory, and field experience, and the nature of specific field and clinical experiences including their relationships with didactic programs consistent with a high quality, innovative program? How well does this program integrate with and complement other academic programs in the parent institution? Is there adequate consideration of requirements for information dissemination and special training needs that may be peculiar to that center? Are there methods and approaches in place to evaluate training accomplishments and to document the professionals trained during the five year period?

Environment

Are the quality, sufficiency, and multidisciplinary character of the training and research environment well described? Is there evidence of an institutional commitment to the program goals and the relationship of this program to the broader ICRC program? Is there a record of success in obtaining outside support to supplement the academic program such as other federal grants, support from states and other public agencies, and support from the private sector?

REVIEW CRITERIA FOR THE RESEARCH PROJECTS

Each application may propose a maximum of four research projects. At least one research project must address a component of translation research. In addition, at least one research project must address a component of policy research. Two of the research projects must address one of NCIPC's current research focus areas (Motor Vehicle-related Injuries, Violence Against Children and Youth, Prescription Drug Overdose, or Traumatic Brain Injury) (<http://www.cdc.gov/injury/about/focus.html>), or address high burden injury and/or violence prevention and control topic areas. The remaining research projects must be in alignment with NCIPC's Injury Research Agenda. Reviewers will be instructed to determine if these criteria have been met when evaluating the scientific merit of the research projects. The research project descriptions should indicate what research gaps are being addressed. Research projects that address shared risk factors are encouraged.

Note: Each of the research projects will be given an overall score.

Significance

Do the proposed research projects address important problems? If the applicant achieves the aims of the research projects, how will they advance scientific knowledge or public health practice? What will be the effect of the proposed research projects on the concepts, methods, technologies, treatments, or preventative interventions that drive this field? Will the proposed research projects have an impact on a national level? Do the proposed research projects examine vulnerable populations? Will this study provide information that will have significant impact in the future?

Investigators

Are the investigators for each proposed research projects appropriately trained and well suited to carry out this work? Is the work proposed appropriate to the experience level of the principal investigator and other researchers? Does the investigative team bring complementary and integrated expertise to the research project (if applicable)?

Innovation

Are the proposed research projects original and innovative? For example: Do the proposed research projects challenge existing paradigms or public health practice; address an innovative hypothesis or critical barrier to progress in the field? Do the proposed research projects develop or employ novel concepts, approaches, methodologies, tools, or technologies for this area? What new information will each proposed research project provide?

Approach

Are the conceptual framework, design, methods, and analyses adequately developed, well integrated, well-reasoned, and appropriate to the aims of each proposed research project? Do the research projects include plans to measure progress toward achieving the stated

objectives? Is there an appropriate work plan included? Are there plans for translation of the research findings? Does the applicant acknowledge potential problem areas and consider alternative tactics? Does at least one research project address a component of translation research? Does at least one research project address a component of policy research? Do two of the research projects address one of NCIPC's current research focus areas or address high burden injury and/or violence prevention and control topic areas? Are the remaining research projects aligned with NCIPC's Injury Research Agenda? What real world impact will each research project have? How well can each research project be adopted in the real world?

Environment

Does the scientific environment in which the work will be done contribute to the probability of success? Do the proposed studies benefit from unique features of the scientific environment, or subject populations, or employ useful collaborative arrangements? Is there evidence of institutional support? Is there an appropriate degree of commitment and cooperation by other interested parties as evidenced by letters of support detailing the nature and extent of their involvement?

Other Considerations

Because the research projects can be carried out in a short period of time with limited resources, their description in the application will not have the same level of detail as found in an R01 application. Accordingly, reviewers will be instructed to evaluate the research projects differently than they would an R01 application; they will be instructed to focus on the general approach to the problem, the justification for the proposed work, and any pilot work or preliminary data that was provided.

Review Criteria for a Developmental Center Application

Note: The Administrative Core, the Training, Education and Outreach Core and the Research Project will each be given an overall score.

REVIEW CRITERIA FOR THE ADMINISTRATIVE CORE

Significance

Do the proposed activities of the center address important problems or critical barriers to progress in the field of injury and/or violence prevention and control? If the aims of the application are achieved, how will scientific knowledge, technical capability, and/or public health practice be improved? How will successful completion of the aims change the concepts, methods, technologies, treatments, services, or preventative interventions that drive the field of injury and/or violence prevention and control? What is the potential impact of the center in addressing local and national health needs related to injury and/or violence prevention and control? Does the creation of this center push forward the field of injury and/or violence prevention and control, and will it be a resource to the nation?

Investigator(s)

Are the center director, key personnel, project PI, and other researchers appropriately trained and well suited to carry out the specific aims of this application? Are they adequately qualified to plan and conduct research and administer a national center for injury prevention and control? Does the center director have the leadership ability, scientific stature, and commitment of time to adequately manage such a center? Does the center director report to an appropriate institutional official, e.g. Dean of a school, Vice-President of a University, or Commissioner of Health? Has the center director committed at least fifty percent (50%) effort devoted solely to this grant for each budget year? Have the center director, key personnel, project PI, and other investigators made significant contributions to the field of injury and/or violence prevention and control as demonstrated by their accomplishments and publications? Does the center director have at least three peer-reviewed injury and/or violence related publications on which they are a senior author? Has this been documented by listing the relevant publication(s) under the "Selected peer-reviewed publications" section of the principal investigator's Biographical Sketch page in the application? Has the center director obtained injury and/or violence prevention and control research grant funding in the last 10 years? Do the investigators have complementary and integrated expertise; are their leadership approach, governance and organizational structure appropriate for the proposed activities?

Innovation

Does the application challenge and seek to shift current research or public health practice paradigms by utilizing novel theoretical concepts, approaches or methodologies, instrumentation, or interventions? Is a refinement, improvement, or new application of theoretical concepts, approaches or methodologies, instrumentation, or interventions proposed? To what extent are novel administrative models, research methods, research topics, or potentially synergistic project relationships proposed that may enhance the potential of the field of injury and/or violence prevention and control?

Approach

Do the proposed center activities adequately address the mission and priorities of NCIPC and of the proposed center? Are the overall strategy, methodology, and analyses well-reasoned and appropriate to accomplish the specific aims of the application? Are there appropriate administrative arrangements and facilities to stimulate collaboration? Are there adequate connections among the proposed research, intervention, and education projects to build a synergistic overall program? Do the goals of the center address policy and translation research? Are potential problems, alternative strategies, and benchmarks for success presented in the application? Is the proposed center more than the sum of its parts? What are the long term goals of the center? Are they appropriate?

Are there adequate overall plans for administration and management of the ICRC to support all facets of the operation of the center? Is the center director adequately supported? Is there adequate management depth to provide long-term continuity of

center leadership? Does the administrative structure facilitate communication among the center participants?

Does the administrative core provide a mechanism for planning, coordinating the activities of the center? Does the administrative core provide oversight of the center's efforts? Does the administrative core provide a mechanism for overseeing fiscal and resource management? Does the administrative core provide a mechanism for preparing and publishing annual reports and scientific publications? Does the administrative core provide a mechanism to integrate professionals from a wide spectrum of disciplines to perform injury and/or violence prevention and control research?

Environment

Are the institutional support, equipment and other physical resources available to the investigators adequate? Will the aims of the application benefit from unique features of the scientific environment, subject populations, or collaborative arrangements of the proposed center? Will the scientific environment in which the work will be done contribute to the probability of success? Is there strong Institutional commitment to the proposed center?

REVIEW CRITERIA FOR THE TRAINING, EDUCATION AND OUTREACH CORE

Significance

What is the potential of the education and training component of this core to train injury and/or violence prevention professionals? What is the potential impact of the training and educational programs in meeting the needs for injury and/or violence prevention and control?

Do the proposed outreach activities facilitate the translation of injury and/or violence prevention findings into practice and policy? What is the potential of the outreach component to implement effective interventions in injury and/or violence prevention and control?

Staff

What are the qualifications of the director and key personnel in delivering academic and/or short course training in the proposed field? For formal degree training programs, what are the accomplishments of the teaching staff and mentors as research investigators in injury and/or violence prevention and control? Do the director, key personnel, faculty and staff have evidence of peer-reviewed publications and research grant support? What are the qualifications of the director and key personnel in performing outreach activities?

Innovation

Does the academic program involve new and innovative approaches to training and education relevant to the injury and/or violence prevention and control field? Do the proposed outreach activities involve new and innovative approaches?

Approach

Are the content and design of the training and educational programs adequate to meet the training objectives of the center? Is the course content the proposed degree programs adequate? Are the courses, course sequence, time devoted to lecture, laboratory, and field experience, consistent with a high quality, innovative training and education program? How well does this training and education program integrate with and complement other academic programs in the parent institution? Are there methods and approaches in place to evaluate training accomplishments? What is the potential impact of the outreach program in meeting the needs for injury and/or violence prevention and control? Are appropriate injury prevention constituents (other education and research institutions, businesses, community groups, community based organizations, state and local governments, state and local health departments, and other non-governmental organizations) engaged in the outreach program? Will the proposed outreach activities have an impact on the practitioner's ability to affect injury prevention and control? Are the proposed outreach activities and materials culturally, linguistically, and educationally appropriate? Is the evaluation plan for impact appropriate?

Environment

Are the quality, sufficiency, and multidisciplinary character of the training and outreach environment well described? Is there evidence of an institutional commitment to the program goals and the relationship of this core to the broader ICRC program? Is there a record of success in obtaining outside support to supplement the academic programs and outreach activities such as other federal grants, support from states and other public agencies, and support from the private sector?

REVIEW CRITERIA FOR THE RESEARCH PROJECT

The proposed research project must address one of NCIPC's current research focus areas (Motor Vehicle-related Injuries, Violence Against Children and Youth, Prescription Drug Overdose, or Traumatic Brain Injury) (<http://www.cdc.gov/injury/about/focus.html>), or address a high burden injury and/or violence prevention and control topic areas. The remaining research projects must be in alignment with NCIPC's Injury Research Agenda. Reviewers will be instructed to determine if these criteria have been met when evaluating the scientific merit of the research projects.

Significance

Does this study address an important problem? If the applicant achieves the aims of the application, how will it advance scientific knowledge or public health practice? What will be

the effect of these studies on the concepts, methods, technologies, treatments, or preventative interventions that drive this field? Do the proposed research projects examine vulnerable populations? Will this study provide information that will have significant impact in the future?

Investigators

Are the investigators appropriately trained and well suited to carry out this work? Is the work proposed appropriate to the experience level of the principal investigator and other researchers? Does the investigative team bring complementary and integrated expertise to the project (if applicable)?

Innovation

Is the project original and innovative? For example: Does the project challenge existing paradigms or public health practice; address an innovative hypothesis or critical barrier to progress in the field? Does the project develop or employ novel concepts, approaches, methodologies, tools, or technologies for this area? What new information will each proposed research project provide?

Approach

Are the conceptual framework, design, methods, and analyses adequately developed, well integrated, well-reasoned, and appropriate to the aims of the project? Does the project include plans to measure progress toward achieving the stated objectives? Is there an appropriate work plan included? Are there plans for translation of the research findings? Does the applicant acknowledge potential problem areas and consider alternative tactics? Does the research project address one of NCIPC's current research focus areas or address a high burden injury and/or violence prevention and control topic area? What real world impact will each research project have? How well can each research project be adopted in the real world?

Environment

Does the scientific environment in which the work will be done contribute to the probability of success? Do the proposed studies benefit from unique features of the scientific environment, or subject populations, or employ useful collaborative arrangements? Is there evidence of institutional support? Is there an appropriate degree of commitment and cooperation by other interested parties as evidenced by letters of support detailing the nature and extent of their involvement?

2. Additional Review Criteria

As applicable for the project proposed, *reviewers will evaluate* the following additional items while determining scientific and technical merit, and in providing a research project score, but *will not give separate scores* for these items.

Protections for Human Subjects

If the research involves human subjects but does not involve one of the six categories of research that are exempt under [45 CFR Part 46](#) , the committee will evaluate the justification for involvement of human subjects and the proposed protections from research risk relating to their participation according to the following five review criteria: 1) risk to subjects, 2) adequacy of protection against risks, 3) potential benefits to the subjects and others, 4) importance of the knowledge to be gained, and 5) data and safety monitoring for clinical trials.

For research that involves human subjects and meets the criteria for one or more of the six categories of research that are exempt under 45 CFR Part 46, the committee will evaluate: 1) the justification for the exemption, 2) human subjects involvement and characteristics, and 3) sources of materials. For additional information on review of the Human Subjects section, please refer to the HHS/CDC Requirements under AR-1 Human Subjects Requirements (http://www.cdc.gov/od/pgo/funding/grants/additional_req.shtm#ar1).

If your proposed research involves the use of human data and/or biological specimens, you must provide a justification for your claim that no human subjects are involved in the Protection of Human Subjects section of the Research Plan.

Inclusion of Women, Minorities, and Children

When the proposed project involves clinical research, the committee will evaluate the proposed plans for inclusion of minorities and members of both genders, as well as the inclusion of children. For additional information on review of the Inclusion section, please refer to the policy on the Inclusion of Women and Racial and Ethnic Minorities in Research (<http://www.cdc.gov/OD/foia/policies/inclusio.htm>) and the policy on the Inclusion of Persons Under21 in Research (<http://aops-mas-iis.cdc.gov/Policy/Doc/policy496.pdf>).

Vertebrate Animals

The committee will evaluate the involvement of live vertebrate animals as part of the scientific assessment according to the following five points: 1) proposed use of the animals, and species, strains, ages, sex, and numbers to be used; 2) justifications for the use of animals and for the appropriateness of the species and numbers proposed; 3) adequacy of veterinary care; 4) procedures for limiting discomfort, distress, pain and injury to that which is unavoidable in the conduct of scientifically sound research including the use of analgesic, anesthetic, and tranquilizing drugs and/or comfortable restraining devices; and 5) methods of euthanasia and reason for selection if not consistent with the AVMA Guidelines on Euthanasia. For additional information on review of the Vertebrate Animals section, please refer to the Worksheet for Review of the Vertebrate Animal Section (http://grants.nih.gov/grants/guide/url_redirect.htm?id=11150).

Biohazards

Reviewers will assess whether materials or procedures proposed are potentially hazardous to research personnel and/or the environment, and if needed, determine whether adequate protection is proposed.

3. Additional Review Considerations

As applicable for the project proposed, reviewers will consider each of the following items, but *will not give scores* for these items, and should not consider them in providing an overall impact/priority score.

Resource Sharing Plans

HHS/CDC policy requires that recipients of grant awards make research resources and data readily available for research purposes to qualified individuals within the scientific community after publication. Please see:

<http://www.cdc.gov/od/foia/policies/sharing.htm>. Investigators responding to this funding opportunity should include a plan on sharing research resources and data.

Budget and Period of Support

Reviewers will consider whether the budget and the requested period of support are fully justified and reasonable in relation to the proposed research. The applicant can obtain guidance for completing a detailed justified budget on the CDC website, at the following Internet address: <http://www.cdc.gov/od/pgo/funding/budgetguide.htm>.

4. Review and Selection Process

Applications will be evaluated for scientific and technical merit by an appropriate peer review group, in accordance with CDC peer review policy and procedures, using the stated review criteria.

As part of the scientific peer review, all applications:

- Will undergo a selection process in which only those applications deemed to have the highest scientific and technical merit (generally the top half of applications under review), will be discussed and assigned an overall impact/priority score.
- Will receive a written critique.

Applications will be assigned to the appropriate HHS/CDC Center, Institute, or Office.

Applications will compete for available funds with all other recommended applications submitted in response to this FOA. Following initial peer review, recommended applications will receive a second level of review. The following will be considered in making funding decisions:

- Scientific and technical merit of the proposed project as determined by scientific peer review.
- Availability of funds.

- Relevance of the proposed project to program priorities.
- Geographic balance
 Geographic balance of the funded applications is not a requirement of this FOA. However, if a sufficient number of scientifically meritorious applications are received, geographic balance across states and regions of the United States **may** be taken into consideration when the final funding decisions are made.

5. Anticipated Announcement and Award Dates

After the peer review of the application is completed, the PD/PI will be able to access his or her Summary Statement (written critique) and other pertinent information via the eRA Commons.

Section VI. Award Administration Information

1. Award Notices

Any applications awarded in response to this FOA will be subject to the DUNS, CCR Registration, and Transparency Act requirements. If the application is under consideration for funding, HHS/CDC will request "just-in-time" information from the applicant as described in the HHS Grants Policy Statement (<http://dhhs.gov/asfr/ogapa/aboutog/grantsnet.html>).

A formal notification in the form of a Notice of Award (NoA) will be provided to the applicant organization for successful applications. The NoA signed by the Grants Management Officer is the authorizing document and will be sent via email to the grantee's business official.

Awardees must comply with any funding restrictions described in [Section IV.5. Funding Restrictions](#). Selection of an application for award is not an authorization to begin performance. Any costs incurred before receipt of the NoA are at the recipient's risk. These costs may be allowable as an expanded authority, but only if authorized by CDC.

2. CDC Administrative Requirements

Overview of Terms and Conditions of Award and Requirements for Specific Types of Grants

All HHS/CDC grant and cooperative agreement awards include the HHS Grants Policy Statement as part of the NoA. For these terms of award, see the HHS Grants Policy Statement Part II: Terms and Conditions of Award (<http://dhhs.gov/asfr/ogapa/grantinformation/hhsgps107.pdf>).

Awardees must comply with the administrative requirements (AR) outlined in 45 Code of Federal Regulations (CFR) Part 74 or Part 92, as appropriate, as well as any additional requirements included in the FOA.

Specific requirements that apply to this FOA are the following:

Generally applicable ARs:

[AR-1: Human Subjects Requirements](#)

[AR-2: Inclusion of Women and Racial and Ethnic Minorities in Research](#)

[AR-3: Animal Subjects Requirements](#)

[AR-7: Executive Order 12372 Review](#)
[AR-9: Paperwork Reduction Act Requirements](#)
[AR-10: Smoke-Free Workplace Requirements](#)
[AR-11: Healthy People 2010](#)
[AR-12: Lobbying Restrictions](#)
[AR-13: Prohibition on Use of CDC Funds for Certain Gun Control Activities](#)
[AR-14: Accounting System Requirements](#)
[AR-16: Security Clearance Requirement](#)
[AR-17: Peer and Technical Reviews of Final Reports of Health Studies – ATSDR](#)
[AR-21: Small, Minority, And Women-owned Business](#)
[AR-22: Research Integrity](#)
[AR-24: Health Insurance Portability and Accountability Act Requirements](#)
[AR-25: Release and Sharing of Data](#)
[AR-26: National Historic Preservation Act of 1966](#)
[AR-28: Inclusion of Persons Under the Age of 21 in Research](#)
[AR-29: Compliance with EO13513, “Federal Leadership on Reducing Text Messaging while Driving”, October 1, 2009](#)
[AR-30: Information Letter 10-006, - Compliance with Section 508 of the Rehabilitation Act of 1973](#)
[AR 31 - Distinguishing Public Health Research and Public Health Nonresearch](#)
[AR 32 – FY 2012 Enacted General Provisions](#)

For more information on the Code of Federal Regulations, visit the National Archives and Records Administration at: <http://www.access.gpo.gov/nara/cfr/cfr-table-search.html>

To view brief descriptions of relevant CDC requirements visit:
http://www.cdc.gov/od/pgo/funding/grants/additional_req.shtm

3. Additional Policy Requirements

The following are additional policy requirements relevant to this FOA:

HHS Policy on Promoting Efficient Spending: Use of Appropriated Funds for Conferences and Meetings, Food, Promotional Items and Printing Publications

This policy supports the Executive Order on Promoting Efficient Spending (EO 13589), the Executive Order on Delivering and Efficient, Effective, and Accountable Government (EO 13576) and the Office of Management and Budget Memorandum on Eliminating Excess Conference Spending and Promoting Efficiency in Government (M-35-11). This policy apply to all new obligations and all funds appropriated by Congress. For more information, visit the HHS website at: http://www.hhs.gov/asfr/ogapa/acquisition/effspendpol_memo.html)

Federal Funding Accountability and Transparency Act of 2006

Public Law 109-282, the Federal Funding Accountability and Transparency Act of 2006 as amended (FFATA), requires full disclosure of all entities and organizations receiving Federal funds including grants, contracts, loans and other assistance and payments through a single publicly accessible Web site, www.USASpending.gov (<http://www.usaspending.gov/>). For the full text of the requirements, please review the following website: http://frwebgate.access.gpo.gov/cgi-bin/getdoc.cgi?dbname=109_cong_bills&docid=f:s2590enr.txt.pdf

Plain Writing Act

The Plain Writing Act of 2010 was signed into law on October 13, 2010. The law requires that federal agencies use "clear Government communication that the public can understand and use" and requires the federal government to write all new publications, forms, and publicly distributed documents in a "clear, concise, well-organized" manner. For more information on this law, go to: <http://www.plainlanguage.gov/plLaw/index.cfm>.

Tobacco and Nutrition Policies

The CDC supports implementing evidence-based programs and policies to reduce tobacco use and secondhand smoke exposure, and to promote healthy nutrition. CDC encourages all awardees to implement the following *optional* evidence-based tobacco and nutrition policies within their organizations. These policies build on the current federal commitment to reduce exposure to secondhand smoke, which includes The Pro-Children Act, 20 U.S.C. 7181-7184 that prohibits smoking in certain facilities that receive federal funds.

Tobacco:

- Tobacco-free indoors – no use of any tobacco products (including smokeless tobacco) or electronic cigarettes in any indoor facilities under the control of the applicant.
- Tobacco-free indoors and in adjacent outdoor areas – no use of any tobacco products or electronic cigarettes in any indoor facilities, within 50 feet of doorways and air intake ducts, and in courtyards under the control of the applicant.
- Tobacco-free campus – no use of any tobacco products or electronic cigarettes in any indoor facilities and anywhere on grounds or in outdoor space under the control of the applicant.

Nutrition:

- Healthy food service guidelines that at a minimum align with Health and Human Services and General Services Administration Health and Sustainability Guidelines for Federal Concessions and Vending Operations for cafeterias, snack bars, and vending machines in any facility under the control of the recipient organization and in accordance with contractual obligations for these services. The following are resources for healthy eating and tobacco free workplaces:
 - http://www.gsa.gov/graphics/pbs/Guidelines_for_Federal_Concessions_and_Vending_Operations.pdf
 - <http://www.cdc.gov/nccdphp/dnpao/hwi/toolkits/tobacco/index.htm>

- <http://www.cdc.gov/chronicdisease/resources/guidelines/food-service-guidelines.htm>

Applicants should state whether they choose to participate in implementing these two *optional* policies. However, **no applicants will be evaluated or scored** on whether they choose to participate in implementing these optional policies.

5. Reporting

Awardees will be required to submit the [Non-Competing Continuation Grant Progress Report \(PHS 2590\)](#) annually and financial statements as required in the HHS Grants Policy Statement.

A final progress report, invention statement, equipment inventory list and the expenditure data portion of the Federal Financial Report are required for closeout of an award, as described in the HHS Grants Policy Statement.

Although the financial plans of the HHS/CDC CIO(s) provide support for this program, awards pursuant to this funding opportunity depend upon the availability of funds, evidence of satisfactory progress by the recipient (as documented in required reports) and the determination that continued funding is in the best interest of the Federal government.

The Federal Funding Accountability and Transparency Act of 2006 (Transparency Act), includes a requirement for awardees of Federal grants to report information about first-tier subawards and executive compensation under Federal assistance awards issued in FY2011 or later. Compliance with this law is primarily the responsibility of the Federal agency. However, two elements of the law require information to be collected and reported by recipients: **1) information on executive compensation when not already reported through the Central Contractor Registry; and 2) similar information on all sub-awards/subcontracts/consortiums over \$25,000.** It is a requirement for awardees of Federal grants to report information about first-tier subawards and executive compensation under Federal assistance awards issued in FY2011 or later. All awardees of applicable CDC grants and cooperative agreements are required to report to the Federal Subaward Reporting System (FSRS) available at www.fsrs.gov on all subawards over \$25,000. See the HHS Grants Policy Statement (<http://dhhs.gov/asfr/ogapa/grantinformation/hhsgps107.pdf>) for additional information on this reporting requirement.

A. Submission of Reports

The Recipient Organization must provide HHS/CDC with an original, plus one hard copy of the following reports:

1. **Yearly Non-Competing Grant Progress Report**, (use form PHS 2590, posted on the HHS/CDC website, <http://www.cdc.gov/od/pgo/funding/forms.htm> and at <http://grants.nih.gov/grants/funding/2590/2590.htm>, **is due 90 to 120 days prior to the end of the current budget period.** The progress report will serve as the non-

competing continuation application. Although the financial plans of the HHS/CDC CIO(s) provide support for this program, awards pursuant to this funding opportunity are contingent upon the availability of funds, evidence of satisfactory progress by the recipient (as documented in required reports) and the determination that continued funding is in the best interest of the Federal government.

2. **Annual Federal Financial Report (FFR)** SF 425 is required and must be submitted through eRA Commons **within 90 days after the end of each budget period.**
3. **A final progress report**, invention statement, equipment/inventory report, and the expenditure data portion of the Federal Financial Report (FFR) Standard Form (“SF”) 425 Form are required **within 90 days of the end of the project period.**

B. Content of Reports

1. **Yearly Non-Competing Grant Progress Report:** The grantee’s continuation application/progress report should include:

- Description of Progress during Annual Budget Period: Current Budget Period Progress reported on the PHS 2590 (<http://grants1.nih.gov/grants/funding/2590/2590.htm>)
<http://grants.nih.gov/grants/funding/2590/2590.htm>: Detailed narrative report for the current budget period that directly addresses progress towards the Measures of Effectiveness included in the current budget period proposal.
- Research Aims: list each research aim/project
 - a) Research Aim/Project: purpose, status (met, ongoing, and unmet), challenges, successes, and lessons learned
 - b) Leadership/Partnership: list project collaborations and describe the role of external partners.
- Translation of Research (1 page maximum). When relevant to the goals of the research project, the PI should describe how the significant findings may be used to promote, enhance, or advance translation of the research to policy or practice. This section should be understandable to a variety of audiences, including policy makers, practitioners, public health programs, healthcare institutions, professional organizations, community groups, researchers, and other potential users. The PI should identify the research findings that were translated into public health policy or practice and how the findings have been or may be adopted in public health settings. Or, if they cannot be applied yet, this section should address which research findings may be translated, how these findings can guide future research or related activities, and recommendations for translation. If relevant, describe how the results of this project could be generalized to populations and communities outside of the study. *Questions to consider in preparing this section include:*
 - How will the scientific findings be translated into public health policy or practice?

- How will the project improve or effect the translation of research findings into policy or practice?
- How will the research findings help promote or accelerate the dissemination, implementation, or diffusion of improvements in public health programs or practices?
- How will the findings advance or guide future research efforts or related activities?
- **Public Health Relevance and Impact (1 page maximum).** This section should address improvements in public health as measured by documented or anticipated outcomes from the project. The PI should consider how the findings of the project relate beyond the immediate study to improved practices, prevention or intervention techniques, policy, or use of technology in public health. *Questions to consider in preparing this section include:*
 - How will this project lead to improvements in public health?
 - How will the findings, results, or recommendations been used to influence practices, procedures, methodologies, etc.?
 - How will the findings, results, or recommendations contributed to documented or projected reductions in morbidity, mortality, injury, disability, or disease?
- **Current Budget Period Financial Progress:** Status of obligation of current budget period funds and an estimate of unobligated funds projected provided on an estimated FFR.
- **New Budget Period Proposal:**
 - Detailed operational plan for continuing activities in the upcoming budget period, including updated Measures of Effectiveness for evaluating progress during the upcoming budget period. Report listed by Research Aim/Project.
 - Project Timeline: Include planned milestones for the upcoming year (be specific and provide deadlines).
- **New Budget Period Budget:** Detailed line-item budget and budget justification for the new budget period. Use the CDC budget guideline format.
- **Publications/Presentations:** Include publications/presentations resulting from this

CDC grant only during this budget period. If no publication or presentations have been made at this stage in the project, simply indicate “Not applicable: No publications or presentations have been made.

- IRB Approval Certification: Include all current IRB approvals to avoid a funding restriction on your award. If the research does not involve human subjects, then please state so. Please provide a copy of the most recent local IRB and CDC IRB, if applicable. If any approval is still pending at time of APR due date, indicate the status in your narrative.

C. Annual Federal Financial Reporting

The Annual Federal Financial Report (FFR) SF 425 is required and must be submitted through eRA Commons within 90 days after the end of each budget period. The FFR should only include those funds authorized and disbursed during the timeframe covered by the report. The final FFR must indicate the exact balance of unobligated funds and may not reflect any unliquidated obligations. There must be no discrepancies between the final FFR expenditure data and the Payment Management System's (PMS) cash transaction data.

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 submit a letter explaining the reason and date by which the Grants Officer will receive the information. **All CDC Financial Expenditure data due on/after October 1, 2012 must be submitted using the FFR via the eFSR/FFR system in the eRA Commons.** All Federal Reporting in the Payment Management System is unchanged. All new submissions should be prepared and submitted as FFRs.

CDC's implementation of the FFR retains a financial reporting period that coincides with the budget period of a particular project. However, **the due date for annual FFRs will be 90 days after the end of the calendar quarter in which the budget period ends.** Note that this is a change in due dates of annual FFRs and may provide up to 60 additional days to report, depending upon when the budget period end date falls within a calendar quarter. For example, if the budget period ends 1/30/2012, the annual FFR is due 6/30/2012 (90 days after the end of the calendar quarter of 3/31/2012). Due dates of final reports will remain unchanged. The due date for final FFRs will continue to be 90 days after the project period end date.

Grantees must submit closeout reports in a timely manner. Unless the Grants Management Officer (GMO) of the awarding Institute or Center approves an extension, grantees must submit a final FFR, final progress report, and Final Invention Statement and Certification within 90 days of the end of grant period. Failure to submit timely and accurate final reports may affect future funding to the organization or awards under the direction of the same Project Director/Principal Investigator (PD/PI).

FFR (SF 425) instructions for CDC grantees are now available at <http://grants.nih.gov/grants/forms.htm>. For further information, contact GrantsInfo@nih.gov. Additional resources concerning the eFSR/FFR system, including a User Guide and an on-line demonstration, can be found on the eRA Commons Support Page: <http://www.cdc.gov/od/pgo/funding/grants/eramain.shtm>.

FFR Submission: The submission of FFRs to CDC will require organizations to register with eRA Commons (Commons) (<https://commons.era.nih.gov/commons/>). CDC recommends that this one time registration process be completed at least 2 weeks prior to the submittal date of a FFR submission.

Organizations may verify their current registration status by running the “List of Commons Registered Organizations” query found at: <http://era.nih.gov/commons/>. Organizations not yet registered can go to <https://commons.era.nih.gov/commons/registration/registrationInstructions.jsp> for instructions. It generally takes several days to complete this registration process. This registration is independent of Grants.gov and may be done at any time.

The individual designated as the PI on the application must also be registered in the Commons. The PI must hold a PI account and be affiliated with the applicant organization. This registration must be done by an organizational official or their delegate who is already registered in the Commons. To register PIs in the Commons, refer to the eRA Commons User Guide found at: <http://era.nih.gov/commons/index.cfm>.

- D. Final Reports:** Final reports should provide sufficient detail for CDC to determine if the stated outcomes for the funded research have been achieved and if the research findings resulted in public health impact based on the investment. The grantee’s final report should include:
- **Research Aim/Project Overview:** The PI should describe the purpose and approach to the project, including the outcomes, methodology and related analyses. Include a discussion of the challenges, successes and lessons learned. Describe the collaborations/partnerships and the role of each external partner.
 - **Translation of Research Findings:** The PI should describe how the findings will be translated and how they will be used to promote, enhance or advance the research findings and the impact on public health policy and practice. This section should be understandable to a variety of audiences, including policy makers, practitioners, public health programs, healthcare institutions, professional organizations, community groups, researchers and other potential end users. The PI should also provide a discussion of any research findings that influenced policy or practice

during the course of the project period. If applicable, describe how the findings could be generalized and scaled to populations and communities outside of the funded project.

- **Public Health Relevance and Impact:** This section should address improvements in public health as measured by documented or anticipated outcomes from the project. The PI should consider how the findings of the project related beyond the immediate study to improved practices, prevention or intervention techniques, policy, technology or systems improvement in public health.
- **Publications; Presentations; Media Coverage:** Include information regarding all publications, presentations or media coverage resulting from this CDC funded activity. Please include any additional dissemination efforts that did or will result from the project.

Section VII. Agency Contacts

We encourage inquiries concerning this funding opportunity and welcome the opportunity to answer questions from potential applicants.

Application Submission Contacts

[Grants.gov Customer Support](#) (Questions regarding Grants.gov registration and submission, downloading or navigating forms)

Contact Center Phone: 800-518-4726

Email: support@grants.gov

Hours: 24 hours a day, 7 days a week; closed on Federal holidays

[eRA Commons Help Desk](#) (Questions regarding eRA Commons registration, tracking application status, post submission issues, FFR submission)

Phone: 301-402-7469 or 866-504-9552 (Toll Free)

TTY: 301-451-5939

Email: commons@od.nih.gov

Hours: Monday - Friday, 7am - 8pm U.S. Eastern Time

CDC Technical Information Management Section (TIMS)

Procurement and Grants Office

Telephone 770-488-2700

Email: PGOTIM@cdc.gov

Hours: Monday - Friday, 7am – 4:30pm U.S. Eastern Standard Time

Scientific/Research Contact(s)

Paul Smutz, PhD

CDC Research

Rev. 09/2012

Scientific Program Officer
National Center for Injury Prevention and Control
Centers for Disease Control and Prevention (CDC)
4770 Buford Hwy, NE, Mailstop F-63
Atlanta, GA 30341
Telephone: 770-488-4850
Email: wsmutz@cdc.gov

Peer Review Contact(s)

Jane Suen, PhD
Scientific Review Officer
National Center for Injury Prevention and Control
Centers for Disease Control and Prevention (CDC)
4770 Buford Hwy, NE, Mailstop F-63
Atlanta, GA 30341
Telephone: 770-488-4281
Email: jxs3@cdc.gov

Financial/Grants Management Contact(s)

Annie Harrison-Camacho
Procurement and Grants Office (PGO)
Telephone: 770-488-2098
Email: atc4@cdc.gov

Section VIII. Other Information

All awards are subject to the terms and conditions, cost principles, and other considerations described in the HHS Grants Policy Statement.

Authority and Regulations

Awards are made under the authorization of Section 301 (a) [42 U.S.C. 241(a)] of the Public Health Service Act, and section 391 (a)[42 U.S.C. 280 b(a)] of the Public Service Health Act, as amended.