

The following tables list the CIO Project Plans for this supplemental NOFO, which is for Year 1 of CDC-RFA-PW24-0080. As a reminder, any activities involving information collection (i.e., surveys, questionnaires, etc.) are subject to OMB/PRA requirements and may require the CDC to coordinate an OMB Information Collection Clearance. Recipients and funding CIO should engage in OMB/PRA discussions shortly after Notices of Award are issued to allow time to submit applicable paperwork.

Applicants are eligible to submit applications for CIO Project Plans that match the Population of Focus Category and Population of Focus Description for which they received initial funding in FY24.

Individual awards will vary depending on the activities and approximate funding available for each CIO Project Plan. The approximate amount available for a particular project is provided in the table below.

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Table 1. Category A CIO Project Plans

Project Title	Population of Focus Description	Proposed FY24 Project Funding Total
Addressing Prediabetes/Diabetes and Social Needs Through Community Care Hubs	State Health Departments	\$ 1,000,000
Advancing Infectious Disease Policy Development Capacity of Local Health Officials	County and City Health Officials	\$ 175,000
Advancing Infectious Disease Policy Development Capacity of State Health Officials	State Health Officials	\$ 225,000
Best Practices for COVID-19 Health Equity: TA for OT21-2103 Recipients	Local health departments	\$ 1,000,000
Big City/Large Metro Senior Deputy Partnership Development and Engagement	Big City/large metro (local) health department senior deputies	\$ 350,000
Blueprint for Effective Overdose Prevention and Response Investment in Rural Communities	Rural local health departments	\$ 1,000,000
Building and Maintaining Capacity for Tobacco Prevention and Control within State Health Departments	State health department staff supporting tobacco control, including National Tobacco Control Program Managers and their staff	\$ 250,000

Building Capacity for climate and health in local health departments	Local health department staff. This may include county and city health officials, and other relevant public health practitioners that focus on public health at the local level. This in turn benefits the populations served directly by local health departments.	\$ 200,000
Building capacity for ending violence against children and ACEs	Staff and partners involved in the prevention of violence, suicide, opioid overdose, and ACEs in a local health department (LHD) in a diverse US city, with high levels of youth/community violence.	\$ 150,000
Building Capacity for Healthy Homes in US territories and freely associated states	State Health Agencies	\$ 1,000,000
Building Capacity for Tribal Overdose Prevention	Tribal health departments and tribal serving organizations working in injury and overdose prevention.	\$ 890,000
Building Capacity of Coroners and Medical Examiners for Accurate and Timely Cause of Death Reporting	State health offices to include coroner and medical examiner offices	\$ 250,000
Building Capacity of the Public Health System to Improve Population Health Through Local Health Departments	The City and County Health Departments across the United States, which includes department staff, leadership, and stakeholders. The primary audience being local health department leaders and the secondary audience of local health department employees.	\$ 145,000
Building Community Resilience Through Addressing Root Cause Public Health Challenges	Local governmental agencies or organizations who support county or local health departments.	\$ 750,000

Building State Capacity for Rapid Response Overdose Prevention	state health agencies	\$ 1,000,000
Building State Health Department Capacity to use ACEs Data and Science to Prevent Negative Health Outcomes	State health department leadership and staff	\$ 650,000
Building the Capacity of Chronic Disease Directors in the U.S. Affiliated Pacific Islands	Territorial Health Departments	\$ 150,000
Building Work@Health Program Capacity for Sustainable Training and Technical Assistance	State health departments	\$ 150,000
Cancer Leadership and Collaboration Technical Assistance	State Health Departments receiving funding from the Division of Cancer Prevention and Control (DCPC) will be the population of focus. The project will help these organizations build capacity for cancer prevention and control programs funded by CDC, including partnering and working with territorial, tribal, and other organizations that are also funded by the same programs, to share best practices and to reach populations that are disproportionately impacted by cancer.	\$ 580,000
Capacity building assistance for Long COVID at state health departments	State health Agencies	\$ 450,000
Capacity Building for Public Health Analysts in the Overdose Response Strategy	State health agencies and those agencies that work with health dept staff	\$ 11,000,000
Characterizing chronic disease among Medicaid members who use tobacco	State health department, specifically those involved in Medicaid and tobacco control programs	\$ 350,000

Climate adaptation in territorial health departments	Territorial Health Officials (THOs), their leadership and staff, the populations residing in these jurisdictions, and related partners and stakeholders. This could include American Samoa, Guam, Commonwealth of Northern Mariana Islands, Republic of the Marshall Islands, Federated States of Micronesia, Palau, Puerto Rico, and U.S. Virgin Islands.	\$ 90,000
Climate and health capacity in state health departments	Health Officials, state health department leadership and staff (including state environmental health directors), the populations residing in these jurisdictions, and related partners and stakeholders.	\$ 100,000
Climate Ready Tribes Initiative	Tribal health departments	\$ 200,000
Communities of Practice: Heart Disease and Stroke Prevention and Control in Local Health Departments	City and Local Health Departments serving populations of 900,000 or more, and local government officials.	\$ 390,000
Creating Publicly-Accessible Chronic Disease Prevalence Estimates from the MENDS Network	This project will build capacity for state health department staff, including but not limited to staff who work in the fields of epidemiology, public health and clinical informatics, data science, and statistics.	\$ 830,000
Cross-Sector Systems Improvement Technical Assistance for Local Health Department Partnerships	Local health Departments	\$ 1,000,000
Cross-Sector Systems Improvement Technical Assistance for State Health Department Partnerships	State Health Department	\$ 800,000

Cross-Sector Systems Improvement Technical Assistance for Territorial Health Department Partnerships	Territorial public health departments/agencies	\$ 200,000
Cross-Sector Systems Improvement Technical Assistance for Tribal Health Department Partnerships	Tribal public health departments	\$ 600,000
Data Analysis and Evaluation Capacity Building Support for Cancer Programs	State health departments that are recipients of the National Breast and Cervical Cancer Early Detection Program, Colorectal Cancer Control Program, and National Program of Cancer Registries	\$ 1,000,000
Data standards for environmental public health practice	State health agencies	\$ 165,000
Development, Implementation and Evaluation of an Evidence-based Brain Health Approach	State health departments and their community and healthcare organization partners to help promote and implement linkages between clinical and community sectors.	\$ 800,000
Diabetes Prevention Support for Tribes	State Health Departments	\$ 1,000,000
Diabetes Self-Management Education and Support Medicare and Medicaid Coverage	State Health Departments	\$ 1,000,000
Diabetes Technical Assistance for GHWIC Recipients	State Health Departments	\$ 1,000,000
Diabetes Technical Assistance for Island Territories and Freely Associated States	Territorial health departments	\$ 1,000,000

Disaster Recovery Support through a Community of Practice for jurisdictions impacted by Hurricane Ian and Fiona	State health agencies	\$ 200,000
Embedding disability inclusion into the public health workforce	State, tribal, local (city and county), and territorial health departments	\$ 193,000
Emergency Preparedness and Response Maternal Child Health Virtual Learning Collaborative	Local Health Departments	\$ 350,000
Emergency Readiness and Response: Engaging communities and integrating health equity	The population and sub-populations that will benefit from the CBA services are state and local Health Departments (HDs) and the Community Based Organizations (CBOs) they work with that support disproportionately affected populations (e.g., those with disabilities, incarcerated, homeless individuals, from marginalized communities, and more) before, during, and after emergencies.	\$ 125,000
Enhancing Local Public Health Emergency Preparedness and Response Capacity	Local Public Health Departments	\$ 1,069,500
Enhancing modeling and forecasting capacity of large metropolitan health departments utilizing CFA resources	Large metropolitan or big city health departments, or coalitions of such.	\$ 125,000
Enhancing modeling and forecasting capacity of local health departments utilizing CFA resources	Local public health professionals and officials including in particular those supporting city, county, tribal and territorial jurisdictions.	\$ 125,000
Enhancing modeling and forecasting capacity of state health departments utilizing CFA resources	State health departments as well as the public health decision makers these entities support (e.g. elected officials, and those with decision -making authority).	\$ 200,000

Enhancing State Public Health Emergency Preparedness and Response Capacity	State health officials with primary responsibilities related to public health/medical emergency preparedness and response.	\$ 462,500
Enhancing Territorial Public Health Emergency Preparedness and Response Capacity	State health officials, and PHEP-funded staff, within U.S. territories and freely associated states with primary responsibilities related to public health/medical emergency preparedness and response.	\$ 200,000
Enhancing the Multi-State Electronic Health Record-Based Network for Disease Surveillance	This project will build capacity for state health department staff, including but not limited to staff who work in the fields of epidemiology, public health and clinical informatics, data science, and statistics.	\$ 1,000,000
Enhancing Tribal Public Health Emergency Preparedness and Response Capacity	Federally recognized tribes and tribal entities with primary responsibilities related to public health emergency preparedness and response.	\$ 125,000
Equipping Community Health Workers in Rural Areas to Address Alzheimer's Disease and Related Dementias	State health agencies	\$ 300,000
Examining and Improving STD Clinical Services Provided by Health Departments	Publicly funded STD clinics (under local health departments and others that operate with public funding) and other publicly funded clinics that may provide STD services	\$ 625,000

Executive Leadership Development for Mid-Career Public Health Professionals Representing Underrepresented Populations	State health departments. This program is dedicated to the development of early-career and mid-level leaders in public health from diverse backgrounds. It aims to be accessible to a nationwide pool of public health professionals representing a variety of backgrounds. Members of a racial/ethnic minority group/ lesbian/gay/bisexual/transgender, and/or a person with disabilities employed in governmental public health agencies.	\$ 1,300,000
Expanding Access and Capabilities of National DPP Umbrella Hub Arrangements	State Health Departments	\$ 1,000,000
Expanding Capacity to Address the Overdose Epidemic	State and/or local health agencies that work with health dept staff	\$ 6,000,000
Expanding Electronic Case Reporting (eCR) to Benefit Urban Tribal Populations	Local health departments in cities with Urban Indian Organizations that provide healthcare services to AI/AN people	\$ 500,000
Expanding environmental health strategies in housing and community settings	State Health Agencies	\$ 1,000,000
Expanding the Non-Communicable Disease Collaborative in the Islands	Territorial health departments	\$ 1,000,000
Expanding Wastewater Surveillance Capacity at the Local Level	Population focus will include local health department staff supporting wastewater to protect and improve the public's health.	\$ 1,000,000

Flexible Funding to Address Social Determinants of Health	State public health departments	\$ 150,000
Food Safety Activities for City and County Health Departments and Officials	Local Health Departments	\$ 120,000
Food Safety Activities for State Health Departments and Officials	State Health Departments/State Health Officials	\$ 135,000
Getting Further Faster: Virtual Community of Practice	This project will build capacity for MCPs (including state and territorial health departments, community-based organizations [rural, urban, and tribal], and health care systems) in a range of work segments, including but not limited to education, management, policy and program development, communications, and partnership development.	\$ 500,000
GIS Capacity Building for Chronic Disease among Health Department Staff	State health department staff working on surveillance, prevention and treatment of heart disease, stroke and other chronic diseases.	\$ 1,000,000

Grants Management Capacity Building in the U.S. T/FAS	The population of focus for this project falls under Category A: Governmental Public Health Departments. More specifically, these include the public health departments of the U.S. territories, including Puerto Rico (PR), the US Virgin Islands (USVI), American Samoa (AS), the Commonwealth of the Northern Mariana Islands (CNMI), and Guam (GU), and the freely associated states, including the Federated States of Micronesia (FSM), the Republic of the Marshall Islands (RMI), and the Republic of Palau (PU). Sub-populations of this target population include island leadership and public health officials, health department leadership and staff, and anyone working or having business relations with the T/FAS jurisdictions, including related health department partners.	\$ 500,000
Guidance to Accelerate Tribal Public Health Data Access and Use	Tribal Health Departments	\$ 750,000
Hear Her American Indian/ Alaska Native Campaign Implementation and Partnerships	Tribal Health Departments	\$ 500,000
Heart Disease and Stroke Prevention Assistance to State Health Departments	State Health Departments	\$ 702,500
Hurricane Fiona Recovery: PR Direct Support and TA	State health agencies	\$ 1,000,000
Hurricane Ian Recovery: FL Direct Support and TA	State health agencies	\$ 850,000

Hurricane Ian Recovery: NC/SC Direct Support and TA	State health agencies	\$ 800,000
Immunization Capacity Building Support: County and City Health Officials	Local health departments	\$ 1,000,000
Immunization Capacity Building Support: State and Territorial Health Departments	State Health Agencies	\$ 1,000,000
Implementing Public Health Law Curriculum in Accredited SPPH	Local health departments	\$ 250,000
Improving Access to and Delivery of Sexual Health Services	The population of focus for this work will be sexual health services decision makers which could include Medicaid programs at both the state and federal levels, health insurance plans, as well as professional health services and healthcare provider organizations that study and advocate for the provision of healthcare. In this work, the main focus will be on improving both access to and the delivery of sexual health services. Local level health departments.	\$ 550,000
Improving Adolescent Health Through State-Level School-Based Programmatic Strategies	The populations of focus for this project are staff within state and territorial health departments whose roles are related to adolescent health and well-being and who are most likely to engage with other state leadership in adolescent and school health.	\$ 750,000
Improving HIV Prevention through Policy and Partnerships with Local Public Health Leadership	Local level health departments	\$ 300,000

Improving Hypertension Outcomes in Populations at the Highest Risk of CVD	Associations with a national reach that has the capacity to support health care organizations and providers who focus on cardiovascular disease particularly hypertension prevention, detection, and control, with a focus on African American males and females.	\$ 520,000
Improving Overdose Surveillance and Prevention Capacity and Readiness of Overdose Data to Action: STATE and LOCAL Recipients	State Health Agencies	\$ 3,500,000
Improving STI Prevention Programs and Services through Local-level and Community Partnerships	Local level health departments	\$ 260,000
Improving STI Prevention through Partnerships with State Health Officials	State health departments and state health department leadership	\$ 260,000
Improving Tribal Access to Electronic Case Reporting (eCR) Data	Tribal Health Departments	
Increasing public health readiness for response to nuclear and radiological emergencies	Local Health Department, Emergency Management, and Radiation Control Programs	\$ 170,000
Indigenous Evaluation Capacity Building for Tribal Injury and Overdose Prevention	Tribes and tribal-serving organizations.	\$ 1,000,000
Innovations in building strategic partnerships and public health guidance in public health practice	State health agencies	\$ 1,000,000
Integrating brain health messaging in Chronic Disease Programs and facilitating collaboration among BOLD public health programs	State health departments	\$ 1,000,000

Intersectional strategies to address SUD, OD, ACEs, and PCEs	The partner should have existing relationships with local health departments, post overdose outreach teams and community based organizations across the United States.	\$ 900,000
Leveraging ELC to Meet Local Infectious Disease Needs	Local Health Departments	\$ 250,000
Leveraging Legal Mapping for Suicide Prevention - Category A	This legal mapping project will benefit public health agencies, non-governmental organizations, and public health practitioners by building capacity to be able to evaluate the impact of laws and specific components of laws on health outcomes.	\$ 500,000
Local COVID-19 Health Equity: Telling the Story	Local health departments	\$ 1,000,000
Local Health Department Administrative and Legal Preparedness Toolkits and Training	Local health departments	\$ 250,000
Local Health Official Chemical Emergency Guide	Local Health Departments	\$ 165,000
Local TA for COVID-19 Health Equity Sustainability	Local health departments	\$ 1,000,000
Making Dialysis Safer: Strengthening Infection Prevention in Dialysis Healthcare Settings	Healthcare personnel working in dialysis clinics.	\$ 140,000

Maternal and neonatal risk-appropriate care: assessment, analysis, and action	State health agencies	\$ 875,000
Medical Examiner and Coroner Data Modernization Activities	State health offices to include state coroners	\$ 1,000,000
Million Hearts: Atlanta Hypertension Initiative, Improving Hypertension Control in Priority Populations	State health departments	\$ 520,000
Million Hearts: Preventing Heart Attacks and Strokes with Chronic Disease Directors	State health departments	\$ 675,000
Mobilizing for Action through Planning and Partnership National Training and TA Capacity Building for Public Health Practitioners	Local health department staff responsible for and involved in conducting health assessments and health improvement planning, community-driven strategic planning, cross-sector planning, building cross-sector partnership, community engagement, advancing equity, addressing SDOH, and collective action development.	\$ 750,000
Multi-Location Young Child Nutrition Campaign	Chronic disease directors and chronic disease prevention workforce in local and state health departments (including the District of Columbia) located in states/communities with DNPAO funding (State Physical Activity and Nutrition Program, High Obesity Program, and Racial and Ethnic Approaches to Community Health Program). Funded recipients can be found here: Funding by State DNPAO CDC	\$ 249,900

National DPP Building Capacity for Employer Coverage	State health departments	\$ 1,000,000
National DPP Building Capacity for Medicaid Coverage and Enrollment	State health departments	\$ 1,000,000
National DPP Building Capacity for Medicare Coverage	State health departments	\$ 1,000,000
National DPP Building Capacity to Promote Health Equity Through Coverage	State health departments	\$ 1,000,000
National Profile of Local Health Departments	Local public health department officials	\$ 475,000
National Strategic Plan for Chronic Disease Surveillance Modernization	All NCCDPHP Surveillance System Partners Across All Chronic Categories, Public Health Departments, Health Care Data Providers, and Community Partners that Use Chronic Surveillance Data	\$ 500,000
Operationalizing FHIR in Public Health Data Exchange	State Health Agencies	\$ 750,000

Partnerships and Policy in the US Territories and Freely Associated States	Territorial health departments, specifically those in the US territories (Puerto Rico, the US Virgin Islands (USVI), American Samoa, the Commonwealth of the Northern Mariana Islands (CNMI), and Guam) and freely associated states (the Federated States of Micronesia (FSM), the Republic of the Marshall Islands (RMI), and the Republic of Palau (Palau)). Relevant sub-populations include health officials and health department staff.	\$ 150,000
Partnerships to promote comprehensive, community-driven community and youth violence prevention approaches	Big Cities Health Departments	\$ 1,000,000
Pilot opportunities for health departments to implement and evaluate ways to connect clinical and community fall prevention efforts	State Health Departments that collaborate with clinical and community partners to implement fall prevention	\$ 700,000
Platform for Addressing Public Health Preparedness Challenges (INSPIRE: Readiness)	State Health Department Leadership	\$ 300,000
Prediabetes Health Marketing	State health departments	\$ 1,000,000
Preventing Overdose Among Disproportionately Affected Populations	Local health departments	\$ 1,000,000
Preventing Vector-borne disease in Cities and Counties	The nearly 3,000 Local Health Departments (LHDs) across the United States, including LHD leaders and LHD employees.	\$ 250,000

Preventive Health and Health Services Block Grant Recipient Training and Peer Learning Community	State health agencies	\$ 300,000
Profile Study of State Health Departments: Infrastructure & Workforce	State health agencies	\$ 335,000
Provide Capacity Building and Technical Assistance for Unfunded CLPPP	State Health Agencies	\$ 1,000,000
Provide TA to State and Territorial Health Agencies for Lead Poisoning Prevention Activities	State health departments	\$ 1,000,000
Public Health Collaborative to Improve Cardiovascular Health Outcomes	State/territorial health Departments; State/Territorial Health Officers and staff working on cardiovascular health improvement.	\$ 1,000,000
Reducing Disparities in Breastfeeding through Continuity of Care	The nearly 3,000 local health departments across the United States, including the primary audience of local health department leaders and secondary audience of local health department employees.	\$ 950,000
Resources to Prevent Overdose and Reduce Related Harms at the Intersection of Public Health and Public Safety	Local Public Health Departments implementing overdose prevention and response activities.	\$ 1,000,000

Scaling up Local-level Community-Clinical Linkages for Older Adult Fall Prevention	Organizations that have the capacity to support local health departments, community paramedicine programs and other community-based programs that desire to implement and evaluate the impact of community-clinical older adult fall prevention programs.	\$ 350,000
Senior Leader Reserve Corp	State health departments	\$ 200,000
State COVID-19 Health Equity: Telling the Story	State health agencies	\$ 1,000,000
State Environmental Health Directors Peer Network Supporting Capacity Building and Collaboration	State health agencies	\$ 1,000,000
State Health Department Deputy and Chief Financial Officer Network and Collaboration Effort	Senior Deputies and CFOs in state health departments/agencies	\$ 800,000
State Health Official Rural Health Academy	State governmental public health leaders and professionals interested in building capacity to address rural public health and population health issues.	\$ 150,000
State TA for COVID-19 Health Equity Sustainability	State health agencies	\$ 1,000,000

Strengthening Grants Management Capacity at the Puerto Rico Department of Health	Territorial health department	\$ 600,000
Strengthening Local Health Departments ability to collaborate across sectors to address emerging environmental health concerns	Local health departments	\$ 200,000
Strengthening Local Public Health Systems and Capacities to Create a Healthier Nation	Priority population is the over 3,000 local health departments (LHDs) across the United States, which includes the primary audience of LHD leaders and secondary audience of LHD employees.	\$ 1,000,000
Strengthening National Program of Cancer Registries by Enhancing Education and Training Capacity and Infrastructure	State health departments	\$ 150,000
Strengthening state and territorial public health preparedness for emerging infectious disease threats through a collaborative innovation hub	State Health Agencies	\$ 600,000
Strengthening State Public Health Systems and Capabilities to Create a Healthier Nation	State health agency officials, leaders, decision-makers (state health departments)	\$ 1,000,000
Strengthening States Through Addressing Root Cause Public Health Challenges	State government or organizations who support state health departments	\$ 250,000

Suicide Prevention Capacity Building for Local Health Departments	This project aims to support LHDs in strengthening their capacity for suicide prevention. By addressing these challenges and providing targeted assistance, the project will help LHDs enhance their ability to effectively prevent suicides within their communities. The intent is to have a positive impact on individuals and subpopulations who are at risk of suicidal behaviors by improving access to appropriate prevention measures and tailored support services that meet their specific needs.	\$ 500,000
Support for Implementation of the PHHS Block Grant Measurement Framework	State health agencies	\$ 250,000
Support for the National Alliance for Radiation Readiness (NARR) Project	State health departments, emergency management and health care organizations, state and local radiation control programs, and federal partners	\$ 170,000
Support for the Public Health AmeriCorps Program: Local Health Agencies	Local health departments	\$ 320,000
Support for the Public Health AmeriCorps Program: State Health Agencies	State health agencies	\$ 341,000
Supporting CBOs and Rural Communities	State Health Agencies	\$ 220,000

Supporting State Department of Health Tobacco Control Programs through the State Tobacco Control Program Managers Network	State health department tobacco control managers and their program staff will receive support and technical assistance to improve their capacity to build and sustain their programs and achieve the goals of the National Tobacco Control Program and the Office on Smoking and Health.	\$ 375,000
Supporting Statewide Training and Technical Assistance Priorities for Systems Improvement and Capacity Building for Local Health Departments	Local health departments	
Supporting the Growth of Walkability Action Institutes Across the Country	State health departments	\$ 200,000
Supporting the Practice of Environmental Health at the County and City Level	Local Health departments	\$ 150,000
Technology Policy and Interoperability Policy Capacity Building	State Health Agencies	\$ 600,000
Territorial COVID-19 Health Equity: Telling the Story	Territorial health departments	\$ 1,000,000
Territorial TA for COVID-19 Health Equity Sustainability	Territorial health departments	\$ 1,000,000

The MyMobility Plan Organizational Support Guide-Category A	The population of focus is public health organizations and the professionals who work there or are otherwise associated with them, particularly professionals who work with older adults but do not focus on mobility. The older adults served by these public health organizations/professionals are also a population of focus.	\$ 300,000
The Power of Partnerships Health Equity Alliance	State health agencies and their staff working in programs impacting disproportionately affected populations such as: a) racial and ethnic minority groups, b) people with lower socioeconomic status, c) underserved rural communities, d) people with disabilities, e) sexual and gender minority groups, f) pregnant women, young families, and children.	\$ 350,000
Tools for funding local public health infrastructure	Local health departments	\$ 100,000
Tools to support intersectional strategies to address SUD, OD, ACEs, and PCEs	local health departments	\$ 600,000
Training and Partnerships to Effectively Disseminate Public Health Law Strategies in Local Jurisdictions	Public health staff developing policies, providing legal assistance, implementing or enforcing laws and policies, monitoring or evaluating laws and policies in local health departments.	\$ 550,000
Transforming surveillance and informatics for big city public health agencies.	Big City Health Departments	\$ 500,000

Transforming surveillance and informatics for local public health agencies.	Local Health Departments	\$ 500,000
Translating Wastewater Surveillance Data for Public Health Improvement	Local Health Departments	\$ 1,000,000
Transportation Safety Resource for Action Tool Development	The tool is meant to help state departments of public health and state departments of transportation select equity-centered transportation safety programs, policies, and interventions.	\$ 425,000
Tribal Maternal Mortality Review: A Potential Strategy for Native Communities	This project will benefit Tribal health departments.	\$ 300,000
Tribal Overdose Prevention Training and Technical Assistance	Tribes and tribal serving organizations working in injury and overdose prevention.	\$ 1,000,000
U.S. T/FAS Cultural Awareness Training	Territorial health departments	\$ 100,000
Understanding and Advancing State-Level Policies to Support Brain Health and Caregiving	State health agencies	\$ 300,000
Working with State and Local Governments to Use Opioid Settlement Funds on Evidence-Based Programs that Reduce Overdose	Big City Health Departments	\$ 1,000,000
Youth and Community Violence Prevention Action Teams	Local health departments	\$ 1,000,000

Table 2. Category B CIO Project Plans

Project Title	Population of Focus Description	Proposed FY24 Project Funding Total
2103 Health Equity Grant Rural Carve-Out: State Case Studies	Evaluators in state, tribal, local, and territorial health departments	\$ 200,000
Advanced Molecular Detection	Infectious Disease Epidemiologists in state and local public health agencies; the project targets epidemiologists whose work involves interpretation of pathogen genomic data.	\$ 180,000
Advancing Health Equity in Injury Prevention through Project ECHO	Injury and violence prevention practitioners in state, local, tribal, territorial, and non-governmental organizations.	\$ 225,000
Advancing Obesity Prevention in Early Care and Education Settings	Governmental health department nutritionists who work to support Early Care and Education ((ECE) coalitions and health focused stakeholder groups	\$ 800,000
Advancing Public Health Use of Electronic Health Record Data	Informatics practitioners (informaticians)	\$ 1,000,000
Applied Epidemiology Fellowship	Epidemiologists in state, tribal, local and territorial health departments.	\$ 2,500,000
Assessment of Knowledgebase of Influenza Surveillance Coordinators	Influenza surveillance coordinators in state, territorial, local, and tribal health departments.	\$ 300,000

Building Capacity Among Cancer Programs to Create Tailored Screening Messages	Cancer programs at state and jurisdictional health departments, including awardees of the CDC-funded National Breast and Cervical Cancer Early Detection, National Comprehensive Cancer Control, and Colorectal Cancer Control Programs	\$ 250,000
Building Capacity for Future Leaders in the Public Health Workforce to Address CVD	Public health nutrition and health education workforce in local, tribal, territorial, and state health departments by offering an internship program for students of Minority-Serving Institutions.	\$ 250,000
Building Capacity of STLT Organizations to Support and Sustain Community Health Worker Activities	The population of focus is members of the public health workforce at STLT health departments who provide and/or support CHW services. This population of focus can include individuals who are CHWs, individuals who supervise and/or work with CHWs, and individuals who work with partner agencies that employ CHWs.	\$ 415,000
Building Climate and Health Capacity among Public Health Professionals	State, tribal, local and territorial (STLT) health department staff responsible for strategic and community partnerships (including community liaisons, community health specialists, community health workers, and program managers)	\$ 100,000
Building Climate and Health Capacity for Environmental Health Staff	Environmental Public Health Workforce	\$ 75,000

Building Community Based Organization Capacity to Evaluate Veteran Suicide Prevention Programs	Evaluators in governmental public health departments who can determine programmatic effectiveness of veteran serving suicide prevention organizations	\$ 500,000
Building Epidemiological and Surveillance Capacity for Overdose Data to Action (OD2A) Surveillance Activities	Applied Epidemiologists in STLT HDs	\$ 1,500,000
Building Infrastructure for Disability Health Surveillance and Data Use	Public health program directors, epidemiologists, and informaticians in STLT health departments; and public health professionals in STLT health departments	\$ 900,000
Building State-Based Maternal and Child Health (MCH) Epidemiological Capacity Through a Fellowship Training Program	Applied Epidemiologists in STLT HDs	\$ 1,000,000
Building State Capacity to Implement a One Health Approach to Address Zoonotic Influenza Viruses and other Zoonoses	Epidemiologists in STLT health departments	\$ 1,000,000
Building the Capacity of Public Health Legal Epidemiologists	STLT Legal Epidemiologists	\$ 550,000
Capacity Building and Technical Assistance for Public Health Quality Improvement	Public health performance improvement practitioners in State, Tribal, Local, and Territorial health departments	\$ 750,000
Capacity building assistance for Long COVID Surveillance	Applied Epidemiologists in STLT HDs	\$ 300,000

Capacity Building for Public Health Workforce: TRAIN Learning Network Support	State, tribal, local and territorial health department staff responsible for strategic and community partnerships	\$ 1,000,000
Capacity Building Impacts in Epidemiology due to ELC Cooperative Agreement	Epidemiologists in state and territorial health departments	\$ 250,000
Collaborative Public Health Leadership Development to Improve Population Health	Public health leaders and practitioners from across multiple sectors working on cross- sector or cross-jurisdictional teams to address community health issues and improve health outcomes	\$ 1,000,000
Communities in ACTION: Communicating SDOH Impact Training and Technical Assistance	The population of focus includes health strategist workforce (leaders and mid-career professionals) in STLT health departments. Specifically, working with CDC-funded Addressing Conditions to Improve Population Health recipients (5).	\$ 370,000
Community Capacity Building for Child Mental Health Disaster Surveillance	Public health informaticians in STLT health departments	\$ 300,000
Comprehensive Injury Epidemiology Fellowship	Entry level injury epidemiologist	\$ 325,000
Comprehensive Injury Epidemiology Partnership Project	Epidemiologists working in state, territorial, local and city health departments	\$ 350,000
Data Modernization to Advance Population-Based Birth Defects Surveillance	Informatics practitioners (informaticians)	\$ 150,000
Data Sharing, Data Management, and Data Release Policy Capacity Building	Applied Epidemiologists in STLT HDs	\$ 750,000
Data Standards Harmonization with STLTs	Applied Epidemiologists in STLT HDs	\$ 500,000

Developing Competency Based Public Health Law Curriculum for MPH Students	Early Career Public Health Practitioners (Recent Graduates) who use Law and Legal Epidemiology to improve Public Health Research and Outcomes	\$ 450,000
Dissemination of 2023 Child Obesity Clinical Practice Guideline and Tools	Primary population of focus: Chronic disease practitioners, to include pediatric clinical care providers; Secondary populations of focus: health systems that serve pediatric patients; and chronic disease prevention programs that prevent and treat child obesity, called Family Healthy Weight Programs (intensive health behavior and lifestyle treatment programs)	\$ 100,000
Electronic Case Reporting (eCR) Reportable Condition Knowledge Management System (RCKMS) content advancement and maintenance	Applied Epidemiologists in STLT HDs	\$ 1,000,000
Electronic Case Reporting (eCR) State, Tribal, Local and Territorial support for using the Reportable Conditions Knowledge Management System (RCKMS)	Applied Epidemiologists in STLT HDs	\$ 1,000,000
Electronic Case Reporting (eCR) STLT coordination	Applied Epidemiologists in STLT HDs	\$ 567,037
Electronic Case Reporting (eCR) STLT evaluation	Applied Epidemiologists in STLT HDs	\$ 182,788

Emergency Preparedness Response Maternal Child Health Leadership Academy & Jurisdictional Readiness Assessment	The population of focus is Maternal and Child Health Title V, Public Health Emergency Preparedness (PHEP), or other state/territory health department staff with explicit or functional responsibility for prioritizing maternal and child health in the context of broader emergency preparedness and response efforts. The end target population of benefit is women of reproductive age, including pregnant, postpartum, and breastfeeding people and their infants.	\$ 450,000
Engaging American Indian/Alaska Native teens and adults in swim instructor training	Evaluators in local and tribal health departments to determine programmatic effectiveness of teen and adult swim instructor training in American Indian/Alaska Native population	\$ 300,000
Enhanced HIV surveillance capacity building	Applied Epidemiologists in STLT HDs	\$ 200,000
Enhanced Surveillance for Human Infection with Highly Pathogenic Avian Influenza A(H5N1) Viruses	Staff (such as epidemiologists, etc.) engaged in influenza surveillance in state, territorial, local, and tribal health departments.	\$ 1,000,000
Enhancing Cancer Program Awardees Capacity Through Peer-to-Peer Learning	Chronic disease staff: National Breast and Cervical Cancer Early Detection and /Colorectal Cancer Control Program awardees from health departments, tribes/tribal organizations, Pacific Island Jurisdictions-program directors, data managers, evaluators, and partners.	\$ 525,000

Enhancing modeling and forecasting capacity of public health epidemiologists with CFA resources.	Epidemiologists and data scientists at the STLT level as well as the public health decision makers these entities support (e.g. elected officials, and those with decision - making authority).	\$ 300,000
Enhancing State and Territorial Epidemiologic Emergency Preparedness and Response	The populations that will benefit from this project are state, tribal, local, and territorial (STLT) public health departments. The projects are aimed specifically at epidemiologists in STLT health departments with primary responsibilities related to the public health emergency preparedness, response, and recovery.	\$ 150,000
Enhancing STD Surveillance Capacity	State, local, tribal, and territorial infectious disease health department staff with oversight of STD prevention and surveillance programs.	\$ 75,000
Enhancing the Environmental Health Workforce Internship, Leadership, and Educational Opportunities	Environmental public health workforce	\$ 1,000,000
Epidemiology and Surveillance CBA for STLT	State, Tribal, Local and Territorial Applied Epidemiologists	\$ 1,000,000
Expanded Drug Overdose Investigation Trainings to Improve Overdose Mortality Surveillance	State, tribal, local and territorial (STLT) health department staff responsible for strategic and community partnerships (including community liaisons, community health specialists, community health workers, and program managers)	\$ 700,000

Expanding STLT Wastewater Epidemiology Capacity	Applied epidemiologists in STLT Health Departments	\$ 400,000
Expanding the Reportable Condition Knowledge Management System (RCKMS) content to support electronic lab reporting (ELR)	Applied Epidemiologists in STLT HDs	\$ 500,000
Food Safety Activities for Environmental Health Professionals	Environmental Health Scientists and Specialist in State, Tribal, Local, and Territorial Health Departments	\$ 275,000
Food Safety Activities for State, Local, and Territorial Epidemiologists	State, Tribal, Local, and Territorial Epidemiologists	\$ 455,000
HIV Cluster Detection and Response Implementation Learning Collaborative	State, local, and territorial health departments, including infectious disease, epidemiology, and prevention staff	\$ 1,008,844
Hub and Spoke Center of Excellence (CoE) in Harm Reduction	Public health workforce implementing HIV, VH, STI, TB, DUH, and integrated ID programs	\$ 1,500,000
Immunization Capacity Building Support: Immunization Coalitions and Partnerships	Informatics Practitioners (Informaticians)	\$ 1,000,000
Implementation of Child Death Review in Additional States and Territories	Meets the priority CBA needs of one workforce segment across two or more health department types (state, tribal, local and territorial). A workforce segment can include, but are not limited to, epidemiologists, chronic disease specialists, public health lawyers, environmentalists, informaticians, data scientists, public health nurses, physicians in health departments, and nutritionists.	\$ 800,000

Implementing Automated Audiology Concept Extraction Application to Support Public Health Reporting	Public health informaticians in STLT health departments; and public health professionals in STLT health departments working to improve quality, performance, and outcomes of individuals, programs, and organizations by utilizing data science techniques.	\$ 300,000
Implementing disability definitions for syndromic surveillance: informing equitable emergency response	Epidemiologists in state, territorial, and local health departments	\$ 350,000
Improving capacity for climate and health surveillance	Applied Epidemiologists in State, Tribal, Local and Territorial Health Departments, including those involved in informatics and surveillance capacity focused on climate-sensitive health outcomes.	\$ 75,000
Improving Capacity to Address Environmental Hazards and Excess Cancer Concerns	Applied Epidemiologists in STLT HDs	\$ 150,000
Improving communication about the drug supply to improve health outcomes among PWUD	Public health workforce implementing HIV, VH, STI, TB, DUH, and integrated ID programs	\$ 1,000,000
Improving epidemiologic capabilities for response to non-infectious multi-state foodborne outbreaks	State, tribal, local, and territorial (STLT) public health agencies tasked with detecting and responding to infectious and non-infectious foodborne outbreaks and the populations they serve.	\$ 150,000
Improving foodborne outbreak investigation capacity for environmental health staff	Environmental Public Health Workforce	\$ 250,000

Improving Obesity Prevention, Treatment, and Nutrition in FQHCs	Public health professionals and chronic disease practitioners in community health centers (CHCs) that serve households with lower incomes	\$ 455,000
Improving the response to seasonal influenza through the use of mathematical modeling and forecasting	State, local and territorial epidemiologists and public health officials (e.g. public health clinic personnel).	\$ 1,000,000
Increasing evidence-based decision-making about policies that support the health of children with neurodevelopmental disorders.	Health Department Legal Epidemiologists	\$ 300,000
Increasing preparedness for response to large-scale influenza and other respiratory viral infectious disease outbreak: hospitalization surveillance	State, local and territorial epidemiologists and public health officials (e.g. public health clinic personnel)	\$ 1,000,000
Indigenous Evaluation Capacity Building and Recipient Coordination & Partnership Support	Evaluators in state, tribal, local, and territorial health departments	\$ 750,000
Lead Free Communities Initiative	Chronic disease specialists, public health professionals working on chronic disease including chronic disease directors, directors of health promotion, chronic disease program practitioners, environmental health specialists, and others	\$ 225,000
Legal Surveillance and Mapping for HIV-related State and Territorial Statutory and Regulatory Policy	Governors and their staff, public health lawyers	\$ 300,000
Legionnaires' Disease Resource Development	Applied Epidemiologists in STLT HDs	\$ 100,000

Leveraging Legal Mapping for Suicide Prevention - Category B	This legal mapping project will benefit public health lawyers at national, state, and local levels by building capacity to understand and evaluate laws with potential to impact public health outcomes.	\$ 500,000
Maintaining and enhancing preparedness for response to COVID-19, pandemic, or other large-scale respiratory viral infectious disease outbreaks: hospitalization surveillance	Applied Epidemiologists in STLT HDs	\$ 1,000,000
Maintaining and enhancing preparedness for response to RSV, pandemic, or other large-scale respiratory viral infectious disease outbreaks: hospitalization surveillance	Applied Epidemiologists in STLT HDs	\$ 1,000,000
Make STEADI-based Fall Prevention a Routine Part of Clinical Care- Category B	Organization which works across two or more health department types and work with occupations such as epidemiologists, physicians in health departments and public health nurses.	\$ 475,000
Medical Examiner and Coroner Office Public Health Workforce Development	Forensic epidemiologists	\$ 300,000
NEDSS Base System (NBS) Modernization Needs Assessment & Community of Practice (CoP)	Applied Epidemiologists in STLT HDs	\$ 400,000
Obesity Prevention Capacity Building in Early Care and Education Settings	The population of focus is governmental health department nutritionists who work to support Early Care and Education (ECE) coalitions and health focused stakeholder groups within states	\$ 400,000

Practical Resources and Training for the Performance Improvement Workforce	Public health performance improvement professionals in state, tribal, local, and territorial health departments	\$ 850,000
Pregnant People Infant Linked Longitudinal Surveillance	Applied Epidemiologists in STLT HDs	\$ 500,000
Preventing Vector-borne disease in States and Territories	The Division of Vector-borne diseases wants to support the knowledge and understanding of vector borne diseases in state health departments by supporting workforce training and awareness-raising activities, and organizations like the National Association of Vector Borne Disease Control Officials.	\$ 150,000
Private Water Network	Environmental Public Health Workforce	\$ 100,000
Public Health Law Training for Professionals and Practitioners	Public Health Lawyers, Legal Epidemiologist, and Practitioners who use the Law to Improve Public Health Outcomes.	\$ 550,000
Resource Guide: Getting the Most from Your Jurisdictional EHDI Program	Public health program directors, epidemiologists, and informaticians in STLT health departments; and public health professionals in STLT health departments working to improve quality, performance, and outcomes of individuals, programs, and organizations by utilizing data science and evaluation techniques.	\$ 175,000

Rural Public Health Training Curriculum	State, tribal, local and territorial (STLT) health department staff responsible for strategic and community partnerships; Evaluators in state, tribal, local, and territorial health departments; Chronic disease specialists, public health professionals working on chronic disease including chronic disease directors, directors of health promotion, chronic disease program practitioners, environmental health specialists, and others	\$ 200,000
Scaling What Works	STLT Health Department staff working to adapt and implement proven strategies to improve cancer health outcomes in priority populations.	\$ 600,000
Standardized and Harmonized Laboratory Tests for Quality Patient Care	Standardized and harmonized laboratory tests for quality healthcare will be beneficial for public health to support various stakeholders who use chronic disease biomarker laboratory results for public health/healthcare decisions or to improve public health practice; researchers, clinicians, patients, and support the scientific communities in clinical laboratories.	\$ 100,000
STLT Data Agreement and Data Exchange Legal Capacity Building	Public Health Managers Working in Local, State, Territorial and Tribal Health Departments	\$ 1,000,000
STLT Workgroup on Frontline Investigation & Response Tools	Applied Epidemiologists in STLT HDs	\$ 200,000

Strategic Skills Training Development	Public health professionals in state, tribal, local, and territorial health departments	\$ 350,000
Strategic Workforce Development for Public Health Nutritionists	DNPAO funded Notice of Funding Opportunity (NOFO) SPAN, REACH and HOP recipients and unfunded partners implementing specific nutrition and physical activity related strategic activities. Public Health Nutritionists in SPAN, HOP, REACH funded jurisdictions and public health nutritionists in unfunded states and communities working to advance farm to Early Care and Education (Farm to ECE) activities in states and communities.	\$ 775,000
Strengthening Capacity for Healthcare-associated Infections and Antimicrobial Resistance (HAI/AR) Programs	Public health staff in HAI/AR Programs in health departments nationwide	\$ 800,000
Strengthening Disaster Epidemiology Capacity for Natural and Human-Inducted Disasters	Epidemiologists in state, tribal, local, and territorial health departments	\$ 375,000
Strengthening Health Department Cross-Sector Capacity to Address Social Determinants of Health through Foundational and Strategic Planning	State, Tribal, local, and territorial public health professionals in governmental health departments with experience and responsibility for conducting community health assessment and community health improvement planning, foundational planning, strategic planning, cross-sector planning, cross-sector partnership and collective action development	\$ 950,000

Strengthening the Capacity of Tribal Communities to Prevent Sexual Violence	Tribal Coalitions and their partners that provide support including State, Local and Tribal Health Department Staff and public health partners	\$ 300,000
Strengthening Vaccine-preventable and Respiratory Disease Surveillance through National Partnerships	The target population are epidemiologists in STLT health departments.	\$ 300,000
Support for CDC TRAIN and TRAIN Learning Network	State, tribal, local and territorial health department staff responsible for strategic and community partnerships.	\$ 319,000
Support for Pediatric Providers: Improving Nutrition from Birth to 2 Years	Chronic disease practitioners to include pediatric healthcare workforce who provide direct services to families with children from birth to 2 years of age	\$ 200,000
Support for the Public Health AmeriCorps Program: Multisector Partnerships	State and local health department staff responsible for community partnerships	\$ 618,000
Support for the Public Health AmeriCorps Program: Public Health Practitioners	State and local health department staff responsible for community partnerships	\$ 221,000
Supporting and expanding the National Syndromic Surveillance Program (NSSP) Community of Practice	Community health centers	\$ 450,000
Supporting and Strengthening Environmental Health Practice in USAPI	Environmental Public Health Workforce	\$ 225,000
Supporting Dissemination and Implementation of the U.S. National Water Safety Action Plan - Category B	To increase the capacity of Injury prevention specialists to promote water safety.	\$ 100,000

Supporting dissemination of cardiovascular disease prevention findings among public health practitioners	Evaluators in health departments	\$ 142,500
Supporting Jurisdictions to Improve Surveillance and Data Sharing	Applied Epidemiologists in STLT HDs	\$ 95,000
Surveillance, informatics, and data modernization capacity for public health	Applied Epidemiologists in STLT HDs	\$ 750,000
Sustainability of OT21-2103 Best Practices	State, tribal, local, and territorial health department staff responsible for strategic and community partnerships	\$ 1,000,000
Technical Assistance for Adverse Childhood Experiences Surveillance Data to Action	State, tribal, local, and territorial epidemiologists	\$ 500,000
Technical Assistance for Integrated Viral Hepatitis Surveillance and Prevention for Health Departments	Viral Hepatitis prevention and surveillance workforce in state, local, and territorial health departments.	\$ 500,000
Technical Assistance for Public Health Departments on Health Equity, the SDOH, and Law	Public health lawyers, practitioners, leadership, policy developers, and health department law enforcement leadership as well as staff who use the law as a tool to improve public health practices.	\$ 350,000

<p>Technical Support for Successful Comprehensive Cancer Control Coalitions</p>	<p>STLT HD staff responsible for strategic and community partnerships, specifically cancer coalitions, supported by the National Comprehensive Cancer Control Program, will receive expert, national partner, consultative, technical assistance and support to develop, sustain, and leverage meaningful relationships and resources with diverse partners to successfully develop, update, implement, and evaluate cancer control plans.</p>	<p>\$ 200,000</p>
<p>The Development of National Guidance Documents for the Control and Prevention of Zoonoses and Recommendations</p>	<p>State, tribal, local, and territorial epidemiologists</p>	<p>\$ 100,000</p>
<p>Training Teams of Health Department Staff in Public Health Data Science</p>	<p>Epidemiologists and other staff engaged in data science in STLT health departments</p>	<p>\$ 1,000,000</p>
<p>Transforming surveillance to advance data for public health action</p>	<p>Applied Epidemiologists in STLT HDs</p>	<p>\$ 750,000</p>
<p>Understanding and exploring gaps in public health approaches to address hereditary cancer syndromes</p>	<p>Public health departments, specifically those who work in cancer prevention and control efforts. In addition, this would be relevant to non-governmental organizations who would partner with state and local health departments to implement public health programs and strategies and activities to address the burden associated with hereditary cancer syndromes.</p>	<p>\$ 75,000</p>

<p>Viability assessment: Rural Analysis Assistance Centers and Community of Practice</p>	<p>Evaluators in state, tribal, local, and territorial health departments; Chronic disease specialists, public health professionals working on chronic disease including chronic disease directors, directors of health promotion, chronic disease program practitioners, environmental health specialists, and others</p>	<p>\$ 300,000</p>
<p>Vital Records Performance Improvement</p>	<p>Vital Records and Health Statistics units in state, local, and territorial jurisdictions</p>	<p>\$ 200,000</p>

Table 3. Category C CIO Project Plans

Project Title	Population of Focus Description	Proposed FY24 Project Funding Total
2022 Clinical Practice Guideline: Implementation by Community Health Centers	This effort will directly benefit Community Health Centers, health systems, clinicians, patients, and public health partners.	\$ 1,000,000
Actionable strategies for improving concussion safety in youth contact sports	Organization that has strong relationships with locally based youth sports programs. Ideally the local youth sports programs will be present in socio-economically diverse communities.	\$ 300,000
Advancing Linkage and Retention in Care in Health Systems	Health systems, clinics	\$ 1,000,000
Advancing the Infectious Disease Policy Development Capacity of State Legislators	State Legislators and Staff	\$ 175,000
A National Council focused on Environmental Health and Equity	Persons in formal leadership roles of nonprofit, voluntary, and private entities that support public health services delivery systems.	\$ 1,000,000
Asthma Guidelines-Based Care Coverage Using the EXHALE Strategies	Diverse community-based organizations, state asthma coalitions/programs, professional societies, and public health professionals addressing asthma.	\$ 275,000
Building Bridges Between Community-Based Organizations & Upstream Public Health/Injury and Violence Prevention	Injury and Violence Prevention (IVP) community-based and non-governmental organizations (CBOs/NGOs), IVP researchers, people with IVP lived experience who can disseminate public health information in their communities.	\$ 325,000

Building Capacity in Qualitative Data Design and Applications	Non-profit, voluntary, and private entities that support public health systems including academic consortiums	\$ 300,000
Building Community Capacity through Community Behavioral Health Organizations	The selected organization should have experience working with community-based harm reduction programs to support people who use drugs. The selected organization should do all work rooted in the principles of harm reduction and should have experience working with people with lived experience and whose lived experience includes using drugs.	\$ 2,500,000
Building Infrastructure for Pediatric Trauma-Informed Care and Relational Health	Pediatric healthcare providers and other professionals in the pediatric field	\$ 972,500
Building the Capacity of the National DPP Lifestyle Coach Workforce	Nonprofit and community-based organizations registered in the U.S.	\$ 750,000
Campaign Development and Dissemination Access to Treatment and Care	Community behavioral health organizations	\$ 1,500,000
Climate and Health Capacity in Community-Based Organizations	Community-based organizations and the communities they serve, as well as relevant health partners.	\$ 75,000
Collaboration with Black Greek-Letter Organizations for Overdose Prevention	Non-profit organizations that could support or collaborate with Black Greek-Letter Organizations that are national in scope	\$ 250,000
Community-Based Hypertension Management Program	Community-based organizations that serve high-burden rural and urban communities; clinical providers focused on hypertension control.	\$ 285,000

Community-based Partnerships for Innovations in Health Care Interoperability	Community health centers	\$ 1,000,000
Community Engagement to Improve Cardiovascular Risk Reduction Among Black Adults	This work provides capacity-building and community ambassadors network expansion assistance to benefit local and regional community-based organizations focused on improving the health and wellbeing of their community with an ability to reach Black adults. The efforts here will increase the capacity of these respective organizations to sustain existing work and to spread the reach of communication and community engagement efforts through a community ambassadors network to improve cardiovascular health in black adults.	\$ 1,000,000
Community of Practice: Strengthen infectious disease screening using AMA Routine Screening Toolkit	Health care teams	\$ 200,000
Disability-Inclusive Preventive Health Screening Implementation Guide	community-based organizations, community health centers, primary care providers, hospitals, and education organizations	\$ 300,000
Diverse Strategies to Address Asthma in Schools	State health departments	\$ 275,000
Drug-Free Communities (DFC) Programmatic and Coalition Support Activities	Community-based organizations and coalitions	\$ 245,000
Education for Healthcare Workers Navigating Brain Health and Dementia	Physicians, residents, and medical students	\$ 500,000

Engaging People with Lived Experience to Advance Equity in IVP	community based organizations (CBOs)	\$ 300,000
Essentials for Childhood Community of Practice for Self-Supported States	The population of focus is state-based organizations that work to prevent child abuse and neglect, prevent adverse childhood experiences, and promote positive childhood experiences.	\$ 400,000
Evaluating the Heat and Health Initiative	Nonprofit and community-based organizations registered in the U.S	\$ 200,000
Expanding Pediatric Healthcare Resources for Trauma-Informed Care and Relational Health	Pediatric healthcare providers and other professionals in the pediatric field	\$ 967,000
Expanding Pediatrician Awareness of Environmental Health Topics to Improve Children's Health	Pediatric Healthcare Clinicians/Associations of Pediatricians	\$ 75,000
Healthcare System Living Learning Network on Sepsis Core Elements	Hospitals and healthcare systems	\$ 225,000

<p>Heart Disease and Heart Valve Disease - National Communication Campaign Capacity</p>	<p>National partner organizations and public health systems serving heart disease and HVD at-risk populations through education and awareness activities on heart disease and HVD risks, signs and symptoms, and how to engage with healthcare. These heart disease and/or HVD-focused organizations may engage their priority audiences through their web site and social media, planned publicity events, conferences, and other partnership opportunities. These organizations may be smaller with limited funding and may benefit from increased national visibility on the subject as well as being able to access and leverage available messages, materials, PSAs, advertising and other communication tools produced through this project.</p>	<p>\$ 800,000</p>
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Heart Valve Disease Education and Awareness - Healthcare Professional Capacity Building	Healthcare Professionals (HCP) across the healthcare team (e.g., physicians, nurses, physician’s assistants) or part of public health systems reaching populations at risk for or diagnosed with HVD. These HCPs may work in community health centers, federally qualified health centers, other public clinics, private practices, or hospitals. They will most likely be primary care physicians and their supporting healthcare team members. Where the HCPs own experience with HVD is limited or seems infrequent, this work would build HCPs individual capacity to educate, detect and refer patients with these conditions. The populations served by these HCPs may be diverse in age, race, geography, income, and language, as HVD can be congenital or result after structural damage to the heart. Capacity building assistance efforts will likely benefit from collaborating with healthcare professional organizations familiar with heart disease broadly, and HVD specifically.	\$ 1,000,000
HEDIS measures for colorectal cancer screening follow-up	Specialty Physicians	\$ 275,000

High-Quality Teacher Preparation & Higher Education Professional Development	The populations to be served in this project are faculty at historically black colleges and universities (HBCUs) nationwide that provide education/health education degrees to students.	\$ 400,000
Immunization Capacity Building Support: HPV Vaccination to Prevent Cancer	Community Health Centers	\$ 1,000,000
Immunization Capacity Building Support: Pediatric Healthcare Clinicians	Specialty Physicians	\$ 1,000,000
Improving coordinated care for Long COVID patients through provider education and outreach	Specialty Physicians	\$ 600,000
Improving Hospitals' Capacity to Prevent Community and Youth Violence	The goal is to promote collaboration and improve interactions between hospitals and local health departments to prevent community and youth violence	\$ 300,000

<p>Increasing Capacity to Address Community Violence at Historically Black Colleges and Universities (HBCUs)</p>	<p>The population of focus are HBCUs, LHDs, and CBOs. We would fund a partner to engage 1-2 HBCUs, the surrounding LHD, and CBOs. This partner would facilitate a number of action planning meetings to promote dialogue and collaboration between the local HBCUs, the local health departments, and CBOs to create or enhance partnership capacity within the community. By working collaboratively with LHDs and CBOs, HBCUs can enhance resources to address community violence. This work is similar to a previous project with the American Public Health Association that focused on campus sexual violence and HBCUs (Preventing Sexual Violence on College And University Campuses: A Summary of CDC Activities).</p>	<p>\$ 300,000</p>
<p>Increasing Capacity to Implement Community-Based Interventions to Reduce Cancer Risk</p>	<p>Public health professionals working within community-based organizations to address cancer risk factors</p>	<p>\$ 600,000</p>
<p>Increasing Swim Skills Among Populations at Greater Risk for Drowning</p>	<p>To increase the capacity of community-based organizations nationwide to provide services to populations at greater risk for drowning.</p>	<p>\$ 700,000</p>
<p>Information Sharing on Sepsis Among Pediatric Clinicians and Summer Camp Healthcare Providers</p>	<p>pediatric healthcare providers</p>	<p>\$ 100,000</p>
<p>Innovations in Interoperability to Support Underserved Populations & Community-Based Organizations</p>	<p>Community health centers</p>	<p>\$ 1,000,000</p>

Let's Talk About It: Reducing mental health stigma through key opinion leaders	This project provides an opportunity to identify best methodologies to reach historically underserved populations such as young girls, non-binary youth, Native youth, and LGBTQ+ youth through a national partner who engages with healthcare providers, parents, children, and other non-governmental stakeholders	\$ 300,000
Make STEADI-based Fall Prevention a Routine Part of Clinical Care- Category C	Healthcare providers who serve older adults.	\$ 475,000
Maternal Population Immunization Partnership	Clinicians who are related to maternal/fetal medicine	\$ 750,000
Million Hearts: Improving Hypertension Control Among Pregnant and Postpartum Persons	Obstetricians and gynecologists (OB/GYNs) and other women's health care clinicians (WHCCs)	\$ 320,000
Million Hearts: Optimizing Cardiovascular Disease Prevention in Primary Care	Physicians (e.g., family medicine, internal medicine)	\$ 320,000
Million Hearts: Preventing Hearts Attacks and Strokes with Community Health Centers	Physicians	\$ 850,000
Million Hearts: Preventing Hearts Attacks and Strokes with Improved Blood Pressure Control	Physicians	\$ 1,000,000
Million Hearts: Preventing Hearts Attacks and Strokes with Improved Cholesterol Management	Physicians	\$ 600,000
Mobilizing Mayor-Focused Organizations to Improve Mental Health Through Social Connection	Persons in formal leadership roles of non-profit, voluntary, and private entities that support public health services delivery systems	\$ 500,000

National Partnerships: Dissemination and Expansion of the Cancer Screening Transformation	Nongovernmental-community health centers and Federally Qualified Health Centers	\$ 800,000
Parent/Family Strategies to Improve Adolescent Health and Well-Being	The populations of focus that we have identified for this project include: 1) Education Organizations and Primary Care Providers. This will include (at varying levels of engagement) all school staff (including teachers, school administrators, school-level support staff), mental health providers (including counselors, social workers, and school psychologists), primary care providers (including all staff that work at School Based Health Centers), and most importantly, students (including all grade bands from kindergarten to 12th grade). 2) Parent Groups (both through community-based organization engagement, school-level groups (like Parent Teacher Associations or School Health Advisory Councils) as well as parents of students receiving classroom education).	\$ 500,000
Partnering to enhance/expand availability and utilization of National Violent Death Reporting System (NVDRS) data.	Professionals working in public health, coroner/medical examiner and law enforcement professions that collect, provide, and utilize data that are essential to informing public health surveillance systems and prevention programs. The data from NVDRS are used to inform violence prevention.	\$ 850,000

Pilot Projects to Advance Harm Reduction and Partnerships to Prevent Overdose	Community behavioral health organizations	\$ 500,000
Policy Solutions for Public Health and Behavioral Health Partnerships	Elected officials - State Policy Advisors	\$ 200,000
Public Health and Behavioral Health System Strengthening	Behavioral health professionals	\$ 350,000
Spreading and Scaling Family Healthy Weight Programs in Community Centers	Community centers nationwide that support individuals' physical activity, nutrition, and overall health, and which are staffed to support the implementation of community-based chronic disease prevention and management programs.	\$ 250,000
State Overdose Response and Prevention: Engaging State Leadership and entities to Address the Overdose Epidemic	State legislators and legislative staff	\$ 650,000
Strengthening Capacity of Hospital and Health Department Community Partnerships to Improve Population Health and Public Health Systems	U.S. hospital and health department community partnerships/coalitions working to address shared community health needs	\$ 500,000

<p>Strengthening Data Science Capacity in Injury and Violence Prevention</p>	<p>The subpopulations that would benefit from this project proposal's CBA academic and non-governmental partners not typically engaged in injury and violence prevention and that have connections with state or local health departments and other health organizations. Such subrecipients can include: university departments; non-governmental organizations focused on technology-based prevention efforts; technology industry stakeholders; or health departments themselves.</p>	<p>\$ 900,000</p>
<p>Strengthening Food Allergy Resources in Schools and Out-of-school Time (OST)</p>	<p>K-12 students, school administrators, school nurses, school personnel, and out-of-school time professionals who are affected, or who are working with students, impacted by food allergies. Considerations should be made during school and in out-of-school time (OST) settings, especially for those students disproportionately affected in underserved areas.</p>	<p>\$ 600,000</p>
<p>Strengthening State Health Injury and Violence Prevention Policy</p>	<p>The target population is state legislators and legislative staff.</p>	<p>\$ 464,000</p>

Support and Expansion of the Cardiff Model National Network	This project aims to fund and build implementation capacity of nongovernmental state and local organizations to support comprehensive public health surveillance for violence prevention and implement partnership activities to reduce community-based violence.	\$ 300,000
Supporting Adolescent, Educator, & Family Well-Being through Community-School Partnerships	Community-based organizations that serve youth	\$ 750,000
Supporting a National Public - Private Partner Coalition for Hypertension Control	Public health decision makers that address or prevent cardiovascular disease, as representatives of non-governmental organizations from various sectors. These sectors could include non-governmental public health organizations, clinical organizations, professional organizations, payers, and employers who are focused on improving hypertension control.	\$ 300,000
Supporting Dissemination and Implementation of the U.S. National Water Safety Action Plan- Category C	Community-based organizations nationwide providing services to populations at greater risk for drowning.	\$ 100,000

Supporting medical education and training for health care providers about early onset breast cancer and select gynecologic cancers	The population of focus for this project is primary health care providers, specifically those who provide medical care to persons at risk for early onset breast cancer, hereditary breast and ovarian cancer, or gynecologic cancers. HCPs may include but are not limited to family practice physicians, ob/gyns, nurse practitioners, physician assistants, etc.	\$ 940,000
The MyMobility Plan Organizational Support Guide-Category C	Nongovernmental professionals such as community-based organizations, community health centers, education organizations or public safety organizations who work with older adults, especially those who are not experts in older adult mobility, and the older adults they serve.	\$ 300,000
Training Decision-Makers to Increase Physical Activity Through Community Design	State and local affiliates (including YMCA affiliates) and decision-makers who develop policies, plans and systems that affect physical activity, transportation, land use and healthy community design planning. State and local champions (including YMCA affiliates) who educate decisionmakers and communities on the policies, programs, and practices supportive of physical activity, active transportation and healthy community design planning.	\$ 699,000
Translating Evidence to Practice: Implementation Tools for Preventing Overdose	Community behavioral health organizations	\$ 1,000,000

Tuberculosis Community Engagement Network	Community health centers serving Asian, Asian American, Native Hawaiian and Pacific Islander communities.	\$ 610,000
Urban Indian Organization Overdose Prevention Pilot Program	American Indian and Alaska Native People living in urban areas across the United States.	\$ 1,000,000
Water and Wastewater Systems Sector cross-sector training for preventing and controlling emerging and reemerging infectious disease threats	Wastewater utilities and operators	\$ 1,000,000

<p>Women's Heart Disease Education and Awareness - Community Capacity Building</p>	<p>Regional and local community-based organizations and local and regional public health systems reaching populations of women at risk for or diagnosed with heart disease and/or HVD. CBOs may also include national organizations with local and/or regional chapters. CBOs are generally non-profit and health focused. Women at risk for or diagnosed with heart disease and/or HVD are diverse in age, race, geography, income, and language. The populations may lack healthcare access more generally or lack access to a physician familiar with diagnosis and management/treatment of HVD and other heart conditions. Capacity building assistance efforts will likely benefit from collaborating with individuals and organizations familiar with heart disease broadly, and HVD specifically. Prospective CBOs may need support to continue capacity building activities in the topic area of women's heart disease and of HVD.</p>	<p>\$ 1,000,000</p>
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<p>Youth in Agriculture: Best Practices for Healthy Farmers and Healthy Animals</p>	<p>The primary population of focus are children/youth participating in youth agricultural programs such as 4-H and FFA. Work with these groups is done in collaboration with public health and agricultural sectors and partner organizations at the regional, state and/or local levels.</p>	<p>\$ 550,000</p>
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