

# ***Funding Opportunity – Equipping Local Health Departments to Address Vaccine Hesitancy***

**Informational Webinar**













**Thursday, October 6, 2022**

# Webinar Logistics

- This webinar is being recorded. The recording and slides will be shared with registrants and posted to the NACCHO Immunization webpage
- Submit questions through the Q&A Box at any time. There will be time later in the presentation to address questions.
- If you need technical assistance, please use the Q&A box or email [immunization@naccho.org](mailto:immunization@naccho.org)

# About NACCHO

NACCHO is comprised of nearly **3,000 local health departments** across the United States. Our mission is to serve as a **leader, partner, catalyst**, and **voice** with local health departments.

-   Advocacy
-   Partnerships
-   Funding
-   Training and education
-   Networking
-   Resources, tools, and technical assistance

# Background



## Vaccinate with Confidence

*Protect communities. Empower families. Stop myths.*

Child vaccination coverage remains high nationally, and most parents are confident in the safety and effectiveness of vaccines.

However, the spread of myths and misinformation has put some communities at risk. When misleading information circulates, vaccination coverage can fall and increase the risk for outbreaks of vaccine-preventable diseases.

### A New Approach

*Vaccinate with Confidence* is CDC's strategic framework to strengthen vaccine confidence and prevent outbreaks of vaccine-preventable diseases in the United States.

*Vaccinate with Confidence* will strengthen public trust in vaccines by advancing three key priorities:

#### Protect Communities

Vaccination rates remain strong nationally, but pockets of under-vaccination persist in some locations, putting communities at risk for outbreaks. CDC will support states, cities, and counties to find these communities and take steps to protect them.

#### Empower Families

Trust in vaccines is not built through a top-down approach, but through millions of conversations between parents, doctors, nurses, pharmacists, and community members. CDC will expand resources for health care professionals to support effective vaccine conversations.

#### Stop Myths

To stop misinformation from eroding public trust in vaccines, CDC will work with local partners and trusted messengers to improve confidence in vaccines among at-risk groups; establish partnerships to contain the spread of misinformation; and reach critical stakeholders to provide clear information about vaccination and the critical role it plays in protecting the public.



Image courtesy of the American Academy of Pediatrics and SELF Magazine.



U.S. Department of  
Health and Human Services  
Centers for Disease  
Control and Prevention

CDC | NCIRD | Vaccinate with Confidence

*Vaccinate with Confidence* combines CDC's existing work with new investments, partnerships, and activities to protect communities at risk and strengthen public trust in the life-saving protection of vaccines.

### How We Get There



#### Protect Communities

CDC is supporting partners to find and protect communities at risk.

##### New Investments and Partnerships

- Leverage CDC's Immunization and Vaccines for Children cooperative agreement to support efforts to find and respond to pockets of low vaccine coverage
- Use immunization information system data to pinpoint areas of low vaccination coverage
- Build immunization program capacity and leadership to effectively respond to outbreaks



#### Empower Families

CDC is working with key partners to strengthen parent-provider conversations about vaccines.

##### New Investments and Partnerships

- Start vaccine conversations earlier, with parents of very young infants and pregnant women
- Reduce hesitancy and improve vaccine access at the nation's community health centers
- Develop a provider toolkit to address parents' vaccine questions during outbreaks



#### Stop Myths

CDC is engaging local messengers and partners to contain the spread of misinformation and ensure key stakeholders have critical information about vaccines.

##### New Investments and Partnerships

- Work with social media companies to promote trustworthy vaccine information
- Provide accurate, accessible information on vaccines to state policy makers
- Engage state and local health officials to advance effective local responses to misinformation



#### Priorities for 2020 and Beyond

CDC will prioritize the activities below to ensure that every community is protected:

- Leverage diverse data sources to find and protect communities at risk
- Expand resources for working with local communities
- Build and foster a culture of immunization in health care practices
- Continually improve communication strategies
- Further invest in and collaborate with our vital partners

# Background



## Vaccinate with Confidence

### CDC's Strategy to Reinforce Confidence in COVID-19 Vaccines

#### Build Trust

**Objective:** Share clear, complete, and accurate messages about COVID-19 vaccines and take visible actions to build trust in the vaccine, the vaccinator, and the system in coordination with federal, state, and local agencies and partners.

- ✓ Communicate transparently about the process for authorizing, approving, making recommendations for, monitoring the safety of, distributing, and administering COVID-19 vaccines, including data handling.
- ✓ Provide regular updates on benefits, safety, side effects and effectiveness; clearly communicate what is not known.
- ✓ Proactively address and mitigate the spread and harm of misinformation via social media platforms, partners, and trusted messengers.

#### Empower Healthcare Personnel

**Objective:** Promote confidence among healthcare personnel\* in their decision to get vaccinated and to recommend vaccination to their patients.

- ✓ Engage national professional associations, health systems, and healthcare personnel often and early to ensure a clear understanding of the vaccine development and approval process, new vaccine technologies, and the benefits of vaccination.
- ✓ Ensure healthcare systems and medical practices are equipped to create a culture that builds confidence in COVID-19 vaccination.
- ✓ Strengthen the capacity of healthcare professionals to have empathetic vaccine conversations, address myths and common questions, provide tailored vaccine information to patients, and use motivational interviewing techniques when needed.

#### Engage Communities & Individuals

**Objective:** Engage communities in a sustainable, equitable and inclusive way—using two-way communication to listen, build trust, and increase collaboration.

- ✓ Empower vaccine recipients to share their personal stories and reasons for vaccination within their circles of influence.
- ✓ Work with health departments and national partners to engage communities around vaccine confidence and service delivery strategies, including adaptation of vaccination sites to meet community needs.
- ✓ Collaborate with trusted messengers—such as faith-based and community leaders—to tailor and share culturally relevant messages and materials with diverse communities.

\*Personnel = All staff working in healthcare settings, including physicians, PAs/NPs, nurses, allied health professionals, pharmacists, social workers, support staff, and community health workers

## COVID-19 Vaccine Confidence Rapid Community Assessment Guide

A guide to help you understand your community's needs regarding COVID-19 vaccines in three weeks



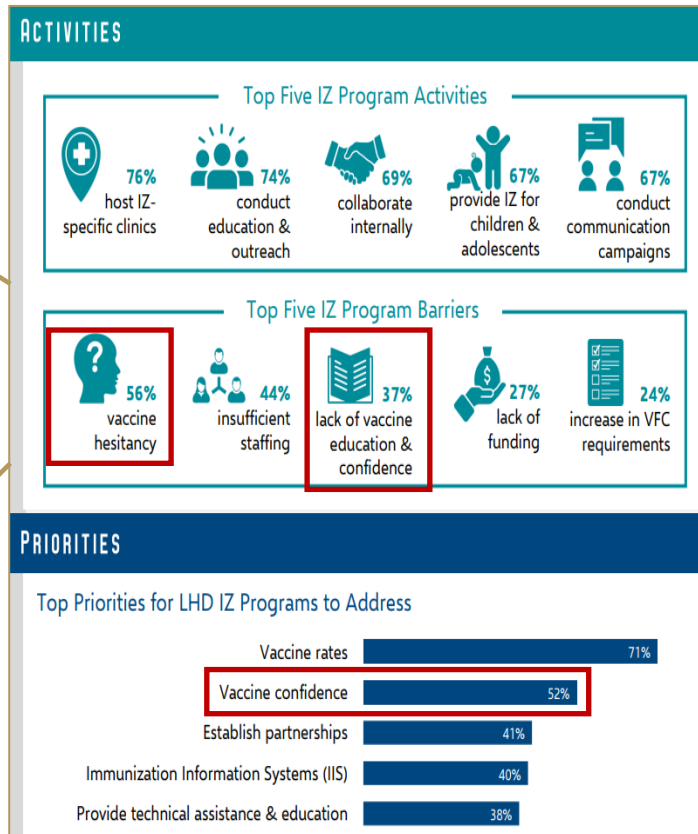
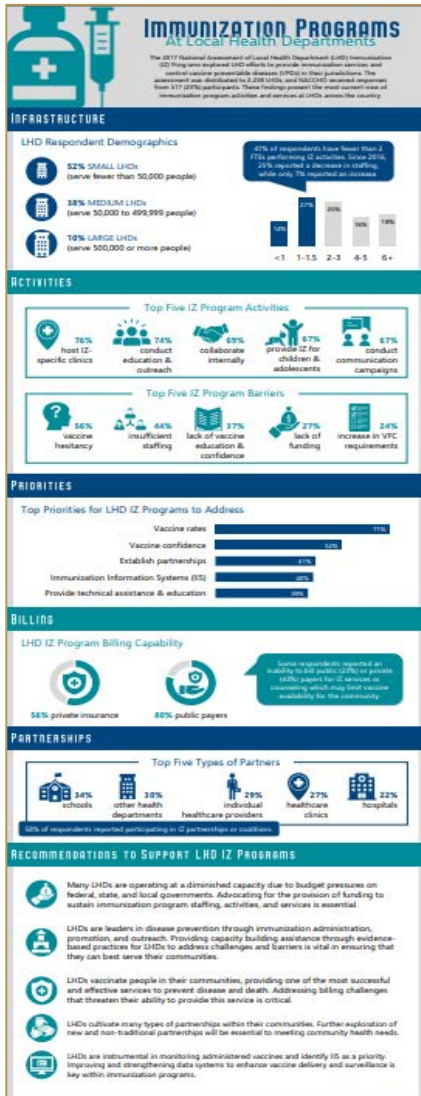
February 2021



U.S. Department of  
Health and Human Services  
Centers for Disease  
Control and Prevention

**Vaccinate with Confidence**  
Strategy to Reinforce Confidence in Covid-19 Vaccines

# Background



**Vaccine hesitancy and lack of confidence in vaccines are significant barriers and priorities for LHD IZ programs to address.**



# Project Goal

- Provide LHDs with the resources to address vaccine hesitancy in priority populations or un/under-vaccinated communities.
- Support LHD activities to:
  - address vaccine hesitancy and misinformation,
  - build partnerships with other local organizations, and
  - identify areas of need to improve vaccine confidence.



# Equipping Local Health Departments to Address Vaccine Hesitancy

[https://www.naccho.org/uploads/downloadable-resources/NACCHO-Vaccine-Hesitancy-RFA Cohort-III-final.pdf](https://www.naccho.org/uploads/downloadable-resources/NACCHO-Vaccine-Hesitancy-RFA_Cohort-III-final.pdf)



# Key Dates



Event	Date/Time
Launch RFA	September 26, 2022
Informational Webinar ( <a href="#">register here</a> )	October 6, 2022 @ 1:00 pm ET
Application Submission Deadline	October 24, 2022 @ 11:59 pm PT
Award Notification Date	On or around November 7, 2022
End of Period of Performance	July 31, 2023

# Site Eligibility Criteria

## **The application is open to local health departments**

- ✓ With an interest or clearly identified need to promote vaccine confidence and contain vaccine misinformation as related to routine, influenza, COVID-19, or other vaccines

# Contract Terms

- NACCHO will establish a fee-for-service contract with the awarded applicant where deliverables will be listed in the recipient contract and payment will be remitted upon submission and acceptance of those items.
- It is the responsibility of the awarded LHDs to return a signed copy of the contract within approximately 30 days of receipt.

# Overview of RFA

- Awarded applicants will be required to conduct the following activities:
  - Participate in **virtual learning, technical assistance, and partnership** activities to openly share challenges, results and outcomes.
  - Conduct **CDC's Rapid Community Assessment** designed to identify communities at-risk for low vaccine uptake, better understand the local community's vaccine needs and decisions, and identify areas of intervention and prioritize potential intervention strategies.
  - Participate in **check-in calls** facilitated by NACCHO to review progress of planned activities and any major changes to the proposed work plan.
  - Participate in **monthly peer sharing and technical assistance calls** facilitated by NACCHO to discuss emerging issues, lessons learned, and/or best practices.
  - Collaborate and **partner with community organizations** and stakeholders to improve education and outreach to identified communities impacted by vaccine hesitancy and misinformation.

# Overview of RFA

- Contribute at least **one resource, tool, or other best practice** on addressing vaccine hesitancy to NACCHO's communication platforms.
- Participate in **evaluation activities** and document project outcomes. Recipients will be expected to conduct the following activities:
  - Participate in NACCHO evaluation and assessment activities conducted at baseline, mid-year, and project close.
  - Submit a final report detailing the successes, challenges, and lessons learned from participation in the project.
- Adhere to NACCHO's standard **contract language** and be able to sign and return the contract to NACCHO within approximately 30 days of receipt.
- Designate one **LHD main point of contact** with whom NACCHO will directly communicate on all matters related to this project.

# Deliverables and Invoice Schedule

Invoice Number and Payment Schedule	Primary Task/Deliverable	Subtasks	Estimated Timeline	Invoice Amount
<b>Invoice #1</b> Due: December 30, 2022 Invoice total: \$20,000	Project Kick-Off	Participate in project kick-off call with NACCHO and awarded LHDs	November – December 2022	\$5,000
		Participate in baseline project assessment		\$5,000
		Participate in Rapid Community Assessment training and post-training evaluation		\$10,000
<b>Invoice #2</b> Due: February 28, 2023 Invoice Total: \$25,000	Conduct Rapid Community Assessment	Complete CDC's Rapid Community Assessment (RCA) process and submit a summary report of findings to include project objectives and community of focus, community stakeholders, community participants, and assessment findings*	January – February 2023	\$20,000
		Evaluate RCA activity and participate in check-in and community of practice calls		\$5,000
<b>Invoice #3</b> Due: March 31, 2023 Invoice Total: \$15,000	LHD Vaccine Hesitancy Project Plan	Submit project workplan outlining LHD vaccine hesitancy goals, activities, required resources, and timeline	March 2023	\$10,000
		Participate in check-in and community of practice calls		\$5,000
<b>Invoice #4</b> Due: June 30, 2022 Invoice Total: \$20,000	Vaccine Hesitancy Resources	Contribute to a joint abstract or product highlighting participation in project	April – June 2023	\$5,000
		Develop at least one LHD-specific resource or tool addressing vaccine hesitancy for routine, influenza, COVID-19, or other vaccines that can be shared via NACCHO communication platforms.		\$10,000
		Participate in check-in and community of practice calls		\$5,000
<b>Invoice #5</b> Due: July 31, 2023 Invoice Total: \$20,000	Project Close Activities	Participate in end of project evaluation	July 2023	\$10,000
		Submit final report documenting project successes, challenges, lessons learned and sustainability plan*		\$10,000

\*Deliverable template will be provided by NACCHO

# Project Expectations

## What you can expect from NACCHO:

- Coordinate check-in calls that will include technical assistance, peer discussion, and LHD site updates
- Assist LHDs in conducting the Rapid Community Assessment by providing training and TA
- Evaluation planning and support

## What is expected of you:

- Conduct Rapid Community Assessment
- Develop a workplan based on RCA results
- Timely submission of invoices and deliverables
- Engagement and discussion during monthly calls
- Feedback on TA

# Application Format & Criteria

## Local Jurisdiction Information

- Applicant name, address, city and state
- Size of jurisdiction served
- Characteristics of jurisdiction
- Counties served
- Primary and secondary points of contact

## Narrative

- Jurisdictional need
- Strategy and approach
- Capacity to implement approach
- Capacity to identify, establish, and leverage partnerships

## Budget

- Line-item budget
- Narrative

## Additional Information

- Vendor Information Form
- W-9
- Certification of Non-Debarment
- Proof of active SAM.gov in accordance with active DUNS #
- FFATA Data Collection Form
- Optional: Letter of Support
- Other: other supporting documents



# RFA Appendices

## Appendix A: NACCHO's Standard Contract Language

## Appendix B: Draft Scope of Work and Invoicing Schedule

## Appendix C: Budget Narrative Template

## Appendix D: Unallowable Costs

**CONTRACTOR AGREEMENT**

This Contractual Agreement is entered into, effective as of the date of the later signature indicated below, by and between the **National Association of County and City Health Officials** (hereinafter referred to as "NACCHO"), with its principal place of business at 1201 (i) Eye Street NW, 4th FL, Washington, DC 20005, and **(insert name of Subrecipient)** (hereinafter referred to as "Subrecipient"), with its principal place of business at **(insert mailing address of Subrecipient)**.

WHEREAS NACCHO wishes to hire Subrecipient to perform the services specified herein for NACCHO to enhance the programmatic activities of a grant; and

WHEREAS Subrecipient wishes to perform such services for NACCHO; and

NOW, THEREFORE, for good and valuable consideration, the receipt and sufficiency of which is hereby acknowledged, the parties, intending to be legally bound, do hereby agree as follows:

**ARTICLE I: SPECIAL PROVISIONS**

- PURPOSE OF AGREEMENT:** To enhance the programmatic activities of a grant.
- TERM OF AGREEMENT:** The term of this agreement shall be for a period of **(insert date)**, or until the term of the grant has expired, whichever is later.
- PAYMENT FOR SERVICES:** The Subrecipient shall be paid for the services provided by it under this agreement. Payment shall be made by NACCHO to Subrecipient within **(insert number)** days of the receipt of a properly itemized invoice. The invoice shall be submitted to NACCHO within **(insert number)** days of the completion of the services.

Invoice No.	Amount
Invoice I	
Invoice II	

NACCHO award number must be made by check, via postage.

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**APPENDIX B – Draft Scope of Work**

Scope of Work: <Organization Name>  
Project: Equipping Local Health Departments to Address Vaccine Hesitancy  
Project Period: January 31, 2022 to July 31, 2022  
Award Amount: \$100,000

**Project Background**

The Equipping Local Health Departments to Address Vaccine Hesitancy project will provide LHDs with resources to address vaccine hesitancy across the lifespan for routine, influenza and COVID-19 vaccines. This will include supporting one temporary, consultant staff member in the LHD dedicated to addressing vaccine hesitancy and misinformation, building partnerships with other local organizations, and identifying areas of need to improve vaccine confidence and uptake.

**Scope of Work**

With support from NACCHO, <Organization Name> seeks to:

- Increase the LHD's workforce capacity through the placement of a temporary staff member to address vaccine hesitancy within the jurisdiction.
- Identify communities at-risk for low vaccine uptake, better understand areas of intervention and prioritize potential intervention strategies.
- Collaborate and partner with other community organizations and stakeholders to address vaccine hesitancy and misinformation.
- Identify model and sustainable approaches to addressing vaccine hesitancy.

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**APPENDIX C – Budget Narrative Template**

The budget narrative explains each line-item and how the amounts were derived. See detailed guidance below.

- Personnel:** List all staff positions by title (both current and proposed). Give the annual salary or hourly rate of each position, the percentage of each position's time devoted to the project, and the activities you anticipate these staff persons to conduct.
- Fringe Benefits:** Provide a breakdown of the amounts and percentages that comprise fringe benefit costs such as health insurance, etc. Please provide government approved rates, if you do not have that, please create a statement letter explaining your approved rates.
- Travel:** Specify the purpose and details of the travel.
- Supplies:** Identify supplies in the detailed budget and the intended use for these supplies (i.e. what activities will the supplies support).
- Contractual:** Identify each proposed contract and specify its purpose and estimated cost.
- Other direct costs:** These will vary depending on the nature of the project. This may include activities, monitoring and evaluation, etc.
- Indirect charge:** Indicate how the rate is applied. If you are proposing more than 10%, please provide government approved rates, if you do not have that, please create a statement letter explaining your approved rates.

1. Personnel	Add text
2. Fringe Benefits	Add text
3. Travel	Add text
4. Supplies	Add text
5. Contractual	Add text
6. Other Direct Costs	Add text
7. Indirect Charge	Add text

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Equipping LHDs to Address Vaccine Hesitancy - RFA

# Application Scoring

The maximum total score an applicant may receive is 11.00 points (i.e., 10.00 general application score + 1.00 health equity score)

**General application score:** The table below outlines the criteria used to score the general application.

Criteria – General Application Score	Weight
Jurisdictional need	25%
Strategy and approach	30%
Capacity to implement approach	25%
Capacity to identify, establish, and leverage partnerships	20%

**Health equity score:** NACCHO will also consider the impact of this work on health equity, including its impact on how LHDs engage with groups that are marginalized. NACCHO will calculate this score for applicants based on the following pre-selected metrics related to health equity.

Criteria – Health Equity Score	Weight
<a href="#">Medically Underserved Areas/Populations</a> designation <i>Score based on MUA/P status for service areas within applicant's jurisdiction.</i>	50%
<a href="#">CDC/ATSDR Minority Health Social Vulnerability Index</a> score (MH SVI) <i>Score based on composite MH SVI for counties within applicant's jurisdiction. The MH SVI builds on the CDC/ATSDR SVI and includes additional variables for race, ethnicity, language, medical vulnerability, and health care infrastructure.</i>	50%

# Submission Instructions

[Home](#) / [My Applications](#) / [3022 - New Application](#)

## Equipping Local Health Departments to Address Vaccine Hesitancy

[Entry Information](#) → [Statement of Need](#) → [Budget](#) → [Upload](#)

With support from the Centers for Disease Control and Prevention (CDC), NACCHO is pleased to announce Equipping Local Health Departments to Address Vaccine Hesitancy, a technical assistance and capacity-building opportunity that will provide LHDs with resources to address vaccine hesitancy across the lifespan for routine, influenza, COVID-19, and other vaccine preventable diseases (VPDs). Selected LHDs will receive training, technical assistance, and other resources to address vaccine hesitancy and misinformation, build partnerships with other local organizations, and identify areas of need to improve vaccine confidence and uptake.

Through this funding opportunity, NACCHO will award up to three LHDs \$100,000 to complete project deliverables. The project period shall begin upon both parties' full execution of the contract and will end on **July 31, 2023**. Contingent on CDC approval of a no-cost extension, the project period of performance may continue (with a contract modification) beyond the specified contract end date. Applications must be submitted through the online submission form no later than **Tuesday, October 25, 2022 at 3:00 am PT**. In fairness to all applicants, NACCHO will not accept late submissions.

All necessary information regarding the project and application process may be found in this RFA. Applicants may pose individual questions to NACCHO at any point during the application process by emailing [immunization@naccho.org](mailto:immunization@naccho.org).

### Contact Information

First Name \*

From page 9-10 of RFA

- Applications should be submitted via the application system **by 11:59pm PT on October 24, 2022.**
- Submissions after this deadline will not be considered. NACCHO will confirm receipt of application within two business days of submission.
- All applicants will be notified of their status on or around November 7, 2022.



# Question & Answer

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**Please enter your questions or  
comments into the Q&A box**



# Thank you for joining today's RFA informational webinar!

**Contact us with questions**

**Email:** [immunization@naccho.org](mailto:immunization@naccho.org)

**An FAQ document and the recording/slides of today's  
webinar will be posted to NACCHO's Immunization  
webpage:** [https://www.naccho.org/programs/community-  
health/infectious-disease/immunization](https://www.naccho.org/programs/community-health/infectious-disease/immunization)