Vision and Eye Health Initiative
Funding Opportunity Announcement (FOA #VI2015A)

The National Association of Chronic Disease Directors (NACDD), with support from the Centers for Disease Control and Prevention (CDC) announces the availability of funding for state and territorial health departments that have the interest and capacity to engage in strategic initiatives or activities designed to improve vision and eye health.

The goal of this announcement is to support state and territorial health departments to improve vision and eye health through the implementation of vision and eye health interventions that focus on advancing vision loss and eye health as public health priorities.

Please note that only those health departments that apply for funding through this FOA will be eligible to apply for NACDD Vision and Eye Health Initiative FOAs released in 2016/2017.

Informational Conference Call:
Wednesday, January 6, 2016 at 3:00 PM (Eastern Time)
Number: 1-866-707-2118; code 2111071#

Applications Due:
Wednesday, January 27, 2016 by 5:00 PM (Eastern Time)

Applications can be submitted by completing and returning FOA Attachments A and B to ctangum@chronicdisease.org or by completing the online application available at: http://www.surveygizmo.com/s3/2490023/8e8e9ba48c59

For further information about this FOA:
Please contact Carol McPhillips-Tangum at ctangum@chronicdisease.org or (404) 377-4061

For further information about the CDC Vision Health Initiative
Visit http://www.cdc.gov/visionhealth/
A. PURPOSE, BACKGROUND AND EXPECTATIONS

Purpose
The National Association of Chronic Disease Directors (NACDD), with support from the Centers for Disease Control and Prevention (CDC) announces the availability of funding for state and territorial health departments that have the interest and capacity to engage in strategic initiative and activities designed to improve vision and eye health.

The goal of this funding opportunity is to support the work of three state or territorial health departments to improve vision and eye health through the implementation of interventions that advance vision and eye health as public health priorities. This funding opportunity seeks to support collaborative strategies that improve public awareness of vision and eye health, promote and bolster partnerships at the federal, state or community level, enhance professional education for public health practitioners, and sustainably integrate vision and eye health into state public health plans.

This funding will support the three state health departments that show they can most effectively achieve this goal through one or more of the following activities:

a) **Characterize the Public Health Burden of Eye Disease and Vision Loss.** Collect, analyze, and use state or territorial-level data from the BRFSS Vision Module and/or other sources to describe and characterize the public health significance of eye diseases (e.g., glaucoma, macular degeneration, diabetic retinopathy, cataracts, refractive error) and vision impairment and/or examine the relationships between vision loss and quality of life, health disparities, and/or co-morbid conditions.

b) **Promote Systems Change to Prevent Vision Loss and Enhance Access to Eye Care.** Convene stakeholders to identify barriers to receipt of preventive care and treatment related to vision and eye health. Explore innovative models of care, system change approaches, technologies, and/or other collaborative strategies that reduce barriers and promote prevention and access to vision and eye care.

c) **Implement Promising Interventions Related to Vision and Eye Health.** Identify, adapt, or develop promising interventions designed to improve vision and eye health and/or improve the quality of life for persons with vision loss. Implement the intervention(s) in a specific community or target population and assess the impact of the intervention(s) on vision and eye health outcomes.

Projects funded under this FOA are intended to serve as springboards to assist health departments to identify vision and eye health initiatives that can be built upon in subsequent years if funding is available. As such, health departments should propose initiatives that will help position them to engage in follow up vision and eye health activities.

Examples of projects might include:

1. Examine state level data on vision and eye health including analysis of the BRFSS Vision Module, analysis of Census data, and examination of administrative data sets, including Area Agencies on Aging needs assessment data, to define the burden of vision
loss at the state level. An analysis would define the magnitude of the problem or demonstrate how vision is associated with other chronic conditions. The results of the needs assessment could be highlighted in a comprehensive final report designed to inform state level decision making to address gaps identified in the report.

2. Convene stakeholders via state-wide conferences and/or meetings designed to bring together consumers, providers, and decision makers to identify potential partners, common interests, and promising strategies to address vision and eye health. The proceedings from the conferences and/or meetings could be captured in a report which includes recommendations about next steps and priority actions that should be undertaken to advance vision and eye health at the state level.

3. Create a strategic plan or road map to identify how stakeholders might sequence activities and align organizational goals to improve access and utilization of eye care, promote the health of people with vision impairment, and strengthen collaborations among providers to enhance health and promote access to eye care services among those at high risk of vision loss.

4. Identify and conduct specific activities to improve the visual accessibility of public health educational materials to ensure that such materials are fully accessible for people with or at risk for vision impairment. Such activities could include modifying diabetes educational materials and/or identifying specific outreach efforts to target people for smoking cessation activities that can reduce the risk of vision loss due to macular degeneration.

Regardless of the specific goals and activities proposed, all activities should be designed in a way that allows for follow up activities to emerge from initial activities. For example, a needs assessment might inform a stakeholder meeting; a stakeholder meeting might inform a strategic plan; a strategic plan might inform specific interventions. Each activity must have a clear deliverable, such as a report, recommendations, modified educational materials, etc.

Background
Blindness and vision loss are major public health problems causing a substantial human and economic toll on individuals and society. Vision impairment often affects people’s ability to drive, read, learn, watch television, or simply attend to common household or personal tasks. In the United States, an estimated 4 million persons aged ≥ 40 years are either blind or have vision loss (defined as best corrected visual acuity <20/40 in the better-seeing eye) and this number is projected to increase to 10 million by 2050.¹

In addition to the importance of comprehensive dilated eye exams to detect eye diseases and prevent irreversible vision loss,² public health interventions to improve health (e.g., by eating right, maintaining a healthy weight, not smoking, understanding one’s family eye health history,

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and using proper eye-safety practices) can prevent or delay vision impairment or mitigate the effects of vision loss. Interventions to detect and manage eye conditions that can lead to vision impairment are available and cost-effective. However, access and use of eye care services are often suboptimal. Because vision loss is not a visible disability and because it is regarded as a normal part of aging, it is often not addressed.

**Expectations**

States and territories awarded funding under this announcement are specifically expected to:

i. Engage in specific activities that achieve the overall goal of advancing vision loss and eye health as public health priorities;

ii. Implement a vision and eye health intervention that focuses on one or more of the priority activities outlined on Page 2 of this FOA and serves to position the health department to engage in subsequent vision and eye health activities (depending upon the availability of future funding);

iii. Focus on sustainability by developing and implementing a realistic and feasible plan to sustain funded activities beyond the initial funding period;

iv. Prepare a detailed work plan and budget within 15 business days of award notification to support proposed interventions designed to improve vision and eye health;

v. Participate in a two day in-person meeting to be held in April or May of 2016 in Atlanta. The exact date and time of this session will be determined by February 2016;

vi. Participate in monthly conference calls that provide training opportunities and peer learning; and

vii. Provide NACDD with quarterly progress reports and a final report detailing progress toward or achievement of project goals and objectives.

**B. ELIGIBILITY**

Only state and territorial health departments are eligible to submit an application. Only one application per state or territory will be accepted.

**C. PROJECT PERIOD AND AVAILABILITY OF FUNDING**

Awards will be made for a project period of 12 months beginning March 1, 2016. Applicants will be notified of award decisions by February 17, 2016.

The total amount available to fund three states is $75,000 (with an average funding amount of $25,000 per state).

**D. INFORMATIONAL CONFERENCE CALL**

A pre-application informational conference call is scheduled for Wednesday, January 6, 2016 at 3:00 PM (Eastern Time). During the informational conference call, questions will be answered regarding the application requirements and grantee responsibilities.

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E. SUBMISSION PROCESS AND DEADLINES

1. All state and territorial health departments applying for funding under this FOA are required to provide the information requested in the Cover Page Template (Attachment A) and Application (Attachment B). This information can be provided by completing and returning Attachments A and B to ctangum@chronicdisease.org or by completing the online application available at: http://www.surveygizmo.com/s3/2490023/8e8e9ba48c59

2. Regardless of whether submissions are emailed or completed online, all information must be submitted by Wednesday, January 27, 2016 by 5:00 EST

3. Late applications will not be accepted.

4. All applications sent by the deadline will receive an email acknowledging receipt of the application by NACDD.

5. All application materials must be submitted electronically. Hard copy and faxed materials will not be accepted.

F. PROJECT REQUIREMENTS

Resource Allocation

- Use of funds: Funds available under this announcement are to be used for costs associated with implementing interventions that focus on one or more of the priority activities described on Page 2 of this FOA. Funds may not be used to conduct research, for equipment, to subsidize renovations, or to conduct lobbying activities.

- Matching funds: Matching funds from applicants are desirable but not required.

- In-kind support: In-kind contributions of staff time and other resources are expected both from the applicant and from project partners (if applicable).

- Fiscal agents: Applicants may use a fiscal agent to accept funds.

Reporting and Information Sharing

Each participating state or territorial health department receiving funding under this announcement will be required to submit project reports every three months and a project final report. These reports will document progress toward quarterly milestones included in the work plan and status of project evaluation activities. These reports will also include information about the status of expenditure of funds from the project budget and the submission of data to NACDD. The schedule for submission of these reports is listed below.

Fourth Report due **April 30, 2017** for January 1 – February 28, 2017

Participation in Program-Specific Orientation

Two staff members from each state or territorial health department receiving funding under this announcement will be required to attend and actively participate in an in-person grantee meeting to be held in April or May of 2016 in Atlanta. Travel support will be provided by NACDD and will not be a part of the awardee’s project budget. The exact date and time of this session will be determined by February 2016. In addition, appropriate staff from state or territorial health
departments awarded funding under this FOA are required to participate in monthly conference calls and peer learning opportunities.

G. SCORING AND TECHNICAL REVIEW
The final selection of state or territorial health department to receive funding under this announcement will be based on information provided in this application. NACDD will convene a panel of independent reviewers to review and score the applications. Applications will be scored on a basis of 100 possible points. The number of possible points for each section of the application is listed below. Applicants will be notified of award decisions by February 17, 2016.

- Description of goal and major objectives of the vision and eye health intervention that your health department would support with funding provided through this announcement = 30 points

- Description of activities your health department would conduct to achieve the goals and major objectives of its proposed vision and eye health intervention = 30 points

- Description of approach your health department would use to monitor and evaluate the results of its vision and eye health intervention = 20 points

- Description of deliverables or products that your health department would produce to share the results of its vision and eye health intervention = 20 points
## Vision and Eye Health Initiative
### Application Cover Page

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**State Fiscal Office Contact**

- **Name:**
- **Title:**
- **Agency:**
- **Address:**
- **Phone:**
- **Fax:**
- **Email:**

Chronic Disease Director signature:
ATTACHMENT B

Vision and Eye Health Initiative
Application from State or Territorial Health Department

Instructions:
1. Complete the entire form as it appears here as a Word document or online at http://www.surveygizmo.com/s3/2490023/8e8e9ba48c59
2. If completing the form as it appears here as a Word document:
   a. Please keep the question/criteria in bold type, making your responses NOT in bold type; and
   b. Save a copy of this form with your state name in the title along with cover sheet (Attachment A) and email it to: ctangum@chronicdisease.org
3. Regardless of whether the application is submitted via the Word document or online, all information must be received by January 27, 2016 by 5:00 EST

Please respond to the following questions:

1. Is your health department currently involved in any initiatives or activities that address vision and eye health?
   
   □ Yes  □ No

   a. If yes, which of the following areas within the health department are currently involved in vision or eye health initiatives or activities? (Check all that apply)

   □ Aging  □ Injury Prevention
   □ Cancer  □ Tobacco / Smoking
   □ Cardiovascular Disease  □ Other(s), please specify: __________
   □ Diabetes

   b. Please briefly explain your health department's current involvement in any initiatives or activities that address vision and eye health: (250 word limit)


2. Has your health department ever collected data using the BRFSS Vision Module?

   □ Yes  □ No

   a. If yes, in which year(s)? ________________
b. Have the BRFSS Vision Module data ever been analyzed?

☐ Yes  ☐ No

c. Have the results of the BRFSS Vision Module analysis ever been published?

☐ Yes (Please forward any available reports to ctangum@chronicdisease.org)  ☐ No

d. Have the results of the BRFSS Vision Module analysis ever been used to influence program decisions?

☐ Yes  ☐ No

e. Please briefly explain how the results of the BRFSS Vision Module have been used to influence program decisions: (150 word limit)

3. Has your health department ever collected data from sources other than the BRFSS to characterize the public health burden of vision impairment?

☐ Yes  ☐ No

a. If yes, which of the following data sources have been used? (Check all that apply)

☐ NHANES Vision Examination Questions  ☐ NHIS Vision/Eye Health Questions
☐ State Level Administrative Data  ☐ Area Agencies on Aging Needs Assessment Data
☐ Other(s), please specify: ________________________________

b. Please provide a brief description of when these data have been collected and how the data have been analyzed and/or used: (150 word limit). (Please forward any available reports to ctangum@chronicdisease.org)
4. Has your health department ever engaged in partnerships or collaborative activities with any of the following organizations? (Check all that apply)

- □ Area Agencies on Aging
- □ Prevent Blindness America (national organization)
- □ Prevent Blindness America (state affiliate)
- □ Other(s), please specify: __________
- □ State Vision Rehabilitation Agency
- □ Vision Care Providers (i.e., optometry, ophthalmology)
- □ Private Vision Rehabilitation Agency

a. Please provide a brief description of the partnerships or collaborative activities that have been undertaken with these external partners and specify whether or not these partnerships and collaborative activities are currently ongoing: (250 word limit)

5. Which of the following would you consider to be a barrier to addressing vision and eye health within your health department? (Check all that apply and rank each barrier from most to least significant using #1 to indicate the most significant barrier)

- □ Lack of understanding about how vision is a cross cutting concern across chronic conditions and injury (Rank____)
- □ Lack of staff time to address vision (Rank____)
- □ Lack of demonstrated interest from constituent groups (Rank____)
- □ Lack of funding into support activities (Rank____)
- □ Vision health is not regarded as an interest of public health (Rank____)
- □ Lack of staff who are knowledgeable about vision and public health (Rank____)
- □ Vision health not regarded as a public health problem (Rank____)
- □ Lack of community partners to address vision concerns (Rank____)
- □ Other. Please specify: __________________________ (Rank____)

6. Please use the following space to provide any additional information you would like to share about barriers to addressing vision and eye health within your health department (150 word limit)

[Blank space for additional information]
7. How would you describe your health department’s level of interest in working on interventions or activities that address vision and eye health?

- [ ] Very interested
- [ ] Somewhat interested
- [ ] Unsure
- [ ] Not very interested
- [ ] Not at all interested

a. Please use the following space to briefly explain your indicated level of interest or disinterest: (150 word limit)


8. How would you describe your health department’s capacity to work on interventions or activities that address vision and eye health?

- [ ] Very high
- [ ] High
- [ ] Moderate
- [ ] Low
- [ ] Very low
- [ ] Unsure

a. Please use the following space to briefly explain your indicated level of capacity: (150 word limit)


9. Would your health department like to be considered to receive funding under this announcement?

- [ ] Yes
- [ ] No (Skip to end)

10. Which of the following priority areas would be the focus of your vision and eye health intervention? (Check all that apply)

- [ ] Characterize the public health burden of eye disease and vision loss
- [ ] Promote systems change to prevent vision loss and enhance access to eye care
- [ ] Implement promising interventions related to vision and eye health

11. Describe the goal and major objectives of the vision and eye health intervention that your health department would support with funding provided through this announcement: (250 word limit; max score = 30 points)


12. Describe the activities your health department would conduct to achieve the goals and major objectives described in response to Q10: (250 word limit; max score = 30 points)


13. Describe the approach your health department would use to monitor and evaluate the vision and eye health intervention described in response to Q10: (250 word max; max score = 20 points)


14. Describe the deliverables or products that your health department would produce to share the results of the vision and eye health intervention described in response to Q10: (150 word limit; max score = 20 points)


15. If you have any additional comments, please use the following space:


Thank you. Please send completed applications to: ctangum@chronicdisease.org