Public Health Infrastructure Grant (PHIG)

Request for Proposals for Sub-Evaluations

Purpose	National Network of Public Health Institutes (NNPHI), on behalf of the PHIG National Evaluation Team (NET), seeks to fund up to 2 sub-evaluations aimed at examining questions of importance and significance within the PHIG evaluation. Information generated will rapidly advance a robust knowledge base regarding promising and effective strategies to strengthen the U.S. public health infrastructure.
Evaluation Topics	**Evaluating the Effectiveness of PHIG Training and Technical Assistance (TTA)** – Examines whether and how TTA provided to PHIG recipients optimizes their implementation of PHIG strategies and activities. This includes assessing recipient changes in knowledge, skills, application, and grant progress after participation in responsive and proactive TTA activities and services. These efforts will assess the effectiveness of TTA in contributing to PHIG recipient grant progress and outcomes. This may include assessing recipient learning, application, quality improvement efforts, and capacity building related to public health workforce, foundational capabilities, and data modernization. Funded at *up to* $350,000 via a phased funding approach. Anticipated to last up to 18 months.	**Evaluating Efforts to Advance Public Health Infrastructure through Strategic Partnerships that Mobilize Community-Driven Solutions** – Document and assesses PHIG recipients' strategies to establish and strengthen collaborations with private, non-governmental partners including but not limited to businesses, healthcare organizations, nonprofits, and faith-based organizations. It will examine the extent to which recipients are leveraging public and private partnerships to optimize local public health infrastructure, resulting in increased efficiency and effectiveness, while ensuring that community-facing services are responsive to and in alignment with community needs. Funded at *up to* $350,000 via a phased funding approach. Anticipated to last up to 18 months.
Eligibility	Teams with demonstrated expertise and experience conducting process, impact, and outcome program evaluations of public health initiatives that involve complex, multi-site designs, with training in both program evaluation methods and research/data analysis. Applicants are strongly	

	encouraged to submit a Notice of Intent that will enable management of perceived conflicts of interest. Please note that receiving existing PHIG-related funding is <u>not</u> a disqualifying factor for this RFP.
Notice of intent deadline*	Friday, June 20, 2025, at 10 pm ET [Submit Notice of Intent Via SmartSheet](#) *optional but strongly encouraged*
Proposal application deadline	Monday, July 14, 2025, at 10pm ET [Submit Proposal Via SmartSheet](#)

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Who is Eligible to Apply?

Organizations applying for this funding must meet the following criteria:

- Demonstrated expertise and experience conducting process, impact, and outcome program evaluations of public health initiatives that involve complex, multi-site designs, with training in both program evaluation methods, evaluation reporting, and research/data analysis.
- Experience evaluating public health programs implemented at the federal, state, county, city, territories and freely associated states (TFAS) government level, including health departments at the policy and/or programmatic levels as well as tribal jurisdictions.
- Experience using the CDC Framework for Evaluation, with a preference for experience with Utilization-Focused Evaluation and/or Participatory Evaluation.
- Demonstrated subject-matter expertise in the topic of focus for the selected sub-evaluation preferred.
- Capacity to effectively design and implement the evaluation project, including managing data collection and analysis, evaluation, and financial reporting.
- Demonstrated ability to use methods that are tailored to the needs of the individuals, organizations, and/or communities of focus.
- Demonstrated track record of contributing to peer-reviewed literature and/or translating and disseminating evaluation findings to a practice-based audience.

Organizations may choose to partner and apply together. However, one organization must be identified as the primary entity responsible for managing funds and deliverables.

Organizations may apply for multiple sub-evaluation topics. Separate proposal submissions are required for each topic.

Organizations currently receiving PHIG-related funding are eligible to apply but must demonstrate a clear separation between implementation and evaluation activities, including independent staffing. Organizations with existing or prior PHIG implementation must disclose any potential or perceived conflicts of interest and, if applicable, clearly describe measures they intend to develop and maintain that will separate existing PHIG work and proposed sub-evaluation activities throughout the period of performance. Prospective candidates are strongly encouraged to complete the optional Notice of Intent process for screening for actual and/or perceived conflicts of interest before submitting full proposals. If a Notice of Intent is not submitted, the proposal will be screened for actual and/or perceived conflicts of interest at the time of submission

NNPHI believes that a wide range of applicants will support the achievement of the project outcomes and welcomes proposals from organizations and teams with varying backgrounds.

While the term "organizations" is used throughout this RFP, any team of individuals who meets the eligibility criteria may apply, including nonprofits, businesses, universities, LLCs, etc. If a team is unsure about eligibility requirements, please reach out to PHIGE2A@nnphi.org or attend our office hours for additional information or support.

Background

National Network of Public Health Institutes (NNPHI): Mobilizing 50-member public health institutes with over $2.2 billion in annual funding as well as 10 university-based regional training centers and 40 affiliates, NNPHI connects more than 12,000 subject-matter experts with organizational partners across the nation. With an expansive organizational presence and activities across all 50 states, the national network is a go-to resource for analysis and best practices. NNPHI also provides important network connections for communities, government agencies, foundations, the health care delivery system, media, and academia.

Overview of the Public Health Infrastructure Grant (PHIG): The Centers for Disease Control and Prevention's (CDC's) Public Health Infrastructure Grant (PHIG) is a groundbreaking investment supporting critical public health infrastructure. Funding from this grant is designed to ensure that health departments have the people, resources, and systems they need to assess, promote, and protect health in the communities they serve. Funding was awarded to 107 state, local, and territorial health departments ("recipients") and three national public health partners ("National Partners"); it will be distributed over a five-year period (12/1/2022 - 11/30/2027). CDC provided guidance to recipients that "no less than 40% of the funding provided to state health department recipients for Strategy A1 Workforce should be distributed among the local health departments that have not received direct funding from this grant." Local jurisdictions that were not direct recipients are known as "indirectly funded health departments." The CDC PHIG website provides maps to visualize the funded jurisdictions.

The purpose of PHIG is to implement activities that strengthen public health outcomes, utilizing a funding model that gives health departments the flexibility to direct funds towards specific organizational and community needs. The PHIG National Partners, consisting of the Association of State and Territorial Health Officials (ASTHO), National Network of Public Health Institutes (NNPHI), and Public Health Accreditation Board (PHAB), support the work of the funded health departments by providing training and technical assistance, evaluating the overall grant, and facilitating coordination and communication across recipients and CDC.

Introduction to the National Evaluation Team (NET): Alongside PHAB, NNPHI collaboratively leads the NET as it plans and implements a user-engaged national evaluation of PHIG. PHIG National Partners are committed to minimizing recipient burden, and the national evaluation is coordinated across partners, prioritizing the utilization of existing data sources and mitigating

duplicative and unnecessary data collection. Throughout 2023 and 2024, the NET has actively engaged with grant recipients, national partners, CDC staff, evaluation subject matter experts, and other organizations to develop a user-engaged evaluation plan, which includes a robust set of evaluation questions as well as PHIG logic models [A1 and A2) (A3 DMI)., and formed an Evaluation Advisory Group (EAG). The evaluation plan is guided by the CDC Framework for Program Evaluation in Public Health.

For additional background on the PHIG evaluation, please see the Public Health Infrastructure Grant National Grant Monitoring and Evaluation Plan Executive Summary and attend the PHIG Sub-Evaluation RFP Informational Webinar on Jun 18, 2025.

PHIG Sub-Evaluations

Sub-evaluation Topics: On behalf of the PHIG NET, NNPHI is seeking to fund up to 2 sub-evaluations aimed at examining questions of importance and significance that users of the information have generated for the PHIG evaluation. Descriptions of each can be accessed via the hyperlinks provided in Table 1. Applicants may compete for multiple sub-evaluation topics. Separate proposal submissions are required for each topic.

Information generated through the sub-evaluations is intended to rapidly advance a robust knowledge base regarding promising and effective strategies to strengthen the U.S. public health infrastructure including increasing the capacity and competency of the public health workforce, strengthening the foundational capabilities, demonstrating effectiveness, and improving health outcomes. This information is intended to inform local and national programmatic and policymaking decisions. Future sub-evaluation topics are anticipated to be released for RFP as additional areas of interest are identified.

Table 1: PHIG Sub-evaluation Topics

Evaluating the Effectiveness of PHIG Training & Technical Assistance ("TTA")
Evaluating Efforts to Advance Public Health Infrastructure through Strategic Partnerships that Mobilize Community-Driven Solutions ("Strategic Partnerships")

Collaboration with the NET

Principal Investigators (PIs) selected to lead an evaluation team for the PHIG sub-evaluations will engage regularly with NNPHI's management team and the NET to monitor and guide the evaluation design and implementation process. When we refer to "PIs," we are referring to a team or organization, not a single individual. We encourage a collaborative approach and are open to team strategies that outline shared leadership and/or multiple points of contact.

In alignment with the NET's commitment to reducing recipient burden, PIs' proposed qualitative and quantitative data collection approaches must be reviewed and approved by the NET to ensure:

- Data cannot be obtained through existing data sources;
- Data is not already being obtained through other primary data sources across PHIG or other partners;
- Participants, especially recipients, are not already engaged by another primary data collection effort across PHIG.

To reduce recipient burden, the NET plans to coordinate data collection throughout the grant in a streamlined fashion where possible. Data collection proposed by sub-evaluation PIs may be considered for inclusion in larger-scale data collection efforts aligned with other PHIG goals where feasible and appropriate.

Collaboration with the Evaluation Advisory Group (EAG)

The PHIG EAG is composed of individuals and organizations that will actively use the evaluation findings and have actively contributed to the development of evaluation questions that informed the sub-evaluation topics. The EAG is open to PHIG recipients, health department staff, CDC staff, national public health organizations, community partners, and affiliated members. This group plays a pivotal role in ensuring that the evaluation process is both relevant and practical. The EAG provides a structured mechanism for participants to have input into how the evaluation is designed and implemented, ensuring their perspectives and needs are considered at every stage.

PI engagements with the EAG will facilitate open dialogue and collaborative decision-making to ensure that the evaluation remains aligned with the stakeholders' goals and contexts. The EAG's responsibilities include reviewing evaluation plans, providing feedback on methodologies, suggesting data sources, and assisting in the interpretation and dissemination of findings. This collaborative approach ensures that the evaluation is grounded in practical reality and addresses the needs of those it aims to serve.

PIs and EAG members will work in collaboration with the NET to ensure that plans, deliverables, and decision points are aligned with the broader national evaluation plan, and NNPHI will work closely with PIs on the sub-evaluations to ensure smooth communication and finalize decision making. Under the guidance of NNPHI and the NET, PIs will present their evaluation strategies and proposed activities to the EAG, seeking their input and guidance. This process involves:

1. **Defining and Describing Strategies**: PIs will work with the EAG to comprehensively define and describe the strategies and activities to be evaluated, ensuring they are relevant and actionable.
2. **Assessing Evaluability**: Together with the EAG, PIs will assess the evaluability of the strategies and activities proposed, determining whether they can be effectively evaluated given the available resources and context.
3. **Developing Evaluation Design**: PIs will collaborate with the EAG to develop a robust evaluation design, incorporating methodologies that are both rigorous and aligned with stakeholders' needs.
4. **Gathering Credible Information**: The EAG will coordinate with PIs to identify key data sources and provide guidance on the data collection process, ensuring it is thorough and credible, while minimizing response burden.
5. **Interpreting Results**: The EAG will play a crucial role in interpreting evaluation results, providing contextual knowledge and stakeholder perspectives that are essential for drawing meaningful conclusions.
6. **Communicating Findings**: PIs will work with the EAG to develop communication strategies tailored to various audiences, ensuring that findings are accessible and actionable. These are anticipated to include conference presentations with NNPHI and NET partners and a robust final report, at minimum. Reporting will be fully integrated into the NET's dissemination strategy, led by NNPHI and PHAB. Individual products for dissemination (e.g. toolkits, webinars, contributions to peer-reviewed publications) will be negotiated during the agreement development phase, specific to each sub-evaluation.

By actively engaging the EAG throughout the evaluation lifecycle, the sub-evaluations will adhere to the CDC's Framework for Evaluation and the principles of utilization-focused evaluation. This collaborative approach ensures that the evaluations conducted are not merely exercises in data collection and analysis but are practical tools that will drive real-world improvements in public health initiatives and infrastructure. The active partnerships between PIs, the EAG, and NET will result in evaluation findings that are not only informative but also lead to actionable insights and improvements, ultimately enhancing public health outcomes.

Grants & Contracts Considerations

[For the purposes of this RFP, the terms "contract", "award", "funding", and "sub-awardee" are used interchangeably, and are not intended to imply a required distinction between or determination of subawards and/or contracts in this document, as this distinction may differ across vendors and sub-evaluations. The determination of agreement classification for selected applications (i.e. subaward/subrecipient agreement or contract) will be determined upon NNPHI's Grants and Contracts team's review of the applicant's submitted proposal (budgets and statements of work in particular).

All SOWs and budgets of the selected organizations will go through NNPHI's approval processes to develop the contract/subaward. Copies of Negotiated Indirect Cost Rate Agreement (NICRAs) and active Unique Entity Identifier (EUI) numbers may be requested or required. The last step of this process is NNPHI's grants and contracts team/officer aligning the SOW/budget with the correct agreement type and drafting the agreement. NNPHI staff will keep selected organizations abreast of timing during this phase. Note that NNPHI agreements use Louisiana Law as the governing law and we generally align our agreements with our standard contract/subaward language. Any requested deviations from our standard clauses will be considered, but will add time to the agreement finalization process.

Project Management and Reporting Expectations

Meetings and Project Management: Selected applicant will become part of a collaborative team that includes members of the NNPHI management team as well as other NET partners and the EAG. Working collaboratively with these teams will be crucial to RFP selected applicants' success at reaching their identified goals. In addition to deep expertise in complex, multi-site evaluations, the collaborative nature of the work requires strong project management and communication skills on the part of the selected applicant(s). PIs should account for the following minimum expectations around project management and communications when planning their proposal and budget:

- Virtual pre-agreement meeting with NNPHI to ensure capacity, readiness, and facilitate planning
- Attendance at virtual kick-off and orientation meeting, facilitated by NNPHI
- Bi-weekly virtual meetings with NNPHI management team
- Up to monthly virtual meetings with the EAG
- Quarterly virtual meetings with the NET
- Quarterly virtual technical assistance calls with NNPHI evaluation and management teams as well as other selected applicant(s) (opportunity to coordinate data management, share challenges, peer learning, etc.)
- Email and video call communications as needed to support project deliverables

Documentation and Reporting: PIs will be expected to document their work and submit it for collaborative review and feedback by the NNPHI management team as well as the NET and the EAG. Documents pertaining to the design and implementation of the sub-evaluation (leading to final reporting in Phase 1 and implementation strategies in Phase 2) may go through multiple rounds of review by NNPHI, the NET, CDC, and the EAG. Minimum expectations around documentation and reporting are described in Table 2.

Table 2: Documentation and Reporting

Type of Report/Documentation	Frequency	Audience	Purpose
Invoices and progress reports submitted to NNPHI management team	Monthly	NNPHI management team	Agreement monitoring
Evidence of agreement(s) executed with any subcontracted/subawarded vendors or partners	As necessary	NNPHI management team	Agreement monitoring
Progress reports submitted to the NET, including preliminary findings	Bi-monthly	NET	Progress monitoring
Key documents relating to the design and planned implementation of the sub-evaluation including but not limited to: - Evaluation plan including evaluation questions, logic model, data collection and methods/analysis plan (Phase 1 deliverable report) * - Final evaluation report(s) by phase (Phase 1 & 2 deliverable) * - Slide deck of evaluation findings (Phase 2 deliverable) * - EAG Engagement Summary* - Other dissemination products to be developed in collaboration with the EAG and the NET *	Anticipated timeline described in Table 5 (subject to change)	NNPHI management team, NET, CDC, EAG	Feedback on strategy and design Alignment with needs and strategies

*Publication, presentation, or data sharing of any kind will be in coordination with NNPHI and the NET. Publication, presentation, or data sharing (including contributions) without approval in any format will not be allowed and appropriate authorship must be discussed.

Funding Availability and Budgetary Requirements

Successful applicants will be awarded the funding amounts detailed in Table 3 through a phased funding structure. NNPHI intends to select one applicant to award an agreement for each of the project domains identified. **This will be a modular award with two clear phases.**

Table 3: Funding Amounts for Sub-Evaluation Topics

Topic	TTA Evaluation	Strategic Partnerships Evaluation
Phase 1	Up to $100,000 to be awarded via an agreement*	Up to $100,000 to be awarded via agreement*
Phase 2	Up to $250,000 to be awarded via agreement amendment upon successful completion of Phase 1 workplan and deliverables	Up to $250,000 to be awarded via agreement amendment upon successful completion of Phase 1 workplan and deliverables
Total	Up to $350,000 via phased funding approach	Up to $350,000 via phased funding approach

* *Please note: The determination of agreement classification (subaward or contract), will be determined upon NNPHI's Grants and Contracts team's review of the applicant's submitted proposal.*

Phase 1 will focus on working collaboratively with the EAG and project partners to confirm the area of interest, the evaluability of the topic (i.e., can it be done and through what approach), and designing an evaluation plan, logic model, and variable matrix that identifies appropriate data sources.

Phase 2 will involve operationalizing and implementing the evaluation plan and continuing the collaborative approach with the EAG and project partners. This phase will culminate in a final report and final presentation to NNPHI, the NET and the EAG, as well as an anticipated conference presentation with NNPHI and/or NET partners. It will also include the development of dissemination products designed in collaboration with the EAG and the NET.

Proposals submitted to this RFP will be awarded Phase 1 funding only if selected. Phase 2 funds are contingent upon successful completion of phase 1 workplan tasks and deliverables, and successful demonstration of collaborative engagement with project partners. Phase 2 funding is also contingent upon availability of PHIG funds from the CDC.

Selected applicant(s) who complete Phase 1 deliverable submission will receive preference for Phase 2 funding, but NNPHI reserves the right to recompete funding for Phase 2 awards, or to revise agreements to avoid conflicts of interest.

Notice of Intent

Prospective candidates are strongly encouraged to submit a notice of intent so that NNPHI can ensure that applying PIs do not have actual or perceived conflicts of interest related to the larger grant. Organization name, contact information, disclosure of PHIG-related funding, and selected sub-evaluation topic for which applicants will submit a proposal are to be submitted [via Smartsheet](#) by Friday, June 20 at 10pm ET. Notice of intent is non-binding and will not be scored as part of the proposal review process. Full proposals will be due by Monday, July 14.

Prospective candidates who submit a notice of intent will be screened on a rolling basis and eligibility will be confirmed by NNPHI no later than Wednesday, June 25. If the notice of intent is not received by the deadline, candidates' eligibility will be screened at the time of application.

Proposal Requirements

Proposal requirements are detailed in Table 4 and summarized below. **Submissions missing any of the required components will not be considered.** Proposals must be formatted for letter-sized pages (8.5" x 11") with 1" margins, using Calibri font, and a minimum font size of 11-point. All documents must be submitted by attaching to the submission form in .pdf format and according to the file naming convention described in Table 4. Applicants may compete for multiple sub-evaluation topics. Separate submissions are required for each topic. All required information regarding the substance of the project should be included in the project proposal. Appendices should not be used to circumvent page limits.

1. <u>Project Abstract</u>: Provide a self-contained summary (maximum of 500 words) of how your organization might approach the evaluation (both Phase 1 & Phase 2). This summary must not include any proprietary or confidential information.
2. <u>Organizational Capacity and Resources</u>: Provide a description of your organization's capacity to manage federal funds and track expenditures on federal awards, produce required reporting, and provide anticipated support for the proposed work. Identify whether your organization has received federal funding previously. Provide existing knowledge of ethical and IRB standards. Clearly identify ability and staff capacity to incorporate best practices in developing appropriate evaluation methods. Specify any prior experience utilizing tailored evaluation approaches with a focus on reducing participant burden.
3. <u>Funding disclosure from PHIG and role description in the project:</u> If your organization is receiving funding for PHIG-related work, please disclose the funding award details and provide information regarding your role on the project. If applicable, please describe measures that will be taken to develop and maintain separation between existing PHIG work and proposed sub-evaluation activities throughout the period of performance. Organizations currently receiving PHIG-related funding are eligible to apply but must

demonstrate a clear separation between implementation and evaluation activities, including independent staffing. Applicant organizations currently not receiving funding for PHIG-related work are required to submit a statement acknowledging this component.

4. Project Narrative: Phase 1 & Phase 2: Identify the sub-evaluation topic and associated national evaluation questions. Propose a plan for carrying out Phase 1 and Phase 2 work, consistent with the requirements in this RFP. This includes describing intended evaluation approaches/strategies, plans for engaging users, plans for developing process and/or outcome and/or impact evaluations that collect credible evidence, appropriately analyze data, and report findings effectively. Include proposed evaluation questions (selected, modified, or developed from sub-evaluation abstract themes A-D), proposed indicators, proposed methodology, as well as data sources and a potential analysis plan. Applicants are encouraged to use both secondary and primary data in their plans. Applicants are not expected to propose data collection across all 107 recipients and should suggest sampling approaches that reflect the proposed strategies and approaches. Include a timeline for the work.

5. Scope of Work (SOW) and Budget: Phase 1 & Phase 2: Propose a budget to complete an evaluation plan outlining specific costs (hourly rates, personnel, supplies, etc.) up to funds available for Phases 1 and 2. Budgets for Phase 1 and Phase 2 activities should be distinct.

Frequently Asked Questions (FAQs)

Our FAQ section provides answers to several questions applicants had in the last round, including eligibility criteria, proposal requirements, and scoring criteria. We encourage all applicants to review these FAQs before attending the informational webinar or office hours, as they address many key aspects of the application process. The FAQs are regularly updated to reflect any changes and clarify recurring points of confusion.

PHIG Sub-Evaluation RFP FAQs

Table 4: Proposal Requirements

Application Headings	Requirements

1. Abstract
    a. Brief description of the organization's mission and reach
    b. Summary of how the organization meets the selection criteria
    c. Brief description of the organization's intended activities for both Phases 1 and 2
	500 word maximum.
	
	File naming convention: ApplicantName_PHIGRFP_abstract

2. Organizational Capacity and Resources
    a. Organizational capacity to design and implement the evaluation
        i. Organization name and SAM registration
        ii. Documentation of federally negotiated indirect rate
        iii. Description of team members* including:
            1. PI
            2. Fiscal/contractual lead
            3. Team member names and qualifications
            4. Subject-matter expertise relating to the sub-evaluation topic applied for
            5. Evaluation expertise, with a focus on experience conducting large, multi-site evaluations
        iv. Experience using:
            1. CDC Framework for Evaluation
            2. Utilization-Focused Evaluation (UFE)
            3. Participatory evaluation strategies
            4. Impact Evaluation
            5. Mixed methods data collection and integration approaches
    b. Experience evaluating public health initiatives at the federal, state, county, city, territories and/or freely associated state government level, including with health departments and tribal jurisdictions
    c. Project management approaches and standards
 	
All team members included in this proposal must be named. Proposals listing "TBD" team members may be excluded. Note: Brief 1-page biosketches of PI and principal staff may be uploaded as a supplement to the application and will not be counted as a part of this page limit.
	5 pages maximum
	
	File naming convention: ApplicantName_PHIGRFP_capacityresources
	
	File naming convention for biosketches: ApplicantName_PHIGRFP_biosketchLastName

3. Funding disclosure from PHIG and role description in the project	1 page

Applicants currently receiving funding for PHIG-related work must disclose the funding award details and provide information regarding the organization's role on the project. Any team members included in this application with current roles on PHIG-related work should be described. PHIG-related work through a subaward or contract is not necessarily an exclusionary item but will be used to manage potential conflicts of interest. Applicants not currently receiving funding for PHIG-related work are required to submit a statement acknowledging this component. Applicants who complete the Notice of Intent by Friday, June 20 will be screened prior to proposal submission and eligibility will be confirmed by Wednesday, June 25. If a notice of eligibility was received, please submit the notice letter for this component.	File naming convention: ApplicantName_PHIGRFP_disclosure

4. Project Narrative: Phase 1 & Phase 2
    a. Selected sub-evaluation topic
    b. Summary of proposed approach for both Phase 1 (develop the evaluation plan) and Phase 2 (implement the evaluation) in collaboration with the NET & EAG. Applicants must incorporate the CDC Framework for Evaluation and utilization-focused evaluation principles and are encouraged to propose participatory evaluation approaches. Applicants must select, modify, and/or develop evaluation questions (should include themes from categories A-D in the sub-evaluation abstract) and include potential evaluation approaches for each question. Applicants should include both primary and secondary data sources and provide details on how sampling would be approached.
    c. Proposed evaluation plan summary matrix (see example and template) that includes a summary of:
        i. Proposed evaluation questions
        ii. Potential evaluation approaches
        iii. Potential methods and data sources
    d. Proposed Timeline (include both Phase 1 & Phase 2)
	1 inch margins, single-spaced, 10 pages maximum
	
	File naming convention: ApplicantName_PHIGRFP_narrative
	
	See template for requirements: Data Collection Matrix Template_PHIG Subevaluation.docx

5. Scope of Work (SOW) and Budget: Phase 1 & Phase 2
    a. Phase 1 SOW, line-item budget, and budget narrative
    b. Phase 2 SOW, line-item budget, and budget narrative
 	
Note:
    a. Applicants should consider referencing the CDC Budget Preparation Guidelines for guidance on what NNPHI looks for in budgets and budget narratives. If applicable, the Consultant Costs section in the CDC Budget Preparation Guideline can be referenced for preparing an Hourly Rate budgets.
	File naming convention: ApplicantName_PHIGRFP_budget
	
	See template: Budget Template_FTE_PHIG Subevaluation RFP.docx

b. **While applicants will submit proposals and budgets for both Phase 1 and Phase 2, this round of funding is for Phase 1 funding only. Approval and funding of Phase 2 scopes of work and budgets are contingent upon successful completion of Phase 1 activities and deliverables and availability of PHIG funding from the CDC.**

c. Awards made in response to this solicitation will be considered either federal sub-awards or contracts and require monthly invoicing. Determination of a subaward or contract is made by NNPHI's Grants and Contracts team upon review of submitted proposal, SOWs, and budgets.

d. Applicants should budget for travel to one in-person meeting to take place in 2026. Travel budgets should include itemized cost estimated including: airfare, nightly cost of lodging, ground transportation costs (ride share). See CDC Budget Preparation Guidelines – Travel section.

e. Funding under this mechanism may NOT include the following:
   - Food or catering services
   - Capital expenses over $5,000
   - Equipment purchases
   - Per HHS requirements, funds awarded under this RFP are subject to the individual salary cap listed in the federal Executive Schedule Level II (currently $221,900, $106.68 hourly).

RFP and Project Timeline

Awards will be made by August 2025. Program orientation and kick-off will be scheduled in August 2025. Selected candidates will be expected to implement their proposal beginning in June 2025.

Request for proposals issued	Friday, June 6, 2025 **Please submit applications here**
Office hours for questions, support, or technical assistance. *The informational webinar will be a presentation introduction to PHIG. That session will be recorded for viewing afterward.* For questions or assistance, please contact PHIGE2A@nnphi.org	1. *PHIG Sub-Evaluation RFP Informational Webinar:* Wednesday, June 18, 12-1pm ET: Registration Link 2. *Office hours:* Thursday, June 26, 3-4pm ET: Registration Link
Optional Notice of Intent* *Strongly encouraged*	Due no later than 5 pm Hawai'i time/7pm PT/10pm ET Friday, June 20, 2025 Please submit NOI here
Confirmation of eligibility	Proposed applicants who complete the Notice of Intent will be notified of their eligibility no later than Wednesday, June 25.
Proposal submission deadline	5pm Hawai'i time/7pm PT/10pm ET Monday, July 14, 2025* *No late submissions will be accepted.
Invites sent for pre-agreement meetings for verifications of capacity and scope	July 2025
Pre-agreement meetings	August 2025
Notices of award	August 2025
Earliest start date for implementation	August 2025 (kickoff meeting to be held virtually with NNPHI and NET partners)*

Table 5: Anticipated Project Timeline (subject to change):

Phase	Timeline	Aug' 25	Sep '25	Oct '25	Nov '25	Dec '25	Jan '26	Feb '26	Mar '26	Apr '26	May '26	Jun '26	Jul '26	Aug '26	Sep '26	Oct '26	Nov '26	Dec '26	Jan '27	Feb '27
Pre-award	Pre-award meeting	X																		
	Agreement development	X	X																	
Phase 1	Kick-off meeting		X																	
	Evaluation plan draft		X	X																
	Submit draft evaluation plan for feedback from NET + EAG + CDC			X		X														
	Finalize evaluation plan						X	X	X											
Phase 2* [if selected]	If applicable, process amendment to Phase 1 agreement to include proposed Phase 2								X											
	Data collection (where applicable) and cleaning									X	X	X	X							
	Data analysis, sharing, and co-interpretation with NET + EAG + CDC												X	X	X					
	Develop draft evaluation report													X	X					
	Submit draft evaluation report for feedback from NET + EAG + CDC														X		X			
	Submit final evaluation report and slide deck															X		X		
	Dissemination of findings, project wrap up																X	X	X	X

Proposal Scoring and Selection Criteria

Notice of Intent will be screened by NNPHI and the NET to confirm eligibility.

Full proposals will be scored by a team of reviewers from NNPHI, PHAB, and ASTHO. Proposals will first be screened for completion, and then scored using the following criteria:

Screening Criteria: Proposals must meet the following screening requirements or will be disqualified:

1. Is the submission complete (i.e., include all requirement elements)?
2. Does the applicant have the required documents attached?
3. Is the applicant eligible based on disclosure of existing PHIG-related funding, perceived conflicts of interest, and/or demonstration of firewall between existing PHIG-related work and work outlined in proposal?

Review Criteria: Proposals that advance beyond the screening stage will be scored on a scale of 1 (low) to 4 (high), and a mean score for all items will be calculated:

1. Does the proposal clearly justify the project's scope and focus with valid evidence and well-defined parameters?
2. Does the plan consider collaborative workplans with the EAG and NET?
3. Is the plan being proposed feasible given available resources and the proposed design?
4. Does the team have the necessary research and evaluation skills to execute this project effectively? Is there discussion of prior experiences that demonstrate evaluation capacity?
   o Are appropriate evaluation questions, evaluation designs, and potential data collection and analysis approaches identified?
   o Is there discussion of how credible evidence and data will be synthesized and/or triangulated to inform findings?
   o Is there discussion of theoretical framework, utilization focused evaluation, the CDC framework for evaluation, and experience in collaborative approaches?
   o Does it include participatory evaluation approaches that respond to the needs of users of the evaluation findings?
5. Does the team demonstrate sufficient expertise in the subject *matter relevant to* the sub-evaluation topic applied to?
   o Do team members have direct experience in the applied topic area?
   o Are team members recognized as experts through credentials, publications, or professional experience?
6. Does the proposal present a methodological approach that is innovative, creative, and capable of generating meaningful insight?

- o Are multiple data sources or mixed-method approaches leveraged for robust findings?
- o Does the proposal describe how results will be interpreted and used effectively?

7. Does the team have adequate staff capacity to implement the work?
   - o Are key roles clearly assigned with sufficient personnel dedicated to each activity? Does the staffing plan align with the proposed timeline and deliverables?
   - o How strong is the evidence provided for the choice of strategy?
   - o Is the approach sufficiently justified?

8. Is the budget proposal appropriate and does it include all required elements?
   - o Does the budget reasonably align with the scope of work and proposed activities?
   - o Are all required budget categories clearly outlined (staff, materials, travel, indirect costs)?

Notice to Applicants

This RFP is not binding on NNPHI or the NET, nor does it constitute a contractual offer. Without limiting the foregoing, NNPHI and the NET reserve the right, in its sole discretion, to reject any or all proposals; to modify, supplement, or cancel the RFP; to waive any deviation from the RFP; to negotiate regarding any proposal; and to negotiate final terms and conditions that may differ from those stated in the RFP. Under no circumstances shall ASTHO/NNPHI/PHAB be liable for any costs incurred by any person in connection with the preparation and submission of a response to this RFP.

Disclosure