# HEPATITIS B DEMONSTRATION PROJECT APPLICATION NARRATIVE TEMPLATE

(20-page limit)

Complete the following RFA Application Narrative by entering responses to each item below; use Arial 11-point font and do not change the margin size. Responses may not exceed 20 pages, including template pages. Responses beyond the 20th page limit will not be reviewed or scored.

Insert the eligible entity (EE) name in the table below. $1M awards must include a minimum of three activities. A fourth activity may be included but will not be scored.

|  |
| --- |
| **Eligible Entity Name:** Click or tap here to enter text. |

| **Award Amount:** | **Select the 3 activities that will be scored.**  |
| --- | --- |
| [x] **$1M Award** | [ ] Hepatitis B Vaccination |
| **Track A - $1M** | [ ] Hepatitis B Screening |
| **Track A - $1M** | [ ] Hepatitis B Linkage to Care  |
| **Track A - $1M** | [ ] Hepatitis B Retention in Care |

## 1. Priority Populations Served

* *Projects should consider including one or more of the following priority groups: 1) Asian American and Pacific Islanders, 2) Sub-Saharan African communities, and/or 3) people who use drugs* *and/or who are receiving substance use-related services. Projects can also consider other groups depending on local data. Projects should explain why the priority groups were selected.*

### RESPONSE:

## 2. Innovation

* *Projects must be innovative. CDPH defines “innovative” as the application of new ideas or promising practices that address the needs of communities living with or at risk of Hepatitis B.*
* *Describe the innovative strategies that will be used to reach/engage your organization’s identified priority population(s).*

### RESPONSE:

## 3. Required Community Engagement

* *Describe 1) how services will be culturally and linguistically appropriate, 2) how the entity will engage the priority population in planning the design of the project and 3) how the proposed project will meet the identified needs of the priority population.*

### RESPONSE:

## 4. Capacity

* *Describe EE’s existing ability to serve clients at risk for HBV. If a referral model is planned, describe the EE’s relationships with those entities that demonstrate expertise, history, and credibility working successfully in engaging the priority population(s), and specify the policies and protocols that will ensure the services are delivered.* ***Attach letters of support if collaborations are planned.***
* *Describe the EE’s experience in implementing evidence-based and/or strength-based programs or innovative strategies that will lead to outcomes that are aligned with goals of this project.*
* *Describe the EE’s current and proposed staffing capacity to complete the award activities and the EE’s administrative systems and accountability mechanisms for grant management.*

### RESPONSE:

1. List any concurrent or prior contract/grant relationships with CDPH/IZB over the last five years. If the EE has received any letters of correction or written notices of breach or inadequate performance from CDPH/IZB related to any concurrent or prior contract/grant relationships, please describe them.

### RESPONSE:

1. List any other agency or grant funding used to provide HBV services for vulnerable populations. Include the funding source, activities being funded and when the funding will end. Describe how the proposed program will be distinct without duplicating services.

### RESPONSE:

## 5. Program Monitoring and Evaluation \*

\*At least 10% of EE’s budget must be allocated to evaluation activities, which include data collection, entry, management, monitoring, and quality control.

* *Describe EE’s ability to collect and monitor project data, including established process for data collection, entry and routine monitoring, sufficient staffing and inter-agency agreements as needed.*
* *For EE’s that do not have internal capacity for program monitoring and evaluation, please describe how grant funds will be used to subcontract with an organization that can support these activities. If a subgrantee will not be used to support these activities, please provide a detailed explanation of how activities will be performed. All subcontractor(s) shall be identified in advance and listed by name and address in the application.*

***RESPONSE:***

**Please select three of the following activities that will be scored. Note: if an EE opts to select additional activities beyond the required number, the additional activities should be described below. However, the EE should indicate which specific activities are to be scored by checking the checkbox next to the activity.**

## 1. Hepatitis B Vaccination: [ ]  Score this activity

The target populations should include priority populations; however, given that that there is a universal recommendation for hepatitis B vaccination among adults, other populations can be included in this activity.

* *Describe strategies for providing hepatitis B vaccine and/or facilitating hepatitis B vaccination.*
* *For EE’s that do not have capacity to vaccinate describe a referral strategy or partnership and a detailed explanation of how services will be delivered and how patients will be referred. All referrals or handoffs of clients for service provision must be “warm handoffs” followed by confirmation of service delivery.*

### RESPONSE:

## 2. Hepatitis B Screening: [ ]  Score this activity

Screening consists of an HBsAg blood test. Additional tests such as Anti-HBs and total anti-HBc can be helpful to distinguish acute, chronic, or resolved infection, but are not required for this activity.

* *Describe strategies for providing hepatitis B screening according to* [*USPSTF*](https://www.uspreventiveservicestaskforce.org/uspstf/recommendation/hepatitis-b-virus-infection-screening) *or the updated* [*CDC*](https://www.cdc.gov/mmwr/volumes/72/rr/rr7201a1.htm) *recommendations.*
* *For EE’s that do not have capacity to screen: describe a referral strategy or partnership and detailed explanation of how services will be delivered and how patients will be referred. All referrals or handoffs of clients for service provision must be “warm handoffs” followed by confirmation of service delivery.*

### RESPONSE:

## 3. Hepatitis B Linkage to Care: [ ]  Score this activity

Linkage to care involves referral of persons with known chronic hepatitis B or newly identified chronic hepatitis B to appropriate medical care for follow-up of their condition.

* *Describe strategies that will increase successful linkage to care.*
* *For EE’s that intend to link clients to another service provider for care: describe a referral strategy or partnership and detailed explanation of how services will be delivered and how patients will be referred. All referrals or handoffs of clients for service provision must be “warm handoffs” followed by confirmation of service delivery.*

### RESPONSE:

## 4. Hepatitis B Retention in Care: [ ]  Score this activity

Retention in care is defined as at least one medical visit involving monitoring and/or treatment per year during the award period.

* *Describe 1) strategies that will increase retention in care and 2) address barriers to engagement in care and provide or facilitate referral to support services that will enhance retention in care.*
* *For EE’s that intend to collaborate with another service provider for retention in care must include how services will be delivered and how service delivery will be tracked.*

### RESPONSE: