Request for Proposals (RFP): Newborn Screening Systems Quality Improvement Projects

Letter of Intent Due Date: **December 13, 2019**
Application Due Date: **January 13, 2020**
Technical Assistance Webinar: December 09, 2019

Submit to: [Chenelle Norman](mailto:Chenelle.Norman@aphl.org), Manager, Newborn Screening Quality Improvement, Newborn Screening and Genetics

*This project (UG8MC31893) is supported by the Health Resources and Services Administration (HRSA) of the U.S. Department of Health and Human Services (HHS) as part of an award totaling $3.3 million dollars. The contents are those of the author(s) and do not necessarily represent the official views of, nor an endorsement, by HRSA, HHS, or the U.S. Government. For more information, please visit [HRSA.gov](https://www.hrsa.gov)*
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SUMMARY

The Association of Public Health Laboratories (APHL) and Newborn Screening Technical assistance and Evaluation Program (NewSTEPs) is seeking up to 30 newborn screening (NBS) programs to participate in a continuous quality improvement (CQI) initiative. The Newborn Screening Systems Quality Improvement Project provides tailored support to successful applicants allowing for a customized/collaborative approach to quality improvement and this Project guided by the following goals:

• **GOAL 1**: Assess needs and engage state newborn screening programs for participation in a multidisciplinary collaborative network focused on newborn screening quality improvement projects.

• **GOAL 2**: Coordinate and facilitate quality improvement projects and data-driven outcome assessments, utilizing evidence-based quality improvement methodologies within each participating state newborn screening program.

• **GOAL 3**: Create a model for replication, sharing and sustainability of continuous newborn screening quality improvement projects.

The Newborn Screening Systems Quality Improvement Project builds on the combined success of previous Health Resources and Services Administration (HRSA) Maternal and Child Health Bureau (MCHB) funded Cooperative Agreements for NewSTEPs, NewSTEPs 360 and the NewSTEPs Timeliness Collaborative Improvement and Innovation Network (CoIIN). These programs are a collaboration between APHL and the Colorado School of Public Health (including partners from the Center for Public Health Innovation) and activities remain driven by active partnerships with state and territorial NBS programs, pediatric sub-specialists, and stakeholders from MCHB, HRSA funded programs, and the Centers for Disease Control and Prevention (CDC).

BACKGROUND

Public health NBS programs in the US screen approximately four million newborns for critical conditions every year, providing the opportunity for early intervention and averting serious and potentially life-threatening complications. NBS is a comprehensive system that includes laboratory testing, point-of-care screening, diagnosis, follow-up, treatment, education, and evaluation services. NBS systems are complex, and with the ongoing expansion of the Recommended Uniform Screening Panel (RUSP) coupled with the introduction of emerging screening technologies and a spotlight on timeliness and cut-offs, continuous quality improvement (CQI) is necessary.

The Newborn Screening Systems Quality Improvement Project is a program facilitating CQI within the NBS system. Through webinars, in-person meetings, technical assistance, workshops, discussion groups/listservs and data entry, data analysis and data visualization, this initiative provides successful applicants the tools they need to successfully implement, spread, and sustain an NBS CQI project. Examples of possible CQI project proposals may include but are not limited to the following:

• **Meet recommended timeframes identified by ACHDNC with the purpose of improving Newborn Screening Timeliness.** Potential activities include: hospital education, introduce or improve the courier system, increase laboratory operating hours, introduce efficiencies in
laboratory processes, improve results communication, utilize Health Information Technology (HIT) for results reporting, and midwife education around timeliness.

- **Improve state process for identification of, and follow-up on, out-of-range results.** *Potential activities include:* pursue targeted technical assistance around establishing and reviewing cut-offs, perform method validation, modify cut-offs, pursue training on analytical tools and methods, update newborn screening disorder detection methods, modify screening algorithms, establish a feedback loop to report false negatives and false positives.

- **Improve state process for communication of screening results to providers and families.** *Potential activities include:* incorporate and/or improve electronic reporting, improve messaging for providers and/or parents, improve interpretation of results through electronic messaging.

- **Improve state process for confirming diagnosis.** *Potential activities include:* develop and use case definitions, incorporate sequencing technologies, track of closed out cases, implement refined disorder specific algorithms (i.e., refining Cystic Fibrosis algorithm from IRT/IRT to IRT/DNA, or introducing HPLC MS/MS for x-ALD second tier detection, etc.), follow-up to confirm cases (late onset disorders).

- **Address emerging issues in NBS.** *Potential activities include:* Continuity of Operations Planning, workforce training and succession planning, education on NBS, data analysis.

- **Implementation of New Disorders.** This includes Pompe, Mucopolysaccharidosis Type I (MPS I), X-Linked Adrenoleukodystrophy (X-ALD), Severe Combined Immunodeficiency (SCID) and Spinal Muscular Atrophy (SMA.)

### RFP PROCESS OVERVIEW

<table>
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<tr>
<th>Date</th>
<th>Event</th>
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<tr>
<td>December 2, 2019</td>
<td>RFP Issued</td>
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<tr>
<td>December 9, 2019</td>
<td>Technical Assistance Webinar at 3:00 pm ET</td>
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<td>(see NewSTEPs listserv for webinar details)</td>
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<tr>
<td>December 13, 2019</td>
<td>Required letter of intent due by 11:59 pm ET</td>
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<td>to APHL (see the Letter of Intent section below)</td>
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<td>January 13, 2020</td>
<td>RFP responses due by 11:59 pm ET to APHL</td>
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<td>January 24, 2020</td>
<td>Awardees notified</td>
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<tr>
<td>March 16, 2020</td>
<td>Anticipated Contract ratification between APHL and awardees</td>
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**PLEASE NOTE:** Funding begins March 16, 2020. However, the drafting and ratification of contracts may take longer than planned depending on the NBS program. APHL will communicate any modification to this anticipated schedule on APHL’s procurement website ([www.aphl.org/rfp](http://www.aphl.org/rfp)) and via an email blast to the NBS Programs and the public health laboratories.
DURATION OF AWARDS

All applicants can request funding for any duration from March 1, 2020 through August 31, 2023. As such, please remain mindful of the timeframe required to initiate, execute and sustain the proposed project. A program can submit multiple applications during the 2019 – 2023 project period.

For multi-year proposals, all budgets are stratified by year by APHL as follows:
- March 1, 2020- August 31, 2020
- September 1, 2020- August 31, 2021
- September 1, 2021- August 31, 2022
- September 1, 2022- August 31, 2023

TECHNICAL ASSISTANCE WEBINAR

Date: Monday, December 9, 2019
Time: 3:00 pm ET
Duration: 1 hour
Dial-In Number(s): +1 646 876 9923 (US Toll) or +1 669 900 6833 (US Toll)
Meeting ID: 936 668 145
Registration Link: https://aphl.zoom.us/j/936668145
NOTE: APHL will record and post this webinar online along with any questions received.

ELIGIBLE APPLICANTS

Eligible applicants include all U.S. and territorial states including NBS programs and stakeholders who:
- Have identified a quality improvement project of interest.
- Submit a letter of intent demonstrating support from institutional leadership by December 13, 2019.

REQUIREMENTS OF FUNDING REQUESTS

Applicants must possess the following, in addition to the eligibility requirements, in order for consideration:

1. Describe how your team identified the problem (for example, using root cause analysis vs. the symptoms of the problem) for the proposed CQI project.
2. Identify a project lead who will be the primary point of contact and act as one of the champions for the work of the project throughout the organization.
3. Form a project team that includes newborn screening laboratory and follow-up program representation (required) and other key partners based on the focus of the project (i.e., hospital partners, patients, etc.)
4. Submit all Quality Indicator data into the NewSTEPs data repository on an annual basis, at minimum, regardless of the project focus. In addition, states must provide baseline data as it relates to their proposed project. Awardees will define and establish baseline data. If you have questions regarding data requirements, please contact Chenelle Norman at Chenelle.Norman@aphl.org
PROGRAM EXPECTATIONS

APHL expects successful participants of the Newborn Screening Systems Quality Improvement Project to meet the program expectations outlined below. **NOTE:** Program requirements will be included in the contract Statement of Work and funding will be contingent on meeting deliverables provided in the contract.

1. Attend and participate in all scheduled webinars and one annual meeting (pending availability of funds) for the duration of the funding period.
2. Submit quality indicator data to the NewSTEPs data repository and project data to the listed NewSTEPs staff point-of-contact on a monthly basis to measure progress. Additional possible data requirements will be reviewed on a state-by-state basis prior to awarding funding. For example, states working on implementing new disorders will be required to complete the NewSTEPs Readiness Tool.
3. Enter into a [Memorandum of Understanding](#) (MOU) with Association of Public Health Laboratories (APHL) for data sharing if your state has not done so already.

LETTER OF INTENT

APHL requires that prospective applicants submit a brief email statement by December 13, 2019 indicating a firm intent to submit a proposal by no later than the RFP Due Date (January 13, 2020). Although a letter of intent is not binding, and does not enter the applicant into the review of the RFP, the information that it contains allows APHL to estimate the potential review workload and plan the contract development and review process. Potential applicants must include the name of the organization or individual that will submit the proposal in their email as well as demonstrate support from institutional leadership. APHL will not consider Applicants who do not submit a Letter of Intent.

The prospective applicants should email a statement reflecting the intent to apply to chenelle.norman@aphl.org using the subject line: LETTER OF INTENT: NEWSTEPS QUALITY IMPROVEMENT PROJECT. APHL must receive this information by **11:59 pm ET on December 13, 2019.**

SUBMISSION OF RFP

Applications must be received at APHL by **11:59 pm ET on January 13, 2020.** Microsoft Word or PDF submissions can be sent to Chenelle Norman at chenelle.norman@aphl.org with a copy to newsteps@aphl.org. APHL will send an email acknowledging the receipt of your application; if you do not receive an acknowledgement within 48 hours, call 240.485.3857 to confirm receipt.

TRAVEL

All awardees will be required to attend an in-person meeting scheduled for June 24 – 26, 2020 at the Westin Georgetown, Washington D.C. Two staff members will have travel expenses covered by APHL.
NOTE: Costs associated with attending the in-person meeting should NOT be included in the proposed budget.

EVALUATION OF RESPONSES

Initial Review
APHL will conduct an initial review of all proposals for completeness. APHL will not consider or evaluate any application that is incomplete on the RFP Due Date (see RFP Process Overview above).

Evaluation Team
After the initial review, an evaluation team will convene to evaluate competitive proposals and assess their relative qualities based on the Evaluation Criteria outlined below and any other factors and sub-factors noted in this RFP. This evaluation team will consist of at least two Subject Matter Experts (SMEs) familiar with quality and continuous improvement implementation and methodologies. The SMEs may consist of APHL members or other external individuals that have expertise in the content area. In addition, the review team may include NewSTEPs staff. APHL’s Chief Program Officer will have final approval over the selected review team’s composition.

APHL will ask proposed review committee members to disclose any potential conflicts of interest and APHL will not place any individual with a conflict of interest on the evaluation team. In the event that a reviewer identifies a conflict of interest (or if APHL staff have reason to believe that a reviewer may not be impartial) after the evaluation team has been assembled, APHL will exclude that reviewer from further participation in the review process and will eliminate that reviewer’s completed reviews from the evaluation process.

Evaluation Criteria
Applications will be evaluated based on each applicant’s ability to present a quality improvement project with defined outcome and process measures, dedicated staff, leadership buy-in, ability to achieve stated goals within the time and budget, ability to provide data to measure change, sustainability of activities following funding period, and thoroughness of responses. Please complete the Appendices in the RFP to respond fully to all of the requirements in the scoring criteria.

| Scoring Criteria and Points | Project Data – clearly describe how your team identified the problem (i.e. root cause analysis vs. the symptoms of the problem). Provide quality indicator data and baseline data for measuring progress, as well as describe any additional data you will be collecting. If this data already exists in your current system or if a data collection method is not currently gathered, explain how long it will take your team to collect 10 observations/instances/pieces of data to analyze for trends. | 25 pts | Appendix A/B |
| | Project Charter/Action Plan – identify project lead, team includes individuals representing lab and follow-up, and includes other key partners if needed, demonstrate staff and leadership support. Identify changes you will implement and role/responsibility of each team member. | 20 pts | Appendix B/C |
**Budget and Budget Justification** – clearly identify funding needs and connect the funding needs to the goals and objectives of the proposed project, and provide justification of funding for each year of funding requested  

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<tr>
<th>Impact - describe the impact your quality improvement project will have and how the project will improve your newborn screening system and/or the community you serve.</th>
<th>20 pts</th>
<th>Appendix D</th>
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<tr>
<td>Sustainability - Describe how you will sustain the project following completion of the funding cycle and what support you have from your newborn screening system to implement this quality improvement.</td>
<td>15 pts</td>
<td>Appendix A</td>
</tr>
<tr>
<td>Readiness Tool - Mandatory ONLY for those implementing new disorders.</td>
<td>15 pts</td>
<td>Appendix A</td>
</tr>
<tr>
<td>Maximum Points Attainable (if NOT implementing new disorders)</td>
<td>95</td>
<td></td>
</tr>
<tr>
<td>Maximum Points Attainable (if completing Readiness Tool for new disorders implementation)</td>
<td>100</td>
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**AWARD**

Depending on the strength of applications, APHL will select up to 30 programs for award. Each selected site will be eligible for the award amount requested and/or deemed appropriate by the evaluation team for one year (with the option to fund for multiple years) via a contract administered by APHL. The awarded applicants can use the award for the following costs associated with implementing a CQI project, including **but not limited to**:

1. Staff time.
2. Travel to quality improvement meetings and trainings not including APHL sponsored meetings.
3. Obtain needed resources to meet project goals and objectives.
4. Development of educational materials and resources (online and hardcopy).
5. Costs associated with hosting in-person sessions and visitors for technical assistance.
6. Laboratory materials and equipment relevant to the project.

**TERM OF PROJECT**

The project term will begin upon contract execution on **March 16, 2020**, and will finish on August 31, 2020. Programs have the option of applying for a multi-year project for which contracts will be re-initiated each funding year. APHL will notify each selected program in advance of any modification to the anticipated scope of work or contract ratification process in the funding year.

**AWARD ANNOUNCEMENT**

APHL will inform selected and non-selected applicants of the award decision on January 24, 2020. APHL will post a list of selected programs on APHL’s procurement website, [www.aphl.org/rfp](http://www.aphl.org/rfp).

All applicants will be entitled to utilize APHL’s RFP Appeals Process to formulate an appeal regarding alleged irregularities or improprieties during the procurement process. Specific details of this policy are located on the procurement website.
CONDITIONS OF AWARD ACCEPTANCE
The eligible applicants must be able to contract directly with APHL or have an existing relationship with a third-party organization that can contract directly with APHL on behalf of the applicant.

RFP RELATED QUESTIONS
Please direct all questions to Chenelle Norman at chenelle.norman@aphl.org. Questions received and associated responses are posted to APHL’s procurement website (www.aphl.org/rfp).

DISCLAIMER AND OTHER GENERAL MATTERS
This RFP is neither an agreement nor an offer to enter into an agreement with any respondent. Once evaluation is complete, APHL may choose to enter into a definitive contract with the selected RFP applicant(s).

APHL must ensure that the selected applicant(s) are neither suspended nor excluded from receiving federal funds and that the applicant(s) meet any other funding eligibility requirement imposed by the Cooperative Agreement. APHL’s determination of whether the applicant is eligible to receive Cooperative Agreement funding will be definitive and may not be appealed. In the event that APHL determines that the selected applicant(s) is ineligible to receive Cooperative Agreement funding, APHL will nullify the contract or will cease negotiation of contract terms.

Each applicant will bear its own costs associated with or relating to the preparation and submission of its application. These costs and expenses will remain with the applicant, and APHL will not be liable for these or for any other costs or other expenses incurred by the applicant in preparation or submission of its application, regardless of the conduct or outcome of the response period or the selection process.

RESPONSE REQUIREMENTS
Each complete response packet should include:
1. Appendix A: Applicant Questions
2. Appendix B: Project Charter
3. Appendix C: First Quarter Action Plan
4. Appendix D: Budget and Budget Justification
5. Appendix E: Readiness Tool (if working on a project focused on new disorders)
APPENDIX A: APPLICANT QUESTIONS

Complete the following questions below:

1- Provide an overview of your Continuous Quality Improvement (CQI) project and the current challenges/barriers your team is facing.

2- How did your team become aware of this challenge or barrier? More specifically, explain how your team was able to identify the root cause of the problem.

3- What data will your team collect in order to determine if the test of change is having the desired impact or an unintended consequence? Describe any additional data you will be collecting outside of Quality Indicators.

4- How will you ensure your team be able to meet all program expectations as it relates to attendance, participation and monthly reporting? Please share potential challenges to meeting program expectations, if any.

5- Describe, in detail, the positive impact your CQI project will have on your newborn screening program and/or the communities you serve.

6- How will you sustain the efforts of your improvement project, outside of fee increases, following the conclusion of the funding period? Please describe the steps involved to implement your sustainability plan as it relates to your proposed improvement project. Include the time required to implement steps to achieve sustainability, required regulatory approvals, and other steps needed to gain approval for sustainability plan.
## APPENDIX B: PROJECT CHARTER

**CHARTER:** Complete the charter below. Outline the aim of your project, impact measures, quality indicators, team lead and team members. Click the hyperlinks for helpful examples.

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<th><strong>Project Aim:</strong></th>
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<tr>
<th><strong>Root Cause Explanation:</strong> How do you know this is issue that needs to be addressed?</th>
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<td>Process and Baseline Measures:</td>
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<td>Identify process measures that will enable you to measure progress toward your project goals. Include the baseline (current value) for each measure. Note- if selected, the awardee is expected to work with a NewSTEPs Data Team member, to further refine your process measures if needed.</td>
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<td>Please indicate in your response where project specific data will be stored, if you require a data storage solution and how long you expect it will take to collect 10 instances of data for analysis (i.e., will you collect this data weekly, monthly, etc.)</td>
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<td>You may establish multiple process measures to track change and improvement over time.</td>
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<th><strong>Quality Indicators:</strong></th>
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<td>Please submit all Quality Indicator data for 2019 in the NewSTEPs Data Repository. For questions related to data submission please contact <a href="mailto:Chenelle.Norman@aphl.org">Chenelle.Norman@aphl.org</a></td>
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**Project Team Leader(s):**

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<th>Name</th>
<th>Title/Role</th>
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**CQI Team Members (NOTE: your team must include at least one laboratory staff and one follow-up staff):**

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If you are including partners outside the state NBS program, how will you ensure they are included in this project?

Please explain why you do not need any partners outside the state NBS program if applicable.
APPENDIX C: FIRST QUARTER ACTION PLAN

ACTION PLAN: Complete the action plan below.

To complete the action plan:
- In the “expected change” column, list the small change(s) you will implement and test to see if it results in an overall improvement (this change should be relevant to achieving your overall project aim)
- In the “tasks required to implement the change” column, list out what exactly needs to happen to test this change
- In the “data needed to evaluate whether the change was an improvement” column, list the data that will be tracked or reported to identify whether this small change led to an improvement
- In the “person(s) responsible” column, list the person(s) involved in carrying out this change
- In the “time line” column, indicate whether the change is being tested, implemented, or spread based on the corresponding timeline

NOTE: the action plan is NOT a list of all the tasks you will accomplish for your project but a summary of the change(s) or Plan Do Study Act (PDSA) you will test for the quarter. You must submit at least one change your team will test.

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<tr>
<th>Expected change</th>
<th>Tasks required to implement the change</th>
<th>Data needed to evaluate whether the change was an improvement</th>
<th>Person(s) responsible</th>
<th>Time Line (‘t’ = test; ‘i’ = implement, ‘s’ = spread)</th>
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APPENDIX D: BUDGET

BUDGET: All applicants must present a budget for completion of activities proposed. The budget should include information detailed in the “Requirements of Funding Request” section above.

NOTE: Programs must use the budget template below and include it within their application document. Programs must also include a SEPARATE budget for each year of funding requested. Failure to include a separate budget for each individual year of the project may compromise the amount of funding requested.

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<th>Personnel</th>
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Equipment (Itemize)

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Supplies/Educational tools and resources (Itemize by category)

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Other Expenses

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TOTAL COSTS
Budget Justification: Please provide explanation for costs in each category. For personnel please describe staff duties to be covered and experience of staff member.

Personnel:

Equipment:

Supplies:

Other Expenses:
APPENDIX E: READINESS TOOL

All states who are proposing a project to work on statewide implementation of a new disorder (Pompe, MPS I, X-ALD, SMA, as well as any other disorders added to the Recommended Uniform Screening Panel (RUSP) during the funding period) are required to initiate Readiness Tool by January 13, 2020 and complete on an on-going basis. Please email Chenelle.Norman@aphl.org to receive necessary log-in information. If you believe the tool is up-to-date, please indicate that as well to the email listed above.
Association of Public Health Laboratories

Conflict of Interest Disclosure Statement

**Applicability:** Disclosure of the following information is required of all Officers, Directors, committee members, staff members and other volunteers who have been designated and who have accepted responsibility to act on behalf of APHL ("APHL Personnel"). Please answer the following questions and, where indicated, include the same information for your immediate family members (your parents, your spouse or partner, your children and your spouse/partner's parents).

APHL will keep your completed disclosure statement in the corporate records of the association.

1. Please list the name, address, phone number, email address and type of business of your current employer. If you are self-employed, please note that below and provide us with the address, phone number, email address and type of business you operate.

2. Do you, or does any family member, currently serve as an officer, director, committee member, or other volunteer (or work as an employee of or a paid consultant to) any organization serving the interest of laboratory science or public health laboratories other than APHL or your state or local laboratory?

   - Yes   - No

   If yes, please list the organization(s) and provide detail on your or your family member's interest or position in the organization(s).

3. Do you, or any family member, have an existing or potential interest in, or compensation arrangement with, any third party providing goods or services to APHL, or with which APHL is currently negotiating?

   - Yes   - No
If the answer is yes, please provide the name of the organization below and describe in detail the nature of the position held.

4. Please note any other financial or business interest you may have with any organization serving the interests of public health laboratories.

   If you have none, please check this box: ☐

☐  Do you, or does any family member, have any other interest or affiliation that is likely to compromise your ability to provide unbiased and undivided loyalty to APHL, or that could come in conflict with your official duties as an Officer, Director, committee member, staff member or other volunteer who has been designated and who has accepted responsibility to act on behalf of APHL?

   ☐  Yes ☐ No

If you answered yes, please describe in detail below the nature of each such interest or affiliation.

6. If you are currently aware of any actual or possible conflict of interest that might otherwise hamper your ability to serve APHL to your best ability and with the highest degree of care, loyalty and obedience – including any potential conflict you or a family member may have with one or more of the RFP applicants – please describe them in detail below.
7. Do you agree that so long as you are an Officer, Director, committee member, staff member or other volunteer who has been designated and who has accepted responsibility to act on behalf of APHL you will immediately disclose to the other Directors and/or Officers or, for staff members, the Executive Director and/or General Counsel the nature of any interest or affiliation which you may hereafter acquire, which is in or is likely to become in conflict with your official duties with APHL?

☐ Yes ☐ No

YOU MUST READ THIS SECTION AND THEN SIGN BELOW
I acknowledge that I have received and read APHL’s Fiduciary Responsibility and Conflict of Interest Policy (the Policy). I have listed all my relevant fiduciary responsibilities and affiliations, and I have identified any actual or potential conflict of interest on this Disclosure Statement and I agree to abide by the Policy. I understand that it is my responsibility to inform APHL in writing of any change in circumstances relating to the Policy and this Disclosure Statement.

Signature: Date:

Printed Name:
APHL Fiduciary Responsibility and Conflict of Interest Policy

1. Policy Statement and Purpose
The members of the APHL Board of Directors understand the importance of serving APHL to the best of their ability and with the highest degree of obedience, loyalty and care. Accordingly, the Board adopts the following policy for APHL Officers and Directors, all staff, committee members, and other volunteers who have been designated and who have accepted responsibility to act on behalf of APHL ("APHL Personnel").

2. Individual Duty and Annual Disclosure
APHL Personnel will avoid any conflict of interest with APHL. APHL Personnel will not profit personally from their affiliation with APHL, or favor the interests of themselves, relatives, friends or other affiliated organizations over the interests of APHL. As used in this Policy, "Conflict of interest" includes any actual, apparent, and potential conflict of interest.
Upon commencing service with APHL, each APHL Personnel will file with the Board an annual statement disclosing all material business, financial, and organizational interests and affiliations they or persons close to them have which could be construed as related to the interests of APHL or the profession of public health laboratory science. Each APHL Personnel has an obligation to make an additional disclosure if a conflict of interest arises in the course of the individual’s service to APHL, whether arising out of his/her employment, consulting, investments, or any other activity. These disclosures will be documented promptly in writing and recorded in the Board minutes and corporate records.

3. Procedure
Whenever APHL considers a matter, which presents an actual, apparent, or potential conflict of interest for APHL Personnel, the interested individual will fully disclose his/her interest in the matter, including the nature, type, and extent of the transaction or situation and the interest of the individual or that individual’s relatives, friends or other affiliated organizations. The Board, after consultation with counsel as appropriate, will determine whether an actual and material conflict exists and, if so, what is the appropriate course of action under this policy and the Board vote will be recorded in the minutes.
Any Board member having a conflict of interest must either (i) voluntarily abstain from and be disqualified from participation in all deliberation and voting on all Board actions relating to the situation or matter that gives rise to the conflict of interest, or (ii) ask the Board to determine whether an apparent or potential conflict of interest is considered by the Board to be an actual and material conflict. In the event that the Board member in question requests that the Board evaluate the apparent or potential conflict, that Board member will abstain and be disqualified from participating in (and voting on) the determination of whether the issue presents an actual and material conflict. If the Board determines that an actual and material conflict exists, the Board member in question will abstain from all voting on, and will be disqualified from participation in all deliberation concerning all Board actions relating to the conflict of interest. The vote will be recorded in the minutes.
These procedures will neither prevent the interested individual from briefly stating his/her position on the matter, nor preclude him/her from answering pertinent questions of Board members, since his/her knowledge may be of assistance to the Board’s deliberations.

APHL Personnel must be cautious and protective of the assets of APHL and insure that they are used in the pursuit of the mission of APHL. The association’s policy requires APHL Personnel to avoid transactions in which APHL personnel may have a significant financial interest in any property which APHL purchases, or a direct or indirect interest in a supplier, contractor, consultant, or other entity with which APHL does business. The Board, after consultation with counsel as appropriate, will determine whether an actual and material conflict exists and, if so, determine whether the transaction is nonetheless favorable to APHL before considering whether to approve it.

4. Other Duties and Obligations
Whenever any APHL Personnel discovers an opportunity for business advantage which is relevant to the activities of APHL, the opportunity belongs to APHL and the individual must present this opportunity to the Board. Only once the Board determines not to pursue the matter and relinquishes the opportunity may the individual consider it a matter of possible personal benefit. APHL Personnel may not accept favors or gifts exceeding $75.00 from anyone who does business with APHL.

All APHL Personnel will keep confidential those APHL matters designated confidential. APHL Personnel are prohibited from disclosing information about APHL to those who do not have a need to know or whose interest may be adverse to APHL, either inside or outside APHL, and are prohibited from using in any way such information for personal advantage to the detriment of APHL.

All APHL Personnel who participate in APHL activities, including committee activities and international consultation activities, must be adequately prepared to fully participate as their position descriptions require and will do so in accordance with the applicable laws and regulations of their respective state or territory and APHL’s Articles of Incorporation, Bylaws, and corporate policies. The APHL Board will read and understand the association’s Articles of Incorporation, Bylaws, corporate policies and financial statements, and routinely verify that all state, federal, and local tax payments, registrations and reports have been filed in a timely and accurate manner.

Board members will never exercise authority on behalf of APHL except when acting in meetings with the full Board or the Executive Committee or as authorized by the Board. If any member of the Board has significant doubts about a course of action of the Board, he or she must clearly raise the concern with the Executive Director and the Board and, when appropriate, seek independent expert advice.