

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

Application Opens: **November 23, 2020**

Technical Assistance Webinar: **December 7, 2020**

Letter of Intent Due Date: **December 11, 2020**

Application Due Date: **January 4, 2021**

Submit to: [Chenelle Norman](#), Manager, Newborn Screening Quality Improvement, Newborn Screening and Genetics

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SUMMARY

The Association of Public Health Laboratories (APHL) is seeking newborn screening (NBS) programs to participate in a continuous quality improvement (CQI) initiative. The Newborn Screening Systems Quality Improvement Project provides tailored support to participants allowing for a customized/collaborative approach to quality improvement (QI).

In addition to the QI Projects award, APHL is seeking applicants for the [QI Projects Supplemental Award](#). Through the supplemental award, newborn screening programs may request up to \$20,000 to support Continuity of Operation (COOP) activities. An overview of the award as well as an outline of program expectations, eligibility, and application requirements are available in [Appendix F](#) on page 18.

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, virtual 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 the Advisory Committee on Heritable Disorders in Newborns and Children (ACHDNC) with the purpose of improving Newborn Screening Timeliness.** *Potential activities include:* hospital education, improve the courier system, increase laboratory operating hours, introduce efficiencies in laboratory processes, improve results communication, utilize Health Information Technology (HIT) for results reporting.
- **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 current 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:* Workforce training and succession planning, education on NBS, and 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.)
- **Improve or enhance NBS continuity of operations (COOP).** Funding is available through the QI Projects supplemental award in [Appendix F](#).

RFP PROCESS OVERVIEW

November 23, 2020	–	RFP Issued
December 7, 2020	–	Technical Assistance Webinar at 2:00 pm ET (see NewSTEPS listserv for webinar details)
December 11, 2020	–	Required letter of intent due by 11:59 pm ET to APHL (see the Letter of Intent section below)
January 4, 2021	–	RFP responses due by 11:59 pm ET to APHL
January 18, 2021	–	Awardees notified
February 26, 2021	–	Anticipated Contract ratification between APHL and awardees

PLEASE NOTE: Funding begins March 1, 2021. 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) 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, 2021 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 2020 – 2023 project period.

For multi-year proposals, APHL will stratify all budgets by year as follows:

- March 1, 2021 – August 31, 2021
- September 1, 2021 – August 31, 2022
- September 1, 2022 – August 31, 2023

TECHNICAL ASSISTANCE WEBINAR

The technical assistance webinar will provide a detailed overview of the QI Projects application and serve as an opportunity to address applicant questions.

Date: Monday, December 7, 2020

Time: 2:00 pm ET

Duration: 1 hour

Registration Link: https://aphl.zoom.us/meeting/register/tJYrfuusqTosHtEJPt5LFR9_rnQGwXoGI4e9

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 11, 2020.

REQUIREMENTS OF FUNDING REQUESTS

In addition to the program expectations, all programs must meet the funding requirements below to be eligible for consideration:

1. Describe how your team identified the problem (i.e. root cause analysis) 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 BOTH 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.
5. Provide baseline data as it relates to the 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 all Continuous Quality Improvement (CQI) national meetings 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.
4. Sign a contract with APHL for acceptance of funds by March 1, 2021.

LETTER OF INTENT

APHL requires that prospective applicants submit a brief email statement by December 11, 2020 indicating an intent to submit a proposal by no later than the RFP Due Date (January 4, 2021). 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 or NEWSTEPS QI SUPPLEMENTAL AWARD for those applying to the [QI supplement](#). APHL must receive this information by **11:59 pm ET on December 11, 2020**.

SUBMISSION OF RFP

Applications must be received at APHL by 11:59 pm ET on January 4, 2021. 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, please call 240.485.3857 to confirm receipt.

TRAVEL

All awardees will be required to attend all Continuous Quality Improvement (CQI) national meetings throughout the duration of the funding period.

NOTE: In 2021, the Continuous Quality Improvement (CQI) national meeting will be virtual.

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. Applicants **do not** need to fill out the conflict of interest form unless instructed by APHL staff.

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		
<i>Project Data</i> – 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
<i>Project Charter/Action Plan</i> – 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
<i>Budget and Budget Justification</i> – 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	20 pts	Appendix D
<i>Impact</i> – 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.	15 pts	Appendix A
<i>Sustainability</i> – 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.	15 pts	Appendix A
<i>Readiness Tool</i> – Mandatory ONLY for those implementing new disorders.	5 pts	Appendix E
Maximum Points Attainable (if NOT implementing new disorders)	95	
Maximum Points Attainable (if completing Readiness Tool for new disorders implementation)	100	

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 or virtual 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 1, 2021 and will finish on August 31, 2021. 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 18, 2021. APHL will post a list of selected programs on APHL's procurement website, 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 \(if working on a project focused on new disorders\)](#)
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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.

For the QI Projects Supplemental funding: Provide an overview outlining how your team will complete the [four phases](#) of the continuity of operations plan (COOP) activities.

- 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.

For the QI Projects Supplemental funding: Why is it important for your program to strengthen or improve the current COOP?

- 3- What data will your team collect in order to determine if the test of change (or [Plan, Do, Study, Act](#)) is having the desired impact or an unintended consequence? Describe any additional data you will be collecting outside of Quality Indicators.

For the QI Projects Supplemental funding: In what ways will your program apply continuous quality improvement to strengthen or improve the current COOP?

- 4- How will you ensure your team is 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.

For the QI Projects Supplemental funding: How will you ensure your team is able to meet all program expectations as it relates to attendance, participation and meeting all project deliverables? 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.

For the QI Projects Supplemental funding: Describe, in detail, the positive impact COOP activities 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.

For the QI Projects Supplemental funding: How will you sustain the efforts of your COOP activities, 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 COOP activities. Include the time required to implement steps to achieve sustainability, required regulatory/agency 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.

For the QI Projects Supplemental funding: You may disregard the section on Process and Baseline Measures.

Project Aim:

Root Cause Explanation: How do you know the newborn screening program needs to address this issue?

Process and Baseline Measures:

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.

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.)

You may establish multiple process measures to track change and improvement over time.

For the QI Projects Supplemental funding: Please disregard this section at this time. APHL will identify measures completion of [phase 1 and phase 2 of the project](#).

Quality Indicators:

Please submit all Quality Indicator data for 2019 in the NewSTEPs Data Repository. For questions related to data submission please contact Chenelle.Norman@aphl.org

Project Team Leader (s):

Name _____ Title/Role _____ Email _____

Name _____ Title/Role _____ Email _____

CQI Team Members (**NOTE:** your team must include at least one laboratory staff and one follow-up staff):

Name	Title/Role	Email
1.		
2.		
3.		
4.		
5.		

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.

Expected change	Tasks required to implement the change	Data needed to evaluate whether the change was an improvement	Person(s) responsible	Time Line ('t' = test; 'i' = implement, 's' = spread)		
				Month		
				March 2021	April 2021	May 2021
1.						
2.						
3.						
4.						
5.						

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.

PLEASE 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.

Personnel						TOTALS
Name	Position Title	%	Hours per Week	Salary or Stipend	Fringe Benefits	
Equipment (Itemize)						
Supplies/Educational tools and resources (Itemize by category)						
Other Expenses						
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 4, 2021 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.

APPENDIX F: SUPPLEMENTAL AWARD

Overview

In light of the current COVID-19 pandemic and ongoing newborn screening contingency plans in states NBS programs, the APHL Quality Improvement Projects collaborative is seeking newborn screening programs interested in using a continuous quality improvement framework to improve or enhance their NBS Continuity of Operations Plans (COOP).

Activities will occur in four phases:

- Phase 1: Review of current COOP and identify areas for improvement.
- Phase 2: Convening of key NBS stakeholders to address and discuss limitations to current COOP and areas for improvement including strategies for continuing NBS activities if unable to perform activities at the state level due to disruptions.
- Phase 3: Evaluation of COOP through testing, training, and exercises.
- Phase 4: Develop final draft of revised COOP and any additional tools or resources.

Programs may request up to \$20,000 to support COOP activities, which may include but are not limited to staff time, tabletop exercises, convening of NBS stakeholders, and creation of COOP related documents, tools and resources.

Program Expectations

APHL expects successful participants of the QI Projects supplemental award 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 all Continuous Quality Improvement (CQI) national meetings for the duration of the funding period.
2. Participate in monthly COOP planning discussion groups.
3. Submit quality indicator data to the NewSTEPS data repository.
4. Submission of an end of project report.
5. Present learnings and final COOP on national webinars, at APHL conferences and as a resource on the NewSTEPS website upon request.
6. 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.
7. Sign a contract with APHL for acceptance of funds by March 1, 2021.

Award Duration

Programs may request up to \$20,000 to support COOP activities. Successful applicants will receive funding from March 2021 – August 2022. Programs must plan to complete all four project phases and deliverables by August 2022.

Application Timeline

The application timeline for the QI Projects supplemental award will follow the same timeline for the general QI Projects RFP [located here](#).

Eligibility

All U.S. and territorial NBS programs are eligible to apply for this funding and are subject to the

requirements to be set forth in a contract between APHL and the funded entity.

Application Requirements

Applicants must complete and submit the following sections of the RFP:

1. [Appendix A: Applicant Questions](#)
2. [Appendix B: Project Charter](#)
3. [Appendix D: Budget and Budget Justification](#)

Scoring Criteria

Scoring Criteria and Points		
<i>Application of Continuous Quality Improvement (CQI)</i> – clearly demonstrate how your team will apply CQI to address all four phases of the project and successfully complete project deliverables.	20 pts	Appendix A/B
<i>Project Charter</i> – identify project lead, team includes individuals representing lab and follow-up, and includes other key partners if needed, demonstrate staff and leadership support.	20 pts	Appendix B/C
<i>Budget and Budget Justification</i> – clearly identify funding needs and connect the funding needs to the goals and objectives of the proposed project, and provide justification for funding.	20 pts	Appendix D
<i>Impact</i> - describe why this project is important and how the project will improve your newborn screening system and/or the community you serve.	20 pts	Appendix A
<i>Sustainability</i> - describe how you will sustain COOP activities following completion of the funding cycle and what support you have from your newborn screening system to complete all project deliverables by August 2021.	20 pts	Appendix A
Maximum Points Attainable	100	

Applications must be received at APHL by 11:59 pm ET on January 4, 2021. Microsoft Word or PDF submissions titled QI PROJECTS SUPPLEMENTAL AWARD 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.

APPENDIX G: APHL CONFLICT OF INTEREST DISCLOSURE STATEMENT
(FOR COMPLETION BY REVIEWERS ONLY – APPLICANTS DO NOT COMPLETE)

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.

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).

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.

For Review Only

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.