

**NHLBI’s Learn More Breathe Better<sup>®</sup>**  
**2022-2023 Community Subcontract Program**  
**Request for Proposals**

Through the *Learn More Breathe Better<sup>®</sup>* Community Subcontract Program, the National Heart, Lung, and Blood Institute (NHLBI) is issuing a call for proposals focused on educational initiatives and programs aimed at increasing awareness about chronic obstructive pulmonary disease (COPD) as a serious lung disease and a leading cause of death and disability in the United States and that furthers implementation of the COPD National Action Plan.

RFP Details:

RFP Issued:	March 3, 2022
Questions Due:	March 10, 2022 3pm EST
Letter of Intent:	March 17, 2022 3pm EDT
Proposal Responses Due:	<b>April 4, 2022 3pm EDT</b>
Primary Contact:	Greta Gorman, Westat, Inc. <a href="mailto:GretaGorman@Westat.com">GretaGorman@Westat.com</a>  Patricia Kaplan, Westat, Inc. <a href="mailto:PatriciaKaplan@Westat.com">PatriciaKaplan@Westat.com</a>
Anticipated Period of Performance:	May 16, 2022 – April 28, 2023

**1. BACKGROUND**

**THE DISEASE:** Chronic obstructive pulmonary disease (COPD) is a serious lung disease and a leading cause of death in the United States.<sup>1</sup> Nationwide, millions of people have been diagnosed with COPD and millions of others don’t know they have it.<sup>2</sup> The burden on the nation’s health care system is enormous. More than \$32 billion was spent on COPD-related patient care in 2010, and those costs were projected to reach \$49 billion by 2020.<sup>3</sup>

<sup>1</sup> Murphy SL, Kochanek KD, Xu JQ, Arias E. Mortality in the United States, 2020. NCHS Data Brief, no 427. Hyattsville, MD: National Center for Health Statistics. 2021.

<sup>2</sup> NHLBI approved core data 2021.

<sup>3</sup> Centers for Disease Control and Prevention. COPD Costs. Accessed on February 2, 2022 at <https://www.cdc.gov/copd/infographics/copd-costs.html>.

**THE COPD NATIONAL ACTION PLAN:** At the request of Congress, federal agencies worked in collaboration with the COPD stakeholder community to develop the [COPD National Action Plan](#)—the nation’s first-ever blueprint to address the burden of COPD. The Action Plan is organized into five goals that address individual and public needs, health care delivery and practice guidelines, data collection and dissemination, research, and legislative requirements.

**LEARN MORE BREATHE BETTER®:** NHLBI’s *Learn More Breathe Better (LMBB)* program is a national health education program that aims to bring greater visibility to lung health by translating research into public and professional education programs. The program has facilitated the efforts of more than 80 partners in all 50 states among patient advocacy groups, state and local public health agencies, and health care professional societies, who have been instrumental in lung health education, particularly around COPD. Program materials continue to be developed with easy-to-understand information designed to address the needs of the public and those at risk for COPD, as well as those living with COPD – both diagnosed and undiagnosed. In addition, the program strives to reach health care professionals, specifically in the primary care community, to increase early detection, proper diagnosis, and appropriate treatment. Despite this progress, COPD remains a significant health issue that will continue to grow without successful interventions. Substantial unmet needs remain for providers and patients.

Through the *LMBB* Community Subcontract Program, NHLBI is supporting the implementation of the COPD National Action Plan in areas that align with its overall program goals.

**The National Action Plan goals are as follows:**

- **Goal 1:**
  - Empower people with COPD, their families, and caregivers to recognize and reduce the burden of COPD.
- **Goal 2:**
  - Improve the diagnosis, prevention, treatment, and management of COPD by improving the quality of care delivered across the health care continuum.
- **Goal 3:**
  - Collect, analyze, report, and disseminate COPD-related public health data that drive change and track progress.
- **Goal 4:**
  - Increase and sustain research to better understand the prevention, pathogenesis, diagnosis, treatment, and management of COPD.
- **Goal 5:**
  - Translate national policy, educational, and program recommendations into research and public health care actions.

**Through its COPD initiatives, *LMBB* focuses on the following target audiences:**

- **Health care providers (HCPs)**
  - **Primary HCP audiences: primary care providers and associated allied health professionals**
  - **Secondary HCP audiences: relevant specialty providers (e.g., pulmonology, oncology, cardiology), respiratory therapists**
- **Men and women over age 35 at higher risk such as:**
  - **Current and former smokers**
  - **People at higher risk based on genetics or environmental/occupational exposures**
- **People who have been diagnosed with COPD and their family and loved ones**

***BREATHE BETTER NETWORK:***

The program’s partnership network – the *Breathe Better Network*, a staple of the *LMBB* program – is a group of more than 80 organizations nationwide that are working to integrate *LMBB* program messages and materials with their outreach efforts.

Organizations representing states, cities, or communities that are engaged in lung

health education and awareness through the *LMBB* program are eligible to join the *Network* and may take advantage of program support, including:



- **Educational materials and social media resources:** Including *LMBB* materials that partners can co-brand with their organization’s name and logo, in accordance with NHLBI guidelines.
- **Templates and models:** To produce COPD events for both public and health care provider audiences.
- **Media outreach materials:** Materials in template form that can be tailored for local use, including the use of national media experts and subject matter experts, as available.
- **Notification of national program activity:** Regularly receive program updates, with the option of building upon national activity to create local activities.

Whereas membership is not required to be eligible to participate in this RFP and receive a subcontract, each respondent is encouraged to consider participation in the *Breathe Better Network*. Requests to join the Network can be directed to [HealthEdu@nhlbi.nih.gov](mailto:HealthEdu@nhlbi.nih.gov).

## 2. GOALS AND ELIGIBILITY

The primary goal of *LMBB's* Community Subcontract Program for 2022-2023 is to increase the capacity to support the development and execution of activities focused on advancing the goals and objectives of the [COPD National Action Plan](#). Realizing that NHLBI is only one of many organizations helping to implement the Action Plan, we believe these Subcontract Agreements could play an important role in supporting some of the Action Plan's goals specifically, but not limited to, the first two goals:

**Goal 1** Empower people with COPD, their families, and caregivers to recognize and reduce the burden of COPD.

**Goal 2** Improve the diagnosis, prevention, treatment, and management of COPD by improving the quality of care delivered across the health care continuum.

Applicants must be nonprofit organizations or state, county, or municipal government agencies. When a task force, working group, consortium, or coalition is involved, one organization must be the lead, with a single point of contact.

As NHLBI's contractor for the *LMBB* program, Westat, Inc. anticipates administering multiple Subcontract Agreements to support NHLBI and *LMBB* program goals. The number of awards will be dependent on the number of applications and funds available.

Collaboration and the ability to establish regional capacity and sustainability are paramount. Preference will be given to recipients who partner with at least two other organizations in the region to broaden the reach of their plan. Additionally, areas with a demonstrated need for COPD intervention and education will be provided special consideration (for more information on COPD age-adjusted prevalence among adults aged  $\geq 18$  years across the United States,<sup>4</sup> review available data by the Centers for Disease Control and Prevention at [https://www.cdc.gov/brfss/annual\\_data/annual\\_2020.html](https://www.cdc.gov/brfss/annual_data/annual_2020.html)). For additional information on the potential regional impact of COPD,<sup>5</sup> see [this Health Affairs article](#).

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<sup>4</sup> Centers for Disease Control and Prevention. Behavioral Risk Factor Surveillance System (BRFSS), 2020.

<sup>5</sup> Yaemsiri S, Alfieri JM, Moy E, et al. Healthy People 2020: Rural Areas Lag In Achieving Targets For Major Causes Of Death. (2019). *Health Aff.*, 38(12), 2027-2031.

Plans that include new ideas/approaches will be given preference over ideas already being executed by the recipient in the population or geographical area target of the intervention. Preference will also be given to organizations that clearly describe the feasibility of their proposed program activities despite limitations and restrictions due to the COVID-19 pandemic (e.g., screening activities). Additionally, preference will be given to organizations that have not previously received funds through this Community Subcontract Program.

Applicants are encouraged to seek collaborations with additional partners including, but not limited to, local or state health departments, fellow members of the *Breathe Better Network* (for a current list of *Breathe Better Network* members, please visit <https://www.nhlbi.nih.gov/LMBBnetwork>), health systems, and area employers (e.g., plants, factories, corporations). Awarded organizations must identify a point of contact for their program. Written commitment from proposed partnering organizations in the state, and evidence of those partners' capacity to implement what was proposed, must be demonstrated at the time of proposal submission.

Applicants are encouraged to visit the [COPD National Action Plan Community Action Tool](#) to review existing programs by organizations working towards implementation of the Action Plan, including prior Community Subcontract Program awardees.

#### **REQUIREMENTS:**

- **Demonstrate Relevance and Alignment** – Offerors must show how their proposed solutions will further the goals of the COPD National Action Plan related to awareness and education.
- **Target Unmet Need** – Offerors are asked to propose solutions that address needs not currently being met by current resources, infrastructure, and/or tools.
- **Leverage Existing Program Materials** – The *LMBB* program has carefully developed a series of digital and print materials for use in consumer and provider outreach. To ensure efficiency and consistency in messaging, offerors are encouraged to outline in their proposals how they will incorporate these resources into their outreach. Visit [copd.nhlbi.nih.gov](http://copd.nhlbi.nih.gov) to access available tools and materials, which can be downloaded free of charge and customized with partner logos in accordance with NHLBI guidelines. We also encourage offerors to update and enhance materials and/or develop new resources tailored to diverse populations and languages.
- **Evaluation/Sustainability** – Offerors must show how they will measure the impact of their program, including how it supports the COPD National Action Plan, the *LMBB* program's objectives (as outlined in this RFP), and addresses an unmet need. Please note all awardees will be required to provide a **final evaluation of their projects to Westat by April 13, 2023**.
- **Address Human Subjects Protection** – Offerors must submit a completed Human Subjects Protection Review Executive Summary document as an appendix to the core proposal. See "Human Subjects Protection" in Section 6: Proposal Instructions.

### **3. PERIOD OF PERFORMANCE**

**May 16, 2022 – April 28, 2023**

### **4. SUPPORT PROVIDED BY NHLBI CONTRACTOR WESTAT, INC. FOR AWARDEES**

#### **Financial**

Awardees will receive funds to support COPD education activity in their communities, to be paid in increments based on a schedule and deliverables to be mutually agreed upon at the onset of the Agreement.

#### **Technical Assistance**

The NHLBI contractor, Westat, Inc., will provide technical assistance to Awardees as needed in the form of counsel on strategic planning, including target audience data, communications, media relations, event planning, and reporting.

#### **Operations**

Upon receiving the announcement of their award, Awardees will receive schedules for conference calls, reports, and activities, along with reporting templates, contact information, and opportunities for sharing questions and information with other Awardees. Quarterly conference calls with all Awardees will also support streamlined operations.

#### **Program Support**

NHLBI's *LMBB* program has produced, and will continue to produce, print and radio PSAs, fact sheets, digital animations, videos, PowerPoint presentations, infographics and info cards, social media resources, templates for events and local media outreach, and other materials that can be used by Awardees.

Awardees may download print-ready materials from the *LMBB* website and customize them by co-branding with their own logos and contact information. See NHLBI's COPD resource webpage ([copd.nhlbi.nih.gov](http://copd.nhlbi.nih.gov)) to access tools and materials.

### **5. REPORTING**

#### **Activity Reports**

Awardees will be required to submit brief reports reflecting 60 days of activity on the 7<sup>th</sup> day

of the month, every other month. A report template will be provided to describe activity since the last report.

**Report components:**

- New contacts made: organizations, with individual(s)' name(s) and title(s)
- Meetings and/or conference calls held
- Presentations or exhibits: forum, estimated number of people in attendance, information about the audience, number of COPD-related *LMBB* program materials distributed
- Media coverage: media outlet, content and tone of coverage, and estimated audience
- Other accomplishments and progress
- Areas of challenge and plans to address the challenge
- Budget updates/tracking of budget spend
- How are you progressing on achieving your goals?
- Do you see any need to adjust your initial goals?
- What aspects of managing the program are most difficult?
- What aspects are most successful?
- What lessons have you learned to date that you would share with other Awardees to facilitate a successful outcome?
- How else could *LMBB* support your current efforts?
- Dollars expended and other resources used

***In each report, those awarded agreements must track and provide an update on each deliverable outlined in their proposal/award. Reports must also include a brief description of plans and goals for the upcoming reporting period.***

**Final Report**

Each awardee will be encouraged to enter their final results and project summary in the [COPD National Action Plan Community Action Tool](#).

In addition, upon completion of the project, each awardee's final report will include the following sections:

- A summary of all project activity
- Audiences reached
- Dollars expended and other resources used
- Evaluation methods and data
- Observations on project successes and lessons learned
- Sustainability plans
- Replication guidelines

## 6. PROPOSAL INSTRUCTIONS

The proposal should include the following sections, organized as follows:

### Approach to the Statement of Work

#### Objectives:

This section should include:

- **Understanding of the challenge and the current COPD landscape:** Your interpretation of, and your insights about the program goals and objectives, as it relates to the current state of COPD.
- **Strategies and Methods:** Your proposed strategies and specific methods, including but not limited to, information about the audience(s) you would target and geographic reach, events to be developed or utilized, organizations you would partner with, and how you would promote your activities to your audience(s). In addition, this section should, where appropriate, address how you will build sustainability into your project, so that it can be continued in the future without NHLBI funds, utilizing community resources. This section should also address how you will document the project so that it can be replicated in other communities.
- **Monitoring and Evaluation:** How you will monitor and evaluate the quality and progress of your work.

**Schedule:** A timetable or schedule with enough detail to demonstrate your understanding of the tasks, from the time the Agreement will be awarded to its conclusion.

#### Organization:

This section should include:

- Proposed management structure for the project. This should include a Project Director who oversees the entire project, and who will become the signee on the Agreement with Westat.
  - Only a maximum of one day-to-day contact, and a backup, will be accepted.
- Proposed personnel and their proposed roles.

#### Budget:

- Identify the total budget required to implement the proposed plan. NHLBI expects to award multiple organizations, with each award not to exceed \$50,000.
- Provide line item detail for estimated costs for specific activities, including direct labor and allowable direct expenses, in accordance with [FAR Part 31](#), necessary to

complete your proposed program. Proposals should include detailed descriptions of expenses along with cost backup for each item. If travel is required, it shall be in accordance with [Federal Travel Regulations](#).

- NHLBI expects a cost-sharing arrangement with successful organizations. Identify other sources of revenue to help support this project and indicate whether they are funds or in-kind support.

A budget template (Appendix A) is provided in the attachment. The template is also available on the *LMBB* Community Subcontract Program webpage ([www.nhlbi.nih.gov/LMBBsubcontracts](http://www.nhlbi.nih.gov/LMBBsubcontracts)).

**Appendix (as brief as possible while conveying your credentials):**

- Resumes of proposed staff or job descriptions of staff to be hired.
- Description of your organization, organizational capabilities, resources, and facilities.
- Description of success in conducting similar programs, utilizing community resources, and demonstrating the usage of other revenue streams, effectively.
- Three letters of reference from leaders of organizations, media, or communities not directly associated with your organization.
- Letters of commitment from other organizations with whom you intend to partner.

**Length of Proposal:** The entire proposal Section 1 “Approach to Statement of Work: Understanding of the Problem, Strategies and Methods, and Monitoring and Evaluation,” should not exceed 10 pages single-spaced in Arial/Times New Roman font size 12, with 1-inch margins. Diagrams, tables, and graphics may use smaller type if needed.

Schedule, Organization, Budget, and Appendix sections may be of the length the proposal team deems necessary, but brevity is encouraged. The Human Subjects Protection Review Executive Summary (Appendix B) must be included as an appendix to the core proposal and should be no more than 4 pages in length. This document does not count toward the 10-page limit for the core RFP response.

**Human Subjects Protections:** Review by an Institutional Review Board (IRB) is required of all projects and activities that involve research with human subjects. Regulations define research as a systematic investigation, including research development, testing, and evaluation, designed to develop or contribute to generalizable knowledge. (See 45 C.F.R. § 46.102(d)). Human subjects are living individuals about whom: (1) data is obtained through intervention or interaction with the individual; or (2) information is obtained that is both private and identifiable. (See 45 C.F.R. § 46.102(f)).

IRB review is required if any aspect of the proposal involves research with human subjects, such as the following:

- Collecting qualitative data using focus groups, one-on-one interviews, or site visits;
- Analyzing or storing data with personal identifiers (e.g., name, address);

- Collecting physical measurements (e.g., height, weight, peak flow rate);
- Using invasive procedures (e.g., blood draw);
- Collecting survey data via telephone, web, mail, ACASI, or other methods with identifiers retained;
- Requesting humans to ingest any substance; or
- Using humans as study subjects in an experiment.

All applicants must complete and submit the Human Subjects Protection Review Executive Summary document. If the applicant determines that IRB oversight is not required, based on the definitions outlined above, the document should still be submitted indicating the applicant's assessment that IRB approval is not required. Please refer to the Human Subjects Protection Review Executive Summary (Appendix B) for further instruction on completing that document.

**Submission:**

**All proposals must be received by 3:00 p.m. EDT on April 4, 2022.** Proposals can be Microsoft Word or PDF files and should be emailed to [GretaGorman@Westat.com](mailto:GretaGorman@Westat.com) and [PatriciaKaplan@Westat.com](mailto:PatriciaKaplan@Westat.com).

**LETTERS OF INTENT**

**We request that applicants submit a non-binding letter of intent by 3:00 p.m. EDT on March 17, 2022.** The letter of intent will give us a sense of the number of proposals to expect, and allow us to plan accordingly.

Letters should be emailed to [GretaGorman@Westat.com](mailto:GretaGorman@Westat.com) and [PatriciaKaplan@Westat.com](mailto:PatriciaKaplan@Westat.com).

## SELECTION CRITERIA FOR AWARD

The following point system will be applied to determine selection of Awardees:

Criteria	Point Value
Established presence in the community that will attract coalition partners and/or program participants; prior success conducting public education efforts at the community level and proven results; proven ability to coalesce partners around a common goal (specific to COPD); references and community support; has not previously received funds through this Community Subcontract program	20
Demonstrated knowledge, via the proposal, of processes that will support success (e.g., communication, project monitoring, evaluation, fiscal management) and alignment with National COPD Action Plan goals	20
Specific plan for implementing novel solutions that serve current unmet needs, explaining approaches/rationale that will reach at-risk audiences and/or health care professionals; inclusion of specific deliverables, milestones, and timeline. Offerors should address how to accomplish their program goals in light of restrictions associated with the COVID-19 pandemic.	30
Qualifications of key personnel and project staff	10
Proposed budget and use of funds	10
Plans for ensuring sustainability of the project in the community and replicability in other communities; inclusion of Human Subjects Protection Review Executive Summary	10
<b>Total Points Value</b>	<b>100</b>

### 7. CONTACT INFORMATION For questions, please contact:

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