### Missouri Collecting Violent Death Information Using National Violent Death Reporting System (NVDRS)

#### 9a. GRANTEE NAME AND ADDRESS

**HEALTH AND SENIOR SERVICES, MISSOURI DEPARTMENT OF**
Alternate Name: **MISSOURI STATE DEPT/ HEALTH & SENIOR SRV**
920 Wildwood Dr
Jefferson City, MO 65109-5796

#### 10a. GRANTEE AUTHORIZING OFFICIAL

Ms. Tonya R Loucks
920 WILDDO DR
Business Official
JEFFERSON CITY, MO 65109-5796
Phone: 573-751-6014

### 11. APPROVED BUDGET (Excludes Direct Assistance)

<table>
<thead>
<tr>
<th>1. Financial Assistance from the Federal Awarding Agency Only</th>
<th>2. Total project costs including grant funds and all other financial participation</th>
</tr>
</thead>
<tbody>
<tr>
<td>a. Salaries and Wages</td>
<td>105,440.00</td>
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<tr>
<td>b. Fringe Benefits</td>
<td>55,883.00</td>
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<tr>
<td>c. Total Personnel Costs</td>
<td>161,323.00</td>
</tr>
<tr>
<td>d. Equipment</td>
<td>0.00</td>
</tr>
<tr>
<td>e. Supplies</td>
<td>1,858.00</td>
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<td>f. Travel</td>
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<tr>
<td>g. Construction</td>
<td>0.00</td>
</tr>
<tr>
<td>h. Other</td>
<td>50,700.00</td>
</tr>
<tr>
<td>i. Contractual</td>
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<tr>
<td>j. TOTAL DIRECT COSTS</td>
<td>322,703.00</td>
</tr>
<tr>
<td>k. INDIRECT COSTS</td>
<td>34,361.00</td>
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<td>l. TOTAL APPROVED BUDGET</td>
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</tr>
<tr>
<td>m. Federal Share</td>
<td>357,064.00</td>
</tr>
<tr>
<td>n. Non-Federal Share</td>
<td>0.00</td>
</tr>
</tbody>
</table>

### 12. AWARD COMPUTATION

| a. Amount of Federal Financial Assistance (from item 11m) | 357,064.00 |
| Less Unobligated Balance From Prior Budget Periods       | 0.00 |
| c. Less Cumulative Prior Award(s) This Budget Period     | 0.00 |
| d. AMOUNT OF FINANCIAL ASSISTANCE THIS ACTION            | 357,064.00 |

### 13. Total Federal Funds Awarded to Date for Project Period

921,418.00

### 14. RECOMMENDED FUTURE SUPPORT

(Subject to the availability of funds and satisfactory progress of the project):

<table>
<thead>
<tr>
<th>YEAR</th>
<th>TOTAL DIRECT COSTS</th>
<th>TOTAL DIRECT COSTS</th>
</tr>
</thead>
<tbody>
<tr>
<td>a. 4</td>
<td>d. 7</td>
<td></td>
</tr>
<tr>
<td>e. 8</td>
<td>f. 9</td>
<td></td>
</tr>
</tbody>
</table>

### 15. PROGRAM INCOME SHALL BE USED IN ACCORD WITH ONE OF THE FOLLOWING ALTERNATIVES:

- a. DEDUCTION
- b. ADDITIONAL COSTS
- c. MATCHING
- d. OTHER RESEARCH (Add / Deduct Option)
- e. OTHER (See REMARKS)

### 16. THIS AWARD IS BASED ON AN APPLICATION SUBMITTED TO, AND AS APPROVED BY, THE FEDERAL AWARDING AGENCY ON THE ABOVE TITLED PROJECT AND IS SUBJECT TO THE TERMS AND CONDITIONS INCORPORATED EITHER DIRECTLY OR BY REFERENCE IN THE FOLLOWING:

- a. The grant program legislation
- b. The grant program regulations
- c. The award notice including terms and conditions, if any, noted below under REMARKS.
- d. Federal administrative requirements, cost principles and audit requirements applicable to this grant.
- e. Other (See REMARKS)

In the event there are conflicting or otherwise inconsistent policies applicable to the grant, the above order of precedence shall prevail.

### REMARKS

Other Terms and Conditions Attached - Yes

### 17. OBJ CLASS 41.51

<table>
<thead>
<tr>
<th>17a. VENDOR CODE</th>
<th>18a. EIN</th>
<th>18b. EIN</th>
<th>19. DUNS</th>
<th>20. CONG. DIST.</th>
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</thead>
<tbody>
<tr>
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<td>b. 16CE924853</td>
<td>c. 93.136</td>
<td>d. CE</td>
<td>e. 50.00</td>
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<td>e. 50.00</td>
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<td>c. 93.136</td>
<td>d. CE</td>
<td>e. 5357,064.00</td>
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</table>

**DEPARTMENT OF HEALTH AND HUMAN SERVICES**
Centers for Disease Control and Prevention
CDC Office of Financial Resources
2920 Brandywine Road
Atlanta, GA 30341

**NOTICE OF AWARD**
AUTHORIZATION (Legislation/Regulations)
SEC 301,317,6391A 42USC241,247B280B-B3

**DEPARTMENT OF HEALTH AND HUMAN SERVICES**
Centers for Disease Control and Prevention
CDC Office of Financial Resources
2920 Brandywine Road
Atlanta, GA 30341

**NOTICE OF AWARD**
AUTHORIZATION (Legislation/Regulations)
SEC 301,317,6391A 42USC241,247B280B-B3
### Direct Assistance

<table>
<thead>
<tr>
<th>BUDGET CATEGORIES</th>
<th>PREVIOUS AMOUNT (A)</th>
<th>AMOUNT THIS ACTION (B)</th>
<th>TOTAL (A + B)</th>
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<td>Personnel</td>
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<td>Travel</td>
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</tr>
<tr>
<td>Equipment</td>
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</tr>
<tr>
<td>Supplies</td>
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<td>$0.00</td>
</tr>
<tr>
<td>Contractual</td>
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</tr>
<tr>
<td>Construction</td>
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<tr>
<td>Other</td>
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<td>$0.00</td>
<td>$0.00</td>
</tr>
<tr>
<td>Total</td>
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# Federal Financial Report Cycle

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<th>Reporting Period Start Date</th>
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<th>Reporting Period Due Date</th>
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<td>08/31/2017</td>
<td>Annual</td>
<td>11/29/2017</td>
</tr>
<tr>
<td>09/01/2017</td>
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<td>Annual</td>
<td>11/29/2018</td>
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<tr>
<td>09/01/2018</td>
<td>08/31/2019</td>
<td>Annual</td>
<td>11/29/2019</td>
</tr>
</tbody>
</table>
1. Final Terms and Conditions FY18 6.13.18
2. Technical Review
Incorporation: In addition to the federal laws, regulations, policies, and CDC General Terms and Conditions for Non-research awards at https://www.cdc.gov/grants/federalregulationspolicies/index.html, the Centers for Disease Control and Prevention (CDC) hereby incorporates Notice of Funding Opportunity (NOFO) number CE16-1607, entitled Collecting Violent Death Information Using the National Violent Death Reporting System (NVDRS), and application dated April 16, 2018, as may be amended, which are hereby made a part of this Non-research award, hereinafter referred to as the Notice of Award (NoA).

Approved Funding: Funding in the amount of $357,064 is approved for the Year 05 budget period, which is September 1, 2018 through August 31, 2019. All future year funding will be based on satisfactory programmatic progress and the availability of funds.

The federal award amount is subject to adjustment based on total allowable costs incurred and/or the value of any third party in-kind contribution when applicable.

Note: Refer to the Payment Information section for Payment Management System (PMS) subaccount information.

Financial Assistance Mechanism: Cooperative Agreement

Substantial Involvement by CDC: This is a cooperative agreement and CDC will have substantial programmatic involvement after the award is made. Substantial involvement is in addition to all post-award monitoring, technical assistance, and performance reviews undertaken in the normal course of stewardship of federal funds.

- Provide a case definition as well as documentation and descriptions of how to collect required data elements
- Provide a web-based system to enter data, to export data to the applicant, and to share data with CDC. The web-based data entry system will also support data quality by providing data summaries and implementing data entry rules, including restricting data entry to valid values
  - Provide training on how to use the web-based data entry system
- Provide applicant results from CDC monitoring and evaluation activities including updates on key performance measures, CDC data quality reports, CDC case reviews, and observations from CDC site and reverse site visits when resources are available.
- Work with applicants to solve challenges identified in evaluation and monitoring activities such as problems of missing or inaccurate data.
- Provide technical assistance in solving problems in all aspects of the system through monthly conference calls, discussions with science and project officers, maintaining a help desk for abstraction questions and questions about the web-based data entry system, and periodic applicant site or reverse site visits as resources are available.
**Key Personnel:** This action also approves the Authorizing Official Representative change to Ms. Tonya Loucks as requested by your organization in a correspondence dated May 23, 2018.

**Budget Revision Requirement:** By October 1, 2018 the recipient must submit a revised budget with a narrative justification, workplan and SF424A for the total approved funding amount. Failure to submit the required information in a timely manner may adversely affect the future funding of this project. If the information cannot be provided by the due date, you are required to contact the GMS/GMO identified in the CDC Staff Contacts section of this notice before the due date.

**Program Income:** Any program income generated under this grant or cooperative agreement will be used in accordance with the Addition alternative.

**Addition alternative:** Under this alternative, program income is added to the funds committed to the project/program and is used to further eligible project/program objectives.

Note: The disposition of program income must have written prior approval from the GMO.

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**FUNDING RESTRICTIONS AND LIMITATIONS**

**Notice of Funding Opportunity (NOFO) Restrictions:**
- Applicants may not use funds for research
- Applicants may not use funds for clinical care
- Applicants may use funds only for reasonable program purposes, including personnel, travel, supplies and services
- Generally, applicants may not use funds to purchase furniture or equipment. Any such proposed spending must be clearly identified in the budget
- Reimbursement of pre-award costs is not allowed
- Other than for normal and recognized executive-legislative relationships, no funds may be use for:
  - Publicity or propaganda purposes, for the preparation, distribution, or use of any material designed to support or defeat the enactment of legislation before any legislative body
  - The salary or expenses of any grant or contract recipient, or agent acting for such recipient, related to any activity designed to influence the enactment of legislation, appropriations, regulation, administration action, or Executive order proposed or pending before any legislative body
  - See Additional Requirement (AR) 12 for detailed guidance on this prohibition and additional guidance on lobbying for CDC awardees
- The direct and primary recipient in a cooperative agreement program must perform a substantial role in carrying out project outcomes and not merely serve as a conduit for an award to another party or provider who is ineligible.
**Indirect Costs:**

Indirect costs are approved based on the Indirect Cost Rate Agreement dated March 9, 2018, which calculates indirect costs as follows, a Provisional is approved at a rate of 21.3% of the base, which includes, direct salaries and wages including all fringe benefits. The effective dates of this indirect cost rate are from July 1, 2018 to June 30, 2019.

**REPORTING REQUIREMENTS**

**Required Disclosures for Federal Awardee Performance and Integrity Information System (FAPIIS):** Consistent with 45 CFR 75.113, applicants and recipients must disclose in a timely manner, in writing to the CDC, with a copy to the HHS Office of Inspector General (OIG), all information related to violations of federal criminal law involving fraud, bribery, or gratuity violations potentially affecting the federal award. Subrecipients must disclose, in a timely manner in writing to the prime recipient (pass through entity) and the HHS OIG, all information related to violations of federal criminal law involving fraud, bribery, or gratuity violations potentially affecting the federal award. Disclosures must be sent in writing to the CDC and to the HHS OIG at the following addresses:

CDC, Office of Grants Services  
LaQuanda Lewis, Grants Management Specialist  
Centers for Disease Control and Prevention  
OD, Environmental, Occupational Health & Injury Prevention Services Branch  
2960 Brandywine Rd  
Atlanta GA 30341  
Email: hrf6@cdc.gov (Include “Mandatory Grant Disclosures” in subject line)

AND

U.S. Department of Health and Human Services  
Office of the Inspector General  
ATTN: Mandatory Grant Disclosures, Intake Coordinator  
330 Independence Avenue, SW  
Cohen Building, Room 5527  
Washington, DC 20201

Fax: (202)-205-0604 (Include “Mandatory Grant Disclosures” in subject line) or  
Email: MandatoryGranteeDisclosures@oig.hhs.gov

Recipients must include this mandatory disclosure requirement in all subawards and contracts under this award.

Failure to make required disclosures can result in any of the remedies described in 45 CFR 75.371. Remedies for noncompliance, including suspension or debarment (See 2 CFR parts 180 and 376, and 31 U.S.C. 3321).

CDC is required to report any termination of a federal award prior to the end of the period of performance due to material failure to comply with the terms and conditions of this award in the OMB-designated integrity and performance system accessible through SAM (currently FAPIIS).
(45 CFR 75.372(b)) CDC must also notify the recipient if the federal award is terminated for failure to comply with the federal statutes, regulations, or terms and conditions of the federal award. (45 CFR 75.373(b))

**PAYMENT INFORMATION**

The HHS Office of the Inspector General (OIG) maintains a toll-free number (1-800-HHS-TIPS [1-800-447-8477]) for receiving information concerning fraud, waste, or abuse under grants and cooperative agreements. Information also may be submitted by e-mail to hhstips@oig.hhs.gov or by mail to Office of the Inspector General, Department of Health and Human Services, Attn: HOTLINE, 330 Independence Ave., SW, Washington DC 20201. Such reports are treated as sensitive material and submitters may decline to give their names if they choose to remain anonymous.

**Payment Management System Subaccount:** Funds awarded in support of approved activities have been obligated in a newly established subaccount in the PMS, herein identified as the "P Account". Funds must be used in support of approved activities in the NOFO and the approved application. All award funds must be tracked and reported separately.

The grant document number identified on the bottom of Page 1 of the Notice of Award must be known in order to draw down funds.

**Subaccount Title:** 16CE924853

**CDC Staff Contacts**

**Grants Management Specialist:** The GMS is the federal staff member responsible for the day-to-day management of grants and cooperative agreements. The GMS is the primary contact of recipients for business and administrative matters pertinent to grant awards.

**GMS Contact:**
CDC, Office of Grants Services
LaQuanda Lewis, Grants Management Specialist
Centers for Disease Control and Prevention
OD, Environmental, Occupational Health & Injury Prevention Services Branch
2960 Brandywine Rd
Atlanta GA 30341
Email: hrf6@cdc.gov

**Program/Project Officer:** The PO is the federal official responsible for monitoring the programmatic, scientific, and/or technical aspects of grants and cooperative agreements, as well as contributing to the effort of the award under cooperative agreements.

**Programmatic Contact:**
Michele Laland, Project Officer
Centers for Disease Control and Prevention
ONDIEH
Grants Management Officer: The GMO is the federal official responsible for the business and other non-programmatic aspects of grant awards. The GMO is the only official authorized to obligate federal funds and is responsible for signing the NoA, including revisions to the NoA that change the terms and conditions. The GMO serves as the counterpart to the business officer of the recipient organization.

GMO Contact:
Brownie Anderson-Rana, Grants Management Officer
Centers for Disease Control and Prevention
OD, Environmental, Occupational Health & Injury Prevention Services Branch
2960 Brandywine Rd
Atlanta GA 30341
Telephone: 770-488-2771
Email: fli2@cdc.gov
Awardee’s Name: Missouri Department of Health and Senior Services

Grantee #:NU17CE924853-03  Budget Year: FY 2018

FOA #:CE16-1607  Title: Missouri Violent Death Reporting System

Requested Amount: $312,477  Recommended Award Amount: $357,064

Actual Unobligated Funds: $0  Estimated Unobligated Funds: $0

1. Response to Technical Review (check one):

_____ The awardee must submit a response to the weakness(es) and recommendations identified in the technical review within 30 days from receipt date of the notice of award. (Note: The awardee’s response should be reflective only of the weaknesses identified, therefore, resubmission of the entire application is not required.)

__X___ No response to Technical Review is required.

2. Budget and Work-plan (check one):

_____ Revised Budget and Work-plan are needed due to a reduction in proposed budget, which affects the proposed activities/work-plan. (Attach budget mark-up and justification to be used by GMS to request revised budget and work-plan.)

__X___ Revised budget and work-plan are required due to – (provide reason(s)):
The funding increase reflects a budget estimate that is proportionate to statewide data collection efforts which includes collection of school associated violent deaths data.

_____ Revised budget and work-plan are NOT required.

3. Performance (check one):

__X___ The project officer certifies performance is satisfactory to date and continued funding is recommended.

_____ The project officer certifies performance is not fully satisfactory to date and weaknesses and recommendations should be addressed, continued funding should be restricted until attached recommendations are met.

_____ The project officer has determined performance to date has been less than satisfactory and continued funding is denied. The project officer’s determination is based on below factual data as published in the announcement.

Project Officer’s Signature (mandatory): Michele LaLand
Date: May 8, 2018
Awardee’s Name: **Missouri Department of Health and Senior Services**

Award #: NU17CE924853-03       Budget Year: FY 2018

A. **Progress report:**

**Summary of Major Strengths:**

The Missouri Department of Health and Senior Services has continued implementing the Missouri Violent Death Reporting System (MOVDRS) between 09/01/2017 and 02/28/2018. MOVDRS remains fully staffed with a Principal Investigator, Project Manager, Project Director, two Data Abstractors, and a LE Liaison. The MOVDRS team works collaboratively with CDC and actively participates during monthly technical assistance calls and the reverse site visits. Case initiation from death certificates began in January 2017. The increase in violent deaths in Missouri has made the need for timely data more urgent. During Y2 to date, MOVDRS reports that they have initiated 92.8% of cases within 180 days with a median initiation time of 96 days for 2017 cases and 45 days for 2018 cases. As of 4/10/2018, MOVDRS has initiated a total of 1,620 cases for 2017. The PM and abstractor have been working with the Bureau of Vital Records to develop a flat file of NVDRS death certificates that can be uploaded directly into the web-based system, improving their DC data entry timeliness and accuracy. MOVDRS requests DC data twice monthly from BVS. MOVDRS staff are working to ascertain the average delay in filing/release for death certificates with homicide versus suicide listed as cause of death.

MOVDRS has made significant progress in regards to coroner/medical examiner data collection. During Year 1, MOVDRS established CME Data Sharing Agreements (DSAs) with 17 pilot counties. During Year 2 to date, MOVDRS maintained these DSAs and partnered with Enhanced State Opioid Overdose Surveillance (ESOOS) program to send informational packets to all MO CMEs who did not participate in the pilot year. This effort has led to negotiations with CMEs from an additional 21 counties acquired after the pilot year. These counties represent 74.6% of violent deaths that occurred in MO in 2016. Furthermore, MOVDRS has executed contracts to reimburse coroners and medical examiners (CMEs). Also, several coroners have been willing to provide records without a contract in place.

In regards to law enforcement data collection, MOVDRS added a Law Enforcement Liaison to their team to foster working relationships with law enforcement agency (LEA) leadership. The LE Liaison has helped identify key supporters and contacts within agencies, improve focus of MOVDRS outreach efforts, and increase the number of DSAs with LEAs.

The MOVDRS advisory board represents membership from a diverse range of stakeholders and data providers both inside and outside of the Missouri state government.

In regards to data dissemination, MOVDRS team members are working on a preliminary website design using currently available data elements such as those that come from DCs and hospitalization data related to violent deaths to inform the public and generate awareness of the MOVDRS program. They will use in MOVDRS once they have sufficient data available.

MOVDRS staff have worked together to develop standard operating procedures for data entry tracking and cross-checking among completed records. The development and refinement of the tracking databases have increased efficiency in communication and tracking of cases for data...
entry. Monthly reports are automatically generated to provide tracking information for the MOVDRS team, which has helped the PM and PI evaluate data collection progress and ensure CDC data collection timelines are met.

With regards to activities for the remainder of the budget period MOVDRS team members plan to continue outreach efforts across the state with two goals: 1) to bring on new county coroners as data providers; 2) increase awareness of the MOVDRS program among data users and stakeholders/interested parties. Specific outreach activities with firm dates include:

- March, 2018: MOVDRS staff will be attending the annual meeting of the Missouri Crisis Intervention Team (MO CIT) Spring Conference in Columbia, MO as well as the Missouri Sheriff’s Association (MSA) conference at the Lake of the Ozarks, MO.
- Also, the MOVDRS advisory board will have its second meeting to discuss successes, challenges, and new ideas resulting from the statewide expansion in year 2.
- April, 2018: MOVDRS staff will give a presentation about the program and opportunities for participation at the Missouri Coroners’ and Medical Examiners’ Association Spring Training Conference in Columbia, MO.
- May, 2018: Staff will continue working with the Child Fatality Review Board (Department of Social Services) and Injury Prevention Program (DHSS) to discuss their data use expectations and needs.

Specific performance measures for Y2 are laid out in the detailed GY2 work plan. MOVDRS is on track to achieve the two core performance measures: implementing a continually-improving surveillance system that collects high quality and comprehensive violent death information in a timely manner that complies with CDC guidelines, and the dissemination of data to partners and public to support violence prevention. MOVDRS has developed and implemented a standardized workflow to receive and enter violent death demographic and circumstance data in line with CDC guidelines; a flow chart of MOVDRS’ data request/data entry process.

**Summary of Major Weaknesses:**

Engagement from law enforcement agencies (LEAs) has been inconsistent. Some LEAs have expressed concerns regarding confidentiality of their records. MOVDRS has added a Law Enforcement Liaison to the LE team to work with these agencies to identify a solution that will suit the needs of both LEA and MOVDRS regarding record sharing and/or retention.

DHSS requires county governments to enter into a contract before the MOVDRS program can provide incentives for providing data. This process is complex and has impacted a significant number of participating counties, leading to considerable delays in their ability to provide incentive payments to counties and subsequently receiving reports.

**Other Relevant Comments:**

MOVDRS provided numbers for their case initiation within 180 days, MOVDRS should be aware that 2017 data collection requires an initiation of 120 days.

MOVDRS has previously requested technical assistance and advice from CDC to improve outreach efforts and help to improve the program’s approach to on-boarding new coroners and law enforcement agencies as data providers. In particular, MOVDRS anticipates additional...
requests to CDC for assistance/guidance with approaches to enhance data collection from a limited number of agencies that are hesitant to participate (LEAs, coroners). There are rural regions of the state with relatively high numbers of violent deaths. There is high need for informed, effective violence prevention and law enforcement activities in these regions. MOVDRS plans to request technical assistance from CDC and other NVDRS participant states to enhance the effectiveness of program targeting in these areas.

**B. New Budget Period Proposal Objectives:**

**Summary of Major Strengths:**

The grant year 2019 budget period will continue to focus on refining MOVDRS’ data entry workflow to ensure timely, high-quality reporting, and onboarding new counties as data providers. MOVDRS staff also plan to disseminate preliminary violent death data reports to key stakeholders, including St. Louis and Kansas City area violence prevention non-profits, and other departments/divisions within the Missouri state government (e.g., DHSS violence intervention and prevention program, Child Fatality Review Board), and to actively gather feedback. The MOVDRS Program Manager will survey data users regarding the ways in which they actively utilize MOVDRS data, and whether the data dissemination formats MOVDRS employs are meeting their reporting/utilization needs.

By the end of GY2, it is anticipated that the MOVDRS program will have streamlined and refined data entry procedures, including the development of internal case tracking, monthly certificate requests from BVS staff, and random selection of cases for quality assurance checks. GY3 data entry strategies will focus on reviewing factors and improving procedures that could impact the timeliness of data entry. In addition to initiating 100% of 2018 violent deaths in the NVDRS web system, staff will ensure that all January 2018 cases are completed and quality-checked by 4/30/2018.

MOVDRS will continue to streamline their SOPs for reaching out to LE data providers. To achieve this goal, the MOVDRS program has added a Law Enforcement Liaison to their LE data collection team to conduct outreach at conferences and in one-time one-on-one meetings.

MOVDRS staff will continue working with CMEs and LE personnel to identify and overcome barriers affecting their willingness and/or ability to provide the program with case files, reports, or records. The MOVDRS program plans to conduct a survey of data providers during August, 2018, the results of which will be used to improve rapport with data providers and to identify approaches that minimize the burden of submitting records to MOVDRS.

**Summary of Major Weaknesses:**

None noted

**Recommendations:**

1. CDC recommends that MOVDRS continue to focus on engaging non-participating coroners.
2. CDC recommends that MOVDRS continue its focus onboarding new counties/data providers.
3. CDC recommends that MOVDRS continue to focus on engaging non-participating law enforcement agencies. CDC recommends that MOVDRS continues developing
dissemination strategies and reports.

4. CDC recommends that MOVDRS continues to seek assistance and guidance from CDC staff as needed.

Other Relevant Comments: