

**U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES**



Maternal and Child Health Bureau  
Division of Maternal and Child Health Workforce Development

***Strengthening the MCH Public Health Academic Pipeline –  
Competitive Supplement to the Centers of Excellence in MCH Education,  
Science, and Practice Program***

**Funding Opportunity Number:** HRSA-20-088  
**Funding Opportunity Type(s):** Competing Supplement  
**Assistance Listings (CFDA) Number:** 93.110

**NOTICE OF FUNDING OPPORTUNITY**

Fiscal Year 2020

**Application Due Date: June 19, 2020**

*Ensure your SAM.gov and Grants.gov registrations and passwords are current immediately!  
HRSA will not approve deadline extensions for lack of registration.  
Registration in all systems, including SAM.gov and Grants.gov,  
may take up to 1 month to complete.*

**Issuance Date: April 27, 2020**

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Authority: 42 U.S.C. 701(a)(2)

## EXECUTIVE SUMMARY

The Health Resources and Services Administration (HRSA) is accepting applications for fiscal year (FY) 2020 for the Strengthening the Maternal and Child Health (MCH) Public Health Academic Pipeline competitive supplement to HRSA-20-042. The purpose of this competitive supplement is to provide funding to up to five Centers of Excellence in MCH Education, Science, and Practice recipients to support post-graduate training to promote career pathways into MCH academia.

Funding Opportunity Title:	Strengthening MCH Public Health Academic Pipeline – Competitive Supplement to Centers of Excellence in MCH Education, Science, and Practice Program
Funding Opportunity Number:	HRSA-20-088
Due Date for Applications:	June 19, 2020
Anticipated Total Annual Available FY 2020 Funding:	\$850,000
Estimated Number and Type of Award(s):	Up to five competitive supplements
Estimated Award Amount:	Up to \$170,000 per year
Cost Sharing/Match Required:	No
Period of Performance:	June 1, 2020 through May 31, 2025 (5 years to align with the base awards funded under HRSA-20-042)
Eligible Applicants:	Centers of Excellence in MCH Education, Science, and Practice recipients funded under HRSA-20-042 (start date of June 1, 2020).  See <a href="#">Section III.1</a> of this notice of funding opportunity (NOFO) for complete eligibility information.

### **Application Guide**

You (the applicant organization/agency) are responsible for reading and complying with the instructions included in HRSA's *SF-424 R&R Application Guide*, available online at <http://www.hrsa.gov/grants/apply/applicationguide/sf424rrguidev2.pdf>, except where instructed in this NOFO to do otherwise.

## **Technical Assistance**

HRSA has scheduled the following technical assistance:

### *Webinar*

Day and Date: Monday, May 11, 2020

Time: 1–2 p.m. ET

Call-In Number: 1-800-988-9362

Participant Code: 4594032

Weblink: <https://hrsa.connectsolutions.com/hrsa-20-088/>

HRSA will record the webinar and make it available at:

<https://mchb.hrsa.gov/fundingopportunities/default.aspx>.

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# I. Program Funding Opportunity Description

## 1. Purpose

This notice announces the opportunity to apply for funding under the Strengthening the Maternal and Child Health (MCH) Public Health Academic Pipeline competitive supplement to the Centers of Excellence in MCH Education, Science, and Practice Program (HRSA-20-042). The purpose of this program is to support post-graduate training to promote career pathways into MCH academia. Support for postdoctoral fellowships and junior faculty will increase research and teaching capacity for advancing MCH within Schools of Public Health, strengthen academic-practice partnerships, and enhance skills in the formation of MCH policy, including the translation of research to practice and policy.

The objectives of the Strengthening the MCH Public Health Academic Pipeline competitive supplement are to: (1) develop and offer postdoctoral fellowships in MCH; (2) recruit diverse postdoctoral fellows and junior faculty committed to MCH research and practice, including individuals from underrepresented racial and ethnic backgrounds; (3) increase skills in MCH research, policy, and practice; and (4) provide mentorship to postdoctoral fellows and junior faculty in areas of teaching, curriculum development, and publications. Under the Strengthening the MCH Public Health Academic Pipeline competitive supplement, recipients may choose to support MCH postdoctoral fellows **or** to support both postdoctoral fellows **and** junior faculty in MCH.

## 2. Background

This program is authorized by 42 U.S.C. 701(a)(2).

### **Need for the Strengthening the MCH Public Health Academic Pipeline Competitive Supplement**

The need for investments in post-graduate MCH training and support for junior faculty stems from a number of factors. In the past decade, senior MCH faculty members with specialized research, policy, and practice expertise have retired in growing numbers leading to gaps in MCH public health academia. While MCH Training Programs, including the Centers of Excellence in MCH Education, Science, and Practice, continue to produce well-trained doctoral graduates, early career professionals face challenges in pursuing academic career pathways. Research funding has become increasingly competitive<sup>1</sup> and academic institutions face economic challenges that impact junior faculty recruitment and retention. Survey data from the Association of Teachers of Maternal and Child Health show that only 40 percent of doctoral graduates from MCH training programs in Schools of Public Health were employed as faculty members in academic institutions and that only 32 percent were in tenure track positions<sup>2</sup>. While doctoral-level graduates report that they are well qualified to conduct research, there is

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<sup>1</sup> Institute of Medicine (US) Committee on Assuring the Health of the Public in the 21st Century. The Future of the Public's Health in the 21st Century. Washington (DC): National Academies Press (US); 2002. 8, Academia. Available from: <https://www.ncbi.nlm.nih.gov/books/NBK221242/>

<sup>2</sup> Association of Teacher of Maternal and Child Health. Results from Surveys of MCH Doctoral Graduates in Schools of Public Health (2009-2010). Available at: <http://www.atmch.org/sites/atmch.org/files/documents/ATMCHDoctoralGradsSurvey.pdf>

additional preparation needed to build skills to succeed in academia, such as identifying funding support, grant writing<sup>3</sup>, policy, and teaching. Among all doctoral graduate respondents (n=99), only one-third indicated they were adequately trained to teach and just over 30 percent indicated they were adequately trained to seek outside support for research.<sup>2</sup>

A 2017 Association of Schools and Programs of Public Health study also highlights the continued need to recruit and retain public health faculty from underrepresented racial and ethnic groups. While 20-year data show increases in the racial and ethnic diversity of public health graduate students and faculty, Black, Hispanic, and Native American faculty continue to be underrepresented among public health faculty positions, particularly as the academic title increased from assistant- to associate- to full professor.<sup>4</sup> There is a need to support diverse MCH public health faculty as they seek promotion and tenure.

HRSA first supported MCH postdoctoral fellowships in FY 2015. Since program inception, the three funded programs successfully developed infrastructure and curriculum for postdoctoral training in MCH. Additionally, all three programs recruited at least one fellow from an underrepresented background, supporting a pathway to academic leadership for diverse individuals. In the second year of program funding alone, postdoctoral fellows had at least 12 manuscripts under review for peer-reviewed publication.

Within one year of completion of the postdoctoral fellowship, over 66 percent (4/6) of the first cohort of fellows successfully competed for MCH faculty. Fellows have also received prestigious research grants. Fellows and their faculty mentors report that the postdoctoral training strengthened post-fellowship applications, as graduates possess specialized skills, such as teaching, mixed methods research, and writing for publication.

Centers of Excellence in MCH Programs remain well positioned to build the MCH public health academic pipeline, building on existing training infrastructure supported by HRSA. This investment extends the continuum of MCH public health workforce development programs to support post-graduate training and ensure a well-trained cadre of researchers and educators who will in turn train the next generation of the MCH workforce.

## **II. Award Information**

### **1. Type of Application and Award**

Type(s) of applications sought: Competing Supplement

HRSA will provide funding in the form of a grant.

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<sup>3</sup> Grant writing is an unallowable cost that cannot be charged to the HRSA award.

<sup>4</sup> Goodman, M. S., Plepys, C. M., Bather, J. R., Kelliher, R. M., & Healtton, C. G. (2019). Racial/Ethnic Diversity in Academic Public Health: 20-Year Update. *Public Health Reports*, 135(1), 74–81. doi: 10.1177/0033354919887747

## **2. Summary of Funding**

HRSA expects approximately \$850,000 to be available annually to supplement up to five Centers of Excellence in MCH Education, Science, and Practice recipients funded under HRSA-20-042. You may apply for a ceiling amount of up to \$170,000 total cost (includes both direct and indirect, facilities and administrative costs) per year. The period of performance is June 1, 2020 through May 31, 2025. Funding beyond the first year is subject to the availability of appropriated funds for the Strengthening the MCH Public Health Academic Pipeline competitive supplement in subsequent fiscal years, satisfactory recipient performance, and a decision that continued funding is in the best interest of the Federal Government.

All HRSA awards are subject to the Uniform Administrative Requirements, Cost Principles, and Audit Requirements at [45 CFR part 75](#).

### **Limitations on indirect cost rates**

Indirect costs under training awards to organizations other than state, local, or Indian tribal governments will be budgeted and reimbursed at 8 percent of modified total direct costs rather than on the basis of a negotiated rate agreement, and are not subject to upward or downward adjustment. Direct cost amounts for equipment, tuition and fees, and sub-grants and subcontracts in excess of \$25,000 are excluded from the direct cost base for purposes of this calculation.

## **III. Eligibility Information**

### **1. Eligible Applicants**

Only Centers of Excellence in MCH Education, Science, and Practice recipients funded under HRSA-20-042 are eligible to apply for this competitive supplement.

### **2. Cost Sharing/Matching**

Cost sharing/matching is not required for this program.

### **3. Other**

HRSA will consider any application that exceeds the ceiling amount non-responsive and will not consider it for funding under this notice.

HRSA will consider any application that fails to satisfy the deadline requirements referenced in [Section IV.4](#) non-responsive and will not consider it for funding under this notice.

NOTE: Multiple applications from an organization are not allowable.

HRSA will only accept your **last** validated electronic submission, under the correct funding opportunity number, prior to the Grants.gov application due date as the final and only acceptable application.

A trainee/fellow receiving support from grant funds must be a citizen of the United States or a foreign national having in his/her possession a visa permitting permanent residence in the United States, or a non-citizen national. Please see the **Appendix** for additional trainee/fellow guidelines.

## IV. Application and Submission Information

### 1. Address to Request Application Package

HRSA **requires** you to apply electronically. HRSA encourages you to apply through [Grants.gov](https://www.grants.gov) using the SF-424 Research and Related (R&R) workspace application package associated with this notice of funding opportunity (NOFO) following the directions provided at <http://www.grants.gov/applicants/apply-for-grants.html>.

The NOFO is also known as “Instructions” on Grants.gov. You must select “Subscribe” and provide your email address for each NOFO you are reviewing or preparing in the workspace application package in order to receive notifications including modifications, clarifications, and/or republications of the NOFO on Grants.gov. You will also receive notifications of documents placed in the RELATED DOCUMENTS tab on Grants.gov that may affect the NOFO and your application. *You are ultimately responsible for reviewing the [For Applicants](#) page for all information relevant to this NOFO.*

### 2. Content and Form of Application Submission

Section 4 of HRSA’s [SF-424 R&R Application Guide](#) provides instructions for the budget, budget justification, staffing plan and personnel requirements, assurances, certifications, and abstract. You must submit the information outlined in the *R&R Application Guide* in addition to the program-specific information below. You are responsible for reading and complying with the instructions included in HRSA’s [SF-424 R&R Application Guide](#) except where instructed in the NOFO to do otherwise. You must submit the application in the English language and in the terms of U.S. dollars (45 CFR § 75.111(a)).

See Section 8.5 of the [SF-424 R&R Application Guide](#) for the Application Completeness Checklist.

#### **Application Page Limit**

The total size of all uploaded files included in the page limit may not exceed the equivalent of **25 pages** when printed by HRSA. The page limit includes the abstract, project and budget narratives, attachments, and letters of commitment and support required in the [SF-424 R&R Application Guide](#) and this NOFO. Standard OMB-approved forms that are included in the workspace application package do not count in the page limit. Please note: If you use an OMB-approved form that is not included in the workspace application package for HRSA-20-088, it may count against the page



limit. Therefore, we strongly recommend you only use Grants.gov workspace forms associated with this NOFO to avoid exceeding the page limit. Indirect Cost Rate Agreement and proof of non-profit status (if applicable) do not count in the page limit. **It is therefore important to take appropriate measures to ensure your application does not exceed the specified page limit.**

**Applications must be complete, within the specified page limit, and validated by Grants.gov under the correct funding opportunity number prior to the deadline.**

### **Debarment, Suspension, Ineligibility, and Voluntary Exclusion Certification**

- 1) You certify on behalf of the applicant organization, by submission of your proposal, that neither you nor your principals are presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from participation in this transaction by any federal department or agency.
- 2) Failure to make required disclosures can result in any of the remedies described in 45 CFR § 75.371, including suspension or debarment. (See also 2 CFR parts 180 and 376, and 31 U.S.C. § 3321).
- 3) Where you are unable to attest to the statements in this certification, an explanation shall be included in **Attachment #3: Other Relevant Documents**.

See Section 4.1 viii of HRSA's [SF-424 R&R Application Guide](#) for additional information on all certifications.

### **Program-Specific Instructions**

In addition to application requirements and instructions in Section 4 of HRSA's [SF-424 R&R Application Guide](#) (including the budget, budget narrative, staffing plan and personnel requirements, assurances, certifications, and abstract), include the following:

#### ***i. Project Abstract***

See Section 4.1.ix of HRSA's [SF-424 R&R Application Guide](#)

Abstract content:

**PROBLEM:** Briefly state the principal needs and problems which are addressed by the project.

**GOAL(S) AND OBJECTIVES:** Identify the major goal(s) and objectives for the period of performance.

**METHODOLOGY:** Describe the programs and activities used to attain the objectives and comment on innovation, cost, and other characteristics of the methodology.

**COORDINATION:** Describe the coordination planned with appropriate national, regional, state, and/or local health agencies and/or organizations in the area(s) served by the project.

**EVALUATION:** Briefly describe the evaluation methods used to assess program outcomes and the effectiveness and efficiency of the project in attaining goals and objectives.

**ANNOTATION:** Provide a three- to five-sentence description of your project that identifies the project's purpose, the needs and problems, which are

addressed, the goals and objectives of the project, the activities, which will be used to attain the goals and the materials which will be developed.

## **ii. Project Narrative**

This section provides a comprehensive framework and description of all aspects of the proposed project. It should be succinct, self-explanatory, consistent with forms and attachments, and well-organized so that reviewers can understand the proposed project.

Successful applications will contain the information below. Please use the following section headers for the narrative:

- **INTRODUCTION** -- Corresponds to Section V's Review Criterion [#1: Need](#)  
Briefly describe the purpose of the proposed project. You must clearly state whether funds will be used to support:
  - MCH postdoctoral fellows OR
  - MCH postdoctoral fellow(s) and junior faculty
  
- **NEEDS ASSESSMENT** -- Corresponds to Section V's Review Criterion [#1: Need](#)  
Briefly describe the background of the proposal, critically evaluating the national, regional, and local need/demand for strengthening the MCH public health academic pipeline, including postdoctoral training in MCH, and specifically identify MCH public health workforce development need(s) to be addressed and gaps which the project is intended to fill.
  
- **METHODOLOGY** -- Corresponds to Section V's Review Criterion [#2: Response](#)  
Propose methods that you will use to address the stated needs and meet each of the program requirements and expectations in this NOFO.

### **1) Goals and Objectives**

State the overall goal(s) of the project and list the specific objectives that respond to the stated need/purpose for this project. The objectives should be specific, measurable, achievable, relevant, and time-oriented (SMART) with specific outcomes for each project year which are attainable in the stated time frame.

### **2) Structure and Content of Training**

Describe the curricula and opportunities for development that will be provided during postdoctoral fellowships or through support for junior MCH faculty, including how the fellowship and/or support for junior faculty will emphasize skill development in teaching, curriculum development, and leadership.

Postdoctoral fellowships are expected to be at least 12 months in length and are not to exceed 24 months in length. It is expected you will propose postdoctoral fellowships with content focused on one of the following areas:

- MCH research to allow the fellows to hone their skills in quantitative and/or qualitative research, begin research projects in highly needed areas of MCH, and gain specialized skills in the translation of research to practice; **OR**

- MCH policy and practice. This may include the study of public policy, training in policy analysis, and advanced training on the effective use of scientific knowledge in the formation of policy. A fellowship on MCH policy and practice may also include placement in an active policy development or MCH practice setting to enhance skills in the use of scientific knowledge for policy formation and program development, and to enhance academic-practice partnerships in MCH.

HRSA expects that support for junior faculty will be prioritized for MCH faculty members with less than 4 years of cumulative faculty experience and with career goals consistent with the purpose of this program.

### **3) Competencies**

Identify the competencies expected of postdoctoral fellows and junior faculty (as applicable) that receive financial support through this program. You are expected to indicate how the competencies align with the MCH Leadership Competencies (<https://mchb.hrsa.gov/training/leadership-00.asp>). You are encouraged to demonstrate alignment with the National Postdoctoral Association's six core competencies (<https://www.nationalpostdoc.org/page/CoreCompetencies?>).

### **4) Recruitment**

Describe a recruitment plan that supports (a) at least two funded postdoctoral fellows per year or (b) at least one postdoctoral fellow **and** at least one junior faculty member per year.

Describe a plan for recruiting a diverse group of doctoral graduates committed to career trajectories in MCH research, policy, and/or practice and who have demonstrated rigor in their doctoral training. Highlight special efforts directed toward recruitment of qualified fellows and junior faculty (as applicable) that are underrepresented in MCH public health academia, including individuals from underrepresented racial and ethnic groups.

### **5) Mentorship**

Describe how each postdoctoral fellow or junior faculty member (as applicable) will be matched with an appropriate mentor(s). Mentorship relationships should provide assistance in professional development, including but not limited to:

- Guidance on developing research proposals and scientific publications;
- Assistance in identifying potential funding sources and assessing suitability;
- Networking and additional training opportunities; and
- Identification of additional, interdisciplinary mentors and collaborators, as needed.

### **6) Peer-Reviewed Publications**

Consistent with expectations of most academic departments in public health, HRSA anticipates that postdoctoral fellows and junior faculty (as applicable) will publish a minimum of two peer-reviewed articles each year in which support is received.

Propose a plan to enhance fellows' skills in writing for peer-reviewed publication.

## 7) Collaboration with Other MCH Postdoctoral Fellows and Junior Faculty

Interchange with other recipients of Strengthening the MCH Public Health Academic Pipeline is expected. Propose a plan to support networking and collaboration among supported postdoctoral fellows and junior faculty (as applicable). You are also encouraged to provide supported fellows and junior faculty (as applicable) with opportunities for interchange with junior and senior MCH faculty at [Centers of Excellence in MCH Program](#) recipients.

The project director of the Strengthening the MCH Public Health Academic Pipeline is expected to attend the annual Centers of Excellence and Catalyst Programs grantee recipient meeting. Support for postdoctoral fellows or junior faculty (as applicable) to attend the annual grantee meeting is highly encouraged. The project director is also expected to participate in periodic conference calls with other recipients of the Strengthening the MCH Public Health Academic Pipeline Program to share lessons learned and discuss and/or develop strategies for measuring impact across programs.

- **WORK PLAN** -- Corresponds to Section V's Review Criteria [#2: Response](#) and [#4: Impact](#)

Describe the activities or steps that you will use to achieve each of the objectives proposed during the entire period of performance in the Methodology section. Use a time line that includes each activity and identifies responsible staff. As appropriate, identify meaningful support and collaboration with key stakeholders in planning, designing, and implementing all activities, including developing the application. The work plan should be included as **Attachment 1**.

### **Logic Models**

Submit a logic model as part of **Attachment 1** for designing and managing the project. A logic model is a one-page diagram that presents the conceptual framework for a proposed project and explains the links among program elements. While there are many versions of logic models, for the purposes of this notice, the logic model should summarize the connections between the:

- Goals of the project (e.g., objectives, reasons for proposing the intervention, if applicable);
- Assumptions (e.g., beliefs about how the program will work and support resources. Base assumptions on research, best practices, and experience.);
- Inputs (e.g., organizational profile, collaborative partners, key personnel, budget, other resources);
- Target population (e.g., the individuals to be served);
- Activities (e.g., approach, listing key intervention, if applicable);
- Outputs (i.e., the direct products of program activities); and
- Outcomes (i.e., the results of a program, typically describing a change in people or systems).

Although there are similarities, a logic model is not a work plan. A work plan is an "action" guide with a time line used during program implementation; the work plan provides the "how to" steps. You can find additional information on developing

logic models at the following website:

<http://www.acf.hhs.gov/sites/default/files/fysb/prep-logic-model-ts.pdf>.

- **RESOLUTION OF CHALLENGES** -- Corresponds to Section V's Review Criterion [#2 Response](#)  
Discuss challenges that you are likely to encounter in designing and implementing the activities described in the work plan, and approaches that you will use to resolve such challenges.
  
- **EVALUATION AND TECHNICAL SUPPORT CAPACITY** -- Corresponds to Section V's Review [Criteria #3: Evaluative Measures](#) and [#5: Resources/Capabilities](#)  
Describe a plan for program evaluation that will contribute to continuous quality improvement. The program evaluation should monitor ongoing processes and the progress towards the goals and objectives of the project. Include descriptions of the inputs (e.g., organizational profile, collaborative partners, key personnel, budget, and other resources), key processes, and expected outcomes of the funded activities.

Propose a plan for assessing and measuring the progress of fellows throughout their fellowship and junior faculty (as applicable). This may include attainment of Individual Development Plan (IDP) or leadership goals, development and submission of research proposals and scientific publications, mentorship and teaching of masters and/or doctoral-level MCH trainees, and involvement in MCH professional associations and journal reviews.

Propose a plan for tracking postdoctoral fellows for up to 10 years after completion of their fellowship and reporting on mid- and long-term outcomes, including, but not limited to:

- Growth of research portfolio
- Publications
- Successful history of student mentoring
- Awards for accomplishments in teaching, research, or practice
- Translation of research findings into programs and policies
- Academic promotion and tenure

You will be responsible for reporting short-, mid-, and long-term outcomes (as applicable) to HRSA annually as part of the non-competing progress report. Please see [Section VI.3](#) for more details on reporting requirements.

As appropriate, describe the data collection strategy to collect, analyze, and track data to measure process and impact/outcomes, and explain how the data will be used to inform ongoing program improvements. Describe any potential obstacles for implementing the program performance evaluation and your plan to address those obstacles.

## **Dissemination and Sustainability**

Document a plan for dissemination of project results and the extent to which project results may be national in scope, and the degree to which the project activities are shared with other stakeholders, including other Centers of Excellence and Catalyst Programs, to strengthen the MCH network.

Demonstrate compliance with Section 508 requirements (if dissemination plans include designing a publicly available website or online materials).

Propose a plan for project sustainability after the period of federal funding ends. HRSA expects recipients to sustain key elements of their projects, including infrastructure supported through this competitive supplement to develop postdoctoral fellowships. Demonstrate how sustaining key elements of your project will contribute to preparing the next generation of MCH public health leaders and extend the impact of federal funding

- **ORGANIZATIONAL INFORMATION -- Corresponds to Section V's Review Criterion #5: Resources/Capabilities**

Provide information on your organization's ability to develop and offer postdoctoral fellowships and support the development of junior MCH faculty.

Name the project director of the Strengthening the MCH Public Health Academic Pipeline competitive supplement and outline their qualifications to lead the program. The project director is expected to commit a minimum of **5 percent time/effort**, either grant-supported or in combination with in-kind support, to the Strengthening the MCH Academic Pipeline competitive supplement. If you are proposing the same project director for both the Center of Excellence in MCH and Strengthening the MCH Public Health Academic Pipeline competitive supplement, indicate their ability to meet the time/effort requirements of both positions. List the names and qualifications of other relevant faculty who will be engaged in postdoctoral fellowship activities and in developing junior faculty (if applicable). Include biographical sketches (biosketches) of key faculty and other personnel as appropriate. You are encouraged to limit biographical sketches to one page in length and should highlight relevant experience in MCH research and/or policy and practice, teaching, scientific publications and other expertise relevant to your proposed project.

Include a staffing plan and position description(s) for key faculty as **Attachment 2**.

### **iii. Budget**

The directions offered in the [SF-424 R&R Application Guide](#) may differ from those offered by Grants.gov. Follow the instructions in Section 4.1.iv of HRSA's [SF-424 R&R Application Guide](#) and the additional budget instructions provided below. A budget that follows the *R&R Application Guide* will ensure that, if HRSA selects the application for funding, you will have a well-organized plan, and by carefully following the approved plan, may avoid audit issues during the implementation phase.

**Reminder:** The Total Project or Program Costs are the total allowable costs (inclusive of direct **and** indirect costs) you incur to carry out a HRSA-supported

project or activity. Total project or program costs include costs charged to the award and costs borne by you to satisfy a matching or cost-sharing requirement, as applicable.

The Further Consolidated Appropriations Act, 2020 (P.L. 116-94), Division A, § 202 states, “None of the funds appropriated in this title shall be used to pay the salary of an individual, through a grant or other extramural mechanism, at a rate in excess of Executive Level II.” See Section 4.1.iv Budget – Salary Limitation of HRSA’s [SF-424 R&R Application Guide](#) for additional information. Note that these or other salary limitations may apply in the following fiscal years, as required by law.

Indirect costs under training awards to organizations other than state, local or Indian tribal governments will be budgeted and reimbursed at 8 percent of modified total direct costs rather than on the basis of a negotiated rate agreement, and are not subject to upward or downward adjustment. Direct cost amounts for equipment, tuition and fees, and sub-grants and subcontracts in excess of \$25,000 are excluded from the direct cost base for purposes of this calculation.

**iv. Budget Justification Narrative**

See Section 4.1.v. of HRSA’s [SF-424 R&R Application Guide](#).

In addition, the Strengthening the MCH Academic Pipeline competitive supplement requires the following:

All budget narratives must clearly outline annual stipend support for at least two postdoctoral fellows or one postdoctoral fellow and salary support for one junior MCH faculty member. Please refer to the **Appendix** for guidelines pertaining to grant support for fellows.

This justification must provide explicit qualitative and quantitative documentation of required resources, productivity, and expected outcomes.

<b>NARRATIVE GUIDANCE</b>	
To ensure that you fully address the review criteria, this table provides a crosswalk between the narrative language and where each section falls within the review criteria. Any attachments referenced in a narrative section may be considered during the objective review.	
<b><u>Narrative Section</u></b>	<b><u>*Review Criteria</u></b>
Introduction	(1) Need
Needs Assessment	(1) Need
Methodology	(2) Response
Work Plan	(2) Response and (4) Impact
Resolution of Challenges	(2) Response

Evaluation and Technical Support Capacity	(3) Evaluative Measures and (5) Resources/Capabilities
Organizational Information	(5) Resources/Capabilities
Budget and Budget Justification Narrative	(6) Support Requested

**v. Program-Specific Forms**

Program-specific forms are not required for application.

**vi. Attachments**

Provide the following items in the order specified below to complete the content of the application. **Unless otherwise noted, attachments count toward the application page limit.** Indirect cost rate agreements and proof of non-profit status (if applicable) will not count toward the page limit. Clearly label **each attachment**.

*Attachment 1: Work Plan and Logic Model*

Attach the work plan for the project that includes all information detailed in [Section IV.2.ii. Project Narrative](#). Also include the required logic model in this attachment.

*Attachment 2: Staffing Plan and Job Descriptions for Key Personnel (see Section 4.1.vi of HRSA’s [SF-424 R&R Application Guide](#))*

Keep each job description to no more than one page in length, as much as is possible. Include the role, responsibilities, and qualifications of proposed project staff. Also, please include a description of your organization’s timekeeping process to ensure that you will comply with the federal standards related to documenting personnel costs.

*Attachments 3–15: Other Relevant Documents*

Include here any other documents that are relevant to the application, including letters of support. Letters of support must be dated and specifically indicate a commitment to the project/program (in-kind services, dollars, staff, space, equipment, etc.).

**3. Dun and Bradstreet Data Universal Numbering System (DUNS) Number Transition to the Unique Entity Identifier (UEI) and System for Award Management (SAM)**

You must obtain a valid DUNS number, also known as the Unique Entity Identifier (UEI), and provide that number in the application. Beginning in December 2020, the \*DUNS number will be replaced by the UEI, a “new, non-proprietary identifier” requested in, and assigned by, the System for Award Management (SAM.gov). For more details, visit the following: [Planned UEI Updates in Grant Application Forms](#) and [General Service Administration’s UEI Update](#) page.

You must also register with SAM and continue to maintain active SAM registration with current information at all times during which you have an active federal award or an



application or plan under consideration by an agency (unless the applicant is an individual or federal agency that is exempted from those requirements under 2 CFR § 25.110(b) or (c), or has an exception approved by the agency under 2 CFR § 25.110(d)).

If you are chosen as a recipient, HRSA would not make an award until you have complied with all applicable DUNS (or UEI) and SAM requirements and, if you have not fully complied with the requirements by the time HRSA is ready to make an award, you may be deemed not qualified to receive an award and use that determination as the basis for making an award to another applicant.

If you have already completed Grants.gov registration for HRSA or another federal agency, confirm that the registration is still active and that the Authorized Organization Representative (AOR) has been approved.

\*Currently, the Grants.gov registration process requires information in three separate systems:

- Dun and Bradstreet (<http://www.dnb.com/duns-number.html>)
- System for Award Management (SAM) (<https://www.sam.gov>)
- Grants.gov (<http://www.grants.gov/>)

For further details, see Section 3.1 of HRSA's [SF-424 R&R Application Guide](#).

**SAM.GOV ALERT:** For your SAM.gov registration, you must submit a [notarized letter](#) appointing the authorized Entity Administrator. The review process changed for the Federal Assistance community on June 11, 2018.

In accordance with the Federal Government's efforts to reduce reporting burden for recipients of federal financial assistance, the general certification and representation requirements contained in the Standard Form 424B (SF-424B) – Assurances – Non-Construction Programs, and the Standard Form 424D (SF-424D) – Assurances – Construction Programs, have been standardized federal-wide. Effective January 1, 2020, the updated common certification and representation requirements will be stored and maintained within SAM. Organizations or individuals applying for federal financial assistance as of January 1, 2020, must validate the federally required common certifications and representations annually through SAM located at [SAM.gov](http://SAM.gov).

**If you fail to allow ample time to complete registration with SAM or Grants.gov, you will not be eligible for a deadline extension or waiver of the electronic submission requirement.**

#### **4. Submission Dates and Times**

##### **Application Due Date**

The due date for applications under this NOFO is *June 19, 2020 at 11:59 p.m. ET*. HRSA suggests submitting applications to Grants.gov at least **3 calendar days before the deadline** to allow for any unforeseen circumstances. See Section 8.2.5 – Summary of emails from Grants.gov of HRSA's [SF-424 R&R Application Guide](#) for additional information.

## 5. Intergovernmental Review

The Strengthening the MCH Public Health Academic Pipeline competitive supplement to Centers of Excellence in MCH Education, Science, and Practice is not a program subject to the provisions of Executive Order 12372, as implemented by 45 CFR part 100.

See Section 4.1 ii of HRSA's [SF-424 R&R Application Guide](#) for additional information.

## 6. Funding Restrictions

You may request funding for a period of performance of up to 5 years, at no more than \$170,000 per year (inclusive of direct **and** indirect costs). Awards to support projects beyond the first budget year will be contingent upon Congressional appropriation, satisfactory progress in meeting the project's objectives, and a determination that continued funding would be in the best interest of the Federal Government.

The General Provisions in Division A of the Further Consolidated Appropriations Act, 2020 (P.L. 116-94) apply to this program. Please see Section 4.1 of HRSA's [SF-424 R&R Application Guide](#) for additional information. Note that these or other restrictions will apply in the following fiscal years, as required by law.

See Restrictions and Non-Allowable Costs in **Appendix: Applicable Standards for Using Grant Funds to Support Trainees/Fellows**.

You are required to have the necessary policies, procedures, and financial controls in place to ensure that your organization complies with all legal requirements and restrictions applicable to the receipt of federal funding including statutory restrictions on use of funds for lobbying, executive salaries, gun control, abortion, etc. Like those for all other applicable grants requirements, the effectiveness of these policies, procedures, and controls is subject to audit.

All program income generated as a result of awarded funds must be used for approved project-related activities. The program income alternative applied to the award(s) under the program will be the addition/additive alternative. You can find post-award requirements for program income at [45 CFR § 75.307](#).

## V. Application Review Information

### 1. Review Criteria

HRSA has procedures for assessing the technical merit of applications to provide for an objective review and to assist you in understanding the standards against which your application will be reviewed. HRSA has critical indicators for each review criterion to assist you in presenting pertinent information related to that criterion and to provide the reviewer with a standard for evaluation.

These criteria are the basis upon which the reviewers will evaluate and score the merit of the application. The entire proposal will be considered during objective review.

Review criteria are used to review and rank applications. The Strengthening the MCH Academic Pipeline competitive supplement has six review criteria. See the review criteria outlined below with specific detail and scoring points.

*Criterion 1: NEED (10 points) – Corresponds to Section IV’s [Introduction](#) and [Needs Assessment](#)*

The extent to which the application effectively demonstrates the problem and associated contributing factors to the problem, to include:

- The quality and reasonableness of the proposed project purpose.
- Evaluation of the national, regional, and local need/demand to strengthen the MCH academic pipeline.
- Sufficient identification of the problem(s) to be addressed and appropriate gaps which the proposed project is intended to fill.
- Sufficient demonstration of how the proposed project will address critical unmet workforce development needs, including postdoctoral training in MCH.

*Criterion 2: RESPONSE (30 points) – Corresponds to Section IV’s [Methodology](#), [Work Plan](#), and [Resolution of Challenges](#)*

The extent to which the proposed project responds to the “Purpose” included in the program description. The strength of the proposed goals and objectives and their relationship to the identified project. The extent to which the activities (scientific or other) described in the application are capable of addressing the problem and attaining the project objectives.

*Sub-Criteria Corresponding to [Methodology](#) (20 points)*

- The quality and reasonableness of the overall goals and specific objectives for the proposed project.
- Sufficient description of the curricula/experiences that will be provided to postdoctoral fellows and junior faculty (as applicable).
- Quality of fellowship curriculum with content focused on MCH research or MCH policy and practice.
- Sufficient description of the competencies expected of postdoctoral fellows and junior faculty (as applicable) that receive financial support through the proposed program.
- Quality and feasibility of a recruitment plan, including plans for recruiting a diverse group of doctoral graduates committed to career trajectories in MCH.
- Sufficient description of how each postdoctoral fellow or junior faculty (as applicable) will be matched with an appropriate mentor(s).
- Quality of information about professional development provided to fellows and junior faculty (as applicable) through mentorship relationships.
- Sufficient description of expectations for postdoctoral fellows and junior faculty (as applicable) to publish two-reviewed articles each year in which support is received.
- Quality of a plan to enhance fellows’ and junior faculty skills in writing for peer-reviewed publication.

- Quality of plans to support networking and collaboration among supported postdoctoral fellows and junior faculty (as applicable).
- The quality of plans for participation in periodic conference calls with other MCH Postdoctoral Fellowship Program recipients and for participation in the annual Centers of Excellence/Catalyst Programs grantee meeting.

*Sub-Criteria Corresponding to [Work Plan](#) (7 points)*

- The quality and feasibility of a time-framed work plan (**Attachment 1**) that effectively describes the activities or steps that will be used to achieve each of the objectives proposed in the methodology section and which will demonstrate meaningful collaboration with key stakeholders.
- The quality of a logic model (**Attachment 1**) that effectively demonstrates the relationship among resources, activities, outputs, target population, short- and long-term outcomes, and utility for evaluation.

*Sub-Criteria Corresponding to [Resolution of Challenges](#) (3 points)*

- Sufficient identification of challenges likely to be encountered and the reasonableness of approaches to resolve identified challenges.

*Criterion 3: EVALUATIVE MEASURES (20 points) – Corresponds to Section IV's [Evaluation and Technical Support Capacity](#)*

The strength and effectiveness of the method proposed to monitor and evaluate the project results. Evidence that the evaluative measures will be able to assess: 1) to what extent the program objectives have been met, and 2) to what extent these can be attributed to the project.

- The effectiveness of an evaluation plan in addressing how the major goals and objectives of the project will be achieved.
- The quality of a plan for assessing and measuring the progress of fellows throughout their fellowship.
- The reasonableness of a plan for tracking postdoctoral fellows after completion of their fellowship to report on mid- and long-term outcomes.
- The quality and reasonableness of plans for the data to be collected, methods for collection, and the manner in which data will be analyzed and reported, including attention to data quality assurance.
- Assigned project personnel have sufficient training and experience for refining, collecting, and analyzing data for evaluation.

*Criterion 4: IMPACT (15 points) – Corresponds to Section IV's [Work Plan](#)*

The extent to which the proposed project has a public health impact and the project will be effective, if funded.

- A detailed and targeted plan to disseminate the project's methodologies and outcomes, including the extent to which the project results and products are national in scope.
- Sufficient demonstration of how program activities will be shared with other MCH stakeholders.
- Sufficient demonstration of compliance with Section 508 requirements (if designing a publicly available website or online materials).

- The strength and reasonableness of a plan for project sustainability after the federal funding ends, including how sustaining key elements of your project will contribute to preparing the next generation of MCH public health leaders.

*Criterion 5: RESOURCES/CAPABILITIES (15 points) – Corresponds to Section IV’s [Evaluation and Technical Support Capacity](#), and [Organizational Information](#)*

The extent to which project personnel are qualified by training and/or experience to implement and carry out the project. The capabilities of the applicant organization and the quality and availability of facilities and personnel to fulfill the needs and requirements of the proposed project.

- Key personnel, including the project director, have adequate time devoted to the project to achieve key project objectives.
- The quality of biographical sketches for the project director and key personnel that highlight relevant experience in MCH research and/or practice and policy, teaching, scientific publications, and other expertise relevant to your proposed project.
- The quality and reasonableness of a staffing plan and position description(s) for key personnel (**Attachment 2**).

*Criterion 6: SUPPORT REQUESTED (10 points) – Corresponds to Section IV’s [Budget](#) and [Budget Narrative](#)*

The reasonableness of the proposed budget for each year of the period of performance in relation to the objectives, the complexity of the research activities, and the anticipated results.

- The extent to which costs, as outlined in the budget and required resources sections, are reasonable given the scope of work.
- The proposed budget and budget justification outline annual support for at least two postdoctoral fellows or one postdoctoral fellow and salary support for one junior MCH faculty member.

## **2. Review and Selection Process**

The objective review process provides an objective evaluation to the individuals responsible for making award decisions. The highest ranked applications receive consideration for award within available funding ranges. HRSA may also consider assessment of risk and the other pre-award activities described in Section 3 below. See Section 5.3 of HRSA’s [SF-424 R&R Application Guide](#) for more details.

## **3. Assessment of Risk**

HRSA may elect not to fund applicants with management or financial instability that directly relates to the organization’s ability to implement statutory, regulatory or other requirements ([45 CFR § 75.205](#)).

HRSA reviews applications receiving a favorable objective review for other considerations that include past performance, as applicable, cost analysis of the project/program budget, assessment of your management systems, ensuring continued applicant eligibility, and compliance with any public policy requirements, including those requiring just-in-time submissions. HRSA may ask you to submit additional

programmatic or administrative information (such as an updated budget or “other support” information) or to undertake certain activities (such as negotiation of an indirect cost rate) in anticipation of an award. However, even at this point in the process, such requests do not guarantee that HRSA will make an award. Following review of all applicable information, HRSA’s approving and business management officials will determine whether HRSA can make an award, if special conditions are required, and what level of funding is appropriate.

Award decisions are discretionary and are not subject to appeal to any HRSA or HHS official or board.

HRSA is required to review and consider any information about your organization that is in the [Federal Awardee Performance and Integrity Information System \(FAPIIS\)](#). You may review and comment on any information about your organization that a federal awarding agency previously entered. HRSA will consider your comments, in addition to other information in [FAPIIS](#) in making a judgment about your organization’s integrity, business ethics, and record of performance under federal awards when completing the review of risk posed as described in 45 CFR § 75.205 HHS Awarding Agency Review of Risk Posed by Applicants.

HRSA will report to FAPIIS a determination that an applicant is not qualified ([45 CFR § 75.212](#)).

## **VI. Award Administration Information**

### **1. Award Notices**

HRSA will issue the Notice of Award (NOA) on or before September 1, 2020. See Section 5.4 of HRSA’s [SF-424 R&R Application Guide](#) for additional information.

### **2. Administrative and National Policy Requirements**

See Section 2.1 of HRSA’s [SF-424 R&R Application Guide](#).

#### **Requirements of Subawards**

The terms and conditions in the NOA apply directly to the recipient of HRSA funds. The recipient is accountable for the performance of the project, program, or activity; the appropriate expenditure of funds under the award by all parties; and all other obligations of the recipient, as cited in the NOA. In general, the requirements that apply to the recipient, including public policy requirements, also apply to subrecipients under awards, and it is the recipient’s responsibility to monitor the compliance of all funded subrecipients. See [45 CFR § 75.101 Applicability](#) for more details.

#### **Data Rights**

All publications developed or purchased with funds awarded under this notice must be consistent with the requirements of the program. Pursuant to 45 CFR § 75.322(b), the recipient owns the copyright for materials that it develops under an award issued pursuant to this notice, and HHS reserves a royalty-free, nonexclusive, and

irrevocable right to reproduce, publish, or otherwise use those materials for federal purposes, and to authorize others to do so. In addition, pursuant to 45 CFR § 75.322(d), the Federal Government has the right to obtain, reproduce, publish, or otherwise use data produced under this award and has the right to authorize others to receive, reproduce, publish, or otherwise use such data for federal purposes, e.g., to make it available in government-sponsored databases for use by others. If applicable, the specific scope of HRSA rights with respect to a particular grant-supported effort will be addressed in the NOA. Data and copyright-protected works developed by a subrecipient also are subject to the Federal Government's copyright license and data rights.

### **Human Subjects Protection**

Federal regulations ([45 CFR part 46](#)) require that applications and proposals involving human subjects must be evaluated with reference to the risks to the subjects, the adequacy of protection against these risks, the potential benefits of the research to the subjects and others, and the importance of the knowledge gained or to be gained. If you anticipate research involving human subjects, you must meet the requirements of the HHS regulations to protect human subjects from research risks.

### **3. Reporting**

Award recipients must comply with Section 6 of HRSA's [SF-424 R&R Application Guide](#) and the following reporting and review activities:

- 1) **DGIS Performance Reports.** The recipient must submit information related to this competitive supplement as part of their Centers of Excellence in MCH Education, Science, and Practice DGIS performance report. Available through the Electronic Handbooks (EHBs), the Discretionary Grant Information System (DGIS) is where recipients will report annual performance data to HRSA. Award recipients are required to submit a DGIS Performance Report **annually**, by the specified deadline. Please refer to HRSA-20-042 for additional details on required DGIS performance reports.
- 2) **Progress Report(s).** The recipient must submit information related to this competitive supplement as part of their Centers of Excellence in MCH Education, Science, and Practice progress report narrative. Please refer to HRSA-20-042 for additional details on the Non-Competing Continuation Renewal Submission.
- 3) **Integrity and Performance Reporting.** The NOA will contain a provision for integrity and performance reporting in [FAPIS](#), as required in [45 CFR part 75 Appendix XII](#).

## VII. Agency Contacts

You may request additional information and/or technical assistance regarding business, administrative, or fiscal issues related to this NOFO by contacting:

Djuana Gibson  
Grants Management Specialist  
Division of Grants Management Operations, OFAM  
Health Resources and Services Administration  
5600 Fishers Lane, Mailstop 10SWH03  
Rockville, MD 20857  
Telephone: (301) 443-3243  
Email: [DGibson@hrsa.gov](mailto:DGibson@hrsa.gov)

You may request additional information regarding the overall program issues and/or technical assistance related to this NOFO by contacting:

Michelle Tissue, MPH  
Division of MCH Workforce Development  
Maternal and Child Health Bureau  
Health Resources and Services Administration  
5600 Fishers Lane, Room 18W51  
Rockville, MD 20857  
Telephone: (301) 443-6853  
Email: [MTissue@hrsa.gov](mailto:MTissue@hrsa.gov)

You may need assistance when working online to submit your application forms electronically. Always obtain a case number when calling for support. For assistance with submitting the application in Grants.gov, contact Grants.gov 24 hours a day, 7 days a week, excluding federal holidays at:

Grants.gov Contact Center  
Telephone: 1-800-518-4726 (International Callers, please dial 606-545-5035)  
Email: [support@grants.gov](mailto:support@grants.gov)  
Self-Service Knowledge Base: <https://grants-portal.psc.gov/Welcome.aspx?pt=Grants>

Successful applicants/recipients may need assistance when working online to submit information and reports electronically through HRSA's [EHBs](#). For assistance with submitting information in HRSA's EHBs, contact the HRSA Contact Center, Monday–Friday, 8 a.m. to 8 p.m. ET, excluding federal holidays at:

HRSA Contact Center  
Telephone: (877) 464-4772  
TTY: (877) 897-9910  
Web: <http://www.hrsa.gov/about/contact/ehbhelp.aspx>



## **VIII. Other Information**

### **Technical Assistance**

HRSA has scheduled following technical assistance:

#### *Webinar*

Day and Date: Monday, May 11, 2020

Time: 1–2 p.m. ET

Call-In Number: 1-800-988-9362

Participant Code: 4594032

Weblink: <https://hrsa.connectsolutions.com/hrsa-20-088/>

HRSA will record the webinar and make it available at:

<https://mchb.hrsa.gov/fundingopportunities/default.aspx>.

### **Tips for Writing a Strong Application**

See Section 4.7 of HRSA's [SF-424 R&R Application Guide](#).

## **Appendix: Applicable Standards for Using Grant Funds to Support Trainees/Fellows**

### **A. Definitions**

1. A trainee is an individual whose activities within the training program are directed primarily toward achieving an advanced degree.
2. A fellow is an individual who has met at least the minimum standards of education and experience accepted by his/her respective profession and whose activities within the training program are for the primary purpose of obtaining or enhancing particular skills or knowledge.

### **B. Qualifications for receiving stipends/tuition/salary support under this program:**

1. A trainee must have at least a baccalaureate degree and be enrolled in a graduate program.
2. A fellow must have achieved the academic degree and completed requisite training which constitutes the basic professional level training for his/her field.
3. A postdoctoral fellow must have an earned doctorate and must have completed any required internship.
4. A post-residency fellow must have an earned medical degree and must have satisfied requirements for certification in a specialty relevant to the purpose of the proposed training.
5. A special trainee or fellow may be approved, upon request to your HRSA project officer, only in those unusual circumstances where particular needs cannot be met within the categories described above.
6. Citizenship – The trainee or fellow receiving a stipend must be a citizen or a non-citizen national of the United States or have been lawfully admitted for permanent residence, as evidenced by a currently valid Permanent Resident Card [USCIS Form I-551] or other legal verification of such status, by the start of the training grant, fellowship or traineeship, or award. A non-citizen national is a person who, although not a citizen of the United States, owes permanent allegiance to the United States.
7. Licensure – For any profession for which licensure is a prerequisite, the trainee/fellow must also be licensed by one of the states, or, in the case of foreign graduates, meet other requirements which legally qualify him/her to practice his/her profession in the United States.

## **C. Restrictions**

1. Concurrent Support - Trainees/fellows receiving stipends under this program will generally be full time, long-term trainees. Stipends generally will not be made available under this program to persons receiving a salary, fellowship or traineeship stipend, or other financial support related to his/her training or employment for the same hours counted toward his/her HRSA-funded traineeship/fellowship. Exceptions to these restrictions may be requested to the HRSA project officer and will be considered on an individual basis. Tuition support may be provided to full-time or part-time students.
2. Non-Related Duties - The funding recipient shall not use funds from this award to require trainees or fellows to perform any duties which are not directly related to the purpose of the training for which the grant was awarded.
3. Field Training - Funding recipients may not utilize grant funds to support field training, except when such training is part of the specified requirements of a degree program, or is authorized in the approved application.
4. Grant funds may not be used:
  - a) for the support of any trainee who would not, in the judgment of the awardee, be able to use the training or meet the minimum qualifications specified in the approved plan for the training;
  - b) to continue the support of a trainee who has failed to demonstrate satisfactory participation in the training program;
  - c) for support of candidates for undergraduate or pre-professional degrees, or the basic professional degree.

## **D. Trainee Costs**

1. Allowable Costs
  - a) Stipends (except as indicated above)
  - b) Tuition and fees, including medical insurance
  - c) Travel related to training and field placements
  - d) For some institutions it may be beneficial to support trainees through tuition remission and wages. Tuition remission and other forms of compensation paid as, or in lieu of, wages to students (including fellows and trainees) performing necessary work are allowable provided that there is a bona fide employer-employee relationship between the student and the institution for the work performed, the tuition or other payments are reasonable compensation for the work performed and are conditioned explicitly upon the performance of necessary work, and it is the institution's practice to similarly compensate students in non-sponsored as well as sponsored activities.
2. Non-Allowable Costs
  - a) Dependent/family member allowances
  - b) Travel between home and training site
  - c) Fringe benefits or deductions which normally apply only to persons with the status of an employee

### 3. Stipend Levels

The Division of MCH Workforce Development (DMCHWD) has adopted stipend levels established by Kirschstein-National Research Service Awards (NRSA) for trainees and fellows: <https://grants.nih.gov/grants/guide/notice-files/NOT-OD-20-070.html> (pre-doctoral and postdoctoral)<sup>1</sup>. Dollar amounts indicated in this NOFO are subject to update by the agency as reflected in this issuance. All approved stipends indicated are for a full calendar year, and must be *prorated for an academic year or other training period of less than 12 months*. The stipend levels may, for the DMCHWD, be treated as ceilings rather than mandatory amounts, i.e., stipends may be less than *but may not exceed the amounts indicated*. However, where lesser amounts are awarded, the awarding institution must have established, written policy which identifies the basis or bases for such variation and which ensures equitable treatment for all eligible trainees/fellows.

Supplements to Stipends - Stipends specified below may be supplemented by an institution from non-federal funds. *No federal funds may be used for stipend supplementation unless specifically authorized under the terms of the program from which the supplemental funds are derived.*

#### a) Pre-Doctoral

One stipend level is used for all pre-doctoral candidates, regardless of the level of experience.

Career Level	Years of Experience	Stipend for FY 2020	Monthly Stipend
Predoctoral	All	\$25,320	\$2,110

#### b) Postdoctoral

The stipend level for the entire first year of support is determined by the number of full years of relevant postdoctoral experience\*\* when the award is issued. Relevant experience may include research experience (including industrial), teaching assistantship, internship, residency, clinical duties, or other time spent in a health-related field beyond that of the qualifying doctoral degree. Once the appropriate stipend level has been determined, the fellow must be paid at that level for the entire grant year. *The stipend for each additional year of support is the next level in the stipend structure and does not change mid-year.*

Career Level	Years of Experience	Stipend for FY 2020	Monthly Stipend
Postdoctoral	0	\$52,704	\$4,392
	1	\$53,076	\$4,423
	2	\$53,460	\$4,455
	3	\$55,596	\$4,633
	4	\$57,456	\$4,788

	5	\$59,580	\$4,965
	6	\$61,800	\$5,150
	7 or More	\$64,008	\$5,334

\*\*Determination of the “years of relevant experience” shall be made in accordance with program guidelines and will give credit to experience gained prior to entry into the grant-supported program as well as to prior years of participation in the grant-supported program. The appropriate number of “years” (of relevant experience) at the time of entry into the program will be determined as of the date on which the individual trainee begins his/her training rather than on the budget period beginning date of the training grant. Stipends for subsequent years of support are at the next level on the stipend chart.

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<sup>i</sup> **\*NOTE:** DMCHWD has **not** adopted the “Tuition and Fees, Training Related Expenses, and Institutional Allowance for Kirschstein-NRSA Recipients” guidance established by NOT-OD-20-070 (<https://grants.nih.gov/grants/guide/notice-files/NOT-OD-20-070.html>). Recipients must ensure compliance with all policies referenced in this NOFO that impact the provision of financial support to trainees/fellows