

**U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES  
Health Resources and Services Administration**

Office of Rural Health Policy

***Rural Assistance Center Cooperative Agreement***

**Announcement Type:** Initial: New, Competing Continuation

**Funding Opportunity Number:** HRSA-15-065

**Catalog of Federal Domestic Assistance (CFDA) No. 93.223**

**FUNDING OPPORTUNITY ANNOUNCEMENT**

Fiscal Year 2015

**Application Due Date: January 9, 2015**

*Ensure SAM.gov and Grants.gov registrations and passwords are current immediately!  
Deadline extensions are not granted for lack of registration.  
Registration in all systems, including SAM.gov and Grants.gov,  
may take up to one month to complete.*

**Release Date: November 11, 2014**

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Authority: Section 711, Social Security Act (42 U.S.C. 912)

## EXECUTIVE SUMMARY

The Health Resources and Services Administration (HRSA), Office of Rural Health Policy (ORHP) is accepting applications for fiscal year (FY) 2015 Rural Assistance Center (RAC) Cooperative Agreement. The purpose of this program is to serve as a gateway to information on rural health for residents in rural areas of the United States and for all others interested in the issue.

Funding Opportunity Title:	Rural Assistance Center Cooperative Agreement
Funding Opportunity Number:	HRSA-15-065
Due Date for Applications:	01/09/2015
Anticipated Total Annual Available Funding:	\$2.1 million
Estimated Number and Type of Award(s):	1 award
Estimated Award Amount:	Up to \$2.1 million per year
Cost Sharing/Match Required:	No
Project Period:	6/1/2015 through 5/31/2020 (5 years)
Eligible Applicants:	An applicant can be a public or private entity. [See <a href="#">Section III-1</a> of this funding opportunity announcement (FOA) for complete eligibility information.]

All applicants are responsible for reading and complying with the instructions included in HRSA's *SF-424 Application Guide*, available online at <http://www.hrsa.gov/grants/apply/applicationguide/sf424guide.pdf>, except where instructed in this funding opportunity announcement to do otherwise. A short video for applicants explaining the new *Application Guide* is available at <http://www.hrsa.gov/grants/apply/applicationguide/>.

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# **I. Funding Opportunity Description**

## **1. Purpose**

The Office of Rural Health Policy (ORHP) will fund a cooperative agreement to support a Rural Assistance Center (RAC). The RAC is a gateway to information on rural health for residents in rural areas of the United States and for all others interested in the issue. Through daily interactions and responding to inquiries and concerns, the RAC will be able to ensure that ORHP and the Department of Health and Human Services are informed of developing and ongoing grass-roots issues in the rural U.S.

The role of ORHP as the Department of Health and Human Service's focal point for rural information allows its staff to identify key regulatory and statutory issues. The staff of ORHP will work collaboratively with the RAC to prioritize key issues and develop information resources to share with callers and web users. It is also expected that RAC staff will produce publications to respond to emerging issues. ORHP and Department staff will review RAC proposals for publications to ensure that critical issues are appropriately identified. When publications are prepared for release, ORHP and Department staff will review them for accuracy and completeness.

The awardee must be able to identify and facilitate access to information from a wide range of sources that deal with aspects of rural health care. ORHP will also coordinate information sharing between the RAC and the Rural Health Research Centers, the Rural Recruitment and Retention Network, State Offices of Rural Health, and other projects that are funded by the Office. RAC staff will work with ORHP to develop strategies for dissemination of key research findings and for providing synthesis of key research findings. The applicant should be familiar with providers of Technical Assistance (TA) for rural health care providers funded by ORHP and be able to make referrals, avoid duplication of services, and ensure that rural residents are directed to appropriate resources for their information needs.

The awardee will provide support to the "Improve Rural Health Care" Initiative, originally announced in the President's 2010 budget. The initiative seeks to strengthen partnerships among rural health care providers, recruit and retain rural health care professionals, and modernize the health care infrastructure in rural areas. Another key part of the Initiative will involve focusing ORHP's grant programs on building an evidence base for successful health care models in rural communities. ORHP has developed an extensive evaluation and performance measurement focus within its community-based grant programs. The awardee will play a key role in broadly disseminating these promising practices from rural communities. The intent is to support rural community health improvement nationally and to build an ongoing evidence base for successful rural health interventions and projects.

## **2. Background**

The Office of Rural Health Policy was established in 1987 and is located within the Health Resources and Services Administration. ORHP's authorizing legislation, which is found in Section 711 of the Social Security Act, specifically charges ORHP with:

- Advising the Secretary on the effects of current policies and proposed statutory, regulatory, administrative and budgetary changes in the programs established under Titles XVIII and XIX, on the financial viability of small rural hospitals and other health care providers, on the ability of rural areas (and rural hospitals in particular) to attract and retain physicians and other health professionals and on access to (and the quality of) health care in rural areas.
- Establishing and maintaining an information center for collecting and disseminating information on rural health care issues, research findings relating to rural health care and innovative approaches to the delivery of health care in rural areas.

## **II. Award Information**

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

Types of applications sought: New and Competing Continuation.

Funding will be provided in the form of a cooperative agreement. A cooperative agreement, as opposed to a grant, is an award instrument of financial assistance where substantial involvement is anticipated between HRSA and the recipient during performance of the contemplated project. Awardees are expected to collaborate with ORHP to achieve the expectations described.

In addition to the usual monitoring and technical assistance provided under the cooperative agreement, **HRSA Program responsibilities shall include:**

- Assisting the awardee in the identification of new and emerging Rural Health Issues.
- Collaborating on identification of promising practices in provision of rural health care.
- Collaborating in the planning and development of publications and web resources on Rural Health Issues.
- Reviewing the process for providing individualized information to requests received from the public.
- Assisting the awardee in the identification of key contacts in the Rural Health policy arena including leading Federal, State, and community leaders, researchers, Technical Assistance providers, and policy experts.
- Assisting the awardee in the identification of key national, regional and State meetings on rural health.
- Assisting the awardee in the identification of associations with an interest in rural health.
- Assisting the awardee in the identification of promising practices in provision of rural health care.
- Assisting the awardee in the identification of funding sources for rural health projects.

**The cooperative agreement recipient's responsibilities shall include:**

- Collecting, analyzing, synthesizing, and disseminating promising practices in rural health and key findings of leading rural researchers.
- Responding to ORHP requests, comments, and questions on a timely basis.
- Responding to a wide range of information requests on rural issues through operation of a toll-free phone service and via email. Examples of topics covered in such requests could include recruitment and retention of health care personnel, funding of rural health clinics,

the effects of health care reform on rural areas, and use of non-physician providers in rural settings.

- Systematically seeking out resources on a range of issues relevant to rural health and providing access to them via the web, email, social media, and other channels appropriate to rural stakeholders.
- Development and maintenance of a Section 508-compliant web site that includes, but is not limited to, issues identified in this document.
- Assisting rural residents in navigating the complex web of Federal agencies, foundations and TA providers that support rural health care. This includes being able to assist with inquiries on funding by identifying the most appropriate public and private sources of funding for specific types of rural projects such as, but not limited to, telemedicine, construction or rehabilitation of clinical sites, or new health education programs.
- Making human and technical resources available, as necessary, either directly or contractually to operate the Information Center including access to an academic library that includes at least a focus or concentration in the health sciences.
- Producing and electronically distributing email updates.
- Attending and exhibiting at key national, regional or state meetings identified by ORHP and the applicant.
- Maintaining a web-based directory of Federal, State, foundation, and other funding available to support rural health. .
- Tracking, posting, or linking to policy documents and Federal regulations that affect rural health care.
- Producing an annual report listing accomplishments of the Center, identifying topics frequently requested by users, and outlining future activities.

## **2. Summary of Funding**

This program will provide funding during Federal fiscal years 2015-2019. Up to \$2.1 million is expected to be available annually to fund one (1) awardee. The actual amount available will not be determined until enactment of the final FY 2015 Federal budget. This program announcement is subject to the appropriation of funds, and is a contingency action taken to ensure that, should funds become available for this purpose, applications can be processed, and funds can be awarded in a timely manner. Applicants may apply for a ceiling amount of up to \$2.1 million per year. The project period is five (5) years. Funding beyond the first year is dependent on the availability of appropriated funds in subsequent fiscal years, satisfactory awardee performance, and a decision that continued funding is in the best interest of the Federal Government.

### **III. Eligibility Information**

#### **1. Eligible Applicants**

Eligible applicants include public, private, and nonprofit organizations, including faith-based and community organizations, as well as Federally recognized Indian tribal governments and organizations.

In addition, eligible applicants are strongly encouraged to be an organization that is national in scope and have prior experience working with the full range of key rural interest groups (including State Offices of Rural Health, state and national rural health associations, foundations, research organizations, and other state and national organizations). Applicant organizations are expected to have an existing infrastructure and capacity for maintaining an information center for collecting and disseminating information on rural health care issues, research findings relating to rural health care and innovative approaches to the delivery of health care in rural areas.

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

Cost sharing/matching is not required for this program.

#### **3. Dun and Bradstreet Universal Numbering System Number and System for Award Management (formerly, Central Contractor Registration)**

Applicant organizations must obtain a valid DUNS number and provide that number in their application. Applicant must also register with the System for Award Management (SAM) and continue to maintain active SAM registration with current information at all times during which it has 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)).

HRSA may not make an award to an applicant until the applicant has complied with all applicable DUNS and SAM requirements and, if an applicant has not fully complied with the requirements by the time HRSA is ready to make an award, HRSA may determine that the applicant is not qualified to receive an award and use that determination as the basis for making an award to another applicant.

If an applicant/awardee organization has already completed Grants.gov registration for HRSA or another Federal agency, confirm that it is still active and that the Authorized Organization Representative (AOR) has been approved.

The Grants.gov registration process requires information in three separate systems:

- Dun and Bradstreet (<http://fedgov.dnb.com/webform/pages/CCRSearch.jsp>)
- 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 Application Guide\*](#).

**Applicants that fail to allow ample time to complete registration with SAM or Grants.gov**

**will not be eligible for a deadline extension or waiver of the electronic submission requirement.**

#### **4. Other**

Applications that exceed the ceiling amount will be considered non-responsive and will not be considered for funding under this announcement.

Any application that fails to satisfy the deadline requirements referenced in *Section IV.3* will be considered non-responsive and will not be considered for funding under this announcement.

NOTE: Multiple applications from an organization are not allowable.

## **IV. Application and Submission Information**

### **1. Address to Request Application Package**

HRSA *requires* applicants for this funding opportunity announcement to apply electronically through Grants.gov. Applicants must download the SF-424 application package associated with this funding opportunity following the directions provided at [Grants.gov](https://www.Grants.gov).

### **2. Content and Form of Application Submission**

Section 4 of HRSA's [SF-424 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 Application Guide in addition to the program specific information below. All applicants are responsible for reading and complying with the instructions included in HRSA's [SF-424 Application Guide](#) except where instructed in the funding opportunity announcement to do otherwise.

See Section 8.5 of the *Application Guide* for the Application Completeness Checklist.

#### **Application Page Limit**

The total size of all uploaded files may not exceed the equivalent of 50 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 *Application Guide* and this FOA. Standard OMB-approved forms that are included in the application package are NOT included in the page limit. Indirect Cost Rate Agreement and proof of non-profit status (if applicable) will not be counted in the page limit. **We strongly urge you to print your application to ensure it 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 to be considered under the announcement.**

#### **Program-Specific Instructions**



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

***i. Project Abstract***

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

Provide a summary of the application. Because the abstract is often distributed to provide information to the public and Congress, please prepare this so that it is clear, accurate, concise, and without reference to other parts of the application. It must include a brief description of the proposed cooperative agreement including the needs to be addressed, the proposed services, and the population group(s) to be served.

***ii. Project Narrative***

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

Use the following section headers for the Narrative:

- ***INTRODUCTION -- Corresponds to Section V's Review Criteria #1 and 4***  
This section provides a brief overview of the purpose of the proposed project, the vision for the RAC, and highlights the goals for the five-year project period.
- ***NEEDS ASSESSMENT -- Corresponds to Section V's Review Criterion #1***  
This section outlines the information needs of the rural population of the United States as related to health care programs. Demonstrate an understanding of the evolution of rural health care and the historical challenges facing rural communities in terms of resources and demographics, including populations experiencing cultural and linguistic barriers to care. Demographic data should be used and cited whenever possible to support the information provided. Please discuss the information gaps that the project hopes to address.
- ***METHODOLOGY -- Corresponds to Section V's Review Criteria #2 and 5***  
Propose methods that will be used to meet the program requirements and expectations in this funding opportunity announcement. Develop a plan that shows how the RAC will make human and technical resources available, as necessary, to operate an information center that would allow the identification of, and provision of access to, a full range of existing information about the provision of rural healthcare and rural population health. Create new content to address information gaps and connect resources from other sources. The following methods should be included:
  1. Operate and maintain both a toll-free phone service and a Section 508-compliant website with key rural health information of interest to those interested in improving rural health care and rural population health.
  2. Make available space for furniture and equipment of the staff.
  3. Produce an inventory, in an electronic format, of key national and state organizations with interests in rural health, with links to their websites and descriptions of their missions.

4. Produce a general interest newsletter on rural health that will be published electronically through e-mail and the RAC website.
  5. Develop a 10-member advisory board of rural health experts to advise the awardee of how to best meet the informational needs of the rural community.
  6. Include staff with experience working with rural-related interest groups, advocacy organizations, researchers, think-tank representatives and Federal employees who work on programs that serve rural communities.
  7. Develop a methodology for promoting the information center that ensures maximum exposure among rural health care providers, associations and rural communities.
  8. Develop a plan for collecting, analyzing, synthesizing, and disseminating promising practices with emphasis on evaluation findings from the Rural Health Outreach Best Practices and Tracking project as part of the President's "Improving Rural Health Care Initiative."
  9. Research and share information about rural health programs and interventions.
  10. Collect and share information rural health care's economic impact on communities.
  11. Collect and develop tools to help rural communities plan and position grant-funded projects so that services can be sustained over the long term.
- *WORK PLAN -- Corresponds to Section V's Review Criteria #2 and 5*  
The work plan should be aligned with the intent and goals of the Rural Assistance Center including support to the "Improve Rural Health Care" Initiative. Activities in the work plan should link to the priority needs described. The work plan should be a matrix that carefully integrates goals, objectives, activities and outputs. These activities should be time framed, realistic and measurable. The plan should also indicate the person responsible for each activity.
  - *RESOLUTION OF CHALLENGES -- Corresponds to Section V's Review Criterion #5*  
Discuss challenges that are likely to be encountered in designing and implementing the activities described in the Work Plan, and approaches that will be used to resolve such challenges.
  - *EVALUATION AND TECHNICAL SUPPORT CAPACITY -- Corresponds to Section V's Review Criteria # 3 and 5*  
Describe current experience, skills, and knowledge, including individuals on staff, materials published, and previous work of a similar nature. The applicant should be affiliated either directly or contractually with a university-based library with a health science focus.  
  
Discuss plans for monitoring and assessing performance, including the methods to be employed by project staff to ensure that proposed activities are being successfully documented and completed, based on the overall work plan.
  - *ORGANIZATIONAL INFORMATION -- Corresponds to Section V's Review Criterion #5*  
Provide information on the applicant organization's current mission and structure (including an organizational chart), existing infrastructure and capacity, scope of current activities and describe how these all contribute to the ability of the organization to conduct the program requirements and meet program expectations. Discuss applicant

organization's experience in maintaining an information center for collecting and disseminating information on rural health care issues, research findings relating to rural health care and innovative approaches to the delivery of health care in rural areas.

Describe the applicant organization's prior experience working with the full range of key rural interest groups (including State Offices of Rural Health, state and national rural health associations, foundations, research organizations, and other state and national organizations) and ability to illustrate their knowledge of rural health issues and of the key individuals and organizations involved in ensuring availability of health services in rural areas.

**iii. Budget**

**Reminder:** The Total Project or Program Costs are the total allowable costs (inclusive of direct **and** indirect costs) incurred by the recipient to carry out a grant-supported project or activity. Total project or program costs include costs charged to the award and costs borne by the recipient to satisfy a matching or cost-sharing requirement.

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

The Consolidated Appropriations Act, 2014, Division H, § 203, (P.L. 113-76) 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." Please see Section 4.1.iv Budget – Salary Limitation of HRSA's [SF-424 Application Guide](#) for additional information. Note that these or other salary limitations will apply in FY 2015, as required by law.

**iv. Budget Justification Narrative**

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

**v. Attachments**

Please 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. **Each attachment must be clearly labeled.**

*Attachment 1: Work Plan*

Attach the Work Plan for the project that includes all information detailed in Section IV.  
i. Project Narrative.

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

Keep each job description to one page in length as much as is possible. Include the role, responsibilities, and qualifications of proposed project staff.

*Attachment 3: Biographical Sketches of Key Personnel*

Include biographical sketches for persons occupying the key positions described in Attachment 2, not to exceed two pages in length. In the event that a biographical sketch is included for an identified individual who is not yet hired, please include a letter of commitment from that person with the biographical sketch.

*Attachment 4: Letters of Agreement and/or Description(s) of Proposed/Existing Contracts (project specific)*

Provide any documents that describe working relationships between the applicant organization and other entities and programs cited in the proposal. Documents that confirm actual or pending contractual agreements should clearly describe the roles of the contractors and any deliverable. Letters of agreement must be dated.

*Attachment 5: Project Organizational Chart*

Provide a one-page figure that depicts the organizational structure of the project.

*Attachment 6: For Multi-Year Budgets--Fifth Year Budget,*

After using columns (1) through (4) of the SF-424A Section B for a five-year project period, the applicant will need to submit the budgets for year 5 as an attachment. They should use the SF-424A Section B.

*Attachment 7: Summary Progress Report*

**ACCOMPLISHMENT SUMMARY (FOR COMPETING CONTINUATIONS ONLY)**

A well planned accomplishment summary can be of great value by providing a record of accomplishments. It is an important source of material for HRSA in preparing annual reports, planning programs, and communicating program-specific accomplishments. The accomplishments of competing continuation applicants are carefully considered during the review process; therefore, applicants are advised to include previously stated goals and objectives in their application and emphasize the progress made in attaining these goals and objectives. Because the Accomplishment Summary is considered when applications are reviewed and scored, **competing continuation applicants who do not include an Accomplishment Summary may not receive as high a score as applicants who do.** The Accomplishment Summary will be evaluated as part of Review Criterion 5:

**IMPACT.**

The accomplishment summary should be a brief presentation of the accomplishments, in relation to the objectives of the program during the current project period. The report should include:

- (1) The period covered (09/01/2010 to 08/31/2015).
- (2) Specific Objectives - Briefly summarize the specific objectives of the project as actually funded.
- (3) Results- Describe the program activities conducted for each objective. Include both positive and negative results or technical problems that may be important.

*Attachments 8 – 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. Submission Dates and Times**

#### **Application Due Date**

The due date for applications under this funding opportunity announcement is *January 9, 2015 at 11:59 P.M. Eastern Time.*

See Section 8.2.5 – Summary of e-mails from Grants.gov of HRSA’s *SF-424 Application Guide* for additional information.

### **4. Intergovernmental Review**

The Rural Assistance Center is a program subject to the provisions of Executive Order 12372, as implemented by 45 CFR 100. See Executive Order 12372 in the [HHS Grants Policy Statement](#).

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

### **5. Funding Restrictions**

Applicants responding to this announcement may request funding for a project period of up to five (5) years, at no more than \$2.1 million per year. 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.

Funds under this announcement may not be used for the following purposes:

Under current OMB regulations, funds under this announcement may not be spent, either directly or through contract, to pay for the purchase, construction, renovation or improvement of facilities or real property.

The General Provisions in Division H, Title V of the Consolidated Appropriations Act, 2014 (P.L. 113-76), apply to this program. Please see Section 4.1 of HRSA’s [SF-424 Application Guide](#) for additional information. Note that these or other restrictions will apply in FY 2015, as required by law.

## **V. Application Review Information**

### **1. Review Criteria**

Procedures for assessing the technical merit of applications have been instituted to provide for an objective review of applications and to assist the applicant in understanding the standards against which each application will be judged. Critical indicators have been developed for each review criterion to assist the applicant in presenting pertinent information related to that criterion and to provide the reviewer with a standard for evaluation. Review criteria are outlined below with specific detail and scoring points.

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

Review Criteria are used to review and rank applications. The Rural Assistance Center has six (6) review criteria:

***Criterion 1: NEED (10 points) – Corresponds to Section IV’s Part 2, Introduction and Needs Assessment***

The extent to which the application describes the problem and associated contributing factors to the problem.

The extent to which the applicant:

- A. Describes how the RAC will address information gaps for rural communities.
- B. Demonstrates an understanding of the evolution of rural health and social services and the historical challenges facing rural communities in terms of resources and demographics.

***Criterion 2: RESPONSE (25 points) – Corresponds to Section IV’s Part 2, Methodology***

The extent to which the proposed project responds to the “Purpose” included in the program description which includes:

- The clarity 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.
- Extent to which the applicant succeeds in addressing the following:
  - A. Describing a work plan that is aligned with the intent and goals of the RAC, which addresses the stated programmatic requirements.
  - B. Providing a statement of the scope, purpose, and activities of the project in order to demonstrate a clear understanding of the intent and requirements of the services being sought, including a thorough understanding of key players and issues in the rural health care and social services environment.
  - C. Explaining the need priorities and how they link priority needs to activities in the work plan.
  - D. Providing a matrix that carefully integrates goals, objectives, activities, outputs, and how the outputs will be measured. The matrix outlines the individual(s) responsible for carrying out each activity and includes a project timeline.
  - E. Providing an accompanying narrative that describes how the goals and activities outlined in the matrix will be accomplished.

***Criterion 3: EVALUATIVE MEASURES (15 points) – Corresponds to Section IV’s, Part 2, Evaluation and Technical Support Capacity***

The effectiveness of the method proposed to monitor and evaluate the project results. Evaluative measures must be able to assess:

- The extent to which the program objectives have been met, and the extent to which these can be attributed to the project.
- Extent to which the applicant describes:
  - A. A reasonable approach for implementing its proposed work plan, i.e., for the development, management, and operations of the RAC.

- B. A plan for monitoring and assessing its performance. The applicant proposes methods to be employed by project staff for ensuring that proposed activities are being successfully documented and completed, based on the overall work plan.
- C. A sound approach for ensuring its flexibility and responsiveness to the needs of its customers to be served by the project; applicant describes any anticipated problems/challenges and approaches to addressing them.

**Criterion 4: IMPACT (10 points) – Corresponds to Section IV’s Part 2, Introduction**

The extent and effectiveness of plans for dissemination of project results and/or the extent to which project results may be national in scope and/or degree to which the project activities are replicable, and/or the sustainability of the program beyond the Federal Funding. Applicants must clearly explain the extent to which the project will reach a national audience.

**Criterion 5: RESOURCES/CAPABILITIES (25 points) – Corresponds to Section IV’s Part 2, Methodology, Work Plan, Resolution of Challenges and Evaluation, 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 projects.

- The extent to which project personnel demonstrate flexibility in meeting anticipated and unanticipated challenges in implementing activities in prior projects, or in meeting challenges as described in the Progress Report for Competing Continuations.
- The existing infrastructure and capabilities of the applicant organization, and quality and availability of facilities and personnel to fulfill the needs and requirements of the proposed project.
- Applicant organization’s experience in maintaining an information center for collecting and disseminating information on rural health care issues, research findings relating to rural health care and innovative approaches to the delivery of health care in rural areas.
- Prior experience working with the full range of key rural interest groups (including State Offices of Rural Health, state and national rural health associations, foundations, research organizations, and other state and national organizations) and ability to illustrate their knowledge of rural health issues and of the key individuals and organizations involved in ensuring availability of health services in rural areas.

For competing continuations, past performance will also be considered. The extent to which the applicant:

- A. Illustrates its knowledge of rural health and social service issues.
- B. Illustrates its knowledge of the key individuals and organizations involved in ensuring availability of health and social services in rural areas.
- C. Demonstrates its expertise and capability in the areas of website design and development, including but not limited to information architecture, search engine optimization, website security, usability, accessibility.
- D. Demonstrates an affiliation with a university-based library with a health science focus.
- E. Includes biographical sketches/curricula vitae that document the education, experience, and skills relevant and necessary for successfully carrying out the proposed project.
- F. Describes its proposed management and operational approach to carrying out the project.

- G. Describes non-staff resources required to support successful implementation of the project.

**Criterion 6: SUPPORT REQUESTED (15 points)** – Corresponds to Section IV’s, Part 2, Budget. The reasonableness of the proposed budget in relation to the objectives, the complexity of the activities, and the anticipated results.

The extent to which the applicant:

- A. Demonstrates a realistic, adequately justified budget consistent with the proposed project work plan and proposed expenditures are allocated for allowable purposes.
- B. Demonstrates that the costs of administration, monitoring/evaluation, and quality assurance are reasonable and proportionate to the costs of service provision.
- C. Demonstrates that the costs of the proposed project are economical in relation to the proposed service utilization.

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

Please see Section 5.3 of HRSA’s [SF-424 Application Guide](#).

This program does not have any funding priorities, preferences or special considerations.

## **3. Anticipated Announcement and Award Dates**

It is anticipated that awards will be announced prior to the start date of June 1, 2015.

# **VI. Award Administration Information**

## **1. Award Notices**

The Notice of Award will be sent prior to the start date of June 1, 2015. See Section 5.4 of HRSA’s [SF-424 Application Guide](#) for additional information.

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

See Section 2 of HRSA’s [SF-424 Application Guide](#).

## **3. Reporting**

The successful applicant under this funding opportunity announcement must comply with Section 6 of HRSA’s [SF-424 Application Guide](#) and the following reporting and review activities:

**Progress Report(s).** The awardee must submit a progress report to HRSA on an **annual** basis. Further information will be provided in the award notice.



## VII. Agency Contacts

Applicants may obtain additional information regarding business, administrative, or fiscal issues related to this funding opportunity announcement by contacting:

Inge Cooper, Grants Management Specialist  
ATTN: Rural Assistance Center  
HRSA Division of Grants Management Operations, OFAM  
Parklawn Building, MailStop Code: 10W01D  
5600 Fishers Lane  
Rockville, MD 20857  
Telephone: (301) 594-4236  
Fax: (301) 443-5461  
E-mail: [icooper@hrsa.gov](mailto:icooper@hrsa.gov)

Additional information related to the overall program issues and/or technical assistance regarding this funding announcement may be obtained by contacting:

Steven Hirsch  
Executive Secretary  
Attn: Rural Assistance Center  
Office of Rural Health Policy, HRSA  
Parklawn Building, Room 17W61  
5600 Fishers Lane  
Rockville, MD 20857  
Telephone: (301) 443-7322  
Fax: (301) 443-2803  
E-mail: [shirsch@hrsa.gov](mailto:shirsch@hrsa.gov)

Applicants may need assistance when working online to submit their application forms electronically. Applicants should 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, seven days a week, excluding Federal holidays at:

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

Successful applicants/awardees may need assistance when working online to submit information and reports electronically through HRSA's Electronic Handbooks (EHBs). For assistance with submitting information in HRSA's EHBs, contact the HRSA Call Center, Monday-Friday, 8:00 a.m. to 8:00 p.m. ET:

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

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

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