Increasing Organ Donation Awareness Program

Funding Opportunity Number: HRSA-20-062
Funding Opportunity Type(s): New
Assistance Listings (CFDA) Number: 93.134

NOTICE OF FUNDING OPPORTUNITY

Fiscal Year 2020

Application Due Date: January 17, 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: October 23, 2019

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Authority: Section 377A(b) Public Health Service (PHS) Act, as amended (42 U.S.C. 274f-1(b)).
EXECUTIVE SUMMARY

The Health Resources and Services Administration (HRSA) is accepting applications for fiscal year (FY) 2020 Increasing Organ Donation Awareness Program. The purpose of this program is to reduce the gap between the demand for organ transplants and the supply of donated organs\(^1\). This program notice is subject to the appropriation of funds, and is a contingency action taken to ensure that, should funds become available for this purpose, HRSA can process applications and award funds in a timely manner.

<table>
<thead>
<tr>
<th>Funding Opportunity Title:</th>
<th>Increasing Organ Donation Awareness Program</th>
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<tr>
<td>Funding Opportunity Number:</td>
<td>HRSA-20-062</td>
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<tr>
<td>Due Date for Applications:</td>
<td>January 17, 2020</td>
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<tr>
<td>Anticipated Total Annual Available FY 2020 Funding:</td>
<td>$1,500,000</td>
</tr>
<tr>
<td>Estimated Number and Type of Award(s):</td>
<td>Up to 5 grants</td>
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<tr>
<td>Estimated Award Amount:</td>
<td>Up to $450,000 per year</td>
</tr>
<tr>
<td>Cost Sharing/Match Required:</td>
<td>No</td>
</tr>
<tr>
<td>Period of Performance:</td>
<td>September 1, 2020 through August 31, 2023 (3 years)</td>
</tr>
</tbody>
</table>
| Eligible Applicants: | Domestic public and nonprofit private entities
See Section III.1 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.

\(^1\) For purposes of this grant program, the terms “organ” is used consistently with the definition provided in the final rule governing the operation of the Organ Procurement and Transplantation Network (OPTN), 42 CFR §121.2. This regulation currently provides that “organ” means a human kidney, liver, heart, lung, pancreas, intestine (including the esophagus, stomach, small and/or large intestine, or any portion of the gastrointestinal tract) or vascularized composite allograft (VCA) (also defined in 42 CFR 121.2 ). The VCAs eligible for study under this grant program are limited to hands and face.
Technical Assistance

HRSA has scheduled the following technical assistance:

*Webinar*

Day and Date: November 14, 2019  
Time: 1 – 2 p.m. ET  
Call-In Number: 888-566-1292  
Participant Code: 3232869  
**Weblink:** [https://hrsa.connectsolutions.com/fy_2020_increasing_organ_donation_awareness_grant_program/](https://hrsa.connectsolutions.com/fy_2020_increasing_organ_donation_awareness_grant_program/)

Playback will be available at: [https://www.organdonor.gov/about-dot/grants/programs.html](https://www.organdonor.gov/about-dot/grants/programs.html)
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I. Program Funding Opportunity Description

1. Purpose

This notice announces the opportunity to apply for funding under the Increasing Organ Donation Awareness Program. The overall purpose of the program is to reduce the gap between the demand for organ transplants and the supply of donated organs.

The specific objectives for the FY 2020 award cycle include:

1) Identify successful strategies for increasing registration for deceased donation through traditional portals such as the Department of Motor Vehicles and online registries.
2) Identify non-traditional donor registration portals and ascertain their effectiveness for increasing donor registration as compared to traditional portals.
3) Increase awareness and education about opportunities for, as well as the risks and benefits associated with, living organ donation.
4) Increase awareness and education about vascularized composite allografts (VCA) and willingness of individuals to become VCA deceased donors or to provide authorization for deceased relatives to become VCA donors.

Accordingly, HRSA will support research studies to test the effectiveness of strategies that target any of the specified program objectives with the potential to have a broad impact and to be readily adaptable within the donation and transplantation community. For purposes of this program, model interventions are defined as those that are: (1) effective in producing a verifiable and demonstrable impact on the program objectives identified above; (2) replicable; (3) transferable; and (4) feasible in practice. All projects must include methodology and quantitative evaluation components capable of ascertaining the effectiveness of the intervention(s). While quantitative research would most strongly demonstrate effectiveness, qualitative components may also add useful information. The description, budget, and timeline should reflect a strong research methodology.

Applicants may propose studies that are pilot projects or extension projects. A pilot project implements and tests an intervention that has not been tested before for its utility and effectiveness in the donation field. An extension project builds on results of a pilot project or an existing strategy by adjusting or adding some new dimension to the original intervention to strengthen it. Studies that propose the use of multiple strategies are required to measure the independent effects of each strategy as well as the interactive effect of the various strategies. Applicants are required to demonstrate that their proposed intervention meets the requirements indicated in the Notice of Funding Opportunity (NOFO).

Applicants are encouraged to propose new ideas and novel approaches that are cost-effective in achieving these program objectives and demonstrate utility for the donation and transplantation community. Applicants may also implement strategies that have been proven to be successful in other public health fields and evaluate their effectiveness for use in the donation field.
Applicants have flexibility in proposing interventions, including: The focus and nature of the intervention, intervention site(s), geographic location(s), target population(s), etc., insofar as they are consistent with the program objectives specified for this NOFO.

Substantial attention is given to project impact. Study designs will be reviewed for their potential to be replicated after the period of performance with similar or other target populations or in similar or other parts of the country. Including more than one target population, oversampling specific population(s), or implementing in more than one geographic location are methods that may be employed to strengthen study findings, impact, and replication potential.

HRSA will consider for funding under this notice, interventions designed to promote or encourage living organ donation or increasing target populations’ willingness or readiness to become a living donor. Applications that focus on living organ donation must clearly describe an intervention designed to increase the target population’s knowledge about, opportunities for, and the risks and benefits associated with living organ donation. Outcome measures must evaluate changes in awareness of and knowledge about the opportunities for and risks and benefits of living organ donation, or changes in the target populations’ willingness to consider living organ donation or become a living donor as appropriate.

Applications that focus on VCA donation can include strategies to increase awareness of, knowledge about, and/or willingness to become a VCA donor at the time of one’s death or to authorize VCA donation for a deceased relative or significant other. These interventions must be designed to foster greater public awareness of the availability, need for, and success of these types of transplants and/or increase the public’s willingness to donate one’s own or a relative’s hands or face for transplantation.

Collaboration

HRSA seeks to promote greater collaboration among the donation and transplantation community, organizations with research expertise and experience, and other organizations with potential to enhance or facilitate the project. You are encouraged, but not required, to prepare the application and, if funded, implement the project as a consortium of organizations having relevant expertise and experience required for the successful design, implementation, and evaluation of the proposed intervention(s). You are required to provide any documents that describe working relationships between your organization and other entities and programs cited in the proposal (see Section IV. 2 vi. Attachment 3 Letters of Agreement, Memoranda of Understanding).

2. Background

This program is authorized by Section 377A (b) of the Public Health Service (PHS) Act, as amended (42 U.S.C. 274f-1(b).

The Increasing Organ Donation Awareness Program (formerly Social and Behavioral Interventions to Increase Organ Donation) was initiated in FY 1999 in response to the large and growing disparity between the high number of people needing transplants and the comparatively small number of available organs. This program has supported a
broad spectrum of interventions to increase donation at the national, state, and local levels by a variety of public and private organizations. Such interventions range from large-scale national media and public education programs to developing and enhancing statewide donor registries to community-based activities designed to raise awareness among specific populations. Grant-sponsored research and evaluation projects have contributed to the understanding of how one decides to become a donor, as well as the delicate process of requesting family authorization for a deceased relative’s donation.

With the annual number of waiting list deaths between 6,000 and 7,000 since 2001, the transplant community has continued to look to living organ donation as a life-saving option for patients in need of organ transplants. This notice offers opportunities for projects to focus on increasing the public’s awareness of living organ donation. Recognizing that there are both benefits and risks to the donor involved in living organ donation, this notice will support projects to educate the public about the opportunity for, as well as the risks and benefits associated with, living organ donation.

In recent years, VCA donation and transplantation, particularly hand and face transplants, have become more prevalent. Public sentiment toward VCA donation and transplantation is fairly positive, perhaps due in part to the recognized need for these types of procedures by people who have suffered serious facial and limb injuries. A 2012 national survey conducted for HRSA by the Gallup Organization revealed that the portion of the public willing to donate their hands and face after death was 80.3 percent and 58.2 percent, respectively. However, the number of people not familiar with or supportive of VCA donation and transplantation is estimated to be high based on the newness of the field. Much work remains to be done to fully inform the public about this type of transplantation.

II. Award Information

1. Type of Application and Award

Type(s) of applications sought: New

HRSA will provide funding in the form of a grant.

2. Summary of Funding

HRSA expects approximately $1,500,000 to be available annually to fund up to five recipients. You may apply for a ceiling amount of up to $450,000 total cost (includes both direct, and indirect, facilities, and administrative costs) per year. This program notice is subject to the appropriation of funds, and is a contingency action taken to ensure that, should funds become available for this purpose, HRSA can process applications and award funds in a timely manner. The period of performance is September 1, 2020 through August 31, 2023 (3 years). Funding beyond the first year is subject to the availability of appropriated funds for the “Increasing Organ Donation Awareness Program” 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.

III. Eligibility Information

1. Eligible Applicants

Eligible applicants include domestic public or non-profit private entities. Faith-based and community-based organizations are eligible to apply for these funds. Tribes and tribal organizations are eligible to apply. If your organization is an Organ Procurement and Transplantation Network (OPTN) member and/or if you are working with a consortium that includes OPTN members, you and all other OPTN members involved in the project are expected to be in compliance with the HHS final rule governing the operation of the OPTN (42 CFR part 121). You can find more information about the OPTN and the final rule at https://optn.transplant.hrsa.gov/governance/about-the-optn/final-rule/.

Foreign entities are not eligible for these awards.

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 as non-responsive 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 with the same DUNS # are allowable if the applications propose separate and distinct projects. For example, one institution may submit an application focusing on living donation and another focusing on VCA donation.

If for any reason (including submitting to the wrong funding opportunity number or making corrections/updates) an application is submitted more than once prior to the application due date, 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.

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 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 provide your email address when reviewing or preparing the workspace application package in order to receive notifications, including modifications and/or republications of the NOFO on Grants.gov before its closing date. Responding to an earlier version of a modified notice may result in a less competitive or ineligible application. Please note you are ultimately responsible for reviewing the For Applicants page for all information relevant to desired opportunities.

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 may not exceed the equivalent of 80 pages when printed by HRSA. The page limit includes the abstract, project and budget narratives, attachments including biographical sketches (biosketches), and letters of commitment and support required in HRSA’s 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. Biographical sketches do count in the page limitation. Indirect Cost Rate Agreement and proof of non-profit status (if applicable) do not count in the page limit. We strongly urge you 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 to be considered under this notice.

Debarment, Suspension, Ineligibility, and Voluntary Exclusion Certification

1) You, on behalf of the applicant organization, certify, 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 7-15: 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 justification, 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.

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(a) #2 Response**
     
     Briefly describe the purpose of the proposed project and the anticipated accomplishments (goals), including knowledge gained, and describe the measurable steps (objectives) to achieve the accomplishments. Discuss why the specific interventions proposed are expected to have a substantial positive impact on the proposed performance measure(s) for your project to meet the Program’s specific objectives. Identify which performance measure is being addressed and whether the project is a pilot or extension study.

   - **NEEDS ASSESSMENT -- Corresponds to Section V’s Review Criterion(a) #1 Need, #2 Response, and #3 Evaluative Measures**

     This section must justify the need for your project in the community and/or organization where you plan to conduct your project. Identify, discuss, and document the needs of your target population(s). Include socio-cultural factors that support the need for your project. Include relevant published and unpublished data and observational information with appropriate citations to support the need for and significance of the project. Use national data to illustrate need and provide context for the project. Discuss need in the study site(s) or assess needs specific
to the target population(s). Discuss the purpose and usefulness of demographic data and describe barriers that the project aims to overcome.

- **METHODOLOGY -- Corresponds to Section V’s Review Criterion(a) #2 Response, #3 Evaluative Measures, #4 Impact, and #5 Resources/Capabilities**

Describe the strategies and methods you will use to accomplish the goals, objectives, and requirements in this NOFO. Discuss the utility of any proposed research approaches, paying particular attention to new approaches, if employed. Document whether the proposed methodology has been successfully used in donation or other health-related research. If using a new approach, describe its appropriateness for the proposed project. If proposing an extension, describe the original intervention, including its purpose, funding source, research methods, and findings related to its effectiveness, and justify the extension by clearly detailing the potential utility of the proposed changes to the intervention.

Provide a comprehensive review of studies, knowledge, and/or practices relevant to the proposed topic, referencing donation research and/or relevant studies from the broader health education and public health literature field. Demonstrate awareness of other initiatives relevant to your project. Propose and justify methods to distinguish the impact of the proposed project from the impact of other on-going efforts, random news events, or television programming. As appropriate, discuss effective tools and strategies for any or all of the following: ongoing staff training; outreach activities; anticipated collaborations; efforts to involve patients, families, and communities of culturally, linguistically, socio-economically, and geographically diverse backgrounds; and sharing and disseminating project information and findings. Describe how this project addresses the goals of Healthy People 2020.

The methodology section also must provide a complete description of the following elements:

**Theoretical Foundation** – a description of the conceptual model(s) of public health education or other relevant models or theories upon which the intervention is based, including:

a) Main concepts
b) Key theorists/developers
c) Comparison, based on a critical review of the literature, of existing models or theories and the rationale for selecting the particular model applied
d) Description of how these models inform the intervention and other components of the methodology (measurement instruments, print and electronic materials, messages, etc.)
e) Clarification of adaptations to the theory, if any, for the proposed project and discussion of the planned methods to reduce threats to validity resulting from the adaptation.

**Target Population**

a) Justification for choosing the target population(s) for the intervention
b) Description of the size and characteristics
c) Overview of current donation practices and attitudes
d) Rationale for selecting the specific geographic areas for project implementation, appropriateness for reaching the identified target population, and the appropriateness of the geographic area for determining replicability of the intervention to other areas in the United States, and Plans for recruiting and retaining the target group

**Settings** – description of and rationale for the specific setting(s) in which the intervention will be implemented

**Intervention** –

a) Detailed description of the intervention, including a thorough description of all components of any multifaceted interventions being used; for extension projects, a detailed description of the original project and a description of the similarities and differences between the original work and the proposed extension intervention.

b) Discussion of the intervention’s potential effectiveness for accomplishing the specific objectives and performance measure addressed.

c) Discussion of the intervention’s potential effectiveness for addressing any barriers that the project might encounter as discussed in the Needs Assessment.

d) Review of relevant descriptive information and data relating to the feasibility and effectiveness of the same or similar interventions (including recommended refinements/modifications).

e) Potential of the intervention to be effectively replicated, transferred, and applied by institutions/organizations with similar competencies, and to target populations with similar socio-demographic profiles

f) Discussion of the anticipated cost-effectiveness of the proposed project including the metrics and rationale for this calculation. (Development and research costs do not need to be included in the calculation).

**Variables** – specification of the variables, including delineation between independent and dependent variables

**Outcome Measures and Research Methodology** – all projects must include a research plan including:

a) Description of and justification for specific outcomes that will be used to determine effectiveness of the intervention.

b) Thorough description of, and rationale for the proposed research methodology.

c) Discussion of how the proposed research methodology can be expected to reliably measure project impact.

d) Explanation of how the proposed research methodology will determine and account for baseline measurement, e.g., how the analysis will control for individuals who already have some experience with deceased solid organ or VCA donation and transplantation or living organ donation.

e) Description of the methods to control for the independent effects of the proposed intervention and such external influences as ongoing donation outreach activities, news and media events, etc.
f) Data collection and analysis plans; as appropriate, describe the strategy to collect, analyze, and track data to measure process and impact/outcomes, with different cultural groups (e.g., race, ethnicity, language) and explain how the data will be used to inform project development and service delivery. If data must be obtained from an organization that is not the applicant organization, it is critical to include a letter of support from that organization, in Attachment 6, on letterhead and signed by an official, confirming the applicant’s access to the data.

g) Descriptions of qualitative approaches to be used, if any, and process evaluation, if proposed.

Instruments – descriptions of measurement instruments to be used including psychometric properties, and if possible, copies or drafts of data collection instruments, e.g., surveys, telephone protocols, interview formats.

Protection of Human Subjects
When human subjects are involved, the project must be in compliance with the Department of Health and Human Services (HHS) regulations for protection of human subjects (45 CFR part 46). Please refer to instructions provided in HRSA’s SF-424 R&R Application Guide, Appendix B: Supplemental Instructions for Preparing the Human Subjects Section of the Research Plan, for specific instructions on preparing the human subjects section of the application.

This section is required for applicants answering “yes” to the question “Are human subjects involved?” on the R&R Other Project Information form. If the answer is “No” to the question, but the proposed research involves human specimens and/or data from subjects, applicants must provide a justification in this section for the claim that no human subjects are involved.

Discuss plans to seek Institutional Review Board (IRB) approval. IRB approval is not required at the time of application submission, but must be submitted to HRSA prior to initiating any activities involving human subjects.

Dissemination Plan
a) Discuss how you propose to disseminate project outcomes, including the development of a replication guide to be used by others in the field and a plan for distributing the guide during the funding period (electronic distribution is acceptable). The format and structure of the guide will vary depending on the project.

b) The dissemination plan can include submitting articles to academic journals but must include other strategies as well, such as presenting findings via appropriate conferences, newsletters, and social media outlets to maximize the impact of the project on the field of donation outreach.

- WORK PLAN -- Corresponds to Section V’s Review Criterion(a) #2 Response and #3 Evaluative Measures
Describe the steps that you will use to achieve the goals and objectives of the proposed project and each of the activities proposed for the entire period of performance. The work plan must reflect a strong research component. Include the submission of your project for IRB approval. Use a timeline that includes each activity and identifies responsible staff for all phases and years of the proposed project, including a plan for dissemination of project outcomes. This timeline will contribute to the assessment of each year’s progress. A graphic representation (e.g., Gantt or PERT chart) in Attachment 5 is helpful in the review process. As appropriate, identify meaningful support and collaboration with key stakeholders in planning, designing, and implementing all activities, including developing the continuation applications, and the extent to which these contributors reflect the cultural, racial, linguistic, and geographic diversity of the populations and communities served. Include the Work plan in Attachment 1 (Work Plan and Logic Model).

**Logic Model**

Applicants must submit a logic model in 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 project 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 project 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 project activities); and
- Outcomes (i.e., the results of a project, 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 project implementation; the work plan provides the “how to” steps. You can find additional information on developing logic models at the following website:


- **RESOLUTION OF CHALLENGES -- Corresponds to Section V’s Review Criterion(a) #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 Criterion(a) #3 Evaluative Measures and #5 Resources/Capabilities

Discuss relevant experience, skills, and knowledge of key project staff to conduct this project, including published materials and previous work of a similar nature. It is not necessary to repeat all information included in biographical sketches, but rather to justify qualifications and appropriateness for the project role. Applicants must make sure that the requisite knowledge and experience for conducting their specific study are clearly evident within the project team.

When developing the staffing plan, please note the following:

Principal Investigator
The project shall be headed by a single Principal Investigator (PI) designated by the applicant institution who will be responsible for the technical, programmatic, and administrative aspects of the award and for the day-to-day management of the project. The PI is expected to have experience and expertise in one or both of the following areas:

- Program development, design and implementation of interventions to educate the public about living organ donation or to educate about, and increase willingness to be a deceased VCA donor, and/or
- Research study, design, and analysis to conduct and assess the effectiveness of social-behavioral interventions.

The PI is expected to have a substantive and substantial role in the project. A PI who is not employed by the applicant institution is expected to be employed by a public or nonprofit institution and have a relevant position related to the work to be performed.

Principal Researcher/Evaluator
The principal researcher/evaluator (PR) is expected to have substantial involvement in designing and implementing the project methodology component. This professional is expected to have knowledge and experience in social and behavioral research/evaluation. The principal researcher or another member of the research team is expected to have education and expertise sufficient to conduct social science statistical analysis consistent with the proposed intervention and evaluation.

Key Organ Donation Professional
This professional is expected to have substantial experience in conducting outreach and education efforts related to organ donation.

ORGANIZATIONAL INFORMATION -- Corresponds to Section V’s Review Criterion(a) #5 Resources/Capabilities

Succinctly describe your organization’s current mission and structure, scope of current activities, and how these elements all contribute to the organization’s
ability to conduct the proposed project and meet the program’s goals and objectives. Include an organizational chart in Attachment 4 (Project Organizational Chart). Discuss how the organization will follow the approved plan, as outlined in the application, properly account for federal funds, and document all costs to avoid audit findings.

The staffing plan and job descriptions for key faculty/staff must be included in Attachment 2 (Staffing Plan and Job Descriptions). However, the biographical sketches must be uploaded in the SF-424 RESEARCH & RELATED Senior Key Person Profile form that can be accessed in the Application Package under “Mandatory.”

### NARRATIVE GUIDANCE

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.

<table>
<thead>
<tr>
<th>Narrative Section</th>
<th>Review Criteria</th>
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<tbody>
<tr>
<td>Introduction</td>
<td>(2) Response</td>
</tr>
<tr>
<td>Needs Assessment</td>
<td>(1) Need, (2) Response, and (3) Evaluative Measures</td>
</tr>
<tr>
<td>Methodology</td>
<td>(2) Response, (3) Evaluative Measures, (4) Impact, and (5) Resources/Capabilities</td>
</tr>
<tr>
<td>Work Plan</td>
<td>(2) Response and (3) Evaluative Measures</td>
</tr>
<tr>
<td>Resolution of Challenges</td>
<td>(2) Response</td>
</tr>
<tr>
<td>Evaluation and Technical Support</td>
<td>(3) Evaluative Measures and (5) Resources/Capabilities</td>
</tr>
<tr>
<td>Capacity</td>
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<tr>
<td>Organizational Information</td>
<td>(5) Resources/Capabilities</td>
</tr>
<tr>
<td>Budget and Budget Narrative</td>
<td>(6) Support Requested – the budget section should include sufficient justification to allow reviewers to determine the reasonableness of the support requested.</td>
</tr>
</tbody>
</table>

### iii. Budget

See Section 4.1.iv of HRSA’s [SF-424 R&R Application Guide](#). Please note: The directions offered in the [SF-424 R&R Application Guide](#) may differ from those offered by Grants.gov. Follow the instructions included in the [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, you can avoid audit issues during the implementation phase.
Reminder: The Total Project Costs are the total allowable costs (inclusive of direct and indirect costs) incurred by the recipient to carry out a HRSA-supported project or activity. Total project costs include costs charged to the award and costs borne by the recipient to satisfy a matching or cost-sharing requirement, as applicable.

In addition, the Increasing Organ Donation Awareness Program requires the following:

If a consortium of organizations is conducting the project, applicants must include as attachments itemized line-item budgets and budget narratives (see IV.2.iv. below) for each year of grant support for each organization in the consortium. These attachments are submitted on the SF-424 R&R Sub-award Budget Attachment(s) Form. It is not necessary to submit cumulative budgets for the separate organizations. It is important to clearly indicate on each budget page which organization it represents. These forms will represent the full period of performance of federal assistance requested.

Department of Defense and Labor, Health and Human Services, and Education Appropriations Act, 2019 and Continuing Appropriations Act, 2019 (P.L. 115-245), Division B, § 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 FY, as required by law.

iv. Budget Justification Narrative
See Section 4.1.v of HRSA’s SF-424 R&R Application Guide.

v. Program-Specific Forms, if applicable

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. You must 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. If applicable, also include the required logic model in this attachment. If funds will be sub-awarded or expended on contracts, describe how your organization will ensure proper documentation of funds.

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 one page in length to the extent possible. Include the role, responsibilities, and qualifications of proposed project staff. Also, please include a description of your organization’s time-keeping process to ensure that you will comply with the federal standards related to documenting personnel costs.

**Attachment 3: Letters of Agreement, Memoranda of Understanding, and/or Description(s) of Proposed/Existing Contracts (project-specific)**

Provide any documents that describe working relationships between your organization and other entities and programs cited in the proposal. Documents that confirm actual or pending contractual or other agreements should clearly describe the roles of the contractors and any deliverable. Make sure any letters of agreement are signed and dated.

**Attachment 4: Project Organizational Chart**

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

**Attachment 5: Tables, Charts, etc.**

To give further details about the proposal (e.g., Gantt or PERT charts, flow charts).

**Attachments 6: Letter(s) of Support**

**Attachments 7-15: 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 and System for Award Management**

You must obtain a valid DUNS number, also known as the Unique Entity Identifier, for your organization/agency and provide that number in the application. You 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 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)).

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 you have 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://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.

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 January 16, 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 Increasing Organ Donation Awareness Program is subject to the provisions of Executive Order 12372, as implemented by 45 CFR part 100. See Executive Order 12372 in the HHS Grants Policy Statement at: http://www.hrsa.gov/grants/hhsgrantspolicy.pdf.

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 3 years, at no more than $450,000 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 B of the Department of Defense and Labor, Health and Human Services, and Education Appropriations Act, 2019 and Continuing Appropriations Act, 2019, (P.L. 115-245) are in effect at the time this NOFO is posted. Please see Section 4.1 of HRSA’s SF-424 R&R Application Guide for additional information. Awards will be made subsequent to enactment of the FY 2020 appropriation. The NOA will reference the FY 2020 appropriation act and any restrictions that may apply. Note that these or other restrictions may be updated, as required by law, upon enactment of a FY 2020 appropriations act.

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

- To purchase or improve land, or to purchase, construct, or make permanent improvements to any building except for minor remodeling.

- To make payments to recipients of services, except for reimbursement of reasonable and allowable out-of-pocket expenses associated with participation in project activities. For more information on cost principles please see page II-25 of the HHS Grants Policy Statement available online at ftp://ftp.hrsa.gov/grants/hhsgrantspolicystatement.pdf.

- To support: (a) projects that do not fall under one of the four research objectives listed in the introduction; (b) biomedical and clinical research; (c) the development and/or assessment of the efficacy of new or improved clinical methods of donor management, organ recovery, or organ preservation; (d) fundamental research focused on new or improved evaluation tools and methodologies; (e) fundamental research focused on the development of new behavioral theories relevant to health attitudes, practices, and decision-making; or (f) interventions inconsistent with existing federal law.

- To fund interventions to increase tissue donation alone.

- To fund proposals to assess clinical outcomes of donation after cardiac death organs.

- To fund Organ Procurement Organization (OPO) staff time devoted to project activities that are being supported by other sources. If an OPO is proposed to receive funding, describe how the OPO staff activities are separate from their normal operations.
• To fund staff time for individuals to supervise grant project staff if their role is generally to supervise staff and activities (e.g., an organization’s CEO cannot receive project funds to provide overall supervision of the project).

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. Review criteria are outlined below with specific detail and scoring points.

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 Increasing Organ Donation Awareness Program has six (6) criteria. See the review criteria outlined below with specific detail and scoring points.

Criterion 1: NEED (10 points) – Corresponds to Section IV’s Needs Assessment.

The extent to which the application provides a detailed description of the significance of the problem and the intervention components including:

- The need for the intervention nationally and in the local area in which the intervention will be implemented, with respect to the general population and the specific target population, if any.
- The level of knowledge about VCA or barriers to authorization for VCA donation for oneself or another individual for organ donation and/or donor registration experienced by the target population.
- The level of knowledge about and attitudes toward living donation experienced by the target population.
- The socio-cultural determinants of health and health disparities impacting the
population or community in relation to living organ donation or VCA deceased
donation, or organ donation in general.

- Supporting data, citing relevant published and unpublished literature.

Criterion 2: RESPONSE (30 points) – Corresponds to Section IV’s Introduction, Needs
Assessment, 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. The above will be measured by the extent to which the following
are addressed:

- Degree of clarity of proposed goals, objectives, and performance measures and
  their relationship to the project activities.
- Suitability and appropriate application of the theoretical foundation.
- Extent to which the strategies (scientific or other) described in the application are
capable of addressing the problem/need, attaining the project objectives.
- Extent to which the proposed intervention responds to the barriers described in
  the application for the general and/or target population.
- Quality of and justification for the proposed intervention and an explanation of
  how and why the specific intervention(s) is expected to have a substantial
  positive impact on the performance measure(s).
- Adequacy of the proposed study sites and target populations.
- Adequacy of the work plan in describing the activities or steps that will be used to
  achieve each of the activities proposed during the entire project period, including
  obtaining IRB approval and preparing non-competing applications.
- Adequacy of the discussion of potential challenges and ways to address them.
- Adequacy of the discussion of the original study if the proposed project is an
  extension study; degree of adherence to the original study, and justification for
  the proposed adaptations.
- Degree to which the application discusses the relevance of the project to the
  goals of Healthy People 2020.

Criterion 3: EVALUATIVE MEASURES (20 points) – Corresponds to Section IV’s
Needs Assessment, Methodology, Work Plan, and 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 assess: 1) to what extent
the project objectives have been met, and 2) to what extent these can be attributed to
the project.

Degree of scientific rigor in the research design, intervention development,
implementation, and assessment of the impact of the intervention, to include:

- Adequacy of the study population, supported by detailed power analysis
calculations and selection procedures, geographic areas, plans for retention of
target group and settings, and oversampling of specific populations, if appropriate.

- Quality of the methods to monitor and assess the effectiveness of the intervention and other relevant factors. Measurement instruments and procedures must be able to assess: 1) the extent to which the project objectives have been met, and 2) the extent to which these can be attributed to the intervention.

- Quality of the applicant’s access to necessary data (e.g., through letters of support) and the explanation of how the data will be used to inform project development and delivery.

- Quality of plans for inclusion of minorities, members of all sexes/genders, and all ages as applicable.

- Quality of plans for protection of human subjects from research risks.

- To the extent applicable, the degree to which the application is in compliance with the Department of Health and Human Services (HHS) regulations for protection of human subjects (45 CFR part 46). See the instructions in the Grants.gov Application Guide SF424 (R&R), Supplemental Instructions for Preparing the Human Subjects Section of the Research Plan, Appendix B.

- To the extent applicable, the degree to which the application discusses plans to seek Institutional Review Board (IRB) review and includes it within the Work Plan (An IRB decision is not required at the time of application submission but must be received prior to initiation of any activities involving human subjects).

Criterion 4: IMPACT (15 points) – Corresponds to Section IV’s Methodology, and Budget

The feasibility and effectiveness of plans for dissemination of project results, and the:

- Extent to which project results may be national in scope, and
- degree to which the project activities are replicable and sustainable beyond the federal funding.

The degree to which the design and evaluation will assess whether the intervention can be effectively replicated, transferred, and applied by other organizations given similar fiscal resources:

- Cost-effectiveness of the intervention relative to the size or magnitude of the impact (e.g., cost and ease of replicating the proposed intervention).

- Potential for effectiveness, and appropriateness of plans for dissemination of project results and tools for replication.
• Adequacy of the replication guide to assess broad replicability of the intervention.

Criterion 5: RESOURCES/CAPABILITIES (15 points) – Corresponds to Section IV’s Methodology, Evaluation and Technical Support capacity, Organizational Information

• The extent to which project organization(s) demonstrate expertise and experience relevant to the focus of the proposed project, including organizational expertise and current involvement in donation or transplantation outreach:

• The extent to which that the Principal Investigator has experience and expertise in either, design and implementation of interventions related to the proposed focus and/or design and conduct of studies to assess the effectiveness of social-behavioral interventions.

• The extent to which the project demonstrates substantive involvement of the Principal Investigator in the day-to-day management of the project.

• The extent to which the applicant demonstrates the Principal Researcher has expertise and experience in research design and methods in the behavioral and social sciences.

• The extent to which the Key Donation Professional is involved in all aspects of the project.

• The extent to which project personnel are qualified by training and/or experience to implement and carry out the project.

• The extent to which expertise and experience of the proposed project staff is supported by education, relevant publication in peer-reviewed journals, and work history.

• Appropriateness of staff for reaching the target population.

• The extent to which the applicant provides the appropriate facilities and other resources to fulfill the needs and requirements of the proposed project.

• The extent to which the applicant describes the proposed collaborative arrangements with other organizations including faith-based and community-based organizations, if any.

Criterion 6: SUPPORT REQUESTED (10 points) – Corresponds to Section IV’s Budget and Budget Justification

• The reasonableness of the proposed budget and quality of the justification for each year of the project period 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 extent to which key personnel have adequate time devoted to the project to achieve project objectives.

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 approving officials may also consider assessment of risk and the other pre-award activities described in Section 3 below. In addition to the ranking based on merit criteria, HRSA approving officials will apply other factors (e.g., geographical distribution) described below in selecting applications for award.

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.

Effective January 1, 2016, 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 any of 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) prior to the start date of 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. 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 federally 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 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) **Progress Report(s).** The recipient must submit a progress report to HRSA on an annual basis. Further information will be available in the NOA.

2) **Other required reports and/or products:**

   **Final Report.** A final report is due within 90 days after the project period ends. A final report is required, including a description and assessment of the award recipient’s use of funds provided under this grant program with a detailed description of the research, the intervention, and its effectiveness, especially as related to the performance measures for the proposed project.

   The final report shall include recommended strategies for replication, e.g., implementation guidelines, and copies of the materials and software that would need to be shared. One copy of all publications associated with the project shall be included. Award recipients will receive more information about the specific requirements and format of this report. The final report must be submitted on-line by awardees in the Electronic Handbooks system at [https://grants.hrsa.gov/webexternal/home.asp](https://grants.hrsa.gov/webexternal/home.asp). In addition, each award recipient must present an oral report of their project and findings in the TA workshop (see below) of their final project year.

3) **Integrity and Performance Reporting.** The NOA will contain a provision for integrity and performance reporting in FAPIIS, 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:

Denise Boyer  
Grants Management Specialist  
Division of Grants Management Operations, OFAM  
Health Resources and Services Administration  
5600 Fishers Lane, Mailstop 10N146B  
Rockville, MD 20857  
Telephone: (301) 594-4256  
Fax: (301) 443-5461  
Email: dboyer@hrsa.gov

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

Successful applicants/recipient 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 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 the following technical assistance:

Webinar

Day and Date: November 14, 2019
Time: 1 – 2 p.m. ET
Call-In Number: 888-566-1292
Participant Code: 3232869

Venus Walker
Public Health Analyst, Division of Transplantation
Attn: Organ Transplantation Program
Healthcare Systems Bureau
Health Resources and Services Administration
5600 Fishers Lane, Room 08W49D
Rockville, MD 20857
Telephone: (301) 443-7578
Fax: (301) 594-6095
Email: vwalker@hrsa.gov
Technical Assistance (TA) Workshops for Award Recipients

In order to maximize effectiveness and efficiency and promote creative exchange of ideas, all funded projects are required to participate in a total of four virtual workshops during the three years of the project period. There will be two (2) Award Recipient Technical Assistance Workshops during the first project year: a pre-implementation meeting in early fall and an all award recipient meeting in the summer. An all Award Recipient meeting also will be held in the summer of all subsequent project years. The researcher and key donation or transplantation professional from each funded project are required to participate in all TA workshops.

The purpose of the TA workshops is to discuss the critical components of each project, assess progress, identify problem areas and potential solutions, develop strategies for achieving maximum efficacy of each project, and promote networking among award recipients with like interests. Workshop consultants will review progress reports and other materials and provide suggestions to award recipients on issues such as project intervention, design, approach, outcome measures, budget, and parameters. Other attending award recipients also will offer suggestions and feedback. Suggested budget revisions commensurate with project revisions must be submitted to the Federal Government for review and approval. Additionally, project review conference calls may be held periodically with staffs of individual projects or small groups of projects.

Final Presentation

Award recipients must make an oral presentation of their intervention and outcomes during the summer virtual TA meeting of the final project year. Award recipients who obtain a no-cost extension shall make the final presentation during the summer TA meeting of the no-cost extension year so final data can be reported. Information shall include: description of the intervention and approach, findings, conclusions, challenges and solutions experienced, and contributions of the project in terms of impact on donation.

Data Coordination and Management

Each award recipient shall be responsible for the collection, entry, quality control, and analysis of all project data. Award recipients shall provide interim data and plans for proposed analyses to their government project officer as requested. All data resulting from this award shall be made available to the grantor and shall be dispersed at the grantor’s discretion. Privacy and confidentiality must be protected in accordance with the Privacy Act, as amended (5 U.S.C. 522a).

Publication and Presentation of Project Findings

Publication of major findings is encouraged. All publications and oral presentations of work performed under, and data resulting from, this award must contain appropriate acknowledgment of HRSA support and a disclaimer as follows:
“This publication/presentation was supported by Grant No. _____ from the Health Resources and Services Administration’s Division of Transplantation (HRSA/DoT), U.S. Department of Health and Human Services. The contents of this publication/presentation are solely the responsibility of the author(s) and do not necessarily represent the views of HRSA/DoT.”

In addition, HRSA must be notified in advance of all publications and presentations to enable coordination of announcements about the oral or written presentation of information resulting from the project funded under this NOFO.

**Tips for Writing a Strong Application**

See Section 4.7 of HRSA’s *SF-424 R&R Application Guide*. 
Appendix

Resources: Several resources of potential interest to applicants are noted below.

- Brief descriptions of projects funded through this award can be obtained electronically at: [https://www.organdonor.gov/about-dot/grants/programs/behavioral-interventions.html](https://www.organdonor.gov/about-dot/grants/programs/behavioral-interventions.html) A list of publications by current and previously funded DoT award recipients can be obtained at [http://www.organdonor.gov/dtcp/publications.html](http://www.organdonor.gov/dtcp/publications.html)