U.S. Department of Health and Human Services

HRSA

Health Resources & Services Administration

NOTICE OF FUNDING OPPORTUNITY

Fiscal Year 2023

Bureau of Health Workforce

Division of Nursing and Public Health

Maternity Care Nursing Workforce Expansion (MatCare) Program

Funding Opportunity Number: HRSA-23-120

Funding Opportunity Type(s): New

Assistance Listings Number: 93.247

Application Due Date: July 14, 2023

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 may take up to 1 month to complete.

Issuance Date: June 12, 2023

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See Section VII for a complete list of agency contacts.

Authority: 42 U.S.C. § 296j (Section 811 of the Public Health Service Act)

508 COMPLIANCE DISCLAIMER

Note: Persons using assistive technology may not be able to fully access information in this file. For assistance, email or call one of the HRSA staff listed in Section VII. Agency Contacts.

EXECUTIVE SUMMARY

The Health Resources and Services Administration (HRSA) is accepting applications for the fiscal year (FY) 2023 Maternity Care Nursing Workforce Expansion (MatCare) Program. The purpose of this program is to provide support to accredited nurse midwifery programs to train nurse midwives through trainee scholarships, stipends, curriculum enhancement, and community-based training in order to grow and diversify the maternal and perinatal health nursing workforce. The program seeks to increase the number of Certified Nurse Midwives (CNMs) prepared to address and reduce maternal mortality and morbidity in rural, urban underserved, and tribal communities.

Funding Opportunity Title:	Maternity Care Nursing Workforce Expansion (MatCare) Program
Funding Opportunity Number:	HRSA-23-120
Due Date for Applications:	July 14, 2023
Anticipated FY 2023 Total Available Funding:	$8,000,000
Estimated Number and Type of Award(s):	Approximately 8 grants
Estimated Annual Award Amount:	Up to $1,000,000 per award
Cost Sharing/Match Required:	No
Period of Performance:	September 30, 2023, through September 29, 2027 (4 years)

Eligible Applicants:	Eligible applicants are accredited schools of nursing, nursing centers, academic health centers, state, or local governments, and other public or private nonprofit entities determined appropriate by the Secretary, such as HRSA-supported health centers or Rural Health Clinics.
	Domestic community-based organizations, tribes and tribal organizations are eligible to apply, if otherwise eligible.
	Individuals and for-profit entities are not eligible applicants under this NOFO.
	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,* except where instructed in this NOFO to do otherwise. Visit HRSA's How to Prepare Your Application page for more information.

Technical Assistance

HRSA will hold a pre-application technical assistance (TA) webinar for applicants seeking funding through this opportunity. The webinar will provide an overview of pertinent information in the NOFO and an opportunity for applicants to ask questions. Visit the HRSA Bureau of Health Workforce's open opportunities website to learn more about the resources available for this funding opportunity.

Table of Contents

I. Program Description

1. Purpose

This notice announces the opportunity to apply for funding under the Maternity Care Nursing Workforce Expansion (MatCare) Program.

The purpose of the MatCare Program is to support accredited nurse midwifery programs to train nurse midwives through trainee scholarships, stipends, curriculum enhancement, and community-based training. The program seeks to grow and diversify the maternal and perinatal health nursing workforce through support for education and training in rural and underserved communities.

Program Goals

1. Increase the number of Certified Nurse Midwives (CNM) and diversify the maternal and perinatal health nursing workforce

2. Enhance maternal health training to better address maternal mental health, maternal mortality, and morbidity risk factors

3. Strengthen community-based training partnerships

2. Background

The MatCare Program is authorized by 42 U.S.C. § 296j (Section 811 of the Public Health Service Act).

More women die in the United States each year from pregnancy related complications than any other developed country.[1] The maternal mortality rate for 2021 was 32.9 deaths per 100,000 live births, compared with a rate of 23.8 in 2020 and 20.1 in 2019.[2] Disparities in maternal mortality persist due to variations in healthcare quality, access to care, underlying chronic conditions, and provider implicit bias, which contribute to the disproportionate impact of maternal deaths among underserved communities.[3] American Indian/Alaska Native and Black women are 2 and 3 times more likely to die from pregnancy-related causes than White women.[3] Rural and underserved populations experience maternal mortality more acutely[4]. Rural areas had a pregnancy-related mortality rate of 29.4 deaths per 100,000 live births versus 18.2 in urban areas.[5]

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[1] Tikkanen, R., Gunja, M. Z., FitzGerald, M., & Zephyrin, L. (2020, November 18). *Maternal mortality and maternity care in the United States compared to 10 other developed countries*. Maternal Mortality Maternity Care US Compared 10 Other Countries | Commonwealth Fund. (Accessed February 2023). https://www.commonwealthfund.org/publications/issue-briefs/2020/nov/maternal-mortality-maternity-care-us-compared-10-countries

[2] Hoyert DL. Maternal mortality rates in the United States, 2021. NCHS Health E-Stats. 2023. DOI: https://dx.doi.org/10.15620/cdc:124678

[3] Centers for Disease Control and Prevention. (2022, April 6). *Working together to reduce Black Maternal Mortality*. Centers for Disease Control and Prevention. (Accessed February 2023). From https://www.cdc.gov/healthequity/features/maternal-mortality/index.html

[4] *Health disparities in rural women*. ACOG. (2014, February). Retrieved February 10, 2023, from https://www.acog.org/clinical/clinical-guidance/committee-opinion/articles/2014/02/health-disparities-in-rural-women

[5] Maron, DF. Maternal Health Care Is Disappearing in Rural America. Scientific American. (2017). Retrieved from: https://www.scientificamerican.com/article/maternal-health-care-is-disappearing-in-rural-america/

Compounding this maternal mortality issue is the shortage of maternal health providers, with the shortage of obstetricians-gynecologists (OB/GYNs) projected to increase to more than 5,700 by 2030.[6] Furthermore, shortages in rural areas persist, with 50 percent of US counties lacking OB/GYNs and 56 percent lacking nurse midwives.[7] CNMs can help address this gap and meet the growing need for maternal health services and are well positioned to address issues related to social determinants of health for patients, families, and communities through primary care, gynecological care, and family planning services.[8]

Increasing and diversifying the number of CNMs is a high priority for addressing the maternal health workforce shortage and reducing maternal mortality disparities. Nurses from diverse backgrounds may be more sensitive to the issues of inequities and are more likely to work in underserved areas, providing lasting and sustainable health care to those who experience health, social, and economic disparities.[9,10] Nurses who share a cultural or linguistic background with their patients may have a more in-depth knowledge of factors that impact their patients' health outcomes, and can tailor treatment plans to appropriately meet patient needs.[10] Research suggests that having a diverse nursing workforce population including from underrepresented minority (URM) groups are more likely to care for URM patients and serve in impoverished areas and thus improve access for underserved populations.[11] Ensuring the maternal health workforce can address the needs of the communities they serve will help meet the cultural needs of an increasingly diverse population and achieving health equity in the US.[10]

To better understand this NOFO, go to the dictionary of key program-related terms at [Health Workforce Glossary](#).

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.

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[6] HRSA. (n.d.). Projections of Supply and Demand for Women's Health Service Providers: 2018-2030. (Accessed February 202). https://bhw.hrsa.gov/sites/default/files/bureau-health-workforce/data-research/projections-supply-demand-2018-2030.pdf

[7] Hung, P., Henning-Smith, C. E., Casey, M. M., & Kozhimannil, K. B. (2017). Access to obstetric services in rural counties still declining, with 9 percent losing services, 2004-14. Health Affairs, 36(9), 1663-1671.

[8] Workforce Projections. (Accessed February 2023). Data.hrsa.gov. https://data.hrsa.gov/topics/health-workforce/workforce-projections

[9] Smith, G. R. (2007). Health Disparities: What Can Nursing Do? *Policy, Politics, & Nursing Practice*, *8*(4), 285–291. Retrieved from: https://doi.org/10.1177/1527154408314600

[10] How Nurses Can Help Address the Health Disparities Problem. (n.d.). Eastern Michigan University Online. Retrieved June 16, 2022, https://online.emich.edu/articles/rnbsn/the-health-disparities-problem.aspx#:~:text=Workplace%20Diversity%3A%20A%20diverse%20nursing%20workforce

[11] Glazer, G., Tobias, B., & Mentzel, T. (2018). Increasing healthcare workforce diversity: Urban universities as catalysts for change. Journal of Professional Nursing, 34(4), 239-244. https://doi.org/10.1016/j.profnurs.2017.11.009

2. Summary of Funding

HRSA estimates approximately $8,000,000 to be available annually to fund approximately 8 award recipients. You may apply for a ceiling amount of up to $1,000,000 annually (reflecting direct and indirect costs) per year. **Your request for each subsequent year of the period of performance cannot exceed your year 1 request**.

The period of performance is September 30, 2023 through September 29, 2027 (4 years). Funding beyond the first year is subject to the availability of appropriated funds in subsequent fiscal years, satisfactory progress, and a decision that continued funding is in the best interest of the Federal Government.

Limitations on Indirect Cost Rates

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

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 accredited schools of nursing, nursing centers, academic health centers, state or local governments, and other public or private nonprofit entities determined appropriate by the Secretary, such as HRSA supported health centers or Rural Health Clinics.

Eligible applicants located in the 50 states, the District of Columbia, Guam, the Commonwealth of Puerto Rico, the Northern Mariana Islands, American Samoa, the U.S. Virgin Islands, the Federated States of Micronesia, the Republic of the Marshall Islands, and the Republic of Palau, may apply for these funds. Domestic community-based organizations, tribes and tribal organizations are also eligible to apply, if otherwise eligible.

Under an academic-clinical partnership, either partner may apply under this NOFO, provided the applicant is an eligible entity. Only one of the partners may apply and be awarded.

Individuals and for-profit entities are not eligible applicants under this NOFO.

2. Cost Sharing/Matching

Cost sharing/matching is not required for this program.

3. Other

HRSA may not consider an application for funding if it contains any of the non-responsive criteria below:

- Exceeds the funding ceiling amount
- Fails to satisfy the deadline requirements referenced in Section IV.4

Maintenance of Effort

The recipient must agree to maintain non-federal funding for award activities at a level that is not less than expenditures for such activities maintained by the entity for the fiscal year preceding the fiscal year for which the entity receives the award, as required by 42 U.S.C. § 296b(b) (Section 803(b) of the Public Health Service Act). Such federal funds are intended to supplement, not supplant, existing non-federal expenditures for such activities. Complete the Maintenance of Effort (MOE) information and submit as *Attachment 5*.

HRSA will enforce statutory MOE requirements through all available mechanisms.

Beneficiary Eligibility Requirement

A trainee receiving support from grant funds under this program must be a citizen, non-citizen national of the United States, an individual lawfully admitted for permanent residence to the United States, or any other "qualified alien" under section 431(b) of the Personal Responsibility and Work Opportunity Reconciliation Act of 1996, Pub. L. 104-193, as amended. Individuals on temporary or student visas are not eligible to participate.

To be eligible for MatCare traineeship support, the student/trainee must meet all of the following requirements:

- Be a licensed registered nurse (RN).
- Be eligible to work in the United States.
- Be enrolled full-time in an advanced nursing education program to become certified as a CNM.
- Maintain the predetermined academic standards of the recipient institution.

Multiple Applications

Multiple applications from an organization with the same Unique Entity Identifier (UEI) are not allowable. Applicants can submit only one application per unique entity with distinct UEI. For example, the University of Homestate at Smalltown campus and the University of Homestate at Anytown campus with their own separate UEIs and separate

grounds, buildings (e.g., school of nursing), and faculty, can each submit an application for this program.

HRSA will only accept your last validated electronic submission before the Grants.gov application due date as the final and only acceptable application.

Failure to include all required documents as part of the application may result in an application being considered incomplete or non-responsive. **Where required, applications received without the appropriate tables will be deemed non-responsive to the NOFO and will not be considered for funding under this notice.**

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 Grants.gov: HOW TO APPLY FOR GRANTS. If you use an alternative electronic submission, see Grants.gov: APPLICANT SYSTEM-TO-SYSTEM.

Form Alert: For the Project Abstract Summary, applicants using the SF-424 R&R Application Package are encountering a "Cross-Form Error" associated with the Project Summary/Abstract field in the "Research and Related Other Project Information" form, Box 7. To avoid the "Cross-Form Error," you must attach a blank document in Box 7 of the "Research and Related Other Project Information" form and use the Project Abstract Summary Form in workspace to complete the Project Abstract Summary. See Section IV.2.i Project Abstract for content information.

The NOFO is also known as "Instructions" on Grants.gov. You must select "Subscribe" and provide your email address for HRSA-23-120 in order to receive notifications including modifications, clarifications, and/or republications of the NOFO on Grants.gov. You will also receive notifications of documents placed in the RELATED DOCUMENTS tab on Grants.gov that may affect the NOFO and your application. *You are ultimately responsible for reviewing the For Applicants page for all information relevant to this NOFO.*

2. Content and Form of Application Submission

Application Format Requirements

Section 4 of HRSA's *SF-424 R&R Application Guide* provides general instructions for the budget, budget narrative, staffing plan and personnel requirements, assurances, certifications, etc. You must submit the information outlined in HRSA's SF-424 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 budget figures expressed in U.S. dollars (45 CFR § 75.111(a)).

See Section 8.5 of the HRSA *SF-424 R&R Application Guide* for the Application Completeness Checklist to assist you in completing your application.

Application Page Limit

The total number of pages that count against the page limit shall be no more than **50 pages** when we print them. HRSA will not review any pages that exceed the page limit. Using the pages within the page limit, HRSA will determine eligibility using Section III. Eligibility Information of the NOFO.

These items DO NOT count in the Page Limit:
- Standard OMB-approved forms included in the workspace application package
- Abstract (standard form (SF) "Project_Abstract Summary"
- The Indirect Cost Rate Agreement (if it applies)
- The proof of non-profit status (if it applies)

If there are other items that do not count against the page limit, we'll make this clear in Section IV.2.vii Attachments.

If you use an OMB-approved form that isn't in the HRSA-23-120 workspace application package, it may count toward the page limit. We recommend you only use Grants.gov workspace forms related with this NOFO to avoid going over the page limit.

Applications must be complete, within the maximum specified page limit, and validated by Grants.gov under HRSA-23-120 before the deadline.

Debarment, Suspension, Ineligibility, and Voluntary Exclusion Certification

1) You certify on behalf of the applicant organization, by submission of your proposal, that neither you nor your principals are presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from participation in this transaction by any federal department or agency.

2) Failure to make required disclosures can result in any of the remedies described in 45 CFR § 75.371, including suspension or debarment. (See also 2 CFR parts 180 and 376, and 31 U.S.C. § 3354).

3) If you are unable to attest to the statements in this certification, you must include an explanation in *Attachment 9-15: Other Relevant Documents*.

See Section 4.1 viii of HRSA's *SF-424 Application Guide* for additional information on all certifications.

Program Requirements and Expectations

Successful award recipients must address and implement the following program requirements:

Increase the Number of Certified Nurse Midwives and Diversify the Maternal and Perinatal Health Workforce

1. Recruit, train, support (e.g., through mentorship, peer support, social support), and graduate students, from diverse backgrounds, including those from disadvantaged and underrepresented populations, who will become certified nurse midwives. Applicants/award recipients are strongly encouraged to recruit faculty and preceptors from diverse populations.

2. Provide financial traineeship support, such as tuition scholarships and/or stipends, to student nurse midwives committed to working with rural and or underserved populations. Trainees who receive HRSA funds from the MatCare program must apply for and obtain a National Provider Identifier (NPI) number as a condition of their traineeship support.

   o Award recipients must collect and report the NPI numbers of nursing students who receive traineeship funds and follow-up with graduates to collect post-graduation employment demographics for a minimum of 1 year after graduation.

Expand Maternal Health Training and Enhance Curriculum

3. Expand accredited certified nurse midwifery training programs to increase the number of students trained and graduated. Funding can be used to support infrastructure funding and project costs to administer training, such as administrative costs, preceptor stipends, faculty salary, and other project costs.

4. Implement or enhance didactic and clinical curriculum that addresses maternal mental health, social determinants of health (SDOH), care for individuals with limited English proficiency (LEP) and/or individuals with physical disabilities and/or intellectual and developmental disabilities (IDD), and promotes health equity for rural and underserved populations.

Strengthen Community-Based Training Partnerships

5. Establish or enhance academic-clinical/community-based partnerships that facilitate immersive, clinical training experiences (e.g., 3-6 months) for trainees in community-based settings with the goal of pairing them with competent preceptors and preparing them to provide high quality, culturally competent care. Such training experiences must include a focus on addressing maternal mental health, reducing health disparities, decreasing maternal mortality and morbidity, and addressing the needs of underserved populations. Award recipients are responsible for establishing community-based clinical training experiences with competent clinical preceptors, and ensuring each trainee has a placement.

   Examples of community-based settings to train and provide experiential learning experiences to participants include HRSA-supported health centers and Rural Health Clinics or other entities serving rural and underserved communities.

6. Develop or expand partnerships with other academic institutions (including Historically Black Colleges and Universities (HBCUs), Tribal Colleges and Universities (TCUs), Minority Serving Institutions (MSIs)), community-based organizations, or other community-based entities, to develop strategies to recruit a diverse group of trainees (through holistic admissions, career pathway programs, etc.), a diverse group of faculty and preceptors, and to assist graduates in finding employment.

Program-Specific Instructions

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

Develop and upload (in Attachment 9) a disparities impact statement. Regularly report to HRSA the increase in the numbers of student nurse midwives that are (1) in training and (2) graduated as a result of grant funding.

Follow-up with graduates to collect post-graduation employment information for a minimum of 1 year after graduation and regularly report to HRSA the number of grant program-funded graduates providing maternal health care as certified nurse midwives.

Award recipients must adhere to HHS Evaluation Policy and evaluation standards and best practices described in OMB Memorandum M-20-12 when evaluating their program. Award recipients are required to participate in federally-designed evaluations to assess program effectiveness and efficiency upon request.

i. *Project Abstract*

Use the Standard OMB-approved Project Abstract Summary Form that is included in the workspace application package. Do not upload the abstract as an attachment or it may count toward the page limit. See *Form Alert* in Section IV.1 Application Package. For information required in the Project Abstract Summary Form, see Section 4.1.ix of HRSA's *SF-424 R&R Application Guide.* When applicable, identify if a funding priority/ preference is being requested.

NARRATIVE GUIDANCE

To ensure that you fully address the review criteria, the table below provides a crosswalk between the narrative language and where each section falls within the review criteria. Any forms or attachments referenced in a narrative section may be considered during the objective review.

Narrative Section	Review Criteria
Purpose and Need	(1) Purpose and Need

Narrative Section	Review Criteria
Response to Program Purpose: (a) Work Plan (b) Methodology/Approach (c) Resolution of Challenges	(2) Response to Program Purpose: (a) Work Plan (b) Methodology/Approach (c) Resolution of Challenges
Impact: (a) Evaluation and Technical Support Capacity (b) Project Sustainability	(3) Impact: (a) Evaluation and Technical Support Capacity (b) Project Sustainability
Organizational Information, Resources, and Capabilities	(4) Organizational Information, Resources, and Capabilities
Budget and Budget Justification Narrative	(5) Support Requested

ii. *Project Narrative*

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

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

- *PURPOSE AND NEED -- Corresponds to Section V's Review Criterion(a) 1*

    Use and cite demographic data whenever possible to support the information provided. In your application:

    - Briefly describe the purpose of the proposed project and how it will address the need for certified nurse midwives.

    - Include a discussion of the target population served by certified nurse midwives, including the unmet needs as well as the maternal mental health, SDOH and health disparities impacting the population or communities served. Applicants may also use HRSA's Maternal & Child Health Infant Mapping Tool or HPSA Find (Primary Care Maternity Care Target Area Score) to obtain additional data on maternal health in their community.

    - Describe the need to diversify the CNM workforce in your locality, state or region and your institution's commitment to train individuals who are from diverse backgrounds, including rural or disadvantaged backgrounds. This will also be demonstrated by completing the BHW Program Specific Data

Form and uploading in *Attachment 8*, providing information about your institution's student and graduate demographics.

- Include a Disparities Impact Statement (DIS) in *Attachment 9*. The DIS is an instrument used to measure and describe how training will support trainees' capacity to meet the needs of underserved populations.

- *RESPONSE TO PROGRAM PURPOSE -- This section includes three sub-sections — (a) Work Plan; (b) Methodology/Approach; and (c) Resolution of Challenges—all of which correspond to Section V's Review Criteria 2 (a), (b), and (c).*

  - *(a) WORK PLAN -- Corresponds to Section V's Review Criterion(a) 2 (a)*

In your application, provide a detailed work plan that demonstrates your ability to implement a project of the proposed scope. Your work plan must be submitted through the Standardized Work Plan (SWP) Form located in the Grants.gov workspace. Specific instructions on filling out the Standardized Work Plan Form are at Section IV.2.v. In addition to completing the Standardized Work Plan, applicants should include a brief narrative as outlined below.

In your work plan:

- Describe the activities or steps you will use to achieve each of the objectives proposed in your Methodology section throughout the entire four-year period of performance for the grant.

- Describe the timeframes, deliverables, and key partners/stakeholders required during the grant period of performance to address each of the needs described in the Purpose and Need section.

- Identify meaningful support and collaboration with key stakeholders in planning, designing, and implementing all activities, including securing clinical training sites.

- Explain how the work plan is appropriate for the program design and how the targets fit into the overall timeline of grant implementation.

(b) METHODOLOGY/APPROACH -- Corresponds to Section V's Review Criterion 2 (b)

In your application, and consistent with the Program Requirements and Expectations in this NOFO:

- Outline your proposed project objectives, including proposed number of student NMs to be trained, and activities to achieve those objectives, and describe how they link to the project purpose and stated needs.

- Propose methods that you will use to address the stated needs. Include a description of any innovative methods that you will use. Specifically, applicants must describe the following:

  o Strategies to recruit and enroll trainees that address the needs of the communities served including those from diverse backgrounds,

which may include but are not limited to, outreach through HBCUs, TCUs and MSIs, holistic admissions, and career pathway programs.

- o Approach in providing trainee retention and graduation support services such as mentoring, peer support, tutoring, counseling, academic coaching, stipends to support eligible non-tuition costs, etc.

- o How the project will provide funds to trainees, including a disbursement plan for provision of traineeship support, including stipends.

- o Plans to establish or expand partnerships with community-based clinical sites, other academic institutions (which may include HBCUs, TCUs, MSIs), community-based organizations, or other community-based entities, to recruit, retain and graduate trainees, provide community-based clinical training experiences, and assist graduates to find employment.

- o Plans to secure community-based clinical training sites and competent clinical preceptors, that will prepare trainees to reduce health disparities, decrease maternal mortality and morbidity, and address the needs of underserved populations. Such plan must include ensuring that each trainee has placement with competent clinical preceptors.

- Identify strategies, tools and/or activities to address the SDOH, increase health literacy, and advance health equity.

(c) RESOLUTION OF CHALLENGES -- Corresponds to Section V's *Review Criterion 2 (c)*

In your application:

- Discuss challenges that you are likely to encounter in designing and implementing the activities described, such as challenges with recruitment, retention, and graduation of trainees, including those from diverse backgrounds.

- Discuss approaches that you will use to resolve challenges described.

- *IMPACT -- This section includes two sub-sections— (a) Evaluation and Technical Support Capacity; and (b) Project Sustainability—both of which correspond to Section V's Review Criteria 3 (a) and (b).*

  - *(a) EVALUATION AND TECHNICAL SUPPORT CAPACITY -- Corresponds to Section V's Review Criterion) 3 (a)*

    In your application:

    - Describe the systems and processes that will enable you to meet HRSA's performance measurement requirements for the MatCare Program. This

should include your strategy for collecting, managing, and reporting required performance data in an accurate and timely manner. At the following link you will find examples of reporting forms required for other BHW nursing workforce development grants that include data elements that you may be required to collect: http://bhw.hrsa.gov/grants/reporting/index.html. Note: Performance measures and data forms are subject to change each academic year.

- Document the procedure for assuring the data collection, management, storage, and reporting of National Provider Identifier numbers for individuals participating in the Program. Describe your process to track trainees after program completion/ graduation for up to 1 year, to include collection of trainees' NPIs. (Note: Trainees in eligible professions/disciplines who receive HRSA funds as a result of this award are required to apply for an NPI for the purpose of collecting post-graduation employment demographics).

- Describe the program performance evaluation. The program performance evaluation should monitor ongoing processes and the progress towards meeting the goals and objectives of the project. Include evidence that the evaluative measures will be able to assess: 1) to what extent the program objectives have been met, and 2) to what extent these can be attributed to the project. Include descriptions of the inputs (e.g., organizational profile, collaborative partners, key personnel, budget, and other resources), key processes, variables to be measured, and expected outcomes of the funded activities. Evaluations must adhere to HHS Evaluation Policy and evaluation standards and best practices described in OMB Memorandum M-20-12. The evaluation and reporting plan also should include the plans for dissemination of project results.

- *(b) PROJECT SUSTAINABILITY -- Corresponds to Section V's Review Criterion 3 (b)*

   In your application:

   - Propose a plan for project sustainability after the period of federal funding ends. Award recipients are expected to sustain key elements of their projects that have been effective in improving practices and that have led to improved outcomes for the target population.

   - Include a description of specific actions you will take to (a) highlight key elements of your grant projects, e.g., training methods or strategies, which have been effective in improving practices; (b) obtain future sources of potential funding; and (c) provide a timetable for becoming self-sufficient.

   - Discuss challenges that are likely to be encountered in sustaining the program and approaches that will be used to resolve such challenges.

- *ORGANIZATIONAL INFORMATION, RESOURCES, AND CAPABILITIES --*

Corresponds to Section V's [Review Criterion(a) 4](#)

In your application:

- Succinctly describe your organization's current mission, structure, and scope of current activities and how these elements all contribute to the organization's ability to implement the program requirements and meet program expectations. Include an organizational chart (requested in [Section IV.2.v./vi](#)., [Attachment 3](#)).

- Discuss how the organization will follow the approved plan, as outlined in the application, properly account for the federal funds, ensure appropriate oversight of funds, and document all costs to avoid audit findings.

- Describe current experience, skills, and knowledge of personnel on previous work of a similar nature. Include the staffing plan and job descriptions for key faculty/staff to be involved in the proposed project in [Attachment 2](#). Describe the minimum qualifications for each faculty/staff position in the job description. Functional and program responsibilities should be specified in the narrative and position descriptions. A position description should not exceed **one** page in length but can be as short as one paragraph in length due to page limits.

- Include biographical sketches for key personnel in the SF-424 RESEARCH & RELATED Senior Key Person Profile (Expanded) form that can be accessed in the Application Package under "Mandatory". (See details below).

- Describe organizations who will partner with yours to fulfill the goals of the program and meet the training objectives. Include, noting overall page limits, select copies of letters of agreement/MOU ([Attachment 4](#)), letters of support ([Attachment 7](#)) or similar documents from key organizations/individuals of their willingness to perform in accordance with the plan presented in the application, indicating partnership or support.

Project Director: The Project Director for the proposed project must at a minimum be a licensed Registered Nurse, with a master's or doctoral level degree with experience in maternal health care. HRSA encourages applicants to select Project Directors with demonstrated competence (e.g., student/faculty/preceptor recruitment; community partnerships, program design), appropriate academic preparation, clinical (CNM) expertise, and experience as an educator. The Project Director maintains primary oversight for the project and is responsible to HRSA for all deliverables, requests for information, participation in HRSA requirements, and collaborations required for the grant. The Project Director is the primary contact and works closely with HRSA staff, members of the project staff and partners, and other award recipients as needed, to synergize efforts and ensure success of the project, and accomplish the goals of the MatCare program. NOTE: There can only be one Project Director for the MatCare Program.

Project Coordinator: The MatCare Program must include a Project Coordinator role that can be supported with grant funds or in-kind funds. The Project Coordinator is the point of contact for day-to-day operations of the project and will be responsible for

implementing, overseeing, managing, coordinating, and tracking project activities and trainees, and will serve as a liaison between project partners. The Project Coordinator will also be responsible for data collection and ensuring timely reporting of data to HRSA.

Biographical Sketches

Provide a biographical sketch for key faculty/staff contributing to the project (at a minimum, include a biographical for the Project Director). The information must be current, indicating the individual's position and sufficient detail to assess the individual's qualifications for the position being sought and consistent with the position description. ***Each biographical sketch should be limited to two pages as they count toward the overall page limit***. Include all degrees and certificates.

Biographical sketches (see Appendix C for sample) must be uploaded in the *SF-424 RESEARCH & RELATED Senior/Key Person Profile (Expanded)* form that can be accessed in Grants.gov via the NOFO Application Package under "Mandatory."

Biographical sketches should include the following information:

- Senior/key personnel name
- Position Title
- Education/Training - beginning with baccalaureate or other initial professional education, such as nursing, including postdoctoral training and residency training if applicable:
  - o Institution and location
  - o Degree (if applicable)
  - o Date of degree (MM/YY)
  - o Field of study
- *Section A (required)* **Personal Statement.** Briefly describe why the individual's experience and qualifications make them particularly well-suited for their role (e.g., PD/PI) in the project that is the subject of the award.
- Section B (*required*) **Positions and Honors.** List in chronological order previous positions, concluding with the present position. List any honors. Include present membership on any Federal Government public advisory committee.
- Section C (*optional*) **Other Support.** List both selected ongoing and completed (during the last 3 years) projects (federal or non-federal support). Begin with any projects relevant to the project proposed in this application. Briefly indicate the overall goals of the projects and responsibilities of the Senior/Key Person identified on the Biographical Sketch.
- When applicable, biographical sketches must include training, language fluency and experience working with populations that are culturally and linguistically different from their own.

iii. *Budget*

The directions offered in the SF-424 may differ from those offered by Grants.gov. Follow the instructions in Section 4.1.iv of HRSA's *SF-424 R&R Application Guide* and any additional budget instructions provided below. A budget that follows the *Application*

Guide will ensure that, if HRSA selects your application for funding, you will have a well-organized plan and, by carefully following the approved plan, may avoid audit issues during the implementation phase. Follow the instructions in Section 4.1.iv of HRSA's *SF-424 R&R Application Guide* and any additional budget instructions provided below. A budget that follows the *Application Guide* will ensure that, if HRSA selects your application for funding, you will have a well-organized plan and, by carefully following the approved plan, may avoid audit issues during the implementation phase.

Additional Budget Instructions:

Subawards/subcontracts

A detailed line-item budget form is required for each subaward and should be uploaded to the Subaward Budget Attachment(s) Form. NOTE: The R&R Subaward Budget Attachment Form limits the number of attachments for subawards to 10. If you need to include additional line-item budget forms, upload the attachment in R&R Other Project Information Form, block 12 "Other Attachments." These additional line-item budget forms for subawards will not count against the page limit. Note that any additional budget justifications (i.e., back-up information) are included in the page limit.

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

As required by the Consolidated Appropriations Act, 2023 (P.L. 117-328), Division H, § 202, "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." Effective January 2023, the salary rate limitation is $212,100. Note that these or other applicable salary limitations may apply in the following fiscal years, as required by law.

In addition, the MatCare Program requires the following:

1. Applicants may request a maximum annual budget of $1,000,000 per year. Annual budget includes:

   o traineeship funding to cover participant/trainee support costs, and

   o infrastructure funding to cover administrative costs, preceptor stipends, faculty salary, and other project costs.

2. Dedicate a minimum of 70 percent of the total direct costs for Participant/Traineeship support. Charge costs to "Participant/Trainee Support Costs" in Section E of the SF424 R&R form. Allowable costs for traineeship awards may include:

   o Scholarship to cover the total cost of tuition, books, fees, and health insurance for the duration of the nurse midwifery program to which the traineeship is provided; and

     o Stipends (reasonable living expenses), travel, and subsistence for the individual participants for the period for which the traineeship is provided. This may include stipends to cover preceptor costs for preceptors who are not employees of the institution.

        Note: Stipend support for preceptors who are not employees of the Applicant's institution may be supported under Participant/Traineeship support category, or under contractual or consultant categories, as justifiable based on institutional policy. Award recipients are responsible for paying stipends support to the preceptors.

3. Salary for faculty/staff involved in the proposed project should be commensurate with the level of effort dedicated to the project.

Indirect costs under training awards to organizations other than state or local governments, or federally recognized Indian tribes, will be budgeted and reimbursed at 8 percent of modified total direct costs rather than on the basis of a negotiated rate agreement, and are not subject to upward or downward adjustment.

Direct cost amounts for equipment, tuition, and fees, and subawards and subcontracts in excess of $25,000 are excluded from the direct cost base for purposes of this calculation.

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

All budgets must provide sufficient details to fully explain and justify the resources needed to accomplish all program objectives.

In your application:

- Describe all line-item federal funds (including subawards), and matching non-federal funds proposed for this project. Please note: all budget justification narratives count against the page limit.

In addition, MatCare requires the following:

Participant/Trainee Support Costs: List tuition, fees, health insurance, stipends (reasonable living expenses), travel, subsistence, other allowable expenses, and the number of trainees. Ensure that the total trainee costs are at least 70 percent of the total direct costs. Ensure that your budget breakdown separates these trainee costs, and includes a separate sub-total entitled "Total Participant/ Trainee Support Costs" which includes the summation of all trainee costs. Participant/Trainees are not the employees of the applicant.

Consultant Services: If you are using consultant services, list the total costs for all consultant services. In the budget justification, identify each consultant, the services they will perform, the total number of days, travel costs, and the total estimated costs.

Disbursement Plan: Include a Disbursement Plan for the traineeship awards to be made to students from the MatCare grant funds. The plan must be included in the budget justification narrative at the time of application and should include a planned schedule of disbursement for student awards for the entire period of performance. The schedule should document the frequency of disbursement (e.g., annually at the start of the academic year or by semester at the start of each semester). Identify in the staffing plan and the budget narrative the Point of Contact within the applicant organization for trainee questions about disbursement and traineeship support information (for example, direct deposit or tax questions).

For example, Student A (full time Master's midwifery program) is allotted to receive in year 1:

- Tuition and Fees: $30,000.00
- Stipend (Reasonable Living Expenses): $15,000.00
- Textbooks/e-books: $ 5,000.00
Total $50,000.00

v. *Standardized Work Plan (SWP) Form*

As part of the application package submitted through Grants.gov, you must complete and electronically submit the SWP Form by the application due date. The SWP form is organized by budget period and must include all activities and deliverables for each program goal and objective.

Applicants must enter information for all the number of budget years stated in the NOFO. The program goals for this NOFO must be entered in the Program Goals section of the SWP form. For example, Goal 1 in the Purpose section of the NOFO will need to be entered as Goal 1 in the SWP form. Objectives and sub-objectives can be tailored to your project needs and aligned with the program goals as appropriate. Objectives may be tagged with organizational priorities by selecting applicable priorities on the SWP form. For the purpose of this NOFO, please write in COVID-19 or Health Equity in the "Other Priority Linkage" if your objective or sub-objectives align with those priorities. Form instructions are provided along with the SWP form and are included in the application package found on Grants.gov. **The Project Director must register in the HRSA electronic handbook (EHB) once award is made, in order to review and finalize the completed SWP.**

vi. *Program-Specific Forms*

As part of the application submitted through Grants.gov, applicants must also complete and electronically submit the ANE Program Specific Data Forms and the BHW Program Specific Form. Sample of the ANE Program Specific Data Forms (Tables) are included in Appendix A and the instructions of how to download the BHW Program Specific Form can be found in Appendix B of this NOFO for your reference. The ANE Program Specific Data Forms (Appendix A) Tables must be completed electronically and submitted as part of the official electronic application package. The BHW Program Specific Form (Appendix B) must be completed and submitted as Attachment 8. The data in the ANE Program Specific Data Forms (Tables) are essential in projecting the

number of trainees to be trained, and in making award funding preference determinations in accordance with the authorizing statute. The data in the BHW Program Specific Data Forms demonstrate a record of training individuals who are from a rural or disadvantaged background, or from underrepresented minority (URM) groups, providing information about your institution's student and graduate demographics to determine level of diversity and how the program will address the needs of population served. Applicants must adhere to the form instructions to ensure that the data provided are accurate and complete. These forms are not included in the application page count.

vii.   *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.** Your indirect cost rate agreement and proof of non-profit status (if applicable) will not count toward the page limit. **Clearly label each attachment**. You must upload attachments into the application. HRSA and the objective review committee will not open/review any *hyperlinked* attachments.

Attachment 1: (Required) Accreditation/Approval (Not scored during the objective review)

Applicants must submit appropriate accreditation or approval documentation to be deemed eligible. See Section III.1. Applicants whose academic or clinical/community-based organization accreditation/approval status cannot be verified will be considered nonresponsive and deemed ineligible under this funding notice.

Applicants must submit documentation that (1) demonstrates continuing accreditation/approval from the relevant accrediting/ approval body and that they are not on probation, (2) the name of the accrediting/ authorizing body, (3) the date of initial accreditation/approval, and (4) the date of the next expected accrediting/ approval body review (or expiration date of current accreditation/approval). Applicants on provisional accreditation status must provide proof of this status. The applicant is responsible for verifying that the project partners maintain current accreditation/approval throughout the period of performance and must submit the accreditation/approval document(s) for at least one key partner once award is made.

Schools of Nursing/Nursing Program Accreditation

Nurse Midwifery training programs affiliated with the project must be accredited by the American College of Nurse-Midwives Accreditation Commission for Midwifery Education (ACME). Programs who are in the Pre-Accreditation process, must provide a copy of their *Certificate of Pre-accreditation* and an ACME Board of Review decision letter.

Clinical Facilities Approval Documentation

Clinical/Community-based organizations applying under this NOFO must provide documentation of accreditation/approval by a national, regional, or state accrediting agency or body, such as the Joint Commission on Accreditation Association for

Ambulatory Health Care, Inc., etc. Accreditation/approval ensures that clinical organizations in a community-based setting are dedicated to ongoing and continuous compliance with the highest standard of quality health care accreditation/approval to provide health care is required.

Attachment 2: (Required) 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 as much as is possible. Include the role, responsibilities, and qualifications of proposed key project staff. At a minimum, provide a staffing plan for the project director and the project coordinator.

Attachment 3: (Required) Project Organizational Chart

Provide a one-page figure that depicts the organizational structure of the project (not the applicant organization).

Attachment 4: (Required) Letters of Agreement, Memoranda of Understanding, and/or Description(s) of Proposed/Existing Contracts

Provide any documents that describe working relationships between your organization and other entities and programs cited in the proposal, that confirm actual or pending contractual or other agreements. Make sure any letters of agreement are signed and dated. It is not necessary to include the entire contents of lengthy agreements, so long as the included document provides the information that relates to the requirements of the NOFO. Applicants do not have to include the entire agreement but can include the main agreement page and the signature page.

Attachment 5: (Required) Maintenance of Effort Documentation

You must provide a baseline aggregate expenditure for the prior fiscal year and an estimate for the next fiscal year using a chart similar to the one below. HRSA will enforce statutory MOE requirements through all available mechanisms.

NON-FEDERAL EXPENDITURES	
FY 2022 (Actual) Actual FY 2022 non-federal funds, including in-kind, expended for activities proposed in this application. Amount: $_____	**FY 2023 (Estimated)** Estimated FY 2023 non-federal funds, including in-kind, designated for activities proposed in this application. Amount: $_____

Attachment 6: (As Applicable) Request for Funding Preference or Special Consideration

To receive a funding preference or special consideration, include a statement that you are eligible for a funding preference or special consideration. Include documentation of this qualification. See Section V.2.

Attachment 7: (As Applicable) Letters of Support

Applicants may provide letters of support from organizations or departments involved in the proposed project. Letters of support can also be from individuals within the applicant's institution who hold the authority to speak for the organization or department (CEO, Chair, etc.). Letters of support must be signed and dated, and should indicate understanding of the project and a commitment to the project.

Attachment 8: (Required) BHW Program Specific Data Form (Does not count against the page limit)

The BHW Program Specific Data Form can be found in the Related Documents tab on Grants.gov. Download and complete the form, and upload as Attachment 8.

Attachment 9: (Required) Disparities Impact Statement

A Disparities Impact Statement (DIS) is an instrument used to measure and describe how training will support trainees' capacity to meet the needs of underserved populations.

Please note that elements of the DIS are often integrated in the Project Narrative in the purpose/need and methodology/approach sections. Please include any relevant information from those sections into this attachment.

1) The efforts your organization will make to prepare trainees to address the social determinants of health, including but not limited to access barriers to health services, and increase health literacy.

   - For example: after considering data about the percentage of non-English-speaking residents of the local geographical area, design training related to overcoming language barriers to service delivery.

2) The strategies your organization will engage to improve trainee cultural competence to meet the needs of underserved communities by providing training based on the National Standards for Culturally and Linguistically Appropriate Services (CLAS Standards) in Health and Health Care Standards.

   - For example: To improve cultural and linguistic competence, our trainings will utilize the National Standards for Culturally and Linguistically Appropriate Services in Health and Health Care. This will include a focus on:
     a. Diverse cultural health practices
     b. Preferred languages/language translation services
     c. Training and integration of CLAS Standards, health literacy and other communication needs of the disparity sub-populations identified

3) Measure and report where graduates (completers of training programs) are 1 year following completion and how many of them align demographically with the community and/or disparity sub-populations they are serving, such as graduates/program completers from rural areas now practicing in a rural area.

Project activities must comply with the non-discrimination requirements described in Section VI.

Attachments 10–15: (As Applicable) Other Relevant Documents

Include here any other documents that are relevant to the application, including any other documents that provide further details about the proposal. For applications that include subawards or funds expenditures on contracts, include an attachment with a description on how your organization will ensure proper documentation of funds.

3. Unique Entity Identifier (UEI) and System for Award Management (SAM)

Effective April 4, 2022:

- The UEI assigned by [SAM](#) has replaced the Data Universal Numbering System (DUNS) number.
- Register at [SAM.gov](#) and you will be assigned a UEI.

You must register with SAM and continue to maintain active SAM registration with current information at all times when you have an active federal award, an active application, or an active plan under consideration by an agency (unless you are an individual or federal agency that is exempted from those requirements under 2 CFR § 25.110(b) or (c), or you have an exception approved by the agency under 2 CFR § 25.110(d)). For your SAM registration, you must submit a notarized letter appointing the authorized Entity Administrator.

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

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

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

- System for Award Management (SAM) (https://sam.gov/content/home | [SAM.gov Knowledge Base](#))

- Grants.gov (https://www.grants.gov/)

Effective March 3, 2023, individuals assigned a SAM.gov [Entity Administrator](#) role must be an employee, officer, or board member, and cannot be a non-employee. This change is to ensure entities are in control of who has permission to control roles within their entity.

Here's what this means:

- Entity Administrators assigning roles to non-employees will only be able to assign a Data Entry role or lower.

- Any entities assigning Entity Administrator roles using an Entity Administrator Role Request Letter (formerly called "notarized letter") will no longer be able to assign the Entity Administrator role to a non-employee.

- Entity Administrator roles assigned to non-employees will be converted to Data Entry roles. With a Data Entry role, non-employees can still create and manage entity registration data entry but cannot manage roles.

- If you are an entity using a non-employee or if you are a non-employee working with an entity to manage registrations, please read (and share) more about this change on our blog to know what to expect.

For more details, see Section 3.1 of HRSA's *SF-424 R&R Application Guide*.

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 ***July 14, 2023, at 11:59 p.m. ET.*** HRSA suggests you submit your application to Grants.gov at least **3 calendar days before the deadline** to allow for any unforeseen circumstances. See Summary of emails from Grants.gov in HRSA's *SF-424 R&R Application Guide,* Section 8.2.5 for additional information.

5. Intergovernmental Review

The MatCare Program is not subject to the provisions of Executive Order 12372, as implemented by 45 CFR part 100.

See Section 4.1 ii of HRSA's *SF-424 R&R Application Guide* for additional information.

6. Funding Restrictions

You may request funding for a period of performance of up to 4 years, at no more than $1,000,000 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 H of the Consolidated Appropriations Act, 2023 (P.L. 117-328) apply to this program. See Section 4.1 of HRSA's *SF-424 Application Guide* for additional information. Note that these or other restrictions will apply in following fiscal years, as required by law.

You cannot use funds under this notice to acquire real property, for construction, or to pay for equipment costs not directly related to the purposes of this award.

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 specific uses of funding. It is imperative that you review and adhere to the list of statutory restrictions on the use of funds detailed in Section 4.1 of HRSA's *SF-424 Application Guide*. Like all other applicable grants requirements, the effectiveness of these policies, procedures, and controls is subject to audit

Be aware of the requirements for HRSA recipients and subrecipients at 2 CFR § 200.216 regarding prohibition on certain telecommunications and video surveillance services or equipment. For details, see the HRSA Grants Policy Bulletin Number: 2021-01E.

All program income generated as a result of awarded funds must be used for approved project-related activities. Any program income earned by the recipient must be used under 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 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.

Reviewers will evaluate and score the merit of your application based upon these criteria.

Five review criteria are used to review and rank MatCare Program applications. Below are descriptions of the review criteria and their scoring points.

Criterion 1: PURPOSE AND NEED (15 points) – Corresponds to Section IV's Purpose and Need
Reviewers will consider the extent to which the application effectively:

- Describes the purpose of the project, the problem and associated contributing factors to the problem, including the quality and extent to which it clearly identifies the need for diverse certified nurse midwives, and use of clinical training sites serving vulnerable target population(s), location/ community, and its unmet health needs, using data from reliable and recent data sources.

- Describes the institution's commitment to training individuals who are from diverse backgrounds **(Attachment 8)**, including rural or disadvantaged backgrounds.

- Clearly explains **(Attachments 9)** how training will address maternal mortality, maternal mental health, SDOH; and prepares MatCare Program trainees to provide culturally competent care, and track graduates' ability to meet the needs of the communities they serve.

Criterion 2: RESPONSE TO PROGRAM PURPOSE (45 points) – Corresponds to Section IV's Response to Program Purpose Sub-section (a) Methodology/Approach, Sub-section (b) Work Plan and Sub-section (c) Resolution of Challenges

Criterion 2 (a): WORK PLAN (20 points) – Corresponds to Section IV's Response to Program Purpose Sub-section (a) Work Plan

Reviewers will consider the extent to which the application effectively:

- Provides a clear, comprehensive, and specific set of goals and objectives and the concrete steps that will be used to achieve those goals and objectives, and address the needs described. The description should include timeline, deliverables, stakeholders, partners, and a description of the diversity of the populations recruited and trained and communities served.

- Provides an appropriate and detailed work plan (narrative detail and SWP) that outlines the project activities and demonstrates ability to implement the project within the proposed scope, and appropriateness for the program design.

- Identifies support and collaboration with key stakeholders in planning and implementing project activities.

Criterion 2 (b): METHODOLOGY/APPROACH (20 points) – Corresponds to Section IV's Response to Program Purpose Sub-section (b) Methodology/Approach

Reviewers will consider the extent to which the application successfully:

- Responds to the requirements and expectations of the program and addresses the needs highlighted in the Purpose and Need section, including the strength of the proposed goals and objectives and their relationship to the identified project.

- Describes how the activities in the application can address the problem and attain the project objectives.

- Demonstrates the appropriateness of the methods, tools, and strategies to meet stated needs, including recruitment, funding, and retention of trainees; expanding and establishing partnerships and securing community-based clinical training sites.

- Includes the plan and strategies to address health disparities, increase health literacy, increase health equity, and provide culturally and linguistically appropriate care and services to population served.

Criterion 2 (c): RESOLUTION OF CHALLENGES (5 points) – Corresponds to Section IV's Response to Program Purpose Sub-section (c) Resolution of Challenges

Reviewers will consider the extent to which the application:

- Demonstrates an understanding of potential obstacles and challenges during the design and implementation of the project, as well as a plan for resolving challenges and dealing with identified contingencies that may arise.

Criterion 3: IMPACT (15 points) – Corresponds to Section IV's Impact Sub-section (a) Evaluation and Technical Support Capacity, and Sub-section (b) Project Sustainability)

Criterion 3(a): EVALUATION AND TECHNICAL SUPPORT CAPACITY (10 points) – Corresponds to Section IV's [*Impact Sub-section (a) Evaluation and Technical Support Capacity*](#)

Reviewers will consider the extent to which the application effectively:

- Describes the systems and processes that will meet HRSA's performance measurement requirements for the MatCare Program, including the strategy for collecting, managing, and reporting required performance data in an accurate and timely manner. This includes both internal program performance evaluation plan and HRSA's required performance measures.

- Demonstrates the strength and effectiveness of the proposed evaluation method to monitor ongoing process and progress, and evaluate the project results. Including, evidence that the evaluative measures will be able to assess: 1) to what extent the program objectives have been met, and 2) to what extent these can be attributed to the project.

- Describes the evaluation and reporting plan that enables dissemination of project results and includes necessary components (descriptions of the inputs, key processes, variables to be measured, expected outcomes of the funded activities (specifically the training of new student NMs), and how key measures will be reported), as well as a description of how data will be collected and managed to support timely reporting of performance outcomes. Specific criteria include reporting NPIs and tracking trainees for up to 1 year after program completion/graduation.

Criterion 3 (b): PROJECT SUSTAINABILITY (5 points) – Corresponds to Section IV's [*Impact Sub-section (b) Project Sustainability*](#)

Reviewers will consider extent to which the application effectively:

- Describes a plan for project sustainability after the period of federal funding ends. Includes plans to share key elements of the project, likely future sources of potential funding and a timetable for becoming self-sufficient.

- Articulates likely challenges to be encountered in sustaining the program and describes logical approaches to resolving such challenges.

Criterion 4: ORGANIZATIONAL INFORMATION/RESOURCES/CAPABILITIES (10 points) – Corresponds to Section IV's [Organizational Information, Resources, and Capabilities](#)

Reviewers will consider:

- The structure and capabilities of the applicant organization and the quality and availability of facilities and personnel to fulfill the needs and requirements of the proposed project, including how the organization will follow the approved plan, as outlined in the application.

- The extent to which project personnel are qualified by skills, training and/or experience to implement and carry out the project; this will be evaluated both through the project narrative, as well as through the attachments.

- The identification of partnership and support needed to fulfill the goals of the program and meet the training objectives.

Criterion 5: SUPPORT REQUESTED (15 points) – Corresponds to Section IV's [Budget](#) *and* [Budget Narrative](#)

Reviewers will consider the reasonableness of the proposed budget for each year of the period of performance in relation to the objectives, the complexity of the activities, and the anticipated results. Specifically,

- The extent to which costs outlined in the budget and required resources sections reasonably map to the scope of work.

- The extent to which key personnel have adequate time devoted to the project to achieve project objectives.

- The extent to which trainee support costs are reasonable and supportive of the project.

2. Review and Selection Process

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

Funding Preferences

This program provides a funding preference for some applicants as authorized under Section 805 of the Public Health Service Act (42 U.S.C. § 296d). Applicants will receive funding preference for projects that will substantially benefit rural or underserved populations or help meet public health nursing needs in state or local health departments.

Applicants receiving the preference will be placed in a more competitive position among applications that can be funded. Applications that do not receive a funding preference

will receive full and equitable consideration during the review process. HRSA staff will determine the funding preference and will apply it to any qualified applicant that demonstrates they meet the criteria for one of the preference qualifications. Applicants need to demonstrate that they meet the criteria for one of the preferences; by submitting the required data in Program Specific Tables (Appendix A) and providing supporting documentation in *Attachment 6*. HRSA staff will review all applications for this funding notice and determine the funding preference and will apply it to any qualified applicant that demonstrates they meet the criteria for one of the three available preference qualifications.

Qualification(s) to meet the funding preference(s): Preference shall be given to applicants with projects that meet at least **one** of the following:

Qualification 1: Substantially benefit rural populations:
Applicants who qualify for the rural funding preference must demonstrate that their project will substantially benefit rural populations by providing evidence to show a high rate for placing graduates/program completers in rural practice settings serving rural populations. Eligibility confirmation can be obtained by inserting the address of the practice site for at least one of the graduates/program completers into HRSA's Rural Health Grants Eligibility Analyzer or "Am I Rural?". Applicants must include a copy of the output from the Analyzer with the application in *Attachment 6* (Request for Funding Preference). Note that the output included in the attachment should include relevant funding preference eligibility information and **must not exceed three pages**. Program completer information also can be obtained from the applicant's key partner, documentation establishing the partnership must also be included in *Attachment 4*.

Qualification 2: Substantially benefit underserved populations:
Applicants who qualify for the underserved funding preference must demonstrate that their project will substantially benefit underserved populations by providing evidence to show a high rate for placing graduates/program completers in Medically Underserved Areas/Populations (MUAs/MUPs) practice settings serving underserved populations. Eligibility confirmation can be obtained by inserting the address of the practice site for at least one of the graduates/program completers in the Find Shortage Areas - MUA Find tool. Applicants must include a copy of the output from MUA Find in *Attachment 6*. Note that the output included in the attachment should include relevant funding preference eligibility information and must not exceed three pages. Program completer information also can be obtained from the applicant's key partner, documentation establishing the partnership must also be included in *Attachment 4*.

Qualification 3: Help meet public health nursing needs in state or local health departments:
Applicants who qualify for the funding preference to help meet public health nursing needs in state and local health departments must demonstrate that their project will substantially help meet public health nursing needs by providing evidence to show a high rate for placing graduates/program completers in State or local health department practice settings serving communities in need. Eligibility confirmation can be obtained by providing documentation that shows that graduates/program completers are working in a state or local health department. Applicants must include a copy of the documentation in *Attachment 6*. Note that the documentation included in the attachment should include relevant funding preference eligibility information and must not exceed three pages. Program completer information also can be obtained from the applicant's

key partner, documentation establishing the partnership must also be included in *Attachment 4*.

As stated previously, applicants must meet **only one qualification** to receive the preference. Applicants may submit information pertaining to more than one qualification if so desired.

Funding Special Considerations and Other Factors

As authorized by PHS Act Section 811(h)(2), HRSA is required to give a special consideration for eligible applicants that agree to expend the award to train advanced education nurses who will practice in Health Professional Shortage Areas (HPSAs) designated under 42 U.S.C. § 254(e) (PHS Act Section 332). Applications that do not receive special consideration will be given full and equitable consideration during the review process.

Per the statutory language, to receive the special consideration applicants must agree to expend the award to train advanced education nurses who will practice in Health Professional Shortage Areas (HPSAs) designated under PHS Act section 332. To operationalize this language for the purposes of this NOFO, HRSA has **determined** applicants must show that they have a history of training advanced education nurses who are employed and practice in HPSAs or Maternity Care Health Professional Target Areas (MCTAs). MCTAs are areas within an existing HPSA that are experiencing a shortage of maternity health care professionals.[12]

Either the applicant or a key partner who qualify for the special consideration need to demonstrate that they meet the criteria for special consideration by submitting the required data in Program Specific Tables (Appendix A) and providing supporting documentation in *Attachment 6*. Eligibility confirmation can be obtained by inserting the address of the practice site for at least one of the graduates/program completers in the HRSA HPSA Find or Find Shortage Areas by Address tool. Applicants must include a copy of the HPSA or PC MCTA output from the HRSA HPSA Find or Find Shortage Areas by Address in *Attachment 6*. Note that the documentation included in the attachment should include relevant special consideration eligibility information and must not exceed three pages.

HRSA staff will review all applications for this funding notice and determine the special consideration. HRSA staff will apply the special consideration to any qualified applicant that demonstrates they meet the criteria.

---

[12] What is Shortage Designation? | Bureau of Health Workforce (hrsa.gov)

3. Assessment of Risk

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

HRSA reviews applications receiving a favorable objective review for other considerations that include past performance, as applicable; cost analysis of the project/program budget; assessment of your management systems, ensuring continued applicant eligibility; and compliance with any public policy requirements, including those requiring just-in-time submissions. HRSA may ask you to submit additional programmatic or administrative information (such as an updated budget or "other support" information) or to undertake certain activities (such as negotiation of an indirect cost rate) in anticipation of an award. However, even at this point in the process, such requests do not guarantee that HRSA will make an award. Following review of all applicable information, HRSA's approving and business management officials will determine whether HRSA can make an award, if special conditions are required, and what level of funding is appropriate.

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

HRSA is required to review and consider any information about your organization that is in the Federal Awardee Performance and Integrity Information System (FAPIIS). You may review and comment on any information about your organization that a federal awarding agency previously entered. HRSA will consider your comments, in addition to other information in FAPIIS in making a judgment about your organization's integrity, business ethics, and record of performance under federal awards when completing the review of risk 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 release the Notice of Award (NOA) on or around the start date of September 30, 2023. 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*.

If you are successful and receive a NOA, in accepting the award, you agree that the award and any activities thereunder are subject to:

- all provisions of [45 CFR part 75](#), currently in effect or implemented during the period of the award,

- other federal regulations and HHS policies in effect at the time of the award or implemented during the period of award, and

- applicable statutory provisions.

Accessibility Provisions and Non-Discrimination Requirements

Should you successfully compete for an award, recipients of federal financial assistance (FFA) from HHS must administer their programs in compliance with federal civil rights laws that prohibit discrimination on the basis of race, color, national origin, disability, age and, in some circumstances, religion, conscience, and sex (including gender identity, sexual orientation, and pregnancy). This includes ensuring programs are accessible to persons with limited English proficiency and persons with disabilities. The HHS Office for Civil Rights (OCR) provides guidance on complying with civil rights laws enforced by HHS. See [Providers of Health Care and Social Services](#) and [HHS Nondiscrimination Notice](#).

- Recipients of FFA must ensure that their programs are accessible to persons with limited English proficiency. For guidance on meeting your legal obligation to take reasonable steps to ensure meaningful access to your programs or activities by limited English proficient individuals, see [Fact Sheet on the Revised HHS LEP Guidance](#) and [Limited English Proficiency](#).

- For information on your specific legal obligations for serving qualified individuals with disabilities, including reasonable modifications and making services accessible to them, see [Discrimination on the Basis of Disability](#).

- HHS-funded health and education programs must be administered in an environment free of sexual harassment. See [Discrimination on the Basis of Sex](#).https://www.hhs.gov/civil-rights/for-individuals/sex-discrimination/index.html

- For guidance on administering your program in compliance with applicable federal religious nondiscrimination laws and applicable federal conscience protection and associated anti-discrimination laws, see [Conscience Protections for Health Care Providers](#) and [Religious Freedom](#)https://www.hhs.gov/conscience/religious-freedom/index.html.

Please contact the [HHS Office for Civil Rights](#) for more information about obligations and prohibitions under federal civil rights laws or call 1-800-368-1019 or TDD 1-800-537-7697.

The HRSA Office of Civil Rights, Diversity, and Inclusion (OCRDI) offers technical assistance, individual consultations, trainings, and plain language materials to supplement OCR guidance and assist HRSA recipients in meeting their civil rights obligations. Visit [OCRDI's website](#) to learn more about how federal civil rights laws and

accessibility requirements apply to your programs, or contact OCRDI directly at
HRSACivilRights@hrsa.gov.

Executive Order on Worker Organizing and Empowerment

Pursuant to the Executive Order on Worker Organizing and Empowerment, HRSA strongly encourages applicants to support worker organizing and collective bargaining and to promote equality of bargaining power between employers and employees. This may include the development of policies and practices that could be used to promote worker power. Applicants can describe their plans and specific activities to promote this activity in the application narrative.

Requirements of Subawards

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

Data Rights

All publications developed or purchased with funds awarded under this notice must be consistent with the requirements of the program. Pursuant to 45 CFR § 75.322(b), the recipient owns the copyright for materials that it develops under an award issued pursuant to this notice, and HHS reserves a royalty-free, nonexclusive, and irrevocable right to reproduce, publish, or otherwise use those materials for federal purposes, and to authorize others to do so. In addition, pursuant to 45 CFR § 75.322(d), the Federal Government has the right to obtain, reproduce, publish, or otherwise use data produced under this award and has the right to authorize others to receive, reproduce, publish, or otherwise use such data for federal purposes, e.g., to make it available in government-sponsored databases for use by others. If applicable, the specific scope of HRSA rights with respect to a particular grant-supported effort will be addressed in the NOA. Data and copyright-protected works developed by a subrecipient also are subject to the Federal Government's copyright license and data rights.

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. HRSA will verify that approved and funded applicants' proposed objectives are accomplished during each year of the project.

   The Progress Report has two parts. The first part demonstrates recipient progress on program-specific goals. Award recipients will provide performance

information on project objectives and accomplishments, project barriers and resolutions, and will identify any technical assistance needs.

The second part collects information providing a comprehensive overview of recipient overall progress in meeting the approved and funded objectives of the project, as well as plans for continuation of the project in the coming budget period. The recipient should also plan to report on dissemination activities in the annual progress report.

In addition, you must submit a Quarterly Progress Update (QPU) to HRSA via the Electronic Handbooks (EHBs) at the completion of each quarter. The QPU will be automatically generated and allows award recipients to document progress on their activities based on the information submitted in the SWP.

More information will be available in the NOA.

2) **Performance Reports.** The recipient must submit a Performance Report to HRSA via the Electronic Handbooks (EHBs) on an annual basis. All HRSA award recipients are required to collect and report performance data so that HRSA can meet its obligations under the Government Performance and Results Modernization Act of 2010 (GPRA). The required performance measures for this program are outlined in the Project Narrative Section IV's Impact Sub-section (a). Further information will be provided in the NOA.

The annual performance report will address all academic year activities from July 1 to June 30 and will be due to HRSA on July 31 each year. If award activity extends beyond June 30 in the final year of the period of performance, a Final Performance Report (FPR) may be required to collect the remaining performance data. The FPR is due within 90 calendar days after the period of performance ends.

3) **Final Program Report.** A final report is due within 90 calendar days after the period of performance ends. The Final Report must be submitted online by award recipients in the EHBs at https://grants.hrsa.gov/webexternal/home.asp.

> The Final Report is designed to provide HRSA with information required to close out a grant after completion of project activities. Award recipients are required to submit a final report at the end of their project. The Final Report includes the following sections:
>
> ▪ Project Objectives and Accomplishments - Description of major accomplishments on project objectives.
>
> ▪ Project Barriers and Resolutions - Description of barriers/problems that impeded project's ability to implement the approved plan.
>
> ▪ Summary Information:
>   • Project overview.
>   • Project impact.

- Prospects for continuing the project and/or replicating this project elsewhere.
- Publications produced through this grant activity.
- Changes to the objectives from the initially approved grant.

Further information will be provided in the NOA.

4) **Federal Financial Report.** A Federal Financial Report (SF-425) is required according to the schedule in the SF-424 R&R Application Guide. The report is an accounting of expenditures under the project that year. More specific information will be included in the NOA.

5) **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.

Note that the OMB revisions to Guidance for Grants and Agreements termination provisions located at 2 CFR § 200.340 - Termination apply to all federal awards effective August 13, 2020. No additional termination provisions apply unless otherwise noted.

VII. Agency Contacts

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

Timothy P. Coyle
Grants Management Specialist
Division of Grants Management Operations, OFAM
Health Resources and Services Administration
phone: (301) 443-4243
Email: TCoyle@hrsa.gov

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

Courtney McRae
Nurse Consultant/Project Officer, DNPH
Attn: Funding Program
Bureau of Health Workforce
Health Resources and Services Administration
Telephone: (301) 945-5857
Email: cmcrae@hrsa.gov

Tolu Apaloo
Nurse Consultant/Project Officer, DNPH
Attn: Funding Program
Bureau of Health Workforce

Health Resources and Services Administration
Telephone: (301) 594-2096
Email: TApaloo@hrsa.gov

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

Grants.gov Contact Center
Telephone: 1-800-518-4726 (International callers dial 606-545-5035)
Email: support@grants.gov
Self-Service Knowledge Base

Successful applicants/award recipients may need assistance when working online to submit information and reports electronically through HRSA's Electronic Handbooks (EHBs). Always obtain a case number when calling for support. For assistance with submitting in the EHBs, contact the HRSA Contact Center, Monday–Friday, 7 a.m. to 8 p.m. ET, excluding federal holidays at:

HRSA Contact Center
Telephone: (877) 464-4772 / (877) Go4-HRSA
TTY: (877) 897-9910
Web: http://www.hrsa.gov/about/contact/ehbhelp.aspx

The EHBs login process changed on May 26, 2023 for applicants, recipients, service providers, consultants, and technical analysts. To enhance EHBs' security, the EHBs now uses Login.gov and two-factor authentication. Applicants, recipients, service providers, consultants, and technical analysts must have a Login.gov account for the new login process. For step-by-step instructions on creating a Login.gov account refer to the EHBs Wiki Help page.

VIII. Other Information

Technical Assistance - See TA details in Executive Summary.

Tips for Writing a Strong Application - See Section 4.7 of HRSA's *SF-424 Application Guide*.

Appendix A: Sample ANE Program Specific Data Forms (Table 1 & 2)

Table 1 - Graduate Data – Rural, Underserved, Public Health Practice Settings and Health Professional Shortage Areas (HPSAs) (Used by Advanced Nursing Education Workforce Program (ANEW), Nurse Anesthetist Traineeship Program (NAT), Advanced Nursing Education Nurse Practitioner Residency Programs and Advanced Nursing Education Sexual Assault Nurse Examiners Program (ANE-SANE))

Public Burden Statement: HRSA uses the data from the ANE Program-Specific Data Collection Forms/Tables as part of the process for determining the award amount, ensuring compliance with programmatic and grant requirements, and to provide information to the public and Congress. An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number. The OMB control number for this information collection is 0915-0375 and it is valid until 11/30/2024. This information collection is required to obtain or retain a benefit (Section 811 of the Public Health Service Act). Public reporting burden for this collection of information is estimated to average 7 hours per response, including the time for reviewing instructions, searching existing data sources, and completing and reviewing the collection of information. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to HRSA Reports Clearance Officer, 5600 Fishers Lane, Room 14N136B, Rockville, Maryland, 20857 or paperwork@hrsa.gov.

Graduate Data from 7/01/2021 to 6/30/2022

Fields marked with an asterisk (*) are required

ADVANCED NURSING EDUCATION

* Current Fiscal Year:
(Select the fiscal year date that is provided in the current ANE Funding Opportunity Announcement cover page)

Table 1: Graduate Data - Rural, Underserved, Public Health Practice Settings and Health Professional Shortage Areas (HPSAs) (Used by Advanced Nursing Education Workforce Program (ANEW), Nurse Anesthetist Traineeship Program (NAT), Advanced Nursing Education Nurse Practitioner Residency Programs and Advanced Nursing Education Sexual Assault Nurse Examiners Program (ANE-SANE))

Graduate Data from 07/01/2019 - 06/30/2020

Practice Settings	Nurse Practitioner	Nurse Midwife	Clinical Nurse Specialist	Nurse Anesthetist	Additional Specialty (see NOFO Table 1 Instructions)	Total
Statutory Funding Preference						
1a. Total Number of Graduates Employed in Rural Settings						
1b. Total Number of Graduates Employed in Medically Underserved Communities						
1c. Total Number of Graduates Employed in State or Local Health Departments						
2. Total Number of Graduates Employed in these Funding Preference Settings [Rows 1a + 1b + 1c = Row 2]						
3. Total Number of Graduates						
4. Percentage of Graduates Employed in these Funding Preference Settings [Row 2 divided by Row 3, multiplied by 100]						
Special Consideration						
5a. Total Number of Graduates Employed in Health Professional Shortage Areas (HPSAs)						
5b. Total Number of Graduates Employed in the Additional Settings specified in the NOFO (Refer to Table 1, Row 5b Instructions in the NOFO).						
6. Total Number of Graduates Employed in these Special Consideration Settings [Rows 5a + 5b = Row 6]						
7. Total Number of Graduates (Same number as in Row 3)						
8. Percentage of Graduates Employed in these Special Consideration Settings [Row 6 divided by Row 7, multiplied by 100]						

Instructions for Completing Table 1: Graduate Data - Rural, Underserved, Public Health Practice Settings and HPSA Data - Graduate Data from 7/01/2021 to 6/30/2022

For all programs, refer to the program Notice of Funding Opportunity (NOFO) for specific instructions.

Once the applicant selects 2023 for Current Fiscal Year, the Graduate Date Year should change to 07/01/2021 – 06/30/2022.

All applicants requesting a Funding Preference as outlined in the NOFO, must complete Table 1. In order to be eligible for the **Statutory Funding Preference**, applicants must complete Table 1.

Graduates are to be counted only once in Table 1. **Do not count the same graduate for Funding Preference and Special Consideration.**

Data on Table 1 should reflect graduate totals for certified nurse-midwives (CNMs) who completed program/degree requirements between 07/01/2021 and 06/30/2022. Ensure to enter the correct specialty under the correct column. **For this Program, ONLY the Nurse Midwife Column should be completed.** Complete Table 1, as appropriate, providing data on the cumulative number of graduates from your institution (whether supported with HRSA grant Funds or not) in the previous academic year, who obtained employment and spend at least 50 percent of their employment in clinical practice sites substantially benefiting rural or medically underserved populations, state or local health departments, health professional shortage areas, and other specified settings as outlined in the NOFO.

If the applicant organization is a health facility or other entity (as outlined in the Notice of Funding Opportunity), the data that should be entered in Table 1 is to be obtained from the applicant's academic partner.

The system will automatically calculate the Total for each row and the percentage of Graduates Employed in these Settings.

Statutory Funding Preference

In Table 1 Rows 1a, 1b and 1c, enter the **"Total Number of Graduates Employed" for Rural Settings** (Row 1a), **Medically Underserved Communities** (Row 1b) and **State or Local Health Departments** (Row 1c) by Specialty, as applicable. The data in each row (Rows 1a, 1b, 1c) is a subset of **"Total Number of Graduates"** (Row 3).

In Row 2, the sum for **"Total Number of Graduates Employed in these Funding Preference Settings"** will be automatically calculated by the system from numbers entered for Rows 1a, 1b, and 1c.

In Row 3, enter **"Total Number of Graduates"** (whether supported with HRSA grant funds or not) who completed degree requirements and graduated from your institution in the previous academic year between 7/01/2021 and 06/30/2022 in the appropriate column.

In Row 4, the **"Percentage of Graduates Employed in these Settings"** will be automatically calculated. "**Percentage of Graduates Employed in these Settings**" equals the **"Total Number of Graduates Employed in these Settings"** (from 07/01/2021 – 06/30/2022) divided by **"Total Number of Graduates"** (from 07/01/2021 – 06/30/2022) multiplied by 100, or Row 2 divided by Row 3 multiplied by 100. Row 4 is a component of determining if the **Statutory Funding Preference** is met (refer to the Notice of Funding Opportunity for further details and criteria).

Special Consideration

In Row 5a, enter **"Total Number of Graduates Employed in Health Professional Shortage Areas (HPSAs) or Maternity Care Health Professional Target Area (MCTA)"** (whether supported with HRSA grant funds or not) who completed degree requirements and graduated from your institution in the previous academic year between 7/01/2021 and 06/30/2022 in the appropriate column. This number will be system populated into Special Consideration Row 6 In Row 7, **"Total Number of Graduates"** This number will be system populated from the number in Row 3. In Row 8, the **"Percentage of Graduates Employed in these Special Consideration Settings"** will be automatically calculated. In Row 7, **"Total Number of Graduates"** This number will be system populated from the number in Row 3.

Table 2 - Projected Traineeship Data for Master's, Post Master's Certificate, Doctoral, and Post-Graduate Residency Programs (Used by Advanced Nursing Education Workforce Program (ANEW), Nurse Anesthetist Traineeship Program (NAT), Advanced Nursing Education Nurse Practitioner Residency Programs and Advanced Nursing Education Sexual Assault Nurse Examiners Program (ANE-SANE))

OMB Number 0915-0375
Expiration date November 30, 2024

Projected Traineeship Support Data

Table 2: Projected Traineeship Data for Master's, Post Master's Certificate, Doctoral, and Post-Graduate Residency Programs (Used by Advanced Nursing Education Workforce Program (ANEW), Nurse Anesthetist Traineeship Program (NAT), Advanced Nursing Education Nurse Practitioner Residency Programs and Advanced Nursing Education Sexual Assault Nurse Examiners Program (ANE-SANE))

Projected Traineeship Support Data

Traineeship Data	Budget Year	Nurse Practitioner FT	Nurse Practitioner PT	Nurse Midwife FT	Nurse Midwife PT	Clinical Nurse Specialist FT	Clinical Nurse Specialist PT	Nurse Anesthetist FT	Nurse Anesthetist PT	Additional Specialty (See NOFO Instructions Table 2) FT	Additional Specialty PT	Total
Total # of Master's Degree Participants/ Trainees Projected to Receive Traineeship Support by Budget Year	1											
	2											
	3											
	4											
	5											
Total # of Doctoral Degree Participants/ Trainees Projected to Receive Traineeship Support by Budget Year	1											
	2											
	3											
	4											
	5											
Total # Post-Master's Certificate Participants/ Trainees Projected to Receive Traineeship Support by Budget Year	1											
	2											
	3											
	4											
	5											
Additional Degree/Certificate	1											
	2											
	3											
	4											
	5											
Total												

Instructions for Completing Table 2: Projected Traineeship Data for Master's, Post Master's Certificate, Doctoral and Post-Graduate Residency Programs. For all programs, refer to the program Notice of Funding Opportunity for Section IV.2.vi. Program-Specific Forms **instructions.**

All applicants must complete Table 2. The system will automatically calculate the Total for each row and column. **Trainees to be supported are to be counted only once in a given budget year and for a specific specialty or degree/certificate**.

Only complete for the applicable budget years. For example, complete only Budget Years 1 and 2 for a two-year funding announcement. In other words, if the application is for a two-year funding announcement, leave Table 2 boxes blank for Budget Years 3, 4 and 5.

Enter the "**Total Number of Master's, Post-Master's Certificate, or Doctoral Degree Trainees Projected to Receive Traineeship Support**" in Budget Years 1, 2, 3, 4 and 5 as appropriate by their enrollment status (FT) and their specialty role. **For the MatCare Program, students must be enrolled full-time.**

Appendix B: Instructions to complete BHW Program Specific Data Form

- Navigate to HRSA-23-120 on Grants.gov https://www.grants.gov/web/grants/view-opportunity.html?oppId=346087
- Click Related Documents
- The Link for Appendix B to download the form

HRSA-23-014
Advanced Nursing Education Workforce (ANEW) Program
Department of Health and Human Services
Health Resources and Services Administration

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| SYNOPSIS | VERSION HISTORY | RELATED DOCUMENTS | PACKAGE |

Print Related Documents List

Click on the following file link(s) to download the related document(s):

File Description	File Name	Last Updated Date/Time	File Size
Folder: Full Announcement - HRSA-23-014	HRSA-23-014-Full Announcement - HRSA-23-014.zip	Feb 14, 2023 03:01:43 PM EST	593.5 KB
HRSA-23-014 Notice of Funding Opportunity	HRSA-23-014 ANEW NOFO_FINAL.pdf	Feb 14, 2023 03:01:43 PM EST	623.5 KB
Folder: Other Supporting Documents - Forms	HRSA-23-014-Other Supporting Documents - Forms.zip	Feb 16, 2023 10:33:15 AM EST	5.4 MB
Appendix B	Appendix B.pdf	Feb 16, 2023 10:33:15 AM EST	5.6 MB

- Complete Appendix B and upload as Attachment 8

BHW Program Specific Data Form

Note: To complete the form, please click on the Validate & Save button at the bottom of the form.
***Automatically tabulated

Grants.gov Application Tracking Number	
Select Academic Year	Select Year ▾
Select Discipline for Trainees/Students	Osteopathic Medicine ▾
Others - Please Specify Discipline	

A. STUDENTS/TRAINEES BY GENDER			
STUDENTS/TRAINEES FOR THE THREE PREVIOUS CONSECUTIVE ACADEMIC YEARS AND THEIR GENDER			
Students/Trainees by Gender			
Gender	Number of Students/Trainees Enrolled for Academic Year	Number of Students/Trainees Enrolled for Academic Year	Number of Students/Trainees Enrolled for Academic Year
a. Female			
b. Male			
c. Not Reported			
**Subtotal	0	0	0

Appendix C: Sample Biographical Sketch Form

BIOGRAPHICAL SKETCH

Provide the following information for the Senior/key personnel and other significant contributors. Follow this format for each person. **DO NOT EXCEED TWO PAGES PER PERSON.**

NAME	POSITION TITLE

EDUCATION/TRAINING *(Begin with baccalaureate or other initial professional education, such as nursing, include postdoctoral training and residency training if applicable.)*

INSTITUTION AND LOCATION	DEGREE *(if applicable)*	MM/YY	FIELD OF STUDY

Please refer to the NOFO instructions in order to complete this section.

Appendix D: Resources

- **Training Resources**

  o **Regional Public Health Training Centers (PHTC)** - Provide specialized training for public health students and workers. The training focuses on: Technical, Scientific and Leadership skills. Public health workers and students can use their resources to expand their careers.
  https://bhw.hrsa.gov/funding/regional-public-health-training-centers

- **Partnership Resources**

  o **HRSA Health Center Program** – Health centers are community-based and patient-directed organizations that deliver comprehensive, culturally competent, high-quality primary health care services to the nation's most vulnerable individuals and families, including people experiencing homelessness, agricultural workers, residents of public housing, and veterans.
  https://bphc.hrsa.gov/about-health-centers/what-health-center
  Find a Health Center - https://findahealthcenter.hrsa.gov/

  o **Primary Care Associations (PCAs)** - Provide training and technical assistance to health centers to support the provision of comprehensive, high quality primary healthcare and improve the health of individuals and communities. PCAs can help health centers and look-alikes develop strategies to recruit and retain staff and can assist organizations develop partnerships with health centers.
  https://bphc.hrsa.gov/technical-assistance/strategic-partnerships/primary-care-associations

  o **State Offices of Rural Health (SORH) Program** - All 50 states have a SORH. Most SORHs can be found within a state health department. Each SORH's activities depend on the needs in their state. SORHs may help with the following: Keeping providers aware of new health care activities; Offering technical assistance for funding and health care improvement; and Helping to recruit and retain rural health care workers.
  https://www.hrsa.gov/rural-health/grants/rural-hospitals/sorh

- **Other Program Resources**

  o **HRSA Data Warehouse** – Provides data at your fingertips about HPSAs, MCTAs, Rural Health Clinics, health centers, HRSA programs, fact sheets, and much more.
  https://data.hrsa.gov/

  o **HRSA Health Workforce Connector** - Features career and training opportunities and customized profiles. Qualified clinicians and trainees can also find career and training opportunities by location, discipline, or other criteria, while the sites can recruit qualified candidates.
  https://connector.hrsa.gov/connector/

  o **Indian Health Service (IHS)** – Agency within the Department of Health and Human Services (HHS), is responsible for providing federal health services to American Indians and Alaska Natives, with a mission to raise the physical, mental, social, and spiritual health of American Indians and Alaska Natives to the highest level. The IHS provides a comprehensive health service delivery system for American Indians and Alaska Natives.
  https://www.ihs.gov

  o **Rural Health Information Hub** – Rural Workforce Issues - The RHIhub is a guide to improving health for rural residents. RHIhub's topic and state guides have key resources and information in one location. Provides access to publications, maps and websites; news and events; funding; organizations; and more.
  https://www.ruralhealthinfo.org/topics

Appendix E: Page Limit Worksheet

The purpose of this worksheet is to give you a tool to ensure the number of pages uploaded into your application is within the specified page limit. (Do not submit this worksheet as part of your application.)

The Standard Forms listed in column 1 do not count against the page limit; however, attachments to the Standard Forms listed in column 2 do count toward the page limit. For example, the Budget Narrative Attachment Form does not count, however the attachment uploaded in that form does count against the page limit.

Standard Form Name *(Forms themselves do not count against the page limit)*	Attachment File Name *(Unless otherwise noted, attachments count against the page limit)*	# of Pages *Applicant Instruction – enter the number of pages of the attachment to the Standard Form*
Application for Federal Assistance (SF-424 R&R - Box 18)	SFLLL (Disclosure of Lobbying Activities)	*My attachment = ___ pages*
Application for Federal Assistance (SF-424 R&R - Box 21)	Cover Letter Attachment	*My attachment = ___ pages*
RESEARCH & RELATED Senior/Key Person Profile)	Biographical Sketch	*My attachment = ___ pages*
Project/Performance Site Location(s)	Additional Location(s)	*My attachment = ____ pages*
RESEARCH & RELATED BUDGET – A. Senior/Key Person	Additional Senior Key Persons	*My attachment = ____ pages*
RESEARCH & RELATED BUDGET – C. Equipment Description	Additional Equipment	*My attachment = ____ pages*
RESEARCH & RELATED BUDGET – L. Budget Related	Budget Justification	*My attachment = ____ pages*
RESEARCH & RELATED Other Project Information	8. Project Narrative	*My attachment = ____ pages*
RESEARCH & RELATED Other Project Information	9. Bibliography & References Cited	*My attachment = ____ pages*
RESEARCH & RELATED Other Project Information	10. Facilities & Other Resources	*My attachment = ____ pages*

Standard Form Name *(Forms themselves do not count against the page limit)*	Attachment File Name *(Unless otherwise noted, attachments count against the page limit)*	# of Pages *Applicant Instruction – enter the number of pages of the attachment to the Standard Form*
RESEARCH & RELATED Other Project Information	11. Equipment	*My attachment = _____ pages*
RESEARCH & RELATED Other Project Information	12. Other Attachments	*My attachment = _____ pages*
Attachments Form	Attachment 1: Accreditation/Approval	*My attachment = ___ pages*
Attachments Form	Attachment 2: Staffing Plan and Job Descriptions for Key Personnel	*My attachment = ___ pages*
Attachments Form	Attachment 3: Organizational Chart	*My attachment = ___ pages*
Attachments Form	Attachment 4: Letters of Agreement, Memoranda of Understanding, and/or contracts	*My attachment = ___ pages*
Attachments Form	Attachment 5: MOE	*My attachment = ___ pages*
Attachments Form	Attachment 6: Request for Funding Preference (As Applicable)	*My attachment = ___ pages*
Attachments Form	Attachment 7: Letters of Support (As Applicable)	*My attachment = ___ pages*
Attachments Form	Attachment 8: BHW Program Specific Form	*My attachment = ___ pages*
Attachments Form	Attachment 9: Disparities Impact Statement	*My attachment = ___ pages*
Attachments Form	Attachment 10: Other Relevant Documents	*My attachment = ___ pages*
Attachments Form	Attachment 11: Other Relevant Documents	*My attachment = ___ pages*
Attachments Form	Attachment 12: Other Relevant Documents	*My attachment = ___ pages*
Attachments Form	Attachment 13: Other Relevant Documents	*My attachment = ___ pages*
Attachments Form	Attachment 14: Other Relevant Documents	*My attachment = ___ pages*
Attachments Form	Attachment 15: Other Relevant Documents	*My attachment = ___ pages*

Standard Form Name *(Forms themselves do not count against the page limit)*	Attachment File Name *(Unless otherwise noted, attachments count against the page limit)*	# of Pages *Applicant Instruction – enter the number of pages of the attachment to the Standard Form*
# of Pages Attached to Standard Forms		Applicant Instruction: Total the number of pages in the boxes above.
Page Limit for HRSA-23-120 is 50 pages		**My total = _____ pages**