U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES

HRSA

Health Resources & Services Administration

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

Maternal and Child Health Public Health Catalyst Program

Funding Opportunity Number: HRSA-20-041
Funding Opportunity Type(s): New
Assistance Listings (CFDA) Number: 93.110

NOTICE OF FUNDING OPPORTUNITY

Fiscal Year 2020

Application Due Date: January 8, 2020

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

Issuance Date: October 9, 2019

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Authority: Social Security Act, Title V, Section 501(a)(2) (42 U.S.C. 701(a)(2)).

EXECUTIVE SUMMARY

The Health Resources and Services Administration (HRSA) is accepting applications for fiscal year (FY) 2020 Maternal and Child Health (MCH) Public Health Catalyst Program. The purpose of this program is to: 1) develop and/or expand MCH curriculum, competencies, and degree offerings within schools of public health where there is currently a lack of, or limited, MCH offerings; (2) strengthen the public health graduate student competencies in MCH; and (3) recruit graduate student trainees from underrepresented racial/ethnic backgrounds to complete MCH coursework.

You must select **one** of the two following Catalyst Program tracks for this application: (1) MCH Curriculum Start-Up, or (2) MCH Curriculum Expansion. The Start-Up track is for applicants who do not currently offer a course in foundational MCH. The Expansion track is for applicants who have either (1) only foundational MCH coursework OR (2) an MCH program that has been developed and/or approved in the past 4 years (2015 or later). See the Needs Assessment section for details. You may not apply for both tracks.

The FY 2020 President's Budget does not request funding for this program. This notice is a contingency action taken to ensure that, should funds become available for this purpose, HRSA can process applications and award funds in a timely manner. You should note that this program may be cancelled prior to award.

Funding Opportunity Title:	Maternal and Child Health Public Health Catalyst Program
Funding Opportunity Number:	HRSA-20-041
Due Date for Applications:	January 8, 2020
Anticipated Total Annual Available FY 2020 Funding:	$730,000
Estimated Number and Type of Award(s):	Up to nine grants
Estimated Award Amount:	**Track 1 – MCH Curriculum Start-Up**: Up to $70,000 per year **Track 2 – MCH Curriculum Expansion**: Up to $90,000 per year
Cost Sharing/Match Required:	No
Period of Performance:	June 1, 2020 through May 31, 2025 (5 years)
Eligible Applicants:	Domestic public or nonprofit private institutions of higher learning may apply for training grants. See 42 CFR § 51a.3(b). See Section III.1 of this notice of funding opportunity (NOFO) for complete eligibility information.

HRSA has issued a related NOFO, Centers of Excellence in Maternal and Child Health (MCH) Education, Science, and Practice Program (HRSA-20-042). Applicants may only apply for funding under either HRSA-20-041 **OR** HRSA-20-042.

Note: Multiple applications from an organization are not allowable.

If for any reason (including submitting to the wrong funding opportunity number or making corrections/updates) an application is submitted more than once prior to the application due date, HRSA will only accept your **last** validated electronic submission, prior to the Grants.gov application due date as the final and only acceptable application.

Specifically, organizations applying for the MCH Public Health Catalyst Program (HRSA-20-041) are not eligible to apply for the Centers of Excellence in MCH Education, Science, and Practice Program (HRSA-20-042). It is anticipated that applicants to HRSA-20-041 are to be developing new or expanding foundational MCH coursework. Applicants to HRSA-20-042 have well-established MCH programs.

Application Guide

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

Technical Assistance

HRSA has scheduled the following technical assistance:

Webinar

Day and Date: Wednesday, October 23, 2019
Time: 1–2 p.m. ET
Call-In Number: 1-800-857-5124
Participant Code: 6897238
Weblink: https://hrsa.connectsolutions.com/catalyst20041/

HRSA will record the webinar and make it available at:
https://mchb.hrsa.gov/fundingopportunities/default.aspx.

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I. Program Funding Opportunity Description

1. Purpose

This notice announces the opportunity to apply for funding under the Maternal and Child Health (MCH) Public Health Catalyst Program. The purpose of this program is to: (1) develop and/or expand MCH curriculum, competencies, and degree offerings within schools of public health where there is currently a lack of, or limited, MCH offerings; (2) strengthen the public health graduate student competencies in MCH; and (3) recruit graduate student trainees from underrepresented racial/ethnic backgrounds to complete MCH coursework.

You will select **one** of two program tracks based on applicant readiness (see Needs Assessment section for details). If you choose **Track 1 – MCH Curriculum Start-Up**, you will: (1) develop and offer at least one graduate-level credit bearing course focused on foundational MCH population health. If you choose **Track 2 – MCH Curriculum Expansion,** you will: (1) expand current MCH curricular offerings, and (2) develop and offer a graduate-level public health degree, certificate, or concentration in MCH by the end of the 5-year period of performance.

Recipients in **both tracks** will: (1) recruit graduate student trainees who are from underrepresented backgrounds (including racial and ethnic minorities), who are underrepresented in the maternal and child health field; (2) support graduate students to complete a practicum experience with a MCH organization or to focus on a MCH-related topic; (3) create and/or maintain a student-led organization, events and/or activities that bring together graduate students in the public health school with an interest in MCH; and (4) develop and implement a sustainability plan to outline how MCH curriculum offerings and student interest groups will be continued after federal funding ends.

2. Background

This program is authorized by the Social Security Act, Title V, § 501(a)(2) (42 U.S.C. § 701(a)(2)), as amended.

The need for ongoing investments in MCH public health workforce development stems from a number of factors, including a loss of expertise due to staff attrition in state Title V programs and local public health agencies and a need to increase awareness and formal training in public health concepts.[1] There is a need to expand and strengthen a diverse, MCH-informed workforce that understands the unique challenges that state Title V and local MCH staff face. A lack of MCH coursework and content ultimately contributes to fewer students being formally trained in MCH. Additionally, academic public health programs face challenges in developing and expanding MCH curriculum and competencies without dedicated financial support.

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[1] Public Health Workforce Needs and Interest Survey 2017 National Findings. (2019, January). Retrieved from https://www.debeaumont.org/ph-wins/

Recent data from the 2017 national [Public Health Workforce Interests and Needs Survey](#) (PH WINS) support a strong need for additional, formal public health training opportunities. Only 14 percent of survey respondents have formal public health training and nearly 50 percent of MCH workforce respondents indicated that they plan to leave their public health organization in the next 5 years.[1] The current governmental public health workforce is not representative of the nation, and is predominantly white and over the age of 40.[1] There will be an urgent need for well-trained MCH public health professionals from diverse backgrounds to fill anticipated vacancies in public health agencies. HRSA is well positioned to help fill these critical training gaps and workforce shortages.

HRSA first supported the MCH Public Health Catalyst Program in FY 2015, funding five recipients with a focus on MCH curriculum start-up and an emphasis on recruiting students who are from underrepresented backgrounds. Since program inception, 100 percent of recipients successfully developed, and continue to offer, graduate-level coursework in foundational MCH. Data from FY 2015–16 demonstrate that Catalyst Programs trained 294 students in MCH. Over 54 percent of trainees were from underrepresented racial groups and over 16 percent were from underrepresented ethnic groups, supporting HRSA's goal to increase the diversity of the health care workforce. Reports from FY 2018–19 show that Catalyst Programs facilitated MCH student interest groups with a reach of over 450 members across programs.

Building on the success of the MCH Public Health Catalyst Program, HRSA/MCHB has established a second track within this program to support MCH curriculum expansion and to support the establishment of degree offerings, certificates, or concentrations in MCH. The MCH Public Health Catalyst Program (HRSA-20-041) and the Centers of Excellence in MCH Education, Science, and Practice Program (HRSA-20-042) support a continuum of MCH public health workforce development, with shared long-term workforce preparation and MCH population health goals.

For additional information on HRSA/MCHB's Division of MCH Workforce Development, please visit https://mchb.hrsa.gov/training/.

II. Award Information

1. Type of Application and Award

Type(s) of applications sought: New.

HRSA will provide funding in the form of a grant.

2. Summary of Funding

HRSA estimates approximately $730,000 to be available annually to fund up to nine grants under the MCH Public Health Catalyst Program. The actual amount available will not be determined until enactment of the final FY 2020 federal appropriation. You may apply for a ceiling amount of up to $70,000 total cost (includes both direct and indirect, facilities and administrative costs) per year for Track 1 – MCH Curriculum Start-Up. You may apply for a ceiling amount of up to $90,000 total cost (includes both direct and indirect, facilities and administrative costs) per year for Track 2 – MCH Curriculum Expansion. The FY 2020 President's Budget does not request funding for this program. This program notice is subject to the appropriation of funds, and is a contingency action taken to ensure that, should funds become available for this purpose, HRSA can process applications and award funds in a timely manner. The period of performance is June 1, 2020 through May 31, 2025 (5 years) for both MCH Public Health Catalyst Program tracks. Funding beyond the first year is subject to the availability of appropriated funds for the MCH Public Health Catalyst Program in subsequent fiscal years, satisfactory recipient performance, and a decision that continued funding is in the best interest of the Federal Government.

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

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

III. Eligibility Information

1. Eligible Applicants

Domestic public or nonprofit private institutions of higher learning may apply for training grants. See 42 CFR § 51a.3(b).

2. Cost Sharing/Matching

Cost sharing/matching is not required for this program.

3. Other

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

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

NOTE: Multiple applications from an organization are not allowable.

If for any reason (including submitting to the wrong funding opportunity number or making corrections/updates) an application is submitted more than once prior to the application due date, HRSA will only accept your **last** validated electronic submission, under the correct funding opportunity number, prior to the Grants.gov application due date as the final and only acceptable application.

A trainee/fellow receiving support from grant funds must be a citizen of the United States or a foreign national having in his/her possession a visa permitting permanent residence in the United States, or a non-citizen national. Please see **Appendix A: Applicable Standards for Using Grant Funds to Support Trainees/Fellows** .

You may only submit **one** application for the MCH Public Health Catalyst Program (either Track 1 **OR** Track 2). **Applicants that apply for both MCH Public Health Catalyst Program tracks will be considered non-responsive and will not be considered for funding under either track.**

HRSA has issued a related NOFO, Centers of Excellence in MCH Education, Science, and Practice (HRSA-20-042). You may only apply for funding under either HRSA-20-041 **OR** HRSA-20-042. Specifically, organizations applying for the MCH Public Health Catalyst Program (HRSA-20-041) are not eligible to apply for the Centers of Excellence in MCH Education, Science, and Practice Program (HRSA-20-042). It is anticipated that applicants to HRSA-20-041 are developing new or expanding foundational MCH coursework. Applicants to HRSA-20-042 have well-established MCH programs.

IV. Application and Submission Information

1. Address to Request Application Package

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

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

2. Content and Form of Application Submission

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

See Section 8.5 of the *SF-424 R&R Application Guide* for the Application Completeness Checklist.

Application Page Limit
The total size of all uploaded files may not exceed the number of pages listed in the table below when printed by HRSA:

Track 1 – MCH Curriculum Start-Up	40 pages
Track 2 – MCH Curriculum Expansion	40 pages

The page limit includes the abstract, project and budget narratives, attachments including biographical sketches (biosketches), and letters of commitment and support required in HRSA's *SF-424 R&R Application Guide* and this NOFO. Standard OMB-approved forms that are included in the workspace application package do not count in the page limit. Biographical sketches **do** count in the page limitation. Indirect Cost Rate Agreement and proof of non-profit status (if applicable) do not count in the page limit. **We strongly urge you to take appropriate measures to ensure your application does not exceed the specified page limit.**

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

Debarment, Suspension, Ineligibility, and Voluntary Exclusion Certification
1) You, on behalf of the applicant organization certify, by submission of your proposal, that neither you nor your principals are presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from participation in this transaction by any federal department or agency.
2) Failure to make required disclosures can result in any of the remedies described in 45 CFR § 75.371, including suspension or debarment. (See also 2 CFR parts 180 and 376, and 31 U.S.C. 3321).
3) Where you are unable to attest to the statements in this certification, an explanation shall be included in *Attachment 7–15: Other Relevant Documents*.

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

Program-Specific Instructions

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

i. *Project Abstract*
See Section 4.1.ix of HRSA's *SF-424 R&R Application Guide.*

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

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

▪ *INTRODUCTION -- Corresponds to Section V's Review Criterion #1: Need*

Briefly describe the purpose of the proposed project.

You must state the MCH Public Health Catalyst Program track to which you are applying:
  1. Track 1 – MCH Curriculum Start-Up; **OR**
  2. Track 2 – MCH Curriculum Expansion

▪ *NEEDS ASSESSMENT -- Corresponds to Section V's Review Criterion #1: Need*

Briefly describe the background of the proposal by critically evaluating the national, regional, and local need/demand for the training and specifically identifying MCH public health workforce development need(s) to be addressed and gaps that the project is intended to fill.

Track 1 – MCH Curriculum Start-Up applicants address the following:
As part of the needs assessment, demonstrate that a course in foundational MCH is not offered as part of core course offerings, electives, or as part of a certificate program within the School of Public Health. Include a letter from the Dean of the School of Public Health to certify that foundational MCH coursework is not offered. This letter, certifying selection of Track 1 and the gap in MCH coursework, must be included as ***Attachment 1***.

NOTE: Council on Education for Public Health (CEPH) accredited Schools of Public Health who have indicated an existing "area of study" in Maternal and Child Health, as listed on the Association of Schools and Programs of Public Health website (https://programfinder.aspph.org/), are **not** eligible to apply for Track 1 – MCH Curriculum Start-Up of the MCH Public Health Catalyst Program (HRSA-20-041).

Track 2 – MCH Curriculum Expansion applicants address the following:
As part of the needs assessment, demonstrate that either
(1) the School of Public Health does not have a degree program, certificate or concentration in MCH, but has foundational coursework in maternal and child health; <u>OR</u> (2) that a degree program or certificate in MCH has been developed and/or approved in the past 4 years (2015 or later). Include a letter from the Dean of the School of Public Health that clearly states the need for expanded or enhanced MCH curriculum at the School of Public Health, and certifies one of the two options listed above. This letter must specify selection of Track 2 and be included as *Attachment 1*.

▪ *METHODOLOGY -- Corresponds to Section V's Review Criterion #2: Response*

<u>Both Track 1 and Track 2 applicants address the following:</u>

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

1) **Program Philosophy, Goals, and Objectives**
   Provide a statement of the program philosophy that provides context within which the MCH coursework/curriculum is developed. The content and philosophy of the proposed project should be geared to the preparation of diverse students to engage in professional roles related to the development and improvement of maternal and child health services, including those for children with special health care needs (CSHCN) and families, in the United States. This includes roles in state Title V MCH programs and local public health agencies nationwide.

   Goals and objectives should be clearly linked to the program philosophy.

2) **Competencies**
   Identify the competencies expected of MCH trainees upon completion of the foundational course or MCH curriculum. Indicate how the expected competencies align to the MCH Leadership Competencies (https://mchb.hrsa.gov/training/leadership-00.asp).

3) **Maternal and Child Health Student Interest Group**
   Describe a plan to create or sustain a student-led organization, events, and/or activities that bring together graduate students in the school with an interest in maternal and child health. Examples include a student society, a student interest group, or similar organized body consistent with other student-led groups in the school. Organizational activities may include, but are not limited to, journal clubs, community service activities, special seminars, or symposia with prominent guest speakers relevant to MCH.

   Establishing and maintaining a student-led MCH organization should: build interest in MCH courses; encourage students to pursue additional coursework

or advanced studies in MCH; form a local peer network of students with a shared interest in MCH; generate curiosity and enthusiasm for considering careers in MCH practice; and provide opportunities to connect with other cohorts of MCH students and professionals nationally.

4) **Outreach and Recruitment Strategy**
    Provide a detailed description of how you will recruit graduate student trainees into MCH course(s) and MCH Student Interest Groups, including a description of how students from diverse backgrounds will be engaged in program activities. Provide an estimate of the number of students who will benefit from the program each year, in addition to special efforts directed toward recruitment of qualified students from economically disadvantaged and racially/ethnically underrepresented minority backgrounds.

5) **Collaboration and MCH Practicum Opportunities**
    Document active, functioning, collaborative academic-practice partnerships with state and local MCH partners. Document a plan for developing or maintaining a partnership with a Title V MCH program in your state or region. You should also document how graduate students will interact with community partners, including Title V, through practicum placements. Provide letters of support that demonstrate academic-practice partnerships in *Attachment 2*.

6) **Interchange with other MCH Public Health Programs and HRSA Training Programs**
    Interchange with other MCH Public Health Catalyst Programs and MCH Centers of Excellence Programs is expected. Project directors are expected to participate in regularly scheduled grantee (also referred to as "recipient" in this NOFO) calls, which will be scheduled at least quarterly, to promote cross-grantee information sharing, mentorship between Track 1 and Track 2 staff, and assist in the development of collaborative activities. The project director of each MCH Public Health Catalyst Program is expected to attend the annual Catalyst/Centers of Excellence in MCH grantee meeting and may choose to support additional faculty and/or staff to attend the meeting with grant funds. You are encouraged to interchange with other HRSA Training Programs, including those under the Bureau of Health Workforce, in addition to MCH Public Health Catalyst Programs and MCH Centers of Excellence Programs.

In addition to the requirements listed above:

Track 1 – MCH Curriculum Start-Up applicants address the following:

1) Establish Foundational MCH Course

Propose a plan for developing and offering at least one graduate-level credit-bearing course focused on foundational MCH population health within the first 6 months of the first budget period. Foundational MCH content should be available to graduate students for at least 9 months of each year of the 5-year period of performance. At a minimum, course material should include information on: i) the historical, legislative, and public health systems

knowledge base regarding Title V and related programs in the United States; and ii) the empirical and/or theoretical basis for a life course perspective in addressing the unique developmental and epidemiological characteristics of women, children (including CSHCN), and adolescents within the context of the interaction of physical, social, and environmental influences on health.

Demonstrate how the course(s) will address issues of cultural competence, such as including cultural/linguistic competence training in MCH courses, administrative procedures, faculty and staff development, and recruiting culturally, racially, and ethnically diverse faculty and students.

MCH coursework should be evidence-based and incorporate participation of state Title V practice professionals and other diverse stakeholders as curriculum advisors and as guest lecturers, as applicable and feasible.

Track 2 – MCH Curriculum Expansion applicants address the following:

1) **Expand MCH Curriculum**
   Provide a plan for expanding and/or enhancing the MCH curriculum over the 5-year period of performance. Describe current MCH coursework and how you will expand and/or enhance the MCH curricula over the 5-year period of performance. This may include developing new MCH courses to fill identified gaps, enhancing existing MCH coursework, or working across the School of Public Health to infuse MCH content and competencies into existing coursework that did not previously have a focus on MCH topics or populations.

2) **Develop or maintain MCH degree offering**
   Document a plan for developing or maintaining a graduate-level public health degree, certificate, or concentration in MCH that will be in place by the end of the 5-year period of performance. Outline the proposed or established curriculum for the MCH degree offering, including didactic and practicum components.

   A description of required and elective coursework, practicum experiences, and other pertinent information should be included in ***Attachment 3***.

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

Both Track 1 and Track 2 applicants address the following:

Describe the activities or steps that you will use to achieve each of the objectives proposed during the entire period of performance in the Methodology section. Use a time line that includes each activity and identifies responsible staff. As appropriate, identify meaningful support and collaboration with key stakeholders in planning, designing, and implementing all activities, including developing the application. Include the work plan as part of ***Attachment 4.***

Logic Models

Submit a logic model for designing and managing the project as part of ***Attachment 4***. A logic model is a one-page diagram that presents the conceptual framework for a proposed project and explains the links among program elements. While there are many versions of logic models, for the purposes of this notice, the logic model should summarize the connections between the:
- Goals of the project (e.g., objectives, reasons for proposing the intervention, if applicable);
- Assumptions (e.g., beliefs about how the program will work and support resources; base assumptions on research, best practices, and experience);
- Inputs (e.g., organizational profile, collaborative partners, key personnel, budget, other resources);
- Target population (e.g., the individuals to be served);
- Activities (e.g., approach, listing key intervention, if applicable);
- Outputs (i.e., the direct products of program activities); and
- Outcomes (i.e., the results of a program, typically describing a change in people or systems).

Although there are similarities, a logic model is not a work plan. A work plan is an "action" guide with a time line used during program implementation; the work plan provides the "how to" steps. You can find additional information on developing logic models at the following website:
http://www.acf.hhs.gov/sites/default/files/fysb/prep-logic-model-ts.pdf.

▪ *RESOLUTION OF CHALLENGES -- Corresponds to Section V's Review Criterion #2: Response*

Both Track 1 and Track 2 applicants address the following:

Discuss challenges that you are likely to encounter in designing and implementing the activities described in the work plan, and approaches that you will use to resolve such challenges.

▪ *EVALUATION AND TECHNICAL SUPPORT CAPACITY -- Corresponds to Section V's Review Criteria #3: Evaluative Measures and #4: Impact*

Both Track 1 and Track 2 applicants address the following:

Describe a plan for program evaluation that will contribute to continuous quality improvement. The program evaluation should monitor ongoing processes and progress towards the goals and objectives of the project. Include descriptions of the inputs (e.g., organizational profile, collaborative partners, key personnel, budget, and other resources), key processes, and expected outcomes of the funded activities.

Provide a detailed evaluation plan describing how you will measure the effectiveness of activities related to MCH public health graduate education,

curriculum development, and partnerships with state and local MCH organizations.

Propose a plan for tracking graduate student trainees that complete the MCH course(s) or degree offering, for up to 5 years post-training, to report on the following outcomes: engagement in work focused on MCH populations, demonstration of field leadership in MCH, and work in a public health agency or organization.

Describe the systems and processes that will support your organization's performance management requirements through effective tracking of performance outcomes, including a description of how the organization will collect and manage data (e.g., assigned skilled staff, data management software) in a way that allows for accurate and timely reporting of performance outcomes. Outline a plan for establishing baseline data and targets for required performance measures for the MCH Public Health Catalyst Program. Additional information on performance reporting requirements is in Section VI.3.

Describe current experience, skills, and knowledge, including individuals on staff, materials published, and previous work of a similar nature. As appropriate, describe the data collection strategy to collect, analyze and track data to measure process and impact/outcomes, and explain how the data will be used to inform program development and delivery of MCH training. Describe any potential obstacles for implementing the program performance evaluation and your plan to address those obstacles.

Dissemination and Sustainability
Propose a plan for project sustainability after the period of federal funding ends. HRSA expects recipients to sustain key elements of their projects, including MCH courses and student interest groups, which contribute to increased workforce development efforts in MCH and extend the impact of federal funding. A formal sustainability plan must be submitted to MCHB by the end of the second year of the project.

Document plans for dissemination of project results and the degree to which project activities are collaboratively shared with the MCH field and other HRSA grantees and stakeholders. Demonstrate compliance with Section 508 requirements (if dissemination plans include designing a publicly available website or online course material).

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

Both Track 1 and Track 2 applicants address the following:

Succinctly describe your organization's current mission and structure, scope of current activities and how these elements all contribute to the organization's ability to carry out required program activities and meet program expectations.

Clearly document the administrative and organizational structure within which the MCH course(s) or degree offering will function, including relationships with other departments, institutions, organizations, or agencies relevant to the program. You must include an organizational chart and document Council for Education on Public Health (CEPH) accreditation as a School of Public Health (***Attachment 5***).

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

Describe briefly the physical setting(s) in which the program will take place. Faculty and staff office space, classrooms, library, audiovisual and computer resources should be available to the program.

Project Director Qualifications
The project director of the Catalyst Program grant must be a faculty member (full-time and at the doctoral level) in an accredited School of Public Health with demonstrated leadership, relevant experience, and activities pertaining to MCH science and scholarship. The project director is expected to commit a minimum of 15 percent of their time to the Catalyst Program grant. This 15 percent time may be a combination of grant and in-kind support. This cannot be a shared position.

Faculty Qualifications
Programs are expected to have faculty from diverse health, social science, or related disciplines with requisite levels of education, relevant experience, and activities pertaining to MCH science and scholarship. Experience in MCH should be clearly reflected in faculty biosketches. Faculty may also include those with a strong track record in working with underrepresented students (including racial and ethnic minorities).

The staffing plan and job descriptions for key faculty/staff must be included in ***Attachment 6 (Staffing Plan and Job Descriptions)***. However, the biographical sketches must be uploaded in the SF-424 RESEARCH & RELATED Senior Key Person Profile form, which can be accessed in the Application Package under "Mandatory."

NARRATIVE GUIDANCE

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

<u>Narrative Section</u>	<u>Review Criteria</u>
Introduction	(1) Need
Needs Assessment	(1) Need
Methodology	(2) Response

Work Plan	(2) Response and (4) Impact
Resolution of Challenges	(2) Response
Evaluation and Technical Support Capacity	(3) Evaluative Measures and (4) Impact
Organizational Information	(5) Resources/Capabilities
Budget and Budget Narrative	(6) Support Requested – the budget section should include sufficient justification to allow reviewers to determine the reasonableness of the support requested.

iii. *Budget*

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

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

In addition, the MCH Public Health Catalyst Program (both Track 1 and Track 2) requires the following:

> You must include funding in each budget period for the project director to attend the Catalyst Program and Centers of Excellence in MCH Education, Science, and Practice Program annual grantee meeting. Budget for travel, lodging, and per diem.

Department of Defense and Labor, Health and Human Services, and Education Appropriations Act, 2019 and Continuing Appropriations Act, 2019 (P.L. 115-245), Division B, § 202 states "None of the funds appropriated in this title shall be used to pay the salary of an individual, through a grant or other extramural mechanism, at a rate in excess of Executive Level II." See Section 4.1.iv Budget – Salary Limitation of HRSA's *SF-424 R&R Application Guide* for additional information. Note that these or other salary limitations may apply in the following FY, as required by law.

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

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

In addition, the MCH Public Health Catalyst Program requires the following:

All budget narratives must provide satisfactory details to fully explain and justify the resources needed to accomplish the proposed training objectives. This justification should provide explicit qualitative and quantitative documentation of required resources, productivity, and expected outcomes. Components to highlight include the number of supported trainees expected each year and MCH student interest group activities.

v. *Program-Specific Forms*
Program-specific forms are not required for application.

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

Attachment 1: Letter certifying selection of Track 1 OR Track 2
  Track 1: Provide a letter from the Dean of the School of Public Health certifying the gap in foundational MCH coursework.

  Track 2: Provide a letter certifying that either (1) the School of Public Health does not have a degree program, certificate, or concentration in MCH, but has foundational coursework in maternal and child health; OR (2) that a degree program or certificate in MCH has been developed and/or approved in the past 4 years (2015 or later).

Attachment 2: Letters of Support (Project-specific)
  Provide any documents that describe working relationships between your organization and other entities and programs cited in the proposal. Letters of support should document strong academic-practice partnerships. Documents that confirm actual or pending contractual or other agreements should clearly describe the roles of the contractors and any deliverable. Make sure letters of agreement are signed and dated.

Attachment 3: MCH Curriculum (APPLIES TO TRACK 2 APPLICANTS ONLY)
  Provide a description of required and elective coursework, practicum experiences, and other pertinent information.

Attachment 4: Work Plan and Logic Model
> Attach the work plan for the project that includes all information detailed in Section IV.2.ii. Project Narrative. Also include the required logic model in this attachment.

Attachment 5: Project Organizational Chart and CEPH Documentation
> Provide a one-page figure that depicts the organizational structure of the project. Also provide documentation of CEPH accreditation as a School of Public Health.

Attachment 6: 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 project staff. Include a description of your organization's time keeping process to ensure that you will comply with the federal standards related to documenting personnel costs.

Attachments 7–15: Other Relevant Documents
> Include here any other documents that are relevant to the application, including any additional letters of support. Letters of support must be dated and specifically indicate a commitment to the project/program (in-kind services, dollars, staff, space, equipment, etc.).

3. Dun and Bradstreet Data Universal Numbering System (DUNS) Number and System for Award Management

You must obtain a valid DUNS number, also known as the Unique Entity Identifier, for your organization/agency and provide that number in the application. You must also register with the System for Award Management (SAM) and continue to maintain active SAM registration with current information at all times during which you have an active federal award or an application or plan under consideration by an agency (unless the applicant is an individual or federal agency that is exempted from those requirements under 2 CFR § 25.110(b) or (c), or has an exception approved by the agency under 2 CFR § 25.110(d)).

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

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

The Grants.gov registration process requires information in three separate systems:
- Dun and Bradstreet (http://www.dnb.com/duns-number.html)
- System for Award Management (SAM) (https://www.sam.gov)
- Grants.gov (http://www.grants.gov/)

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

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

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

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

4. Submission Dates and Times

Application Due Date
The due date for applications under this NOFO is *January 8, 2020 at 11:59 p.m. ET*. HRSA suggests submitting applications to Grants.gov at least **3 calendar days before the deadline** to allow for any unforeseen circumstances. See Section 8.2.5 – Summary of emails from Grants.gov of HRSA's *SF-424 R&R Application Guide* for additional information.

5. Intergovernmental Review

The MCH Public Health Catalyst Program is not a program subject to the provisions of Executive Order 12372, as implemented by 45 CFR part 100.

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

6. Funding Restrictions

You may request funding for a period of performance of up to 5 years. If you are applying for Track 1 – MCH Curriculum Start-Up, you may request funding at no more than $70,000 per year (inclusive of direct **and** indirect costs). If you are applying for Track 2 – MCH Curriculum Expansion, you may request funding at no more than $90,000 per year (inclusive of direct **and** indirect costs). The FY 2020 President's Budget does not request funding for this program. This program notice is subject to the appropriation of funds, and is a contingency action taken to ensure that, should funds become available for this purpose, HRSA can process applications and award funds in a timely manner. Awards to support projects beyond the first budget year will be contingent upon Congressional appropriation, satisfactory progress in meeting the

project's objectives, and a determination that continued funding would be in the best interest of the Federal Government.

The General Provisions in Division B of the Department of Defense and Labor, Health and Human Services, and Education Appropriations Act, 2019 and Continuing Appropriations Act, 2019 (P.L. 115-245) are in effect at the time this NOFO is posted. Please see Section 4.1 of HRSA's *SF-424 R&R Application Guide* for additional information. Awards will be made subsequent to enactment of the FY 2020 appropriation. The NOA will reference the FY 2020 appropriation act and any restrictions that may apply. Note that these or other restrictions may be updated, as required by law, upon enactment of a FY 2020 appropriations act.

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

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

V. Application Review Information

1. Review Criteria

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

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

Review criteria are used to review and rank applications. The MCH Public Health Catalyst Program has six review criteria. See the review criteria outlined below with specific detail and scoring points. The highest ranked applications in each of the two tracks will receive consideration for award within available funding ranges.

> Criterion 1.   Need   10 points
> Criterion 2.   Response   35 points
> • Sub-Criteria: Methodology and Resolution of Challenges (25 points)
>   o Relevant to Track 1 and Track 2 [20 points]
>   o Relevant to Track 1 [5 points]
>   o Relevant to Track 2 [5 points]
>   *(both Track 1 and Track 2 add up to 25 points)*

- Sub-Criteria: Work Plan (10 points)
(two sub-criteria add up to 35 points for Criterion 2)

Criterion 3.	Evaluative Measures	15 points
Criterion 4.	Impact	15 points
Criterion 5.	Resources/Capabilities	15 points
Criterion 6.	Support Requested	10 points

TOTAL: 100 points each for Track 1 and Track 2

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

The extent to which the application effectively demonstrates the problem and associated contributing factors to the problem.
- The quality and reasonableness of the proposed project purpose.
- Effective evaluation of the national, regional, and local need/demand for the training.
- Sufficient identification of the MCH public health workforce development need(s) to be addressed.
- Sufficient demonstration of gaps which the proposed project is intended to fill, according to the information provided by the Track 1 and Track 2 applicants, including a letter of certification (**Attachment 1**).

Criterion 2: RESPONSE (35 points) – Corresponds to Section IV's [Methodology], [Work Plan], and [Resolution of Challenges]

The extent to which the proposed project responds to the "[Purpose]" included in Section I. Program Funding Opportunity Description. The strength of the proposed goals and objectives and their relationship to the identified project. The extent to which the activities described in the application are capable of addressing the problem and attaining the project objectives.

Sub-Criteria Corresponding to Section IV's Methodology and Resolution of Challenges (25 points)

For Track 1 – MCH Curriculum Start-Up **and** Track 2 – MCH Curriculum Expansion applications (20 points):
- The quality and reasonableness of the overall goals and specific objectives for the proposed program.
- Sufficient demonstration of a program philosophy that is geared towards the preparation of diverse students to enter careers in state Title V MCH programs and local public health agencies.
- Sufficient description of the competencies expected of learners upon completion of MCH coursework, including how they align to the MCH Leadership Competencies.
- The quality of a plan to create or sustain student-led MCH learning and networking activities.

- The quality and feasibility of an outreach and recruitment strategy, including sufficient efforts directed toward recruitment of students from economically disadvantaged and racially/ethnically underrepresented minority backgrounds.
- The strength and quality of MCH partnerships, including a plan to develop or maintain a partnership with a Title V MCH program.
- Sufficient commitment to interchange with other Catalyst and MCH Centers of Excellence Programs and effectively participate in grantee calls and annual grantee meetings.

For Track 1 – MCH Curriculum Start-Up applications only (5 points):
- The strength and feasibility of a plan for the development and offering of at least one graduate-level credit bearing course with a sufficient focus on foundational MCH population health within the first 6 months of the first budget period.
- The quality of a plan for developing course materials that include the historical, legislative, and public health systems knowledge base regarding Title V, and the empirical and/or theoretical basis for a life course perspective.
- The effectiveness of a plan for how courses will address issues of cultural competence, such as including cultural competence training in the curriculum, administrative procedures, faculty and staff development, and recruiting training faculty and students from underrepresented backgrounds (including racial and ethnic minorities).
- The strength of a plan to develop and offer MCH coursework that is evidence-based and incorporates participation of state Title V practice professionals and other stakeholders.

For Track 2 – MCH Curriculum Expansion applications only (5 points):
- Sufficient description of current MCH coursework and strength and feasibility of a plan for expanding and/or enhancing the MCH curriculum.
- The quality and feasibility of a plan for developing or maintaining a graduate-level public health degree, certificate, or concentration in MCH.

Sub-Criteria Corresponding to Section IV's Work Plan (10 points)

For Track 1 – MCH Curriculum Start-Up **and** Track 2 – MCH Curriculum Expansion applications:
- The quality and feasibility of a work plan (***Attachment 4***) that describes the activities or steps used to achieve each of the objectives proposed in the methodology section.
- The application includes a logic model (***Attachment 4***) that effectively demonstrates the relationship among resources, activities, outputs, target population, short and long-term outcomes.

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

For Track 1 – MCH Curriculum Start-Up **and** Track 2 – MCH Curriculum Expansion applications:

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

- The effectiveness of an evaluation plan in addressing how to achieve major goals and objectives for the project.
- The reasonableness of a plan to describe how feedback from evaluation findings will be incorporated into the program for continuous quality improvement.
- Sufficient description of inputs, key processes, and expected outcomes.
- The quality of a plan to measure the effectiveness of activities.
- Sufficient systems and processes to support the organization's performance management requirements through effective tracking of performance outcomes.
- The quality and reasonableness of plans regarding the data to be collected, methods for collection, and the manner in which data will be analyzed and reported.
- Assigned project personnel have sufficient training to refine, collect, and analyze data for evaluation.
- The feasibility and quality of a plan for tracking graduate student trainees after completion of the MCH course(s) or degree offering for up to 5 years post-training.

Criterion 4: IMPACT (15 points) – Corresponds to Section IV's *Work Plan and* *Evaluation and Technical Support Capacity*

For Track 1 – MCH Curriculum Start-Up **and** Track 2 – MCH Curriculum Expansion applications:

The extent to which the proposed project has a public health impact and the project will be effective, if funded. This may include: the effectiveness of plans for dissemination of project results, the impact results may have on the community or target population, the extent to which project results may be national in scope, and the sustainability of the program beyond the federal funding.

- The extent to which project results may have an impact on students and MCH partners.
- The extent to which project results may have national impact.
- The strength and reasonableness of a plan for project sustainability beyond the federal funding period.
- The quality and feasibility of plans for dissemination of project results.
- Sufficient demonstration of compliance with Section 508 requirements (if designing a publicly available website or online course material).

Criterion 5: RESOURCES/CAPABILITIES (15 points) – Corresponds to Section IV's
Organizational Information

For Track 1 – MCH Curriculum Start-Up **and** Track 2 – MCH Curriculum Expansion applications:

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

- The effectiveness of the administrative and organizational structure within which the MCH course(s) or degree offering will function, including an organizational chart and information that verifies accreditation as a school of public health (**Attachment 5**).
- Sufficient description of how the organization will follow the approved plan, properly account for federal funds, and document costs to avoid audit findings.
- Available resources – faculty, staff, space, equipment – are adequate to carry out the project.
- The strength of staff academic expertise in the content area of maternal and child health and sufficient staff experience working with underrepresented students.
- The project director is an effective faculty member in an accredited School of Public Health with demonstrated leadership, relevant experience, and activities pertaining to MCH science and scholarship.
- Key personnel, including the project director, have adequate time devoted to the project to achieve project objectives.
- The faculty are significantly representative of diverse health, social science, or related disciplines.
- The quality of faculty and staff experience in MCH in biosketches.
- The quality and reasonableness of a staffing plan and job descriptions for key faculty/staff (**Attachment 6**).

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

For Track 1 – MCH Curriculum Start-Up **and** Track 2 – MCH Curriculum Expansion applications:

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

- The extent to which costs, as outlined in the budget and required resources sections, are reasonable given the scope of work, and clearly link to the statement of activities, evaluation plan, and expected outcomes.

- The proposed budget includes a reasonable amount of funds to support the project director to participate in the Catalyst Program and Centers of Excellence in MCH annual grantee meeting.
- The proposed budget justification sufficiently provides explicit qualitative and quantitative documentation of required resources, productivity, and expected outcomes.

2. Review and Selection Process

The objective review process provides an objective evaluation to the individuals responsible for making award decisions. The highest ranked applications in each of the two tracks will receive consideration for award within available funding ranges. Final funding decisions will be made by HRSA based on recommendations by the Objective Review Committee.

See Section 5.3 of HRSA's *SF-424 R&R Application Guide* for more details.

3. Assessment of Risk

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

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

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

Effective January 1, 2016, HRSA is required to review and consider any information about your organization that is in the Federal Awardee Performance and Integrity Information System (FAPIIS). You may review and comment on any information about your organization that a federal awarding agency previously entered. HRSA will consider any of your comments, in addition to other information in FAPIIS in making a judgment about your organization's integrity, business ethics, and record of performance under federal awards when completing the review of risk posed as described in 45 CFR § 75.205 HHS Awarding Agency Review of Risk Posed by Applicants.

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

VI. Award Administration Information

1. Award Notices

HRSA will issue the Notice of Award (NOA) prior to the start date of June 1, 2020. See Section 5.4 of HRSA's *SF-424 R&R Application Guide* for additional information.

2. Administrative and National Policy Requirements

See Section 2.1 of HRSA's *SF-424 R&R Application Guide*.

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

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

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

3. Reporting

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

1) **DGIS Performance Reports.** Available through the Electronic Handbooks (EHBs), the Discretionary Grant Information System (DGIS) is where recipients will report annual performance data to HRSA. Award recipients are required to submit a DGIS Performance Report **annually**, by the specified deadline. To prepare successful applicants for their reporting requirements, the listing of administrative forms and performance measures for this program are available at https://perf-data.hrsa.gov/MchbExternal/DgisApp/formassignmentlist/T1C_1.html. The type of report required is determined by the project year of the award's period of performance.

Type of Report	Reporting Period	Available Date	Report Due Date
a) New Competing Performance Report	June 1, 2020 – May 31, 2025 *(administrative data and performance measure projections, as applicable)*	Period of performance start date	120 days from the available date
b) Non-Competing Performance Report	June 1, 2021 – May 31, 2022 June 1, 2022 – May 31, 2023 June 1, 2023 – May 31, 2024	Beginning of each budget period (Years 2–4, as applicable)	120 days from the available date
c) Project Period End Performance Report	June 1, 2024 – May 31, 2025	Period of performance end date	90 days from the available date

The full OMB-approved reporting package is accessible at https://mchb.hrsa.gov/data-research-epidemiology/discretionary-grant-data-collection (OMB Number: 0915-0298 | Expiration Date: 06/30/2022).

2) **Progress Report(s)**. The recipient must submit a progress report narrative to HRSA **annually** via the Non-Competing Continuation Renewal in the EHBs, which should address progress against program outcomes (e.g., accomplishments, barriers, significant changes, plans for the upcoming budget year), , and include annual data on performance measures identified in the Project Narrative, if not captured by DGIS. Submission and HRSA approval of a

progress report will trigger the budget period renewal and release of each subsequent year of funding. Further information will be available in the NOA.

3) **Final Report**. The recipient must submit a final report narrative to HRSA after the conclusion of the project.

VII. Agency Contacts

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

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

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

Samantha Croffut, MPH, RDN
Public Health Analyst
Division of MCH Workforce Development
Attn: Maternal and Child Health Public Health Catalyst Program
Maternal and Child Health Bureau
Health Resources and Services Administration
5600 Fishers Lane, Room 18W62
Rockville, MD 20857
Telephone: (301) 443-4139
Email: SCroffut@hrsa.gov

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

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

Successful applicants/recipients may need assistance when working online to submit information and reports electronically through HRSA's EHBs. For assistance with

submitting information in HRSA's EHBs, contact the HRSA Contact Center, Monday–Friday, 8 a.m. to 8 p.m. ET, excluding federal holidays at:

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

VIII. Other Information

<u>Helpful Resources</u>

HRSA MCH Training Program Web Site
http://www.mchb.hrsa.gov/training

HRSA Strategic Plan, FY 2019–2022
https://www.hrsa.gov/sites/default/files/hrsa/about/strategic-plan/hrsa-strategic-plan.pdf

MCH Leadership Competencies
https://mchb.hrsa.gov/training/leadership-00.asp

Title V Information System (TVIS)
https://mchb.tvisdata.hrsa.gov/

MCH Navigator
https://www.mchnavigator.org/

Association of Teachers of Maternal and Child Health
http://www.atmch.org/

2016 Association of Maternal & Child Health Programs (AMCHP) Workforce Development Survey
http://www.amchp.org/programsandtopics/WorkforceDevelopment/survey/Pages/default.aspx

Healthy People 2020
https://www.healthypeople.gov/

National Center for Cultural Competence
https://nccc.georgetown.edu/

Technical Assistance

HRSA has scheduled the following technical assistance:

Webinar

Day and Date: Wednesday, October 23, 2019
Time: 1–2 p.m. ET
Call-In Number: 1-800-857-5124
Participant Code: 6897238
Weblink: https://hrsa.connectsolutions.com/catalyst20041/

HRSA will record the webinar and make it available at:
https://mchb.hrsa.gov/fundingopportunities/default.aspx.

Tips for Writing a Strong Application

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

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

A. Definitions

1. A trainee is an individual whose activities within the training program are directed primarily toward achieving an advanced degree.

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

3. A stipend is allowable as cost-of-living allowances for trainees. A stipend is not a fee-for-service payment and is not subject to the cost accounting requirements of the cost principles.[2]

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

1. A trainee must have at least a baccalaureate degree and be enrolled in a graduate program.

2. A fellow must have achieved the academic degree and completed requisite training which constitutes the basic professional level training for his/her field.

3. A post-doctoral fellow must have an earned doctorate and must have completed any required internship.

4. A post-residency fellow must have an earned medical degree and must have satisfied requirements for certification in a specialty relevant to the purpose of the proposed training.

5. A special trainee or fellow may be approved, upon request to your HRSA project officer, only in those unusual circumstances where particular needs cannot be met within the categories described above.

6. Citizenship – The trainee or fellow receiving a stipend must be a citizen or a non-citizen national of the United States or have been lawfully admitted for permanent residence, as evidenced by a currently valid Permanent Resident Card [USCIS Form I-551] or other legal verification of such status, by the start of the training grant, fellowship or traineeship, or award. A non-citizen national is a person who, although not a citizen of the United States, owes permanent allegiance to the United States.

7. Licensure – For any profession for which licensure is a prerequisite, the trainee/fellow must also be licensed by one of the states, or, in the case of

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[2] https://www.hrsa.gov/sites/default/files/grants/hhsgrantspolicy.pdf

foreign graduates, meet other requirements which legally qualify him/her to practice his/her profession in the United States.

C. Restrictions

1. Concurrent Support – Stipends for trainees/fellows generally will not be made available under this program to persons receiving a salary, a fellowship, or traineeship stipend from another source, or other financial support related to his/her training or employment for the same hours counted toward his/her HRSA-funded traineeship/fellowship. Exceptions to these restrictions may be requested to the HRSA project officer and will be considered on an individual basis. Tuition support may be provided to full-time or part-time students.

2. Non-Related Duties – The funding recipient shall not use funds from this award to require trainees or fellows to perform any duties which are not directly related to the purpose of the training for which the grant was awarded.

3. Field Training – Funding recipients may not utilize grant funds to support field training, except when such training is part of the specified requirements of a degree program, or is authorized in the approved application.

4. Grant funds may not be used:
   a) for the support of any trainee who would not, in the judgment of the recipient, be able to use the training or meet the minimum qualifications specified in the approved plan for the training;
   b) to continue the support of a trainee who has failed to demonstrate satisfactory participation in the training program;
   c) for support of candidates for undergraduate or pre-professional degrees, or the basic professional degree.

D. Trainee Costs

1. Allowable Costs
   a) Stipends (except as indicated above)
   b) Tuition and fees, including medical insurance
   c) Travel related to training and field placements (international travel requests will require prior approval)
   d) Tuition remission and other forms of compensation[3]

2. Non-Allowable Costs
   a) Dependent/family member allowances

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[3] Under 45 CFR § 75.466(a), tuition remission and other forms of compensation paid as, or in lieu of, wages to students (including fellows and trainees) performing necessary work are allowable provided that there is a bona fide employer-employee relationship between the student and the institution for the work performed, the tuition or other payments are reasonable compensation for the work performed and are conditioned explicitly upon the performance of necessary work, and it is the institution's practice to similarly compensate students in non-sponsored as well as sponsored activities. Other requirements also apply.

b) Travel between home and training site

c) Fringe benefits or deductions which normally apply only to persons with the status of an employee

3. Stipend Levels

All approved stipends indicated are for a full calendar year, and must be *prorated for an academic year or other training period of less than 12 months*. The stipend levels may, for the Division of MCH Workforce Development, be treated as ceilings rather than mandatory amounts, i.e., stipends may be less than *but may not exceed the amounts indicated*. However, where lesser amounts are awarded, the awarding institution must have established, written policy which identifies the basis or bases for such variation and which ensures equitable treatment for all eligible trainees/fellows. These stipend levels, which apply to the National Institutes of Health, the Agency for Healthcare Research and Quality, and the Health Resources and Services Administration training grantees, were updated on November 27, 2018, https://grants.nih.gov/grants/guide/notice-files/NOT-OD-19-036.html(pre-doctoral and post-doctoral). *Dollar amounts indicated in this NOFO are subject to update by the agency as reflected in this issuance.*

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

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

Career Level	Years of Experience	Stipend for FY 2019	Monthly Stipend
Pre-doctoral	All	$24,816	$2,068

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

Career Level	Years of Experience	Stipend for FY 2019	Monthly Stipend
Post-doctoral	0	$50,004	$4,167
	1	$50,376	$4,198

	2	$50,760	$4,230
	3	$52,896	$4,408
	4	$54,756	$4,563
	5	$56,880	$4,740
	6	$59,100	$4,925
	7 or More	$61,308	$5,109

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

Appendix B: MCH Public Health Catalyst Program Logic Model

PROGRAM INPUTS	PROGRAM OUTPUTS		PROGRAM OUTCOMES	
	ACTIVITIES	PRODUCTS / SYSTEMS	SHORT-TERM / INTERMEDIATE	LONG-TERM / IMPACT
Eligible Entities, Stakeholders & Key Resources	**Activities to create/improve health/service systems and infrastructure** **(What will program inputs do?)**	**Health/service systems and infrastructure created to support desirable systems or behaviors** **(What will be created as a result of the activity?)**	**Health/service systems or behaviors that lead to improved health outcomes** **(What will change as a result of the product/system implemented?)**	**Improved health or health care outcomes** **(What will change if short-term / intermediate outcomes are achieved?)**
MCHB grant funding Faculty/staff time, knowledge, and partnerships Stakeholders/ partners in Title V agencies and community-based partners University support/ resources for curriculum development	**Track 1 – MCH Curriculum Start-Up** Develop and offer at least one graduate-level credit bearing course focused on foundational MCH population health within the first 6 months of the first budget period.	**Track 1 – MCH Curriculum Start-Up** At least four graduate-level credit bearing course(s) focused on foundational MCH population health (one per grantee).	**Track 1 – MCH Curriculum Start-Up** Increased access to foundational MCH coursework at schools of public health.	**Both Tracks** Increased number and percentage of MCH Catalyst Program graduates at 2- and 5-years post program completion work with MCH populations and demonstrate field leadership in MCH. Increased capacity of MCH practitioners and leaders working in state, local and community MCH setting to address current and emerging public health issues for MCH populations. Strengthened academic-practice
	Create and support a student-led organization, events, and/or activities that bring together students in the public health school with an interest in MCH.	Four student-led interest groups that bring together students in the public health school with an interest in MCH.		
	Track 2 – MCH Curriculum Expansion Expand MCH course offerings to offer a well-rounded education experience for trainees, ensuring coursework meets all university and accreditation requirements.	**Track 2 – MCH Curriculum Expansion** At least 20 graduate-level credit bearing course(s) focused on MCH issues (four per grantee).	**Track 2 – MCH Curriculum Expansion** Increased access to MCH-specific public health degree offerings, including practicum opportunities, at the masters and doctoral level.	
	Develop and offer a public health degree, certificate, or concentration in MCH by the end of	Five MCH degree, certificate, or concentration offerings in MCH.		

PROGRAM INPUTS	PROGRAM OUTPUTS		PROGRAM OUTCOMES	
	ACTIVITIES	PRODUCTS / SYSTEMS	SHORT-TERM / INTERMEDIATE	LONG-TERM / IMPACT
Eligible Entities, Stakeholders & Key Resources	**Activities to create/improve health/service systems and infrastructure** **(What will program inputs do?)**	**Health/service systems and infrastructure created to support desirable systems or behaviors** **(What will be created as a result of the activity?)**	**Health/service systems or behaviors that lead to improved health outcomes** **(What will change as a result of the product/system implemented?)**	**Improved health or health care outcomes** **(What will change if short-term / intermediate outcomes are achieved?)**
	the period of performance.			partnerships between Catalyst Programs and state and local MCH agencies.
	Sustain a student-led organization, events, and/or activities that bring together students in the public health school with an interest in MCH.	Five student-led organizations that continue to bring together students in the public health school with an interest in MCH.		Increased presence of MCH curriculum offerings at schools of public health across the United States.
	Develop or maintain partnerships with Title V and other MCH agencies.	At least 10 partnerships with Title V and MCH agencies documented or maintained.	**Track 2 – MCH Curriculum Expansion** Increased access to MCH-specific public health degree offerings, including practicum opportunities, at the masters and doctoral level.	
	Provide mentorship to Catalyst Program directors and faculty in Track 1.	Partnership and mentoring relationships established and maintained between Catalyst Program faculty across Track 1 and Track 2.		
	Both Tracks Recruit qualified students from economically disadvantaged and racially/ethnically underrepresented minority backgrounds to participate in Catalyst Program MCH coursework and activities.	**Both Tracks** Students from economically disadvantaged and racially/ethnically underrepresented minority backgrounds participate in MCH coursework and activities.	**Both Tracks** Increased student engagement in MCH-related activities at schools of public health. Increased knowledge and skill of Catalyst Program	

PROGRAM INPUTS	PROGRAM OUTPUTS		PROGRAM OUTCOMES	
	ACTIVITIES	PRODUCTS / SYSTEMS	SHORT-TERM / INTERMEDIATE	LONG-TERM / IMPACT
Eligible Entities, Stakeholders & Key Resources	Activities to create/improve health/service systems and infrastructure (What will program inputs do?)	Health/service systems and infrastructure created to support desirable systems or behaviors (What will be created as a result of the activity?)	Health/service systems or behaviors that lead to improved health outcomes (What will change as a result of the product/system implemented?)	Improved health or health care outcomes (What will change if short-term / intermediate outcomes are achieved?)
	Conduct 2- and 5-year follow-up for students who complete MCH course(s) or degree offerings to report on the number and percentage of graduates who work in the MCH field and enter leadership positions.	2- and 5-year follow-up data that demonstrates the outcomes of MCH course and/or degree completers (e.g., working in MCH, demonstrating field leadership in MCH academic, policy or practice arenas).	graduates in MCH public health. Increased diversity of the MCH public health workforce.	
	Develop partnerships with state and local MCH organizations to facilitate student practicum placements in state and local MCH organizations.	Partnerships with state and local MCH organizations, and student practicum placements in local MCH organizations.		
	Support graduate students enrolled in MCH course(s) to complete a practicum experience with a MCH organization or to focus on a MCH-related topic.	18 students per year (2 per grantee) complete a practicum with a MCH organization or focused on a MCH-related topic.		
	Participate in grantee calls (at least quarterly) and an annual grantee meeting with other funded MCH Catalyst and Centers of Excellence Programs.	Participation in/attendance at all required conference calls and grantee meetings.		
	Develop a sustainability plan to outline how key elements of the	Nine sustainability plans (one per awardee in both Track 1 and Track 2).		

PROGRAM INPUTS	PROGRAM OUTPUTS		PROGRAM OUTCOMES	
	ACTIVITIES	PRODUCTS / SYSTEMS	SHORT-TERM / INTERMEDIATE	LONG-TERM / IMPACT
Eligible Entities, Stakeholders & Key Resources	**Activities to create/improve health/service systems and infrastructure** **(What will program inputs do?)**	**Health/service systems and infrastructure created to support desirable systems or behaviors** **(What will be created as a result of the activity?)**	**Health/service systems or behaviors that lead to improved health outcomes** **(What will change as a result of the product/system implemented?)**	**Improved health or health care outcomes** **(What will change if short-term / intermediate outcomes are achieved?)**
	project (e.g., coursework, student interest groups) will continue after federal funding ends.			