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

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

MCH Navigator Program

Announcement Type: New, Competing Continuation
Funding Opportunity Number: HRSA-16-043

Catalog of Federal Domestic Assistance (CFDA) No. 93.110

FUNDING OPPORTUNITY ANNOUNCEMENT

Fiscal Year 2016

Application Due Date: February 12, 2016

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

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Meredith Morrissette, MPH
Public Health Analyst, MCHB/DMCHWD
E-mail: MMorrissette@hrsa.gov
Telephone: (301) 443-6392
Fax: (301) 443-1797

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

EXECUTIVE SUMMARY

The Health Resources and Services Administration (HRSA), Maternal and Child Health Bureau (MCHB) is accepting applications for fiscal year (FY) 2016 MCH Navigator Program. The purpose of this program is to strengthen the knowledge, skills, and capacity of the Maternal and Child Health (MCH) workforce through online continuing education tailored to meet the needs of emerging and practicing MCH professionals. The project utilizes a web site to connect learners to open-access webcasts, presentations, instructional modules, and online courses covering essential MCH skills and knowledge.

Funding Opportunity Title:	MCH Navigator Program
Funding Opportunity Number:	HRSA-16-043
Due Date for Applications:	February 12, 2016
Anticipated Total Annual Available Funding:	$180,000
Estimated Number and Type of Award(s):	One (1) cooperative agreement
Estimated Award Amount:	Up to $180,000 per year
Cost Sharing/Match Required:	No
Project Period:	July 1, 2016 through June 30, 2021 (five (5) years)
Eligible Applicants:	Public or nonprofit private institutions of higher learning may apply for training awards. [See Section III-1 of this funding opportunity announcement (FOA) for complete eligibility information.]

Application Guide

All applicants 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/sf424rrguide.pdf, except where instructed in this FOA to do otherwise. A short video for applicants explaining the *Application Guide* is available at http://www.hrsa.gov/grants/apply/applicationguide/.

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I. Program Funding Opportunity Description

1. Purpose

The MCH Navigator Program is designed to strengthen the knowledge, skills, and capacity of the MCH workforce through online continuing education tailored to meet the needs of emerging and practicing MCH professionals. This program supports HRSA Strategic Plan 2010-2015 goals to improve access to quality health care and services, strengthen the health workforce, and improve health equity.

Federal, state, and local MCH agencies are tasked with improving the health of all U.S. women, children, and families. Accomplishing this requires resourceful and innovative leaders who can work across disciplines and across systems, particularly given the changes in our healthcare delivery system and today's environment of intractable health disparities. MCH professionals, including Title V Directors and staff, require access to continuous training in critical MCH topics and skills in order to most effectively implement Title V transformation and identified state workforce needs.

The Maternal and Child Health Bureau (MCHB) is committed to advancing the knowledge and skills of practicing MCH professionals. Current barriers to continuing education include ever-tightening travel restrictions, capacity shortages, difficulty in taking time away from work, and the cost of training. Distance learning education methodologies can address these barriers by providing effective and efficient means by which MCH professionals can practice and advance their analytic, managerial, and clinical skills while continuing to meet their daily on-site responsibilities.

2. Background

This program is authorized by the Social Security Act, Title V, Section 501(a)(2).

Maternal and Child Health Bureau and Title V of the Social Security Act

In 1935, Congress enacted Title V of the Social Security Act, authorizing the Maternal and Child Health Services Programs. This legislation has provided a foundation and structure for assuring the health of mothers and children in our nation for 80 years. Title V was designed to improve health and assure access to high quality health services for present and future generations of mothers, infants, children and adolescents, including those with disabilities and chronic illnesses, with special attention to those of low income or with limited availability of health services.

Today, Title V is administered by MCHB, which is a part of the Health Resources and Services Administration (HRSA) in the U.S. Department of Health and Human Services (HHS). Under Title V of the Social Security Act, the Maternal and Child Health Services Block Grant program has three components – Formula Block Grants to States, Special Projects of Regional and National Significance (SPRANS), and Community Integrated Service Systems (CISS) awards. Using these authorities, the MCHB has forged partnerships with states, the academic community, health professionals, advocates, diverse communities and families to better serve the needs of our nation's children.

Division of Maternal and Child Health Workforce Development (DMCHWD) 2012-2020 National Goals (URL: http://mchb.hrsa.gov/training/about-national-goals.asp)

The DMCHWD works collaboratively with national, state, and local MCH organizations to develop and sustain MCH professionals prepared to provide leadership within Title V and other MCH programs.

DMCHWD's vision for the 21st century is that all children, youth, and families will live and thrive in healthy communities served by a quality workforce that helps assure their health and well-being. To achieve this vision, the Division is guided by its strategic plan for 2012-2020 which includes the following goals:

- **Goal 1: MCH Workforce and Leadership Development:** Address current and emerging MCH workforce needs by engaging, and providing training for and support to MCH leaders in practice, academics and policy.

- **Goal 2: Diversity and Health Equity:** Prepare and empower MCH leaders to promote health equity, wellness, and reduce disparities in health and healthcare.

- **Goal 3: Interdisciplinary/Inter-professional Training and Practice:** Promote interdisciplinary/inter-professional training, practice and inter-organizational collaboration to improve the quality of care by enhancing systems integration for MCH populations.

- **Goal 4: Science, Innovation and Quality Improvement:** Generate and translate new knowledge for the MCH field in order to advance science-based practice, innovation, and quality improvement in MCH training, policies, and programs.

The DMCHWD seeks to ensure excellent health services for families through workforce preparation. Specifically, it supports:

- *Trainees* who show promise to become leaders in the MCH field through teaching, research, clinical practice, service, and/or administration and policymaking.
- *Faculty* who mentor students in exemplary MCH public health practice, advance the field through research, develop curricula particular to MCH and public health, and provide technical assistance to those in the field; and *Continuing education and technical assistance* for those already practicing in the MCH field to keep them abreast of the latest research and practices.

The MCH Navigator project is designed to implement new and emerging technologies to connect the workforce to online training needs. The MCH Navigator cooperative agreement uses a web site to link learners to open-access webcasts, presentations, instructional modules, and online courses covering essential MCH skills and knowledge. MCHB wants to assure that content developed by Title V SPRANS investments, MCH graduate education programs, and other continuing education materials developed by others is readily available to state and local MCH programs and the wider public health communities.

The Navigator is a comprehensive learning portal of vetted, high quality, online training designed to guide MCH professionals to resources suited to their learning needs. It is aligned to

the MCH leadership competencies and allows rapid access to up-to-date training for MCH professionals. These competencies, which are presented in a progression from self to wider community, are designed to support and promote MCH leadership, which requires specific knowledge, skills, personal characteristics, and values (http://leadership.mchtraining.net). The MCH Navigator is specifically structured to meet the needs of the MCH workforce, including staff with different professional responsibilities, professional disciplines, education, work experience and prior exposure to Title V and public health. As such, it encourages life-long learning across all career stages, facilitates self-directed learning, and is constantly evolving to address new and expanding areas of MCH practice.

Data strongly indicate that the MCH Navigator is filling a training gap and is being used by the field. In 2014, the MCH Navigator was accessed by 8,000 MCH professionals, students, and other public health workers for access to nearly 55,000 pages of training resources; 63 percent of these users returned multiple times. On average, the MCH Navigator is used over 1,000 times per month. There are over 275 vetted learning opportunities in the MCH Navigator that directly support the 12 MCH Leadership Competencies. The MCH Navigator includes Training Bundles on core public health topic areas (MCH 101, communication, management, etc.) that provide access to over 150 trainings, as well as MCH Training Spotlights, Briefs, and Resource Lists on emerging MCH topic areas (Affordable Care Act, Children and Youth with Special Health Care Needs, Evaluation, Lifecourse, Needs Assessment) that provide access to over 2,000 trainings.

Need for the MCH Navigator Program

To improve the health of the nation's women, children, and families requires a highly competent and well-trained MCH workforce. Supporting workforce development continues to be a national priority for state and local MCH and public health agencies. HRSA's Strategic Plan includes a sub-goal dedicated to assuring that the health workforce is trained to provide high quality, culturally and linguistically appropriate care; HRSA's Guiding Principles include valuing and strengthening the HRSA workforce and acknowledging HRSA colleagues as a critical resource in accomplishing its mission. Crosscutting workforce development that improves knowledge, skills, and attitudes leads to a highly skilled workforce that can more effectively improve the nation's health. In particular, major crosscutting training areas such as systems thinking, communicating persuasively, change management, information and analytics, problem solving, and working with diverse population were recently identified as priorities, indicating a shift in workforce needs (Kaufman NJ, et al. Thinking Beyond the Silos: Emerging Priorities in Workforce Development for State and Local Government Public Health Agencies. J Public Health Management Practice, 2014, 20(6), 557–56). In fact, the Public Health Accreditation Board Standards and Measures include a focus on workforce development as a part of public health agency accreditation process. Standard 8.2 directs state and local health agencies to "Ensure a competent workforce through the assessment of staff competencies, the provision of individual training and professional development, and the provision of a supportive work environment." (Public Health Accreditation Board, Standards and Measures. Version 1.5. Adopted December 2013).

Research stresses the need for providing a broad framework of education and training (for public health professionals) -- in settings other than full-time degree programs -- particularly given the time, budget, and travel constraints on the current workforce, and the fact that many public health professionals have not yet received formal training in public health. (Koo, Denise and Miner, Kathleen. Outcome-Based Workforce Development and Education in Public Health.

[Annu. Rev Public Health. 2010.31:253-269](#)). It is essential that professional development uses innovative techniques to addresses population health, encompasses MCH leadership competencies that address contemporary challenges, uses data and measurement outcomes, and reaches beyond existing clinical and public health professionals.

Further, the need for training tailored to MCH professionals has been well documented. A 2008 survey conducted by MCHB, Association of Maternal and Child Health Programs (AMCHP), and the Association of Teachers of Maternal and Child Health (ATMCH) assessed state Title V MCH and Children and Youth with Special Health Care Needs (CYSHCN) programs' workforce capacity, training needs, preferred modalities, and barriers to training. Barriers to training included: a lack of career advancement opportunities, insufficient agency support, and inability to take leave from work ([Grason, H., Kavanagh, L., Dooley, S., Partelow, J., Sharkey, A., Bradley, K, et al 2012](#)). The Title V professionals also noted that the main barriers to CE were travel restrictions, inability to obtain release time from work, costs, and lack of geographical access. Recent studies indicate that 80 percent of the public health workforce has not received formal training in their specific job functions at a time when public health agencies are being significantly downsized ([Levi J., Kaiman S., Juliano C., and Segal L. 2008](#)). In addition, due to changes in the health care system, MCH health professionals need to anticipate, adapt, and transform leadership skills.

At a time of increased training needs and diminished state and local public health budgets, the MCH Navigator is necessary and critical to meet new workforce demands. Evidence to date indicates that the MCH Navigator is meeting a need for real-time training to augment face-to-face engagement in learning, such as conferences, workshops, and formal on-campus graduate programs. Formative assessment findings show that the MCH Navigator currently plays a role in promoting leadership development, supporting an individual sense of agency in professional development and an organizational culture that values and promotes professional development.

The MCH Navigator collaborates directly with state Title V and local public health agency staff to provide customized professional development based on need. State Title V programs are using the MCH Navigator as a workforce development tool in a variety of ways, including using the Navigator to train MCH staff about MCH and public health, and using the self-assessment and MCH Navigator content for staff development to develop learning plans for new and existing employees to incorporate into the performance review process. Several universities are using learning opportunities from the MCH Navigator to supplement course content for students at both graduate and undergraduate levels and to provide additional training for faculty.

In addition, the Navigator is aligned with the Title V Block Grant transformation by supporting the needs of Title V Directors and staff through online training related to transformation, and aligns with other SPRANS investments by including content developed by other SPRANS recipients, allowing for greater dissemination of MCHB resources to the MCH workforce. The MCH Navigator is based on the MCH leadership competencies and thereby can help assure that underserved communities have a well-trained, diverse MCH workforce and encourages innovation in the education and training of the health professions workforce. As such, it promotes life-long learning across all career stages, facilitates self-directed learning, and is constantly evolving to address new and expanding areas of MCH practice.

II. Award Information

1. Type of Application and Award

Type(s) of applications sought: New, Competing Continuation

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

As a cooperative agreement, **HRSA Program involvement will include**:

Under the cooperative agreement, MCHB will support and/or stimulate the awardee's activities by working with the awardee in a non-directive, partnership role, but will not assume direction, prime responsibility, or a dominant role in the activity.

In addition to the usual monitoring and technical assistance provided under the cooperative agreement, MCHB responsibilities will include the following:

- Making available the services of experienced HRSA/MCHB personnel as participants in the planning and development of all phases of the project;
- Ongoing review of activities and procedures to be established and implemented for accomplishing the goals of the cooperative agreement;
- Participation, as appropriate, in meetings conducted during the period of the cooperative agreement;
- Review of project information prior to dissemination;
- Assistance and referral in the establishment and facilitation of effective collaborative relationships with federal and state agencies, MCHB award projects, resource centers, and other entities that may be relevant to the project's mission;
- Provision of information resources; and
- Participation in the dissemination of project activities and products.

The cooperative agreement recipient's responsibilities will include:

- Adherence to HRSA guidelines pertaining to acknowledgement and disclaimer on all products produced by HRSA award funds. See "**Acknowledgment of Federal Funding"** in Section 2.2 of HRSA's *SF-424 Application Guide.*

1) Strategic and Collaborative Assessment and Planning
    - Link learners to open-access webcasts, presentations, instructional modules, and online courses covering essential MCH skills and knowledge;
    - Monitor Title V workforce needs and currently available open-access materials and courses; and
    - Link to existing high quality content and develop content where gaps exist.

2) Communications and Outreach
- Develop a communications, dissemination, and outreach plan geared towards MCH workforce learners and to reach diverse audiences and partners such as state and local public health professional organizations, and philanthropic organizations; and
- Draw on partner resources in order to implement the span of activities and operate the Navigator as a MCH community partnership.

3) Content, Quality and Enhancements
- Link learners to open-access webcasts, presentations, instructional modules, and online courses covering essential MCH skills and knowledge;
- Build upon the content contained in the current MCH Navigator website, http://mchnavigator.org (including procuring on HRSA's behalf any necessary copyright permission for content developed by third parties);
- Review and vet existing content for both pedagogy and adult learning with both MCH practice and MCH academic audiences to assure high quality content;
- Link existing efforts where high quality content exists;
- Partner with MCH Stakeholder organizations, develop new content where content gaps exist and then market, and deliver to Title V workforce;
- Provide staff capacity (and technological ability) to maintain the web portal; and
- Develop new innovative features and enhancements (e.g., strategies for use) as recommended by learners and as emerging technology provides new opportunities.

4) Accountability and Evaluation
- Analyze the quality of materials and user data to improve the MCH Navigator Program;
- Assure that the content, pedagogy, and adult learning approach are meeting the needs of diverse MCH workforce audiences; and
- Assist parties involved in any external evaluation of the MCH Navigator Program.

5) External Advisory Capacity
- Recruit and retain members of external advisory group(s) to seek input in the outlined areas: Assessment and Planning, Communications and Outreach, and Content, Quality and Innovation, and Accountability and Evaluation.

2. Summary of Funding

This program will provide funding during federal fiscal years 2016 – 2020. Approximately $180,000 is expected to be available annually to fund one (1) recipient. Applicants may apply for a ceiling amount of up to $180,000 per year. The actual amount available will not be determined until enactment of the final FY 2016 federal budget. This program announcement is subject to the appropriation of funds, and is a contingency action taken to ensure that, should funds become available for this purpose, applications can be processed, and funds can be awarded in a timely manner. The project period is five (5) years. Funding beyond the first year is dependent on the availability of appropriated funds for the MCH Navigator Program in

subsequent fiscal years, satisfactory recipient performance, and a decision that continued funding is in the best interest of the Federal Government.

Effective December 26, 2014, all administrative and audit requirements and the cost principles that govern federal monies associated with this award are subject to the Uniform Guidance 2 CFR Part 200 as codified by HHS at 45 CFR Part 75, which supersede the previous administrative and audit requirements and cost principles that govern federal monies.

The indirect cost rate is capped at 8 percent for training awards.

III. Eligibility Information

1. Eligible Applicants

Only public or nonprofit private institutions of higher learning may apply for this funding opportunity awards.

Foreign entities are not eligible for HRSA awards, unless the authorizing legislation specifically authorizes awards to foreign entities or the award is for research. This exception does not extend to research training awards or construction of research facilities.

2. Cost Sharing/Matching

Cost sharing/matching is not required for this program.

3. Other

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

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

NOTE: Multiple applications from an organization are not allowable.

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 the applicant's **last** validated electronic submission, under the correct funding opportunity number, prior to the Grants.gov application due date as the final and only acceptable application.

IV. Application and Submission Information

1. Address to Request Application Package

HRSA *requires* applicants for this FOA to apply electronically through Grants.gov. Applicants must download the SF-424 Research and Related (R&R) application package associated with this FOA following the directions provided at Grants.gov.

2. Content and Form of Application Submission

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

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

Application Page Limit
The total size of all uploaded files may not exceed the equivalent of **80 pages** when printed by HRSA. The page limit includes the abstract, project and budget narratives, attachments, and letters of commitment and support required in the *Application Guide* and this FOA. Standard OMB-approved forms that are included in the application package are NOT included in the page limit. Indirect Cost Rate Agreement and proof of non-profit status (if applicable) will not be counted in the page limit. **We strongly urge applicants to take appropriate measures to ensure the 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 the announcement.

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

i. *Project Abstract*
See Section 4.1.ix of HRSA's [*SF-424 R&R Application Guide*](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 and well organized so that reviewers can understand the proposed project.

Use the following section headers for the Narrative:

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

This section should briefly describe the purpose of the proposed project. MCH Navigator applicants should briefly describe the background of the proposal, critically evaluating the national and regional need/demand for the training and specifically identifying problem(s) to be addressed and gaps which the project is intended to fill.

▪ *NEEDS ASSESSMENT -- Corresponds to Section V's Review Criterion #1*
A summary of needs assessment findings should be included. State concisely the importance of the project by relating the specific objectives to the potential of the project to meet the purposes of the program described in the program announcement. Applicants must document how their proposed program addresses a critical unmet MCH Title V workforce training need.

▪ *METHODOLOGY -- Corresponds to Section V's Review Criterion #2*
Describe, by year, the activities, methods, and techniques to be used to accomplish the objectives of the project. Applicants should describe the curricular content, instructional design and any technologies utilized.

Goals and Objectives:
State the overall goal(s) of the project and list the specific objectives that respond to the stated need/purpose for this project. The objectives must be **observable** and **measurable** with specific **outcomes** for each project year that are attainable in the stated **time frame**. The outcomes are the criteria for evaluation of the program.

Methodology Narrative Sections:
Under the MCH Navigator Program cooperative agreement, MCHB will support and/or stimulate the awardee's activities by working with the awardee in a non-directive, partnership role, but will not assume direction, prime responsibility, or a dominant role in the activity.

The MCH Navigator Program cooperative agreement should link learners to open-access webcasts, presentations, instructional modules, and online courses covering essential MCH skills and knowledge, building upon the existing website, http://mchnavigator.org. The successful applicant for the MCH Navigator Program cooperative agreement must address the following overall areas:

Strategic and Collaborative Assessment and Planning
The applicant must detail a plan and sources for regularly monitoring Title V workforce needs, assuring that project content does not duplicate existing public health content such as that developed by DMCHWD, Public Health Training Centers, and other public health content providers. Where existing content exists, the MCH Navigator Program should link to existing efforts. The MCH Navigator Program should link learners to open-access webcasts, presentations, instructional modules, and online courses covering essential MCH skills and knowledge.

Describe how the project will utilize advice from external advisory groups and partnerships with MCH stakeholder organizations to inform this ongoing assessment and planning process.

Regular collaboration with MCHB DMCHWD staff is encouraged for linking MCH Navigator with related federal agency workforce development initiatives (DMCHWD, Bureau of Health Professions/PHTCs, AHECs, etc.) and with the Public Health Foundation/TRAIN. The applicant will consult and collaborate with MCHB-funded training award recipients.

Communications and Outreach
Describe a communications and outreach plan for MCH workforce learners and outreach to diverse partners such as state and local public health professional organizations, and philanthropic organizations. Describe a dissemination plan for how new and existing content, as well as new materials, will be developed, marketed, and delivered to learners. Existing and new materials should be posted and marketed through enhanced web based methods that build upon http://mchnavigator.org.

Content, Quality and Enhancements
Describe the process for how the applicant will monitor Title V workforce needs as well as how the applicant will monitor currently available open-access materials and trainings relevant to the target audience. Describe in detail how existing content will be reviewed and vetted, using specific criteria (e.g., currency, accuracy, relevance of the information, pedagogical approach, and technical aspects of the presentation) and involving target user audiences, in order to create internal quality control measures, allow opportunities for user feedback, and ensure high quality content. Where content gaps are identified, describe how new content will be developed, marketed, and delivered to learners. Provide a detailed plan regarding how existing and new materials will be posted and marketed through enhanced web based methods that build upon http://mchnavigator.org, including a plan for how permission will be obtained on HRSA's behalf to incorporate on the website content developed by third parties. As new enhancements for the MCH Navigator Program are recommended, describe how the applicant will take approved features forward to implementation. For example, the applicant should describe the process for development and implementation of a "mini-MPH" package of trainings tailored to individuals who may not be able to get an MPH, but could benefit from the core content.

Accountability and Evaluation
Describe a plan for regular analysis of quality and user data that will inform changes to the project based on evaluation findings. In addition, describe a plan to measure users' increase in knowledge, skills, and attitudes; document how state Title V agencies and others are using the MCH Navigator resources to support workforce development; measure the extent of engagement of partnerships established and the leveraged outreach and resources leveraged attributable to these partnerships. The applicant will assist parties involved in any external evaluation of the MCH Navigator Program.

External Advisory Group(s)
Applicants for the MCH Navigator cooperative agreement must provide detailed information on how they will recruit and retain members of any external advisory group(s); the proposed structure of the group(s); proposed qualifications for members; how the

group(s) will be convened; how they will solicit input from such group(s); and how that input will be incorporated in to the project through the outlined areas: Assessment and Planning, Communications and Outreach, and Content, Quality and Innovation, and Accountability and Evaluation.

Document Collaborative Relationship(s) with MCH Agencies
Applicants must document active, functioning, collaborative relationships between the proposed program and MCH/CSHCN programs and other relevant state and local Title V and related public and private sector programs within the targeted geographic area or nationally for (in **Attachment 1**, "Cohort/Table of Partners and Collaboration" of the application). Programs are expected to explain their relevance to Title V Maternal and Child Health Programs.

Compliance with Section 508
If the project proposes developing a website, describe how it will comply with Section 508 of the Rehabilitation Act, which requires recipients to make electronic and information technology accessible to people with disabilities. (http://www.section508.gov).

Section 508 was enacted to eliminate barriers in information technology, to make available new opportunities for people with disabilities, and to encourage development of technologies that will help achieve these goals. Under Section 508 (29 U.S.C. 794d), agencies must give disabled employees and members of the public access to information that is comparable to the access available to others. It is recommended that applicants review the laws and regulations to further understand about Section 508 and how to support implementation.

- *WORK PLAN -- Corresponds to Section V's Review Criteria #2 and #4*
  Describe the activities or steps that will be used to achieve each of the activities proposed during the entire project period 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 development of the application and, further, the extent to which these contributors reflect the cultural, racial, linguistic and geographic diversity of the populations and communities served.

  Applicants must submit a logic model as **Attachment 4** for designing and managing their project. A logic model is a one-page diagram that presents the conceptual framework for a proposed project and explains the links among program elements. While there are many versions of logic models, for the purposes of this announcement, 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 is supporting resources. Assumptions should be based on research, best practices, and experience.)
  - Inputs (e.g., organizational profile, collaborative partners, key staff, 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 or deliverables of program activities); and
- Outcomes (i.e., the results of a program, typically describing a change in people or systems).

The applicant should document the extent and effectiveness of plans for dissemination of project results, the extent to which project results may be national in scope, and the degree to which the project activities are shared with other stakeholders.

More information on logic models may be found in [Section VIII](#) of this FOA.

Sustainability:
The applicant should provide a plan that projects the sustainability of the program beyond the federal funding period.

Dissemination:
Applicants should provide a detailed plan describing how they will market the products developed by their project to others interested in the topic area. The plan should address the extent and effectiveness of project results and products and/or the extent to which the project results and products may be national in scope. Additionally, the plan should address the degree to which the project activities and products are replicable.

- *RESOLUTION OF CHALLENGES -- Corresponds to Section V's Review Criterion #2*
Discuss challenges that are likely to be encountered in designing and implementing the activities described in the Work Plan, and approaches that will be used to resolve such challenges.

- *EVALUATION AND TECHNICAL SUPPORT CAPACITY -- Corresponds to Section V's Review Criteria #3 and #5*
Evaluation and self-assessment are critically important for quality improvement and assessing the value-added contribution of Title V investments. Consequently, discretionary award projects, including training projects, are expected to incorporate a carefully designed and well-planned evaluation protocol capable of demonstrating and documenting measurable progress toward achieving the stated goals. The measurement of progress toward goals should focus on systems impacts and population health, rather than solely on process or interim output measures. The protocol should be based on a clear rationale relating the identified needs of the target population with project goals, awards activities, and evaluation measures.

In order to address documented challenges to meet the training needs of the current and emerging MCH workforce, particularly those practicing in state and local public agencies and community organizations, MCHB funds awards to universities for developing and delivering distance and blended learning training to update and improve the knowledge and skills of health and related professionals serving mothers and children.

Applicants should provide a detailed plan describing how they will measure the effectiveness of the project, including penetration within the specific target audience nationally or regionally with respect to both dissemination of and engagement with the learning materials. Measures that identify awareness of, applicability to, engagement with (use of) resources of the MCH Navigator by state and local Title V MCH and CYSHCN

programs at the individual and organizational levels will be critical. Acceptable evaluation plans will document the extent to which the capabilities of users to perform their assigned duties on behalf of MCH population health were enhanced as a result of the MCH Navigator learning portal. Because implementation of the MCH Navigator is intended to be a collaborative activity of the MCH community broadly, evaluation plans also must measure the extent of engagement of partnerships established and the outreach and resources leveraged (money, personnel time, course development, etc.) attributable to these partnerships. The applicant must include a logic model as **Attachment 4** that demonstrates the relationship among resources, activities, outputs, and short and long-term population and/or system outcomes.

Monitoring and evaluation activities must be ongoing and, to the extent feasible, must be structured to gain information that is quantifiable and that permits objective rather than subjective judgments. The applicant should present a plan that describes what data will be collected, the methods for collection and the manner in which data will be analyzed and reported. This plan must include the collection of data elements described at: https://perf-data.hrsa.gov/mchb/DgisApp/FormAssignmentList/UE8_1.html.

The applicant should consider describing which data will be used as a component of formative (or process) evaluation for internal project improvement activities, and which will pertain more specifically to demonstrating outcomes/effectiveness/impact. The applicant also should identify who on the project will be responsible for refining and collecting, and analyzing data for the evaluation and how the applicant will make changes to the program based on evaluation findings.

- *ORGANIZATIONAL INFORMATION -- Corresponds to Section V's Review Criteria #5*
  Applicants must describe briefly the administrative and organizational structure within which the program will function, including relationships with other relevant departments, institutions, organizations or agencies relevant to the program. Charts outlining these relationships must be included either in the program narrative or as an attachment.

  Include a brief, specific description of the available resources (faculty, staff, space, equipment, etc.), and related community services that are available and will be used to carry out the program. Include biographical sketches of faculty/staff on SF-424 R&R Senior Key Personnel form.

  Faculty/Staff—Staffing Plan and Personnel Requirements
  Projects must have appropriate faculty and staff with demonstrated leadership, expertise and experience in the specific project content and methods. Project staff should have expertise in MCH content as well as adult learning and evidence based education models utilizing available and emerging technologies.

NARRATIVE GUIDANCE	
In order to ensure that the Review Criteria are fully addressed, this table provides a crosswalk between the narrative language and where each section falls within the review criteria.	

Narrative Section	**Review Criteria**
Introduction	(1) Need
Needs Assessment	(1) Need
Methodology	(2) Response
Work Plan	(2) Response and (4) Impact
Resolution of Challenges	(2) Response
Evaluation and Technical Support Capacity	(3) Evaluative Measures and (5) Resources/Capabilities
Organizational Information	(5) Resources/Capabilities
Budget and Budget Justification Narrative	(6) Support Requested – 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* differ from those offered by Grants.gov. Please follow the instructions included in the R&R Application Guide and, *if applicable*, the additional budget instructions provided below.

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.

The Consolidated and Further Continuing Appropriations Act, 2015, Division G, § 203, (P.L. 113-235) states "None of the funds appropriated in this title shall be used to pay the salary of an individual, through a grant or other extramural mechanism, at a rate in excess of Executive Level II." Please see Section 4.1.iv Budget – Salary Limitation of HRSA's *SF-424 R&R Application Guide* for additional information.   Note that these or other salary limitations may apply in FY 2016, as required by law.

iv. *Budget Justification Narrative*

See Section 4.1.v of HRSA's *SF-424 R&R Application Guide*. In addition, the MCH Navigator Program requires the following:

Describe briefly what additional resources are needed to accomplish the stated goals and objectives, i.e., what is requested through project support and why. See also IV.iii and iv for assistance in preparing the budget and budget justification.

The following principles are vital when describing the need for additional resources:

- All budgets must provide satisfactory details to fully explain and justify the resource(s) needed to accomplish the training objectives. The justification must provide explicit qualitative and quantitative documentation of required resources, productivity, and expected outcomes. Components to highlight include current strengths, number of learners, proposed program activities, Title V activities, and scope of reach (regional or national).
- Programs must fully justify their requests by describing and identifying goals, objectives, activities, and outcomes that will be achieved by the program during the project period. It must be documented that the program plays a significant role in regional and/or national matters.

v. *Program-Specific Forms*

1) *Performance Standards for Special Projects of Regional or National Significance (SPRANS) and Other MCHB Discretionary Projects*

HRSA has modified its reporting requirements for SPRANS projects, Community Integrated Service Systems (CISS) projects, and other grant programs administered by MCHB to include national performance measures that were developed in accordance with the requirements of the Government Performance and Results Act (GPRA) of 1993 (Public Law 103-62). This Act requires the establishment of measurable goals for federal programs that can be reported as part of the budgetary process, thus linking funding decisions with performance. Performance measures for states have also been established under the Block Grant provisions of Title V of the Social Security Act, MCHB's authorizing legislation. Performance measures for other MCHB-funded grant programs have been approved by the Office of Management and Budget and are primarily based on existing or administrative data that projects should easily be able to access or collect. An electronic system for reporting these data elements has been developed and is now available.

2) *Performance Measures for the MCH Navigator Program*

To inform successful applicants of their reporting requirements, the listing of MCHB administrative forms and performance measures for this program can be found at: https://perf-data.hrsa.gov/mchb/DgisApp/FormAssignmentList/UE8_1.html.

NOTE: The performance measures and data collection information is for your PLANNING USE ONLY. These forms are not to be included as part of this application. However, this information will be due to HRSA within 120 days after the Notice of Award.

vi. *Attachments*

Please provide the following items in the order specified below to complete the content of the application. **Unless otherwise noted, attachments count toward the application page limit.** Indirect cost rate agreements and proof of non-profit status (if applicable) will not count toward the page limit. **Each attachment must be clearly labeled**.

Attachment 1: Chart/Table of Partners and Collaboration: Please provide a chart of letters of collaboration between the proposed program and collaborating departments, institutions, organizations or agencies. The chart should provide the following information: Institution, Person as appropriate, Responsibilities/Activities agreed to be provided, Date, Type of commitment (e.g., in kind, dollars, staff, equipment), and how HRSA can access a copy if requested.

Attachment 2: Organizational Chart: Provide a one-page figure that depicts the organizational structure of the project, including subcontractors and other significant collaborators.

Attachment 3: Position Descriptions of Key Personnel: Position descriptions that include the roles, responsibilities, and qualifications of proposed staff can be limited to a paragraph in length, not to exceed one (1) page. Because of the 80-page limit of this application, only include key personnel.

Attachment 4: Logic Model with target, content/activities, and intended impact

Attachment 5: Summary Progress Report: This is **REQUIRED** for MCH Navigator competing continuations. The Detailed Description of Project may be less than, but must not exceed **20 pages, including the narrative and all attachments**. Applicants under this announcement have the option of submitting a report covering the preceding five (5) (July 1, 2010-June 30, 2015) years for activities that are related to the program for which support is being requested. Submit the progress report with the application, as an attachment.

For current MCHB training projects, use the outline below to structure your summary progress report.

The statement should include:

    i. **The period covered** in the report;

    ii. **Specific Objectives:** Briefly summarize the specific objectives of the project as actually funded;

    iii. **Results:** Describe the program activities conducted for each objective and the accomplishments. Include negative results or technical problems that may be important. Include summary performance measure data;

    iv. **Evaluation:** Enumerate the quantitative and qualitative measures used to evaluate the activities and objectives. Specify project outcomes and the degree to which stated objectives were achieved. Include any important modifications to your original plans;

v. **Title V Program Relationship:** Describe the activities related to, or resulting from, established relationships of the program and faculty with state and local Title V agencies and programs in the community, state, and region;

vi. **Regional and National Significance:** Describe significant contributions of the program beyond the state in which it is located.

Attachments 6 -15: Other relevant documents, such as explanation of delinquency on federal debt, budgets and budget justifications for subcontracts, etc.

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

Applicant organizations must obtain a valid DUNS number and provide that number in their application. Applicant must also register with the System for Award Management (SAM) and continue to maintain active SAM registration with current information at all times during which it has an active federal award or an application or plan under consideration by an agency (unless the applicant is an individual or federal agency that is exempted from those requirements under 2 CFR 25.110(b) or (c), or has an exception approved by the agency under 2 CFR 25.110(d))**.**

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

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

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

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

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

4. **Submission Dates and Times**

Application Due Date
The due date for applications under this FOA is *February 12, 2016 at 11:59 P.M. Eastern Time*.

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

5. Intergovernmental Review

The MCH Navigator 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

Applicants responding to this announcement may request funding for a project period of up to five (5) years, at no more than $180,000 per year. Awards to support projects beyond the first budget year will be contingent upon Congressional appropriation, satisfactory progress in meeting the project's objectives, and a determination that continued funding would be in the best interest of the Federal Government.

The General Provisions in Division G of the Consolidated and Further Continuing Appropriations Act, 2015 (P.L. 113-235) apply to this program. Please see Section 4.1 of HRSA's *SF-424 R&R Application Guide* for additional information. Note that these or other restrictions will apply in FY 2016, as required by law.

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

1) **Concurrent Income**
   In most instances, stipends may not be granted to persons receiving a concurrent salary, fellowship or traineeship stipend, or other financial support related to his/her training or employment.
2) **Non-related Duties**
   The training institution shall not require trainees or fellows to perform any duties that are not directly related to the purpose of the training for which the grant was awarded.
3) **Field Training**
   Training institutions may not utilize HRSA 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) **Other**
   HRSA funds may **not** be used: (a) for the support of any trainee who would not, in the judgment of the institution, 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; or (c) for support of candidates for undergraduate or pre-professional degrees, or the basic professional degree.

All program income generated as a result of awarded funds must be used for approved project-related activities.

V. Application Review Information

1. Review Criteria

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

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

Review Criteria are used to review and rank applications. The *MCH Navigator Program* has six (6) review criteria:

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

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

- The critical unmet MCH Title V workforce training need that the MCH Navigator program will address pertains to efforts related to the stated purpose of the MCH Navigator program announcement; and
- The project addresses these identified needs and the degree to which this program addresses the purpose of the MCH Navigator training program (see I. Program Funding Opportunity Description, 1. Purpose).

Criterion 2: RESPONSE (40 points) – Corresponds to Section IV's Needs Assessment, Methodology, Work Plan, and Resolution of Challenges

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

Goals and Objectives (5 points)
- The degree to which the project goals and objectives address the stated needs/purpose outlined in Section A "Purpose/Need" and the objectives are time-framed and measurable.

Program Design Elements (Assessment and Planning, Communications and Outreach, Content, Quality and Innovation, Accountability and Evaluation and External Advisory Capacity): (25 points)
- The extent to which the approach to the MCH Navigator Program is thoughtful, logical and innovative;

- The extent to which the MCH Navigator addresses current and emerging MCH workforce needs by engaging, providing training for, and supporting MCH leaders in practice, academics, and policy;
- The extent to which the MCH Navigator program is based in evidence-based training methods/approaches and adult learning principles;
- The extent to which the project will link learners to open-access materials covering essential MCH skills and knowledge, building upon the existing website;
- Evidence of a detailed plan and sources to regularly monitor Title V workforce needs, assuring that project content does not duplicate existing public health content;
- Evidence of a communications and outreach plan for MCH workforce learners and outreach to diverse partners such as state and local public health professional organizations, and philanthropic organizations;
- The extent to which the applicant will continue to use a rigorous and systematic vetting process for all potential materials that include specific criteria (e.g., currency, accuracy, relevance of information, pedagogical approach, and technical aspects of the presentation) and involve target user audiences, in order to create internal quality control measures, allow opportunities for user feedback, and ensure high quality content;
- Where needed, evidence of how new content will be developed, marketed, and delivered to learners;
- Evidence of how existing and new materials will be posted and marketed through enhanced web based methods that build upon http://mchnavigator.org (including how permission to use third party-developed content will be obtained on HRSA's behalf);
- The extent to which the applicants presents a plan for regular analysis of quality and user data;
- Evidence of a plan for developing a "mini-MPH" package of trainings tailored to individuals who may not be able to get an MPH but could benefit from core content;
- Evidence of how the applicant will recruit, retain, and use members of any external advisory group(s) to inform all program areas: Assessment and Planning, Communications and Outreach, and Content, Quality and Innovation, and Accountability and Evaluation; and
- Evidence of capacity and capabilities to manage the website and interface with HRSA LMS (i.e., technical skills).

Collaboration with Title V and 508 Compliance (10 points)
- The extent to which the applicant has documented active, functioning, collaborative relationships between the proposed program and MCH/CSHCN programs and other relevant state and local Title V and related public and private sector programs within the targeted geographic area or nationally; and.
- The extent to which the applicant demonstrate compliance with Section 508 requirements.

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

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

- Evidence of a detailed plan to measure users' increase in knowledge, skills, and attitudes; document how state Title V agencies and others are using the MCH Navigator resources to support workforce development; measure the extent of engagement of partnerships established and the leveraged outreach and resources leveraged attributable to these partnerships;
- Strength and feasibility of the evaluation strategy to measure project objectives and measures of effectiveness;
- Strength of the proposed project's evaluation plan, including tracking and reporting on the learners participating in the project;
- Strength of the proposed project's logic model; and
- The extent to which data and evaluation informs changes to the project based on evaluation findings.

The extent to which the applicant presents a plan for collecting the data elements, methods of data collection, required by MCHB

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

The feasibility and effectiveness of plans for dissemination of project results, and the extent to which project results may be national in scope, and the degree to which the project activities are replicable, and the sustainability of the program beyond the federal funding.

- The extent to which the applicant includes a sustainability plan for the program beyond the federal funding period;
- Effectiveness of the dissemination plan to share curricula, assessment and other tools, training approaches, research findings (if any), and successes;
- Effectiveness of a plan for addressing the extent and impact of project results and products and/or the extent to which the project results and products may be national in scope; and
- The extent to which the project activities and products are replicable.

Criterion 5: RESOURCES/CAPABILITIES (10 points) – Corresponds to Section IV's Organizational Information

The extent to which project personnel are qualified by training and/or experience to implement and carry out the project. The capabilities of the applicant organization and the quality and availability of facilities and personnel to fulfill the needs and requirements of the proposed project. For competing continuations, past performance will also be considered.

Staff Expertise:
- The extent to which project staff have demonstrated leadership, expertise and experience in the specific project content and methods; and
- The extent to which project staff have expertise in MCH content as well as adult learning and evidence based education models utilizing available and emerging technologies.

Organizational:
- Evidence of administrative and organizational capacity to conduct the proposed project (e.g., the physical resources described are adequate to perform the training, existing resources to support the types of educational methods described); and

- Documentation of relevant affiliation/collaborative agreements with key partners.

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

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

- The extent to which costs, as outlined in the budget and required resources sections, are reasonable given the scope of work;
- Degree of completeness of the budget line items being well described and justified in the budget justification;
- The extent to which the program has budgeted and documented innovative national efforts as part of the budget; and
- The extent to which key personnel have adequate time devoted to the project to achieve project objectives.

2. Review and Selection Process

Please see Section 5.3 of HRSA's *SF-424 R&R Application Guide*.

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

3. Assessment of Risk

The Health Resources and Services Administration 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).

Effective January 1, 2016, HRSA is required to review and consider any information about the applicant that is in the Federal Awardee Performance and Integrity Information System (FAPIIS). An applicant may review and comment on any information about itself that a federal awarding agency previously entered. HRSA will consider any comments by the applicant, in addition to other information in FAPIIS in making a judgment about the applicant's integrity, business ethics, and record of performance under federal awards when completing the review of risk posed by applicants as described in 45 CFR § 200.205 Federal Awarding Agency Review of Risk Posed by Applicants.

A determination that an applicant is not qualified will be reported by HRSA to FAPIIS.

The decision not to make an award or to make an award at a particular funding level, is discretionary and is not subject to appeal to any HHS Operating Division or HHS official or board.

4. Anticipated Announcement and Award Dates

It is anticipated that awards will be announced prior to the start date of July 1, 2016.

VI. Award Administration Information

1. Award Notices

The Notice of Award will be sent prior to the start date of July 1, 2016. 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 of HRSA's *SF-424 R&R Application Guide*.

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 research involving human subjects is anticipated, recipients must meet the requirements of the HHS regulations to protect human subjects from research risks as specified in the Code of Federal Regulations, Title 45 – Public Welfare, Part 46 – Protection of Human Subjects (45 CFR Part 46), available online at http://www.hhs.gov/ohrp/humansubjects/guidance/45cfr46.html.

3. Reporting

The successful applicant under this FOA must comply with Section 6 of HRSA's *SF-424 R&R Application Guide* **and** the following reporting and review activities:

> 1) **Progress Report**(s). The recipient must submit a progress report to HRSA on an **annual** basis. Further information will be provided in the award notice.
>
> 2) **Performance Reports.** HRSA has modified its reporting requirements for SPRANS projects, CISS projects, and other grant programs administered by MCHB to include national performance measures that were developed in accordance with the requirements of the Government Performance and Results Act (GPRA) of 1993 (Public Law 103-62). This Act requires the establishment of measurable goals for federal programs that can be reported as part of the budgetary process, thus linking funding decisions with performance. Performance measures for states have also been established under the Block Grant provisions of Title V of the Social Security Act, MCHB's authorizing legislation. Performance measures for other MCHB-funded grant programs have been approved by the Office of Management and Budget and are primarily based on existing or administrative data that projects should easily be able to access or collect.
>
>> a) **Performance Measures and Program Data**
>> To prepare successful applicants for their reporting requirements, the listing of MCHB administrative forms and performance measures for this program can be found at: https://perf-data.hrsa.gov/mchb/DgisApp/FormAssignmentList/UE8_1_1.html.

b) Performance Reporting

Successful applicants receiving HRSA funds will be required, within 120 days of the Notice of Award (NoA), to register in HRSA's Electronic Handbooks (EHBs) and electronically complete the program-specific data forms that appear for this program at: https://perf-data.hrsa.gov/mchb/DgisApp/FormAssignmentList/UE8_1.html. This requirement entails the provision of budget breakdowns in the financial forms based on the award amount, the project abstract and other grant/cooperative agreement summary data as well as providing objectives for the performance measures.

Performance reporting is conducted for each year of the project period. Recipients will be required, within 120 days of the NoA, to enter HRSA's EHBs and complete the program-specific forms. This requirement includes providing expenditure data, finalizing the abstract and grant summary data as well as finalizing indicators/scores for the performance measures.

c) Project Period End Performance Reporting

Successful applicants receiving HRSA funding will be required, within 90 days from the end of the project period, to electronically complete the program-specific data forms that appear for this program at: https://perf-data.hrsa.gov/mchb/DgisApp/FormAssignmentList/UE8_1.html. The requirement includes providing expenditure data for the final year of the project period, the project abstract and grant/cooperative agreement summary data as well as final indicators/scores for the performance measures.

3) **Final Report.** A final report is within 90 days after the project period ends. The final report collects program-specific goals and progress on strategies; core performance measurement data; impact of the overall project; the degree to which the recipient achieved the mission, goal and strategies outlined in the program; recipient objectives and accomplishments; barriers encountered; and responses to summary questions regarding the recipient's overall experiences over the entire project period. The final report must be submitted on-line by awardees in the Electronic Handbooks system at https://grants.hrsa.gov/webexternal/home.asp.

4) **Integrity and Performance Reporting.** the Notice of Award will contain a provision for integrity and performance reporting in FAPIIS, as required in 2 CFR 200 Appendix XII.

VII. Agency Contacts

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

Denise Boyer
Grants Management Specialist
Division of Grants Management Operations, OFAM
Health Resources and Services Administration
5600 Fishers Lane, Room 10W05D
Rockville, MD 20857
Telephone: (301) 594-4256
Fax: (301) 594-4073
E-mail: dboyer@hrsa.gov

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

Meredith Morrissette, MPH
Public Health Analyst, DMCHWD
MCH Navigator Program
MCHB
Health Resources and Services Administration
5600 Fishers Lane, 18W10B
Rockville, MD 20857
Telephone: (301) 443-6392
Fax: (301) 443-1797
E-mail: MMorrissette@hrsa.gov

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

Grants.gov Contact Center
Telephone: 1-800-518-4726 (International Callers, please dial 606-545-5035)
E-mail: support@grants.gov
iPortal: 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 Electronic Handbooks (EHBs). For assistance with submitting information in HRSA's EHBs, contact the HRSA Contact Center, Monday-Friday, 8:00 a.m. to 8:00 p.m. ET:

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

VIII. Other Information

Logic Models:
Additional information on developing logic models can be found at the following website:
http://www.cdc.gov/nccdphp/dnpao/hwi/programdesign/logic_model.htm.

Although there are similarities, a logic model is not a work plan. A work plan is an "action" guide with a timeline used during program implementation; the work plan provides the "how to" steps. Information on how to distinguish between a logic model and work plan can be found at the following website: http://www.cdc.gov/healthyyouth/evaluation/pdf/brief5.pdf.

IX. Tips for Writing a Strong Application

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