

U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES



Healthcare Systems Bureau
Poison Control Program

Poison Center Network

Funding Opportunity Number: HRSA-19-048
Funding Opportunity Type(s): Competing Continuations
Catalog of Federal Domestic Assistance (CFDA) Number: 93.253

NOTICE OF FUNDING OPPORTUNITY

Fiscal Year 2019

Application Due Date: April 10, 2019

Modified on February 4, 2019 to update the technical assistance information and Appropriation Citation

*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: January 25, 2019

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Authority: Section 1273 of the Public Health Service Act, (42 U.S.C. 300d-73)

EXECUTIVE SUMMARY

The Health Resources and Services Administration (HRSA) is accepting applications for fiscal year (FY) 2019 for the Poison Center Network Grant Program. This program provides funds to qualified poison control centers under Section 1273 of the Public Health Service Act for the purposes of preventing and providing treatment recommendations for poisonings, complying with the operational requirements needed to sustain the accreditations of the centers, and improving and enhancing communications and response capability and capacity.

Funding Opportunity Title:	Poison Center Network
Funding Opportunity Number:	HRSA-19-048
Due Date for Applications:	April 10, 2019
Anticipated Total Annual Available FY 2019 Funding:	\$18,500,000
Estimated Number and Type of Award(s):	Up to 52 grants
Estimated Award Amount:	Award per year is based on 2010 Census Bureau population count data, subject to the availability of appropriated funds.
Cost Sharing/Match Required:	No
Period of Performance:	September 1, 2019 through August 31, 2024 (5 years)
Eligible Applicants:	Accredited poison control centers and unaccredited poison control centers, which qualify for a waiver, in the U.S. and its territories. See Section III-1 of this notice of funding opportunity (NOFO) for complete eligibility information.

Application Guide

You (the applicant organization/agency) are responsible for reading and complying with the instructions included in HRSA's *SF-424 Application Guide*, available online at <http://www.hrsa.gov/grants/apply/applicationguide/sf424guide.pdf>, except where instructed in this NOFO to do otherwise.

Technical Assistance

HRSA has scheduled the following technical assistance:

Conference Call

Day and Date: Thursday, February 28, 2019

Time: 2 p.m. – 3 p.m. ET

Conference Number: 1-877-937-3406

Participant Passcode: 152100

Playback Number: 1-800-801-6152

Passcode: None necessary

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I. Program Funding Opportunity Description

1. Purpose

This notice announces the opportunity to apply for funding under the Poison Center Network Grant Program and provides guidance to qualified poison control centers (PCCs) on preparing and submitting FY 2019 applications for these federal funds. These grants are administered by the Poison Control Program in the Healthcare System Bureau, Health Resources and Services Administration (HRSA), U.S. Department of Health and Human Services (HHS).

The purpose of the 5-year program is to support PCCs' activities to: 1) prevent and provide treatment recommendations for poisonings; 2) comply with operational requirements needed to sustain accreditation and/or achieve accreditation; 3) improve and enhance communications and response capability and capacity; and 4) develop strategies to ensure collection of quality data that is consistent and accurate to report on HRSA funded activities. Accordingly, the grantee should consider developing a plan to improve data quality. While not required, funds may also be used to improve the quality of data uploaded from PCCs to the American Association of Poison Control Centers' National Poison Data System (NPDS) in support of national toxicsurveillance activities conducted by the U.S. Centers for Disease Control and Prevention.

Projects funded under this program must include an evaluation component. Proposed evaluation activities must measure and assess progress in achieving key project milestones directly tied to the project's objectives.

2. Background

The Poison Control Program is authorized through Public Law 113 - 77, the Poison Center Network Act. The Program is mandated to fund poison centers; establish and maintain a single, national toll-free number (800-222-1222) to ensure universal access to poison center services and connect callers to the poison centers serving their areas; and implement a nationwide media campaign to educate the public and health care providers about poison prevention, poison center services, and the toll free number.

II. Award Information

1. Type of Application and Award

Type(s) of applications sought: Competing Continuations

HRSA will provide funding in the form of a grant.

2. Summary of Funding

HRSA expects approximately \$18,500,000 to be available annually to fund 52 recipients. Funding is population-based, and applicants may apply for up to a ceiling amount according to the *Fiscal Year 2019 Estimated Allocation Table*, which depicts the available funding per state/territory and center and is located on the following page. HRSA has established a fixed funding level for the U.S. territories and states with small populations of 1,000,000 and less. The PCP utilizes the 2010 Census Bureau data for population counts. Funding for individual PCCs in states with more than one PCC will be based on the service area information provided by the state in the state designation letter.

The period of performance is September 1, 2019 through August 31, 2024 (5 years). Funding beyond the first year is subject to the availability of appropriated funds for the Poison Center Network Program in subsequent fiscal years, satisfactory recipient performance, and a decision that continued funding is in the best interest of the Federal Government. HRSA may reduce funding levels beyond the first year if recipients are unable to fully succeed in achieving the goals listed in their applications.

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

Limitations on indirect cost rates. For an explanation of HRSA's policy regarding indirect cost rates, see [Grants Policy Bulletin 2017-03 Indirect Cost Rate Agreements in the NOFO](#).

Fiscal Year 2019 Estimated Allocation Table

State/Territory	2010 Census	% of U.S. Pop.	Available Funds by State
TOTAL, All States/Territories			\$18,552,150
Alabama	4,779,736	1.53%	\$280,403
Alaska	710,231	0.23%	\$60,000
American Samoa	55,519	0.02%	\$15,000
Arizona	6,392,017	2.04%	\$375,027
Arkansas	2,915,918	0.93%	\$171,062
California	37,253,956	11.91%	\$2,185,501
Colorado	5,029,196	1.61%	\$295,038
Connecticut	3,574,097	1.14%	\$209,674
Delaware	897,934	0.29%	\$60,000
District of Columbia	601,723	0.19%	\$60,000
Federated States of Micronesia	102,624	0.03%	\$12,466
Florida	18,801,310	6.01%	\$1,102,977
Georgia	9,687,653	3.10%	\$568,326
Guam	159,358	0.05%	\$30,000
Hawaii	1,360,301	0.43%	\$79,803
Idaho	1,567,582	0.50%	\$91,962
Illinois	12,830,632	4.10%	\$752,708
Indiana	6,483,802	2.07%	\$380,372
Iowa	3,046,355	0.97%	\$178,714
Kansas	2,853,118	0.91%	\$167,378
Kentucky	4,339,367	1.39%	\$254,569
Louisiana	4,533,372	1.45%	\$265,950
Maine	1,328,361	0.42%	\$77,931
Maryland	5,773,552	1.85%	\$338,705
Massachusetts	6,547,629	.09%	\$384,116
Michigan	9,883,640	3.16%	\$579,823
Minnesota	5,303,925	1.70%	\$311,154
Missouri	5,988,927	1.91%	\$351,340
Mississippi	2,967,297	0.95%	\$174,076
Montana	989,415	0.32%	\$60,000
Nebraska	1,826,341	0.58%	\$107,142
Nevada	2,700,551	0.86%	\$158,428
New Hampshire	1,316,470	0.42%	\$77,233
New Jersey	8,791,894	2.81%	\$515,776
New Mexico	2,059,179	0.66%	\$120,802
New York	19,378,102	6.19%	\$1,136,816
North Carolina	9,535,483	3.05%	\$559,399
North Dakota	672,591	0.21%	\$60,000
Ohio	11,536,504	3.69%	\$676,788
Oklahoma	3,751,351	1.20%	\$220,073
Oregon	3,831,074	1.22%	\$224,750
Pennsylvania	12,702,379	4.06%	\$745,185
Puerto Rico	3,725,789	1.19%	\$218,535
Rhode Island	1,052,567	0.34%	\$60,000

State/Territory	2010 Census	% of U.S. Pop.	Available Funds by State
South Carolina	4,625,364	1.48%	\$271,347
South Dakota	814,180	0.26%	\$60,000
Tennessee	6,346,105	2.03%	\$372,294
Texas	25,145,561	8.04%	\$1,475,165
Utah	2,763,885	0.88%	\$162,143
US Virgin Islands	106,405	0.03%	\$30,000
Virginia	8,001,024	2.56%	\$469,372
Vermont	625,741	0.20%	\$60,000
Washington	6,724,540	2.15%	\$394,495
West Virginia	1,852,994	0.59%	\$108,706
Wisconsin	5,686,986	1.81%	\$333,627
Wyoming	563,626	0.18%	\$60,000

III. Eligibility Information

1. Eligible Applicants

Awards under this grant program are limited to U.S. accredited and unaccredited PCCs. Eligible applicants must be accredited by a professional organization in the field of poison control that the Secretary has approved as having in effect standards for accreditation that reasonably provide for the protection of the public's health with respect to poisoning. The only professional organization currently approved is the American Association of Poison Control Centers (AAPCC). Eligible applicants can also be accredited by a state government with, at minimum, equivalent standards as the AAPCC. The only state government currently approved is the Mississippi Department of Health. Unaccredited PCCs are eligible for a grant waiver if they can demonstrate that they will obtain such accreditation within a reasonable period of time, not to exceed 5 years.

2. Cost Sharing/Matching

Cost sharing/matching is not required for this program.

3. Other

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

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

Supplement Not Supplant - The legislative authority (Section 1273 (e) of the Public Health Service Act) under this program states that amounts made available to a poison center shall be used to supplement and not supplant other federal, state or local funds provided for such PCC.

Maintenance of Effort (MOE) - The recipient must agree to maintain non-federal funding for award activities at a level that is not less than expenditures for such activities during a time period prior to receiving the award, as required by Section 1273(f) of the Public Health Service Act (42 U.S.C. 300d-73(f)). Complete the Maintenance of Effort information and submit as Attachment 1.

If the recipient does not maintain the MOE requirement in a given period, an equivalent reduction in funding, not to exceed 10 percent of the funding amount, may be applied. The assessment of a penalty for not meeting the MOE requirement will begin using FY 2019 and FY 2020 actual data for comparison.

HRSA will consider any application that fails to satisfy the requirement to provide MOE information 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 the **last** validated electronic submission, under the correct funding opportunity number, prior to the Grants.gov application due date as the final and only acceptable application.

IV. Application and Submission Information

1. Address to Request Application Package

HRSA **requires** you to apply electronically. HRSA encourages you to apply through [Grants.gov](https://www.grants.gov) using the SF-424 workspace application package associated with this NOFO following the directions provided at <http://www.grants.gov/applicants/apply-for-grants.html>.

If you're reading this notice of funding opportunity (NOFO) (also known as "Instructions" on Grants.gov) and reviewing or preparing the workspace application package, you will automatically be notified in the event HRSA changes and/or republishes 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 Application Guide](#) provides instructions for the budget, budget narrative, 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. You are responsible for reading and complying with the instructions included in HRSA's [SF-424 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 *Application Guide* for the Application Completeness Checklist.

Application Page Limit

The total size of all uploaded files may not exceed the equivalent of **50 pages** when printed by HRSA. The page limit includes the abstract, project and budget narratives, attachments, and letters of commitment and support required in the *Application Guide* and this NOFO. Standard OMB-approved forms that are included in the workspace application package do not count in the page limit. The 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) The prospective recipient certifies, by submission of this proposal, that neither it nor its principals is 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 the prospective recipient is unable to attest to the statements in this certification, an explanation shall be included in Attachment #10: Other Relevant Documents.

See Section 4.1 viii of HRSA's [SF-424 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 Application Guide](#) (including the budget, budget narrative, 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 Application Guide](#).

ii. Project Narrative

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

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

- **INTRODUCTION – Corresponds to Section V's Review Criterion(a) #1**
Discuss the overriding reason the project is undertaken. State goals and measurable objectives. Describe steps you will take to achieve program goals. The application must clearly state how the proposed project strategies will: 1) prevent, and provide treatment recommendations for, poisonings; 2) comply with operational requirements needed to sustain accreditation and/or achieve accreditation; **and/or** 3) improve and enhance communications and response capability and capacity.

If the applicant plans to use funds to improve data quality related to national toxicsurveillance, which is an option but not a requirement of this grant, the applicant must state clearly how proposed activities will improve the quality of data uploaded to NPDS and, as applicable, include outcome metrics to measure

success. Alternatively, if the focus is on increased overall data quality, describe how the data quality enhancements overall will be beneficial and will be tested/verified.

The application should also address how the project will help meet the Healthy People 2020 objectives relative to poisonings

<https://www.healthypeople.gov/2020/topics-objectives/topic/injury-and-violence-prevention/objectives>

Specifically, this includes the objectives to: 1) prevent an increase in poisoning deaths; and 2) prevent an increase in nonfatal poisonings.

- **NEEDS ASSESSMENT** – *Corresponds to Section V's Review Criterion(a) #1*
Describe and document the target population and its unmet health needs. Use and cite demographic data whenever possible to support the information provided. Discuss any relevant barriers that the project hopes to overcome. This section should help reviewers understand the population that will be served by the proposed project.
- **METHODOLOGY** – *Corresponds to Section V's Review Criterion(a) #2, 3*
Describe the methods you will use to accomplish the specific goals of the proposed project.

Provide a detailed description of the proposed activities: 1) to prevent, and provide treatment recommendations for poisonings; 2) comply with operational requirements needed to sustain accreditation and/or achieve accreditation; **and/or** 3) improve and enhance communications and response capability and capacity. Also, provide: (a) a plan for implementation; (b) a detailed description of the size and demographic composition of any target population; and (c) identification and documentation of critical project components and key relationships.

If you propose to use funds to improve data quality, which is an option but not a requirement of this grant, you must clearly state what aspects of data quality will be addressed and describe specific planned activities for improvement.

- Evaluation Plan – The evaluation is necessary to determine if the strategies that the PCC has chosen are effective, efficient, and appropriate to identify unexpected problems or benefits; to make corrective modifications; and to aid in strategic planning. PCCs shall complete a process to measure how well the program's procedures and program activities for reaching the intended audience are working as implemented. To the extent possible, the PCCs will attribute program outcomes to HRSA funded activities.

The evaluation should answer questions like:

- Are we reaching the target audience(s) through our program intervention activities?
- Does the audience demonstrate increased knowledge of PCC portfolio and activities (e.g., survey, follow-up calls, and increase in call volume)?

- Have new providers started contacting the PCC for toxicological information as a result of these program activities?
- Are new partners requesting and/or utilizing PCC data for surveillance resulting from these efforts?
- Are program materials distributed to target audience(s)?
- Is there data to substantiate that the dissemination of program materials has resulted in a change in behavior among target audience(s) (e.g., more requests to PCCs for information and/or PCC data from providers and/or from other target audience(s)?

Describe: (a) the type of evaluation(s) to be used and why that type of evaluation was chosen; (b) a detailed evaluation plan that lists concrete action steps, which include specific, measurable, realistic, and time-framed goals, as well as identification of the target audience, key tasks to be completed, methods of measurement to assess project milestones, when the evaluation will take place, and what evaluation methods will be used (*i.e.*, personal interviews, record keeping, surveys, analysis of poison data).

The evaluation strategy must be directly connected to the project objectives and projected outcomes. Objectives should have specific outcomes, which are attainable for each project year. Activities necessary to accomplish the project objectives should be clearly outlined. PCCs must identify specific data that will be collected, and how the data will be collected, analyzed, and reported. These outcomes form the basis for project monitoring and evaluation.

- **WORK PLAN – Corresponds to Section V’s Review Criterion(a) # 2, 4**
Describe the activities or steps you will use to achieve each of the activities proposed during the project period in the Methodology section. Use a time line that includes each activity and identifies responsible staff. As appropriate, identify meaningful opportunities to support and collaborate with key stakeholders in planning, designing and implementing all activities, including development of the application. In addition, take into account the cultural, racial, and geographic diversity of the populations and communities served in the planning, designing and implementation of all activities. Unaccredited PCCs must include a timeline for attaining accreditation and the anticipated date for the accreditation review. If an applicant is due for re-accreditation during this grant cycle, include the date when the accreditation application is due.
- **RESOLUTION OF CHALLENGES – Corresponds to Section V’s Review Criterion(a) #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 Criterion(a) 5**
Discuss relevant experience, skills, and knowledge of key project staff to conduct the proposed project, including previous work of a similar nature. It is not

necessary to repeat all information included in bio sketches, but rather to justify staff qualifications and appropriateness for project role.

▪ **ORGANIZATIONAL INFORMATION – Corresponds to Section V’s Review Criterion(a) #5**

Discuss adequacy of the organization and staff resources for conducting the proposed project. Provide information on the key organizations involved in the project. For each key organization, briefly indicate the current mission and structure, scope of current activities; and how these contribute to the ability of the project team to meet program requirements and expectations.

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

iii. Budget

See Sections 4.1.iv and v of HRSA’s [SF-424 Application Guide](#). Please note: the directions offered in the SF-424 Application Guide may differ from those offered by Grants.gov. Follow the instructions included in the Application Guide and the additional budget instructions provided below. A budget that follows the Application Guide will ensure that if HRSA selects the application for funding, it will have a well-organized plan. By carefully following the approved plan, applicants 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 Poison Center Network Program requires the following:

- The 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. Please see Section **4.1.iv Budget – Salary Limitation** of HRSA’s [SF-424 Application Guide](#) for additional information.
- When submitting a budget requesting salary support, include the individual(s): 1) name; 2) position title; 3) percent of full time employment (FTE) charged to the grant ; 4) base salary ; 5) adjusted annual salary when salary is over the Executive Level II salary limitation; and 6) salary amount requested.
- If the Project Director’s salary is supported by this grant program you must include a statement with the percentage of time and effort the Project Director will be donate towards the goals and objectives of the project.
- Indirect costs for this grant program are limited to 10% of allowable total indirect cost, regardless of the applicant’s negotiated indirect cost rate.¹ To claim indirect costs, an indirect cost rate agreement must be included in your application.
- If it is determined that for the budget periods September 1, 2017 through August 31, 2018 (FY 2017), and September 1, 2018 through August 31, 2019 (FY 2018) the award recipient had a combined unobligated balance of 25 percent or more of the grant funds awarded for the same periods, the award recipient will receive a corresponding reduction in funding to match that percentage beginning in FY 2019 and will continue in subsequent years if the unobligated balance remains at that level.

iv. Budget Narrative

See Section 4.1.v. of HRSA’s [SF-424 Application Guide](#). For each line of the budget provided in Section B. 6.of the SF-424 (Object Class Categories), provide a budget narrative that explains the amount requested. The budget narrative should specifically describe how each item support achievement of the proposed objectives. It is very important to show how each item in the “other” category is justified. For subsequent budget years after Year 1, the narrative should highlight the changes from Year 1 or clearly indicate that there are no substantive budget changes during the period of performance. Do NOT use the Budget Narrative (IV.2.iv) to expand the Project Narrative (IV.2.ii).

v. Program-Specific Instructions

¹ (Federal Register: August 7, 2007; Volume 72, Number 151-<http://edocket.access.gpo.gov/2007/pdf/E7-15352.pdf>)

Accredited PCCs must provide a copy of their most recent accreditation letter from the AAPCC or state government. Provide the date of re-accreditation if it is due in FY 2019.

Unaccredited PCCs seeking a waiver must provide a letter from the AAPCC or state government providing the status of the applicant's likelihood to meet the accreditation requirements. Additionally, address the following questions in the letter:

- 1) What is the pending application accreditation date and the date or approximate date the decision will be made to grant or deny accreditation for this applicant?
- 2) To date, what accreditation criteria has the applicant met and what outstanding criteria has not been met?

The letter verifying the PCC's accreditation status must be provided as Attachment 9, Other Relevant Documents.

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: Maintenance of Effort Documentation

Use the non-federal expenditures sample format below to provide the Maintenance of Effort (MOE) FY 2018 actual amount, excluding PCP funds, and the FY 2019 estimated amount, excluding PCP funds.

NON-FEDERAL EXPENDITURES	
<div style="border: 1px solid black; padding: 5px;">FY 2018 (Actual) Actual FY 2018 expenditures, in-kind, and other contributions, excluding HRSA's PCP funds. Amount: \$ _____</div>	<div style="border: 1px solid black; padding: 5px;">FY 2019 (Estimated) Estimated FY 2019 expenditures, in-kind, and other contributions, excluding HRSA's PCP funds. Amount: \$ _____</div>

Attachment 2: For Multi-Year Budgets—Fifth Year Budget

The project period for this NOFO is from September 1, 2019 through August 31, 2024. The project period consists of 5 budget periods. The SF 424A is a part of the application package. Complete the SF 424A for Non-Construction Programs for each of the 5 years. The SF 424A can only accommodate 4 years of budget information; therefore, the fifth year budget information will need to be completed on a separate SF 424A and submitted with the NOFO as Attachment 2.

When completing the SF 424A, please refer to the SF 424 Application Guide for instructions. Also, consider the following information:

- Use the FY 2019 Allocation Table provided in this NOFO when determining the federal dollar amount requested for each state or territory. The federal dollar amount requested should be the same for each budget period.
- Show only HRSA dollars in the federal section. If you receive funds from the Centers for Disease Control or other federal agencies, that should not be included here. This section is HRSA PCP-specific.
- Enter zero for the non-federal dollar amount. Do not include your host institution or state's funds here;
- Use whole dollars rather than dollars and cents; and
- Indirect costs should not be rounded up.

Attachment 3: Designation and Commitments

Include a current letter of designation from the state, declaring that the PCC is authorized to provide service to the state. States can designate more than one PCC to provide service. If there is more than one PCC that serves the state, the letter should identify each PCC's service area and the percentage of federal funding each center should receive. Submit the designation letter on State health department letterhead.

Also include documentation to indicate the following: 1) a commitment of using and promoting the national toll-free poison number (1-800-222-1222); 2) a commitment to assist in promotion of HRSA's Poison Help campaign; and 3) a commitment to maintain back up mechanisms for the 800 number outside of your state in case of an emergency where telephone lines within your state are not functional.

Attachment 4: Tables, Charts, and Other Graphics

Include in this attachment any graphics that provide further details about implementation of the proposed project, e.g., work plan timeline, Gantt or PERT charts, flow charts.

Attachment 5: Project Organizational Chart

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

Attachment 6: Job Descriptions for Key Personnel

Keep each of the job descriptions for key personnel to one page in length, if possible. Section 4.1 of HRSA's SF 424 Application Guide provides some guidance on items to include in a job description.

Attachment 7: Biographical Sketches of Key Personnel

Include biographical sketches, not to exceed one page in length per sketch, for persons occupying the key positions described in Attachment 6. If a biographical sketch is included for an identified individual not yet hired, please include a letter of commitment from that person with the biographical sketch.

Attachment 8: Letters of Agreement and/or Description(s) of Proposed/Existing Contracts (Project Specific)

Provide any documents that describe working relationships between the applicant and other agencies and programs cited in the proposal. Documents that confirm actual or pending contractual agreements should clearly describe the roles of the subcontractors and any deliverable(s). Letters of agreements must be dated.

Attachment 9: PCC Accreditation Status Documents

Include here any other documents pertaining to PCC Accreditation Status that are relevant to the application, including letters of support.

Attachments 10 – 15: Other Relevant Documents

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

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

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

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

If you have already completed Grants.gov registration for HRSA or another federal agency, confirm that the registration 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 Application Guide](#).

UPDATED 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. Read the [updated FAQs](#) to learn more.

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 April 10, 2019 *at 11:59 p.m. Eastern Time*. HRSA suggests submitting applications to Grants.gov at least **3 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 Application Guide](#) for additional information.

5. Intergovernmental Review

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

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

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 the population-based amount identified 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 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) apply to this program. Please see Section 4.1 of HRSA's [SF-424 Application Guide](#) for additional information. Note that these or other restrictions will apply in the following FY, as required by law.

You are required to have the necessary policies, procedures and financial controls in place to ensure that your organization complies with all legal requirements and

restrictions applicable to the receipt of federal funding including statutory restrictions on use of funds for lobbying, executive salaries, gun control, abortion, *etc.* Like those for all other applicable grants requirements, the effectiveness of these policies, procedures and controls is subject to audit.

All program income generated as a result of awarded funds must be used for approved project-related activities. The program income alternative applied to the award(s) under the program will be the addition/additive alternative. You can find post-award requirements for program income at [45 CFR § 75.307](#).

V. Application Review Information

1. Review Criteria

HRSA has instituted procedures for assessing the technical merit of applications to provide for an objective review of applications and to assist you in understanding the standards against which your application will be reviewed. HRSA has developed 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. See the review criteria outlined below with specific detail and scoring points.

These criteria are the basis upon which the reviewers will evaluate and score the merit of the application. The entire proposal will be considered during objective review except for the competing continuations' progress report, which will be reviewed by HRSA program staff after the objective review process.

Review criteria are used to review and rank applications. The PCP has six review criteria:

Criterion 1: NEED (20 points) – Corresponds to Section IV's Introduction, Needs Assessment

- The extent to which the application describes and establishes the problem, and associated factors related to the problem that the project aims to overcome, to: 1) prevent, and provide treatment recommendations for poisonings; 2) comply with operational requirements needed to sustain accreditation and/or achieve accreditation; **and/or** 3) improve and enhance communications and response capability and capacity;
- The extent to which the application identifies the target population(s) and the barriers the project aims to overcome to reach and address the needs of the target population(s).
- The quality and strength of the description or rationale of proposed project and the strategies employed to meet project goals; and
- If the applicant plans to use funds to improve data quality, which is an option but not a requirement of this grant, the extent to which the applicant demonstrates and describes issues related to data quality for the purposes of national toxicosurveillance.

Criterion 2: RESPONSE (20 points) – Corresponds to Section IV's Methodology, Work plan, Resolution of Challenges

- The extent to which the described activities meet the grant purpose, are capable of addressing the issue, and attaining the project objectives;
- The quality and strength of the justification for the proposed plan and purposeful timing and coordination of the various strategies proposed;
- The quality and strength of the project time table (as part of Work plan); and
- The quality and strength of the plan for evaluation.

Criterion 3: Evaluative Measures (15 points) – Corresponds to Section IV's Methodology

- Effectiveness of methods proposed for selected evaluation methods (Process and/or Impact and Outcome); and
- Feasibility of the plan to assess the proposed strategies.

Criterion 4: IMPACT (20 points) – Corresponds to Section IV's Workplan

- The extent and effectiveness of the project plans in addressing the individual objectives of the project;
- The extent to which project activities will achieve the goals of: 1) preventing, and providing treatment recommendations for poisonings; 2) complying with operational requirements needed to sustain accreditation and or achieve accreditation; **and/or** 3) improving and enhancing communications and response capability and capacity.

Criterion 5: RESOURCES/CAPABILITIES (15 points) – Corresponds to Section IV's Evaluative and Technical Support, Organizational Information, and Attachment 8

- The extent to which project personnel are qualified by experience and work history to implement and carry out the projects;
- Expertise of proposed project staff as supported by training and education;
- Sufficiency of staffing for the magnitude of the proposed project;
- The quality and strength of the capabilities of the applicant organization presented in the application; and
- The quality and strength of the included letter(s) of agreement from any partnering organization. Letter(s) of agreement should be included in Attachment 8.

Criterion 6: SUPPORT REQUESTED (10 points) – Corresponds to Section IV's Organizational Information

- Reasonableness of the proposed budget in relation to the objectives; and
- Clarity and adequacy of budget detail and thoroughness of line-item explanations and justification in the budget narrative for the first budget year and the adequacy of a consolidated budget for years 2 through 5.

2. Review and Selection Process

The independent review process provides an objective evaluation to the individuals responsible for making award decisions. The highest ranked applications receive consideration for award within available funding ranges. HRSA may also consider assessment of risk and the other pre-award activities described in Section 3 below.

See Section 5.3 of HRSA's [SF-424 Application Guide](#) for more details.

3. Assessment of Risk and Other Pre-Award Activities

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 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](#)).

4. Anticipated Announcement and Award Dates

HRSA anticipates issuing/announcing awards prior to the start date of September 1, 2019.

VI. Award Administration Information

1. Award Notices

HRSA will issue the Notice of Award prior to the start date of September 1, 2019. See Section 5.4 of HRSA's [SF-424 Application Guide](#) for additional information.

2. Administrative and National Policy Requirements

See Section 2.1 of HRSA's [SF-424 Application Guide](#).

Requirements of Sub-awards

The terms and conditions in the Notice of Award (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.

3. Reporting

Award recipients must comply with Section 6 of HRSA's [SF-424 Application Guide](#) and the following reporting and review activities:

- 1) **Progress Reports.** The recipient must submit a progress report to HRSA on a **quarterly and annual** basis. Further information will be available in the award notice. Unaccredited PCCs are required to submit quarterly progress reports on the status of pursuing accreditation through the AAPCC. All PCCs are to submit annual progress reports, which will include specific data elements and interim findings on the status of evaluation measures. A final report will be due 60 days after the end of the project period, August 31, 2019. The final report will include an assessment of the grantee's use of funds provided under this grant program, which includes a detailed description of the program's efficiency in accomplishing project goals and anticipated outcomes. Specific data elements will also be required in the final report. More specific information regarding the quarterly and annual progress reports will be included in the NoA.
- 2) **Integrity and Performance Reporting.** The Notice of Award will contain a provision for integrity and performance reporting in [FAPIS](#), as required in [45 CFR part 75 Appendix XII](#).

VII. Agency Contacts

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

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

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

Sondra Stevenson
Acting Director
Division of Poison Control and Healthcare Facilities
Health Resources and Services Administration
5600 Fishers Lane, Room 10-105
Rockville, MD 20857
Telephone: (301) 443-8177
Fax: (301) 443-0619
Email: SStevenson1@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
Portal: <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 Call Center, Monday-Friday, 9:00 a.m. to 5:30 p.m. ET:

HRSA Contact Center
Telephone: (877) 464-4772
TTY: (877) 897-9910
E-mail: CallCenter@HRSA.GOV

VIII. Other Information

Technical Assistance

HRSA has scheduled the following technical assistance:

Conference Call

Day and Date: Thursday, February 28, 2019

Time: 2 - 3 p.m. ET

Conference Number: 1-877-937-3406

Participant Passcode: 152100

Playback Number: 1-800-801-6152

Passcode: None Necessary

Tips for Writing a Strong Application

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