

U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES



Health Resources & Services Administration

Bureau of Health Workforce
Division of Medicine and Dentistry

Grants to States to Support Oral Health Workforce Activities

Funding Opportunity Number: HRSA-18-014

Funding Opportunity Types: Initial: New and Competing Continuation

Catalog of Federal Domestic Assistance (CFDA) Number: 93.236

NOTICE OF FUNDING OPPORTUNITY

Fiscal Year 2018

Application Due Date: March 12, 2018

*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 1 month to complete.*

Issuance Date: January 11, 2018

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Authority: Section 340G of the Public Health Service Act (42 USC §256g)

EXECUTIVE SUMMARY

The Health Resources and Services Administration (HRSA), Bureau of Health Workforce (BHW), Division of Medicine and Dentistry is accepting applications for fiscal year (FY) 2018 for the Grants to States to Support Oral Health Workforce Activities program. The purpose of this program is to support states in developing and implementing innovative programs to address the oral health workforce needs of designated Dental Health Professional Shortage Areas (Dental HPSAs). The FY 2018 President’s Budget does not request funding for this program. This notice is a contingency action taken to ensure that, should funds become available for this purpose, applications can be processed, and funds awarded in a timely manner. Applicants should note that this program may be cancelled prior to award recommendations.

Applicants must be Governor-appointed, state governmental entities that address one or more of the thirteen activities listed in this Notice of Funding Opportunity (NOFO). Only one application per state will be accepted. The state must provide a non-federal contribution to support the grant activities in an amount equal to not less than 40 percent of federal funds provided under the grant.

Funding Opportunity Title:	Grants to States to Support Oral Health Workforce Activities
Funding Opportunity Number:	HRSA-18-014
Due Date for Applications:	March 12, 2018
Anticipated Total Annual Available FY2018 Funding:	\$9,200,000
Estimated Number and Type of Awards:	Up to 23 grants
Estimated Award Amount:	Up to \$400,000 per year
Cost Sharing/Match Required:	Yes
Project Period/Period of Performance:	September 1, 2018 through August 31, 2022 (4 years)
Eligible Applicants:	<p>Eligible applicants include only Governor-appointed, state government entities (such as the state office/division housing the state dental director, or a state-run university or dental school).</p> <p>See Section III-1 of this NOFO, formerly known as the funding opportunity announcement (FOA), for complete eligibility information.</p>

Application Guide

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

Technical Assistance

The following technical assistance webinar and conference call have been scheduled:

Webinar

Day and Date: Wednesday, January 24, 2018

Time: 2:00 p.m. ET

Call-In Number: 1-800-857-5126

Participant Code: 5019189

Web link: https://hrsa.connectsolutions.com/state-oral-health_nof18014/

Playback Number: 1-866-357-4204

Passcode: 5136

Conference Call

Day and Date: Tuesday, February 27, 2018

Time: 2:00 p.m. ET

Conference Number: 1-800-857-5126

Participant Passcode: 5019189

Playback Number: 1-800-944-3584

Passcode: 5136

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I. Program Funding Opportunity Description

1. Purpose

This notice solicits applications for the Grants to States to Support Oral Health Workforce Activities program.

Program Purpose

The purpose of this program is to help states develop and implement innovative programs to address the dental workforce needs of designated dental health professional shortage areas (Dental HPSAs) in a manner appropriate to each state's individual needs.

The aim is to encourage and support state innovation that will increase oral health services for populations living in Dental HPSAs and to sustain those programs that increase the accessibility and quality of oral health services within Dental HPSAs.

Program Requirements

Your application must propose one or more innovative programs to meet the oral health workforce needs of Dental HPSAs in your state. For the purposes of this funding opportunity, an "innovative program" is a new or significantly changed program or service delivery system for your state that uses new ideas, methods and/or approaches to address the oral health workforce needs of Dental HPSAs in your state.

Maintenance, expansion, or minor changes to an established program or service, is not considered an innovative program. Programs that simply increase funded positions or existing service capabilities are not considered innovative programs.

Allowable activities include:

- 1) Efforts to improve/increase dental recruitment and retention;
- 2) Provide grants and low-interest or no-interest loans to help dentists who participate in the Medicaid program under title XIX of the Social Security Act (42 U.S.C. 1396 et. seq.) to establish or expand practices in designated dental health professional shortage areas by equipping dental offices or sharing in the overhead costs of such practices;
- 3) Establish or expand dental residency programs in coordination with accredited dental training institutions in states without dental schools;
- 4) Develop programs, in consultation with state and local dental societies, to expand or establish oral health services and facilities in Dental HPSAs, including services and facilities for children with special needs. Examples include:
 - i. The expansion or establishment of a community-based dental facility, free-standing dental clinic, consolidated health center dental facility, school-linked dental facility, or United States dental school-based facility;
 - ii. The establishment of a mobile or portable dental clinic; and
 - iii. The establishment or expansion of private dental services to enhance capacity through additional equipment or additional hours of operation;

- 5) Placement and support of dental students, dental residents, and advanced dentistry trainees;
- 6) Continuing dental education, including distance-based education;
- 7) Practice support through teledentistry in accordance with state laws;
- 8) Community-based prevention services;
- 9) Coordination with local educational agencies within the state to foster programs that promote children going into oral health or science professions;
- 10) The establishment of faculty recruitment programs at accredited dental training institutions whose mission includes community outreach and service and that have a demonstrated record of serving underserved states; and
- 11) The development of a state dental officer position or the augmentation of a state dental office to coordinate oral health and access issues in the state.

In accordance with Sec. 340G(b)(13) of the Public Health Service Act, and in support of priorities related to opioid abuse and childhood obesity, the following activities are also allowed under this funding opportunity:

- 12) Dental workforce programs designed to address risk factors common to childhood obesity and dental caries; and
- 13) Dental workforce programs designed to address opioid abuse by advancing better practices for pain management and/or improving access to treatment and recovery services. Such programs may include the clinical training of oral health providers in the identification and treatment of individuals with substance use disorders.

Proposals that involve loan repayment and water fluoridation systems activities are discouraged. If included, the proposal must demonstrate that they do not duplicate other federal programs. Proposals that include dental sealant programs, must demonstrate significant innovative changes.

As the ability for states to be able to track their oral health workforce is essential to identifying and addressing workforce shortages, applicants from states who cannot adequately track and assess the oral health workforce capacity within their state **must** include the development/enhancement of this capacity in their proposal under Activity 11.

2. Background

This program, authorized by Title III of the Public Health Service Act Section 340G (42 USC §256g), awards grants to help states develop and implement innovative programs to address the dental workforce needs of designated Dental HPSAs in a manner appropriate to the states' individual needs.

Section 340F of the PHS Act defines "a designated Dental Health Professional Shortage Area" as "an area, population group, or facility that is designated by the Secretary as a dental health professional shortage area under section 332 or designated by the applicable state as having a dental health professional shortage." As of November 29, 2017, there were 5,777 federally designated Dental HPSAs impacting over 61 million individuals and it would take over 10,540 dentists, properly distributed, to

remove these designations.¹ For more information on Dental HPSAs, please visit the HRSA Data Warehouse at <https://datawarehouse.hrsa.gov/Topics/ShortageAreas.aspx>.

The program authorization provides for a number of specific activities that allow for a broad range of programs including support for dental pipeline and training programs, recruitment and retention programs for dental providers, the establishment or expansion of service delivery infrastructure, and population-based services and public health infrastructure. Funded state grants have included programs to expose dental and dental hygiene students to underserved rural clinical sites, target specific underserved populations such as those with substance use disorders and their families, leverage dental hygienists' expanded scopes of practice in new care models, test new models of care using new types of oral health professionals, explore delivering care via teledentistry or mobile care models, test new payment models, and assist dentists in establishing or taking over rural practices. While the approaches states take may be diverse, one thing that is common in their approaches is the requirement to address their particular Dental HPSA workforce needs through innovation.

In addition to the specified activities, the program authorization also allows the Secretary to identify additional appropriate activities that states may pursue under this program. This funding opportunity includes two additional activities that align with the following clinical priorities:

Addressing opioid use disorder through safe and effective pain management and identification and treatment of substance abuse. Opioid overdose deaths in the United States quadrupled between 1999 and 2015 and rates of death involving heroin, synthetic opioids, or a combination have increased more rapidly in recent years.² In 2015, opioid overdose deaths accounted for 63% of all drug overdose deaths in the United States.³ Overdose from prescriptions opioids has been a driving factor in the increase of opioid overdose deaths, with sales of opioids to pharmacies, hospitals, and doctors' offices rising dramatically with no overall change the amount of pain Americans report.⁴ As prescribers of opioids in the United States, dentists can help minimize the potential for their misuse and increase access to dental treatment through prevention, early intervention, and health system integration. More detail can be found at <https://www.hhs.gov/opioids/about-the-epidemic/index.html>.

Addressing common risk factors for childhood obesity and dental caries. HRSA's 2016 National Survey of Children's Health found nearly one-third of children ages 10-17

¹ BHW, HRSA, U.S. Department of Health & Human Services, Designated Health Professional Shortage Areas Statistics as of November 29, 2017, accessed from the Fourth Quarter of Fiscal Year 2017 Designated HPSA Quarterly Summary at <https://datawarehouse.hrsa.gov/tools/hdwreports/Reports.aspx> on November 29, 2017.

² O'Donnell JK, Gladden RM, Seth P. Trends in Deaths Involving Heroin and Synthetic Opioids Excluding Methadone, and Law Enforcement Drug Product Reports, by Census Region — United States, 2006–2015. MMWR Morb Mortal Wkly Rep 2017;66:897–903. DOI: <http://dx.doi.org/10.15585/mmwr.mm6634a2>.

³ *ibid*

⁴ Centers for Disease Control and Prevention, Opioid Overdose: Understanding the Epidemic, August 30, 2017. Accessed on September 27, 2017 from <https://www.cdc.gov/drugoverdose/epidemic/index.html>.

years are overweight or obese⁵. Prevalence of obesity among children ages 2-19 has risen from 5.2 percent in the early 1970s to 17.2 percent in 2013-2014.⁶ Dental caries also remain a concern. Untreated dental caries among children ages 5-19 stands at 18.6 percent with higher rates reported for Hispanics or Latinos (21.7 percent), non-Hispanic or Latino Black or African Americans (23.4 percent), and those below 100 percent of the federal poverty level (24.7 percent).⁷ Risk factors common to childhood obesity and dental caries include behavioral, psychosocial, medical, biological, cultural, sociodemographic, and community environmental and economic factors.⁸

Program Definitions

A glossary containing general definitions for terms used throughout the Bureau of Health Workforce can be located at the [Health Workforce Glossary](#). In addition, the following definitions apply to the Grants to States to Support Oral Health Workforce Activities Program for Fiscal Year 2018.

- **Dental Health Professional Shortage Area (Dental HPSA)** – see Health Professional Shortage Area (HPSA)
- **Disadvantaged Background** – refers to a citizen, national, or a lawful permanent resident of the United States, the Commonwealths of Puerto Rico or the Marianas Islands, the U.S. Virgin Islands, Guam, American Samoa, the Trust Territory of the Pacific Islands, the Republic of Palau, the Republic of the Marshall Islands, or the Federated State of Micronesia who is:
 - **Environmentally Disadvantaged** – an individual’s environment has inhibited him/her from obtaining the knowledge, skills, and abilities required to enroll in and graduate from a health professions school;

AND/OR

- **Economically Disadvantaged** – an individual from a family (a group of two or more individuals) with an annual income below a level based on low-income thresholds, according to family size established by the U.S. Census Bureau, adjusted annually for changes in the Consumer Price Index, and adjusted by the Secretary of Health and Human Services, for use in all health professions programs. The Secretary updates these

⁵ Child and Adolescent Health Measurement Initiative. Data Resource Center for Child and Adolescent Health. 2016 National Survey of Children’s Health (NSCH) data query. Retrieved [12/26/2017] from www.childhealthdata.org. CAHMI: www.cahmi.org.

⁶ Fryar, CD, Margaret, DC, and Ogden, CL. Prevalence of overweight and obesity among children and adolescents ages 2-19 years: United States, 1963-1965 through 2013 -2014. National Center for Health Statistics, Health E-Stats, July 2016.

⁷ National Center for Health Statistics. Health, United States, 2016: With Chartbook on Long-term Trends in Health. Hyattsville, MD. 2017.

⁸ Chi, DL, Luu, M and Shu, F. A scoping review of epidemiologic risk factors for pediatric obesity: implications for future childhood obesity and dental caries prevention research. J Public Health Dent. 2017 Jun;77 Suppl 1:S8-S31. doi: 10.1111/jphd.12221. Epub 2017 Jun 10.

income levels in the Federal Register annually (see the [Federal Register 82\(121\) 28862-28863](#) for current amounts);

AND/OR

- **Educationally Disadvantaged** – an individual who comes from a social, cultural, or educational environment that has demonstrably and directly inhibited the individual from obtaining the knowledge, skills, and abilities necessary to develop and participate in a health professions education or training program.
- **Health Professional Shortage Area (HPSA)** – a federal designation used to identify areas, populations, and facilities which have a shortage of either primary care, dental, and/or mental health providers as measured by the ratio of available discipline-specific providers to: the population of the area; a specific population group; or the number of those served by the facility. All federally qualified health centers and rural health clinics, as defined in section 1861(aa) of the Social Security Act (42 U.S.C. 1395x(aa)), and that meet the requirements of Section 334 of the Public Health Service Act related to charging for services, shall be automatically designated as having such a shortage. More information on the HPSA criteria can be found at <http://bhw.hrsa.gov/shortage/hpsas/designationcriteria/designationcriteria.html>.
- **Innovative Program** – a new or significantly changed program or service delivery system that uses new ideas, methods and/or approaches, designed to improve how the dental workforce needs of designated Dental HPSAs are addressed. The program must be new to your state to be considered innovative. Maintenance, expansion, or minor changes to an established program or service is not considered an innovative program. Programs that simply increase funded positions or service capabilities through efforts very similar to those already in use are not considered innovative programs.
- **Integrated Care** – a graduated spectrum of health services wherein a facility delivers primary care services and coordinates with behavioral health care, oral health care, and/or public health strategies and interventions.
- **Interprofessional education (IPE)** – when two or more professions learn about, from, and with each other to enable effective collaboration and improve health outcomes⁹. (WHO, 2010) The goals of interprofessional collaboration and education are to encourage increased knowledge of the roles and responsibilities of other disciplines, and to improve communication and collaboration among disciplines in future work settings.
- **Medically Underserved Community (MUC)** – a geographic location or population of individuals eligible for designation by the federal government as a HPSA, Medically Underserved Area, Medically Underserved Population, or

⁹ World Health Organization. 2010 Framework for Action on Interprofessional Education and Collaborative Practice. Geneva. World Health Organization.

Governor's Certified Shortage Area for Rural Health Clinic purposes. As an umbrella term, MUC also includes populations such as homeless individuals, migrant or seasonal workers, and residents of public housing.

- **Rural** – a geographical area that includes all non-metro counties. Note: to determine whether a geographical area is considered rural, you can use the [Rural-Urban Commuting Area \(RUCA\) codes](#). Learn more about defining a rural population at <https://www.hrsa.gov/rural-health/about-us/definition/index.html>.

II. Award Information

1. Type of Application and Award

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

HRSA will provide funding in the form of a grant.

2. Summary of Funding

Approximately \$9,200,000 is expected to be available annually to fund approximately 23 recipients. The FY 2018 President's Budget does not request funding for this program. You may apply for a ceiling amount of up to \$400,000 total cost (includes both direct and indirect, facilities and administrative costs) per year. The actual amount available will not be determined until enactment of the final FY 2018 federal appropriation. This program notice is subject to the appropriation of funds, and is a contingency action taken to ensure that, should funds become available for this purpose, applications can be processed, and funds can be awarded in a timely manner. The project period is September 1, 2018 through August 31, 2022 (4 years). Funding beyond the first year is dependent on the availability of appropriated funds for the Grants to States to Support Oral Health Workforce Activities program in subsequent fiscal years, satisfactory recipient performance, and a decision that continued funding is in the best interest of the Federal Government.

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

III. Eligibility Information

1. Eligible Applicants

Eligible applicants include only Governor-appointed, state government entities, such as the office of the state's dental director or a state-run university or dental school. In addition to the 50 States, eligible applicants include the District of Columbia, Guam, the Commonwealth of Puerto Rico, the Northern Mariana Islands, the U.S. Virgin Islands, American Samoa, the Federated States of Micronesia, the Republic of the Marshall Islands, and the Republic of Palau. Private institutions are not eligible to apply for these

grant dollars. States are encouraged to work with tribal entities to facilitate greater consultation and coordination between state and tribal governments.

All applications submitted by any state-governmental entity other than the office/division housing the state dental director (such as a state-run university or dental school) **MUST** contain a letter of support from either the Governor or the state's dental director that specifically endorses the applicant as the state's designated representative to apply for these federal dollars on the state's behalf. Such applicants should coordinate with the office/division housing the state dental director as only one application per state will be accepted. The letter should detail how the state government will be actively involved in the project, to include defining the state's investment of resources to the project and any planned coordination activities at the state level, and must be included in Attachment 7 of the application. Applications from state government entities, other than the office/division housing the state dental director, that do not contain this letter **WILL NOT** be considered for funding.

An application submitted by the state governmental office/division housing the state dental director does not need to include a letter of support from the Governor. For states without an official oral health program or without a state-level oral health leadership position, the eligible entity to apply on the state's behalf would include the individual or entity within the state government that holds the primary responsibility for the state's dental workforce.

2. Cost Sharing/Matching

Cost sharing/matching **is required** for this program. Section 340G(d) of the Public Health Service Act requires a 40 percent match in non-federal contributions for this grant. States must match at least 40 percent of federal funds provided under this grant either in cash or in-kind. In-kind contributions may include plant, equipment, and services and may be provided from state, local, or private sources. The budget justification narrative located in Section IV **MUST** include a line-item breakdown and narrative description of all matching funds proposed for this project. Matching funds must be non-federal contributions related directly to carrying-out project activities. Applications that fail to address cost sharing/matching requirements will be deemed ineligible and not considered for funding under this announcement.

3. Other

Ceiling Amount

Applications that exceed the ceiling amount of \$400,000 per year, inclusive of both direct and indirect costs, will be considered non-responsive and will not be considered for funding under this notice.

Deadline

Any application that fails to satisfy the deadline requirements referenced in *Section IV.4* will be considered non-responsive and will not be considered for funding under this notice.

Multiple Applications

NOTE: Multiple applications from a state are not allowable.

If, for any reason (including submitting to the wrong funding opportunity number or making corrections/updates), an application is submitted more than once prior to the application due date, HRSA will only accept your **last** validated electronic submission, under the correct funding opportunity number, prior to the Grants.gov application due date as the final and only acceptable application. In the event applications are received from more than one entity within a state, the application from the office/division housing the state dental director will supersede applications from any other state-governmental entity.

Other

Failure to include all required documents as part of the application may result in an application being considered incomplete or non-responsive.

Financial Support

A student/trainee receiving support from award funds must be a citizen of the United States, a non-citizen national, or a foreign national having in his/her possession a visa permitting permanent residence in the United States.

IV. Application and Submission Information

1. Address to Request Application Package

HRSA **requires** you to apply electronically through Grants.gov. You must use the SF-424 Research and Related (R&R) application package associated with this NOFO following the directions provided at <https://www.grants.gov/applicants/apply-for-grants.html>.

Effective December 31, 2017 – You **must** use the [Grants.gov Workspace](#) to complete the workspace forms and submit your application workspace package. After this date, you will no longer be able to use PDF Application Packages.

HRSA recommends that you supply an email address to Grants.gov on the grant opportunity synopsis page when accessing the NOFO (also known as “instructions” on Grants.gov) or application package. This allows Grants.gov to email organizations that supply an email address in the event the NOFO is changed and/or republished 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 [Find Grant Opportunities](#) page for all information relevant to desired opportunities.*

2. Content and Form of Application Submission

Section 4 of HRSA’s [SF-424 R&R Application Guide](#) provides instructions for the budget, budget justification, staffing plan and personnel requirements, assurances, certifications, and abstract. You must submit the information outlined in the [SF-424](#)

[R&R Application Guide](#) in addition to the program specific information below. You are responsible for reading and complying with the instructions included in HRSA's [SF-424 R&R Application Guide](#) except where instructed in the NOFO to do otherwise. Applications must be submitted in the English language and must be in terms of U.S. dollars (45 CFR § 75.111(a)).

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

Application Page Limit

The total size of all uploaded files may not exceed the equivalent of **65 pages** when printed by HRSA. The page limit includes the abstract, project and budget narratives, attachments including biographical sketches (biosketches), and letters of commitment and support required in HRSA's [SF-424 R&R Application Guide](#) and this NOFO. Standard OMB-approved forms that are included in the application package do NOT count in the page limitation. Biographical Sketches **do** count in the page limitation. Indirect Cost Rate Agreement and proof of non-profit status (if applicable) will not be counted 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 any of the statements in this certification, an explanation shall be included in Attachment 8: Other Relevant Documents.

See Section 4.1 viii of HRSA's [SF-424 R&R Application Guide](#) for additional information on all certifications.

Program-Specific Instructions

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

i. Project Abstract

See Section 4.1.ix of HRSA's [SF-424 R&R Application Guide](#).

The Abstract must include:

1. A brief overview of the project as a whole, including the innovative program(s) being proposed and tested;
2. Specific, measurable objectives that the project will accomplish;
3. How the proposed project for which funding is requested will be accomplished (i.e., the "who, what, when, where, why and how" of a project); and
4. A list of the specific state activities being address by the proposed program.

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.

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

▪ **PURPOSE AND NEED** -- Corresponds to Section V's Review Criterion #1

Briefly state the purpose of your proposed project and how it relates to the purpose of this funding opportunity. Outline the oral health workforce needs of your state's Dental HPSAs, including those you propose to address through your project activities. Include the capacity of the existing state oral health care workforce and any gaps that exist. Include any relevant oral health workforce trends that have been identified.

Describe the specific Dental HPSAs you plan to target through your proposed innovative program(s), including the population, the oral health workforce, oral health care infrastructure, gaps in the oral workforce, and unmet oral health needs. Include factors that contribute to the gaps and unmet needs such as location of services, language, geography, transportation barriers, or care coordination. Describe specific populations or communities that your innovative program(s) will target within the Dental HPSAs including accessibility of oral health services, oral health status, and social determinants of health and any health disparities.

This section should help reviewers understand the needs of the Dental HPSAs and underserved populations in your state and how the project will improve oral health care for these populations. Current data should be used and cited whenever possible to support the information provided.

- *RESPONSE TO PROGRAM PURPOSE -- This section includes 3 sub-sections — ; (a) Methodology/Approach, b) Work Plan; and (c) Resolution of Challenges—all of which correspond to Section V's Review Criteria #2 (a), (b), and (c).*
- *(a) METHODOLOGY/APPROACH -- Corresponds to Section V's Review Criterion #2 (a).*

Describe in detail your proposed project goals, objectives, activities, and intended outcomes. Objectives should be specific, measurable, achievable, and realistic within the four-year project period.

Clearly describe the innovative program(s) you plan to develop and implement to meet the oral health workforce needs of the Dental HPSAs identified in the Purpose and Need section of your narrative. For each program proposed, you must:

- Indicate which of the thirteen allowed activities the program falls under (see Section I.1 Purpose);
- Indicate if the program is new or, if not, what significant changes are proposed;
- Describe the new ideas, methods, and/or approaches that will be used. Include a description of how your methods are new to the field and/or new to your state;
- Indicate what improvements in the dental workforce or the oral health services and delivery system you expect to see in the affected Dental HPSAs; and
- Describe how these improvements will increase access to high quality oral health services for the underserved populations.
- If you propose to scale-up a recently piloted innovative program you must, in addition to the requirements listed above, provide data from your pilot program that justifies its expansion.
- If you propose loan repayment and water fluoridation systems activities, you must describe other federal programs in the state that support these activities and demonstrate that the proposed activities do not duplicate the other federal programs.

Evaluation must be included as one of your objectives.

Describe your state's oral health workforce data collection, analysis, and planning infrastructure. States who cannot adequately track and assess the oral health workforce capacity **must** include development/enhancement of this workforce capacity in their proposal under Activity 11. Applicants other than the office/division housing the state dental director should coordinate with the relevant state entities to accomplish this objective.

Describe any state policies and regulations you are leveraging in your innovative project(s), including recent changes in your state's practice acts or scopes of practice for any oral health providers.

Cite existing evidence, where available, that supports the proposed methodologies. If you propose to expand a recently tested innovative program, provide program data and evidence that supports its expansion.

▪ *(b) WORK PLAN -- Corresponds to Section V's Review Criterion #2 (b).*

Provide a detailed work plan that demonstrates your experience implementing a project of the proposed scope. Include a detailed description of how your state will develop, implement, complete, and evaluate the innovative program(s) proposed for this project. Include the major steps, activities, key milestones, a timeline for their completion, and the staff responsible for achieving the goals and objectives over the four-year project period.

List any project/performance sites and provide information regarding any consortium or contractual arrangements with any collaborating organizations. Applicants may incorporate, by reference, the information from the Staffing Plan and Job Descriptions for Key Personnel (Attachment 1) or key personnel biographical sketches (uploaded in the SF-424 R&R Senior/Key Person Profile form) when discussing responsible staff.

Include a detailed work plan chart that contains:

- Goals and objectives of the project;
- Activities and steps that will occur to meet the corresponding goals and objectives;
- Responsibility of key staff and partners, and as appropriate, identify meaningful support and collaboration with key stakeholders in planning, designing and implementing all activities;
- Deliverables and/or products;
- If your plan includes awarding contracts, hiring staff, or making subawards, include your key internal processes in your work plan and timelines;
- Outcomes, including the number and distribution of the health workforce; and
- Timeline for completion.

Your work plan chart should contain sufficient detail to allow tracking progress on the implementation of your program on at least a quarterly basis. A sample work plan can be found here:

<https://bhw.hrsa.gov/sites/default/files/bhw/grants/workplantemplate.pdf>.

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

Discuss challenges that you are likely to encounter in designing and implementing the activities described in the work plan and the approaches that will be used to resolve such challenges. If your plan includes awarding contracts, hiring staff, or making subawards, describe any challenges, particularly timeline challenges, that

you are likely to encounter, including your internal processes, and the approaches you will use to minimize them. Describe any potential obstacles to implementing the evaluation objective and meeting HRSA's reporting requirements (as described in Section IV.2.ii. IMPACT (a) Evaluation and Technical Support Capacity) and indicate how those obstacles will be addressed.

- *IMPACT -- This section includes 2 sub-sections— (a) Evaluation and Technical Support Capacity; and (b) Project Sustainability—both of which correspond to Section V's Review Criteria #3 (a) and (b).*
- *(a) EVALUATION AND TECHNICAL SUPPORT CAPACITY -- Corresponds to Section V's Review Criterion #3 (a)*

You must include evaluation as an objective of your proposed program, include it in the work plan, and describe how you will evaluate the impact of your innovative program(s).

You must describe how program performance and outcomes will be evaluated against the goals and objectives of your proposal. For each proposed program indicate:

- What improvement(s) you expect over current or similar programs;
- How you plan to measure that improvement(s); and
- What level of achievement(s) will be considered successful?

In addition to measuring the impact of your program(s) on the oral health workforce, you should include how you will measure the impact of your innovative program(s) on: 1) access to care for the targeted Dental HPSAs, 2) quality of care received by patients in the targeted Dental HPSAs, and/or 3) the estimated cost effectiveness of the care delivered by your innovative program(s), and any other key evaluative measures you identify.

Describe how your staff, capabilities, experience, and plans demonstrate that you will have the expertise and the technical capacity to carry out the proposed evaluation activities. You may use funds to support an Evaluation Specialist to implement your evaluation activities. You may incorporate, by reference, the information from your Staffing Plan and Job Descriptions for Key Personnel (Attachment 1) or key personnel biographical sketches (uploaded in the SF-424 R&R Senior/Key Person Profile form) when discussing the organization's technical support capacity.

You are encouraged to review oral health measures in Healthy People 2020 (<https://www.healthypeople.gov/2020/topics-objectives/topic/oral-health/objectives>) and the Dental Quality Alliance website (<http://www.ada.org/en/science-research/dental-quality-alliance/dqa-measure-activities>).

HRSA Required Performance and Progress Reporting

HRSA requires awardees to report annually on workforce and oral health service outcomes in their annual Performance Reports. The current required data forms for this program may be viewed at <https://bhw.hrsa.gov/sites/default/files/bhw/grants/performance/sohwp.pdf> and most recent instructions at <https://bhw.hrsa.gov/sites/default/files/bhw/grants/sohwp.pdf>. Describe your strategy to collect, manage, analyze and track data (e.g., experience of assigned staff, data sources, frequency of data collection, analysis, etc.), including the systems and processes you will use, to report on HRSA's performance measure. Describe any potential obstacles for implementing your strategy to meet HRSA's Annual Performance Report requirements and your plan to address them.

Awardees will also be required to report annually the progress on the program's goals and objectives in the Annual Non-competing Continuation (NCC) Progress Report. Describe your strategy to collect, manage, and analyze data to monitor and report on the implementation of your work plan, progress toward meeting goals and objectives, and program accomplishments. Progress **and** results from your evaluation objective, will be expected.

Continuous Program Assessment and Improvement

You must include a plan for Rapid Cycle Quality Improvement (RCQI) for the continuous monitoring of ongoing project processes, outcomes of implemented activities, and progress toward meeting grant goals and objectives and the implementation of necessary adjustment to planned activities to effect course corrections. Additional information on RCQI is available at the following website: <http://www.healthworkforceta.org/resources/rapid-cycle-quality-improvement-resource-guide/>

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

Awardees are expected to sustain key elements of their projects, e.g., strategies or services and interventions, which have been effective in improving practices and those that have led to improved outcomes for the target population.

You must propose a clear plan to sustain the successful key elements of your proposed innovative program(s) after the period of federal funding ends. Your plan should be realistic, feasible and include the following: 1) how your evaluation results will be used to support sustaining effective key elements of the program; 2) strategies to achieve sustainability; 3) challenges that are likely to be encountered in sustaining the program and approaches that will be used to resolve such challenges; and 4) identification of potential sources of support to include financial, in-kind, and/or absorption of activities by program partners. Do not assume that additional grant support beyond the four-year project period will be available to sustain your program.

▪ **ORGANIZATIONAL INFORMATION, RESOURCES AND CAPABILITIES --**
Corresponds to Section V's Review Criterion #4

Provide information on your current mission, structure and scope of current activities and describe how these contribute to your organization's ability to leverage available resources, and meet the program requirements and expectations. If you are not part of the state health department, then include a description of the role of the state health department in your proposed project.

Describe how the unique needs of target populations in the Dental HPSAs served are routinely assessed. Identify and describe, in detail, the facilities and organizational resources of the project's performance site(s). For all key personnel, describe current positions, skills and knowledge, and any previous experience that may justify their proposed role in the project.

Describe collaborative linkages and partnerships, such as state oral health coalitions, dental schools, other state divisions/departments (Primary Care Office, Rural Health, Medicaid Directors, etc.), local health departments, and school districts. Include a Project Organizational Chart (Attachment 3) that demonstrates effective collaboration among partners and proper oversight of progress and activities.

The staffing plan and job descriptions for key faculty/staff must be included in Attachment 1 (Staffing Plan and Job Descriptions for Key Personnel). However, the biographical sketches must be uploaded in the SF-424 RESEARCH & RELATED Senior/Key Person Profile form, which can be accessed in the Application Package under "Mandatory." Include biographical sketches for persons occupying the key positions, not to exceed TWO pages in length each. In the event that a biographical sketch is included for an identified individual who is not yet hired, please include a letter of commitment from that person with the biographical sketch.

Biographical sketches, not exceeding two pages per person, should include the following information:

- Senior/key personnel name
- Position Title
- Education/Training – beginning with baccalaureate or other initial professional education, such as nursing, including postdoctoral training and residency training if applicable:
 - Institution and location
 - Degree (if applicable)
 - Date of degree (MM/YY)
 - Field of study
- **Section A (required) Personal Statement.** Briefly describe why the individual's experience and qualifications make him/her particularly well-

suited for his/her role (e.g., PD/PI) in the project that is the subject of the award.

- Section B (*required*) **Positions and Honors**. List in chronological order previous positions, concluding with the present position. List any honors. Include present membership on any federal Government public advisory committee.
- Section C (*optional*) **Peer-reviewed publications or manuscripts in press (in chronological order)**. You are encouraged to limit the list of selected peer-reviewed publications or manuscripts in press to no more than 15. Do not include manuscripts submitted or in preparation. The individual may choose to include selected publications based on date, importance to the field, and/or relevance to the proposed research. Citations that are publicly available in a free, online format may include URLs along with the full reference (note that copies of publicly available publications are not acceptable as appendix material).
- Section D (*optional*) **Other Support**. List both selected ongoing and completed (during the last three years) projects (federal or non-federal support). Begin with any projects relevant to the project proposed in this application. Briefly indicate the overall goals of the projects and responsibilities of the Senior/Key Person identified on the Biographical Sketch.

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>
Purpose and Need	(1) Purpose and Need
Response to Program Purpose: (a) Methodology/Approach (b) Work Plan (c) Resolution of Challenges	(2) Response to Program Purpose (a) Methodology/Approach (b) Work Plan (c) Resolution of Challenges
Impact: (a) Evaluation and Technical Support Capacity (b) Project Sustainability	(3) Impact: (a) Evaluation and Technical Support Capacity (b) Project Sustainability
Organizational Information, Resources and Capabilities	(4) Organizational Information, Resources and Capabilities
Budget and Budget Narrative (see below)	(5) Support Requested

iii. Budget

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

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

In addition, the Grants to States to Support Oral Health Workforce Activities program requires the following, which corresponds to Section V's Review Criterion #5:

The Consolidated Appropriations Act, 2017 (P.L.115-31), Division H, § 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 R&R Application Guide](#) for additional information. Note that these or other salary limitations may apply in FY 2018, 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 Grants to States to Support Oral Health Workforce Activities program requires the following:

Entities who receive funding through both the HRSA State Oral Health Workforce program and a CDC funded state-based oral health program, including any awards under NOFO CDC-RFA-DP18-1810, should be aware that these two programs cannot conduct duplicate activities, and funding for the two programs should be clearly defined as separate but may be complimentary in nature.

Provide a narrative that explains the amounts requested for each line in the SF-424 R&R budget form. You **MUST** submit a one-year budget and budget justification for EACH of the four budget periods with your application. The budget justification should specifically describe how each item will support the achievement of proposed goals and objectives. You must also provide sufficient cost information e.g., rates, quantities, etc., to explain the amounts requested in each line item. Applications that include budget requests for only the first year will receive scoring reductions during the objective reviews and risk not receiving financial support in subsequent years. Be very careful about showing how each item in the "other" category is justified. For

subsequent budget years, the justification narrative should highlight the changes from year-to-year.

If your plan includes hiring new personnel, awarding contracts, or making sub-awards, then you must take into account the processes and time needed to put these parts of your plan in place. Awarded applicants are expected to ensure that new hires are on-board within three months of the planned start date. Additionally, failure to execute any sub-awards or contracts in a timely manner, as noted in the work plan, may lead to administrative action, up to cancellation of the award.

Thoroughly cover your requested amounts, but be concise. Do NOT use the budget justification narrative to expand the project narrative.

Please note the following:

- *Matching Requirement (REQUIRED):* The applicant must provide assurance that it will meet the 40 percent (or greater) matching requirement and that it possesses sufficient infrastructure to manage the activities to be funded through the grant and to evaluate and report on the outcomes resulting from such activities. The budget justification narrative must include a line-item breakdown and narrative description of all matching funds proposed for this project. Matching funds must relate directly to project activities. Applications that fail to address cost sharing/matching requirements will be deemed ineligible and not considered for funding under this announcement.
- *Travel:* Applicants must include annual travel for the Project Director, or a designee, to attend the National Oral Health Conference.
- *Participant/Trainee Support Costs:* For applicants with participant/trainee support costs, list tuition/fees/health insurance, stipends, travel, subsistence, and other trainee related expenses, and the number of participants/trainees. Ensure that your budget breakdown separates these trainee costs, and includes a separate sub-total entitled “total Participant/Trainee Support Costs” which includes the summation of all trainee costs.
- *Consultant Services:* For applicants that are using consultant services, list the total costs for all consultant services. In the budget justification, identify each consultant, the services he/she will perform, the total number of days, travel costs, and the total estimated costs. Your amount budgeted should take into account any internal process and time needed to bring the consultant on board.

v. **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: Staffing Plan and Job Descriptions for Key Personnel* (See Section 4.1.vi. of HRSA's [SF-424 R&R Application Guide](#))
Keep each job description to one page in length as much as is possible. Include the role, responsibilities, and qualifications of proposed project staff.
- *Attachment 2: Letters of Agreement, Memoranda of Understanding, and/or Description(s) of Proposed/Existing Contracts (project-specific)*
Provide any documents that describe working relationships between your organization and other entities and programs cited in the proposal. Documents that confirm actual or pending contractual or other agreements should clearly describe the roles of the contractors and any deliverable(s). Letters of agreement must be signed and dated.
- *Attachment 3: Project Organizational Chart*
Provide a one-page figure that depicts the organizational structure of the project (not the applicant organization).
- *Attachment 4: Tables, Charts, etc.*
Provide any additional documents to give further details about the proposal (e.g., Gantt or PERT charts, flow charts, logic models, etc.).
- *Attachment 5: Indirect Cost Rate Agreement (NOT counted in the page limit)*
Provide a copy of the most recent negotiated Indirect Cost Rate Agreement.
- *Attachment 6: Progress Report*
(FOR COMPETING CONTINUATIONS ONLY)
Past performance is a predictor of future success by an applicant, particularly within the same competitive program. Identify your current (or previous) grant number, include the most important objectives from your approved application (including any approved changes), and document overall program accomplishments under each objective over the entire project period. Where possible, include the proposed and actual metrics, outputs, or outcomes of each project objective. HRSA program staff will review the progress report after the objective review committee reviews your competing continuation application. See Section V.2 Review and Selection Process for further explanation of the past performance.

The progress report should be a brief presentation of the accomplishments, in relation to the objectives of the program during the current project period.

The report should include:

- (1) The period covered (dates).
- (2) Specific Objectives - Briefly summarize the specific objectives of the project as actually funded.
- (3) Results - Describe the program activities conducted for each objective. Include both positive and negative results or technical problems that may be important.

- *Attachment 7: Letters of Support*
Provide a letter of support for each organization or department involved in your proposed project. Letters of support must be from someone who holds the authority to speak for the organization or department (CEO, Chair, etc.), must be signed and dated, and must specifically indicate understanding of the project and a commitment to the project, including any resource commitments (in-kind services, dollars, staff, space, equipment, etc.). All applications submitted by any state-governmental entity other than the office/division housing the state dental director (such as a state-run university or dental school) **MUST** contain a letter of support from either the Governor or the state's dental director that specifically endorses the applicant as the state's designated representative to apply for these Federal dollars on the state's behalf.
- *Attachment 8: Other Relevant Documents*
Include here any other document that is relevant to the application.

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 your 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 (<https://www.grants.gov/>)

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

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

4. Submission Dates and Times

Application Due Date

The due date for applications under this NOFO is *March 12, 2018 at 11:59 p.m. Eastern Time.*

See Section 8.2.5 – Summary of emails from Grants.gov in HRSA’s [SF-424 R&R Application Guide](#) for additional information.

5. Intergovernmental Review

The Grants to States to Support Oral Health Workforce Activities program is not a program subject to the provisions of Executive Order 12372, as implemented by 45 CFR part 100.

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

6. Funding Restrictions

You must request funding for a project period of four (4) years, at no more than \$400,000 per year (inclusive of direct **and** indirect costs). The FY 2018 President’s Budget does not request funding for this program. This program notice is subject to the appropriation of funds, and is a contingency action taken to ensure that, should funds become available for this purpose, applications can be processed, and funds awarded in a timely manner. Awards to support projects beyond the first budget year will be contingent upon Congressional appropriation, satisfactory progress in meeting the project’s objectives, and a determination that continued funding would be in the best interest of the Federal Government.

A student/trainee receiving support from award funds must be a citizen of the United States, a non-citizen national, or a foreign national having in his/her possession a visa permitting permanent residence in the United States.

Funds under this notice may not be used for purposes specified in HRSA’s [SF-424 R&R Application Guide](#). In addition, funds for this program may not be used for new construction or for the purpose of conducting major renovation activities, nor can funding be used for the acquisition of real property. For clarification, please contact the Project Officer.

The Consolidated Appropriations Act, 2017 (P.L.115-31), Division H, § 202, 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 FY2018, 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(s) applied to the award(s) under the program will be cost sharing or matching. Post-award requirements for program income can be found at [45 CFR § 75.307](#).

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 you in understanding the standards against which your application will be judged. Critical indicators have been developed for each review criterion to assist you in presenting pertinent information related to that criterion and to provide the reviewer with a standard for evaluation. Review criteria are outlined below with specific detail and scoring points.

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

Review criteria are used to review and rank applications. The Grants to States to Support Oral Health Workforce Activities program has *five (5)* review criteria.

Note that lack of clarity, insufficient information, or inconsistent data within your application may affect reviewers' ability to evaluate your response and lead to lower scores.

Criterion 1: PURPOSE AND NEED (10 points) – Corresponds to Section IV's Purpose and Need

Your application will be evaluated on:

- The extent to which the purpose of the proposed project aligns with the purpose of this funding opportunity as outlined in Sec. I.1, Purpose.
- The extent to which the application aims to improve oral health workforce and oral health services and outcomes for the highest need communities and populations within targeted Dental HPSAs.
- The extent to which the application describes the specific Dental HPSAs targeted by your proposed innovate program(s), including the populations, unmet oral health needs, any health disparities, and the oral health care infrastructure, including the oral health workforce and any gaps that exist.

Criterion 2: RESPONSE TO PROGRAM PURPOSE (30 points) – Corresponds to Section IV's Response to Program Purpose Sub-section (a) Methodology/Approach, Sub-section (b) Work Plan and Sub-section (c) Resolution of Challenges

Criterion 2 (a): METHODOLOGY/APPROACH (15 points) – Corresponds to Section IV's Response to Program Purpose Sub-section (a) Methodology/Approach

Your application will be evaluated on:

- The extent to which the proposed project goals, objectives, activities, and intended outcomes are clear and the objectives are specific, measurable, achievable, and realistic within the project period.
- The extent to which the proposed programs are innovative and fall under one or more of the thirteen allowable activities as outlined in Section I.1.
- The extent to which the proposed activities are likely to address the needs of the Dental HPSAs, as outlined in the Purpose and Needs section, where they will be implemented.
- The extent to which evaluation is included as an objective.
- The extent to which the state's current ability to effectively track and assess the state's oral health workforce capacity has been described and, if applicable, any weaknesses in the oral health workforce data collection, analysis, and planning infrastructure have been adequately addressed under Activity 11.
- If applicable: the extent to which the proposed loan repayment and water fluoridation systems activities clearly demonstrate that the proposed activities do not duplicate the other federal programs for these activities.

Criterion 2 (b): WORK PLAN (10 points) – Corresponds to Section IV's Response to Program Purpose Sub-section (b) Work Plan

Your application will be evaluated on:

- The extent to which the Work Plan Chart is reasonable and achievable within the timeline and overall project period.
- The extent to which consortium or contractual arrangement with any collaborating organizations are listed for the performance site(s), including the targeted Dental HPSAs identified in the Purpose and Needs Section, and addressed in the Methodology Section.
- The extent to which the Work Plan Chart includes sufficient detail (objectives, timeline, responsibilities, and key tasks including internal processes for hiring, contracting, or subawards, deliverables) to allow tracking of progress, on at least a quarterly basis, on goals, objectives, outcomes, and program implementation.
- The extent to which the work plan chart includes the evaluation objective and clear steps towards its implementation.

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

Your application will be evaluated on the extent to which you demonstrate an understanding of potential obstacles and challenges, during the design and implementation of the project, and your plans for dealing with them. Examples of obstacles include hiring delays or challenges of issuing sub-awards (through full and open competitions) in a timely manner.

Criterion 3: IMPACT (30 points) – Corresponds to Section IV's Impact Sub-section (a) Evaluation and Technical Support Capacity, and Sub-section (b) Project Sustainability

Criterion 3(a): EVALUATION AND TECHNICAL SUPPORT CAPACITY (20 points) – Corresponds to Section IV's Impact Sub-section (a) Evaluation and Technical Support Capacity

Your application will be evaluated on:

- The extent to which the expected improvement(s) over current or similar programs for each innovative program are reasonable.
- The extent to which the plan to measure the expected improvement(s) of each innovative program is sufficient and achievable.
- The extent to which the identified level(s) of achievement for each innovative program that will be considered successful is reasonable and meaningful.
- The extent to which the proposed evaluation will assess the impact of the innovative program(s) on key evaluative measures including: 1) access to care for the underserved populations being served, 2) quality of care received by patients, and/or 3) the estimated cost effectiveness of the care delivered.
- The extent to which staff, capabilities, experience, and plans demonstrate that you will have the expertise and the technical capacity to carry out the proposed evaluation activities.
- The extent to which the described strategy to collect, manage, analyze and track data is reasonable and sufficient to report on HRSA's reporting requirements.
- The extent to which the plan for Rapid Cycle Quality Improvement (RCQI) will lead to necessary adjustments to planned activities over the course of the four-year project period.

Criterion 3 (b): PROJECT SUSTAINABILITY (10 points) – Corresponds to Section IV's Impact Sub-section (b) Project Sustainability

Your application will be evaluated on:

- The extent to which it clearly articulates likely challenges to be encountered in sustaining the program beyond the period of federal funding, and describes logical approaches to resolving such challenges.
- The extent to which it describes a solid plan for sustaining the successful key elements of the proposed innovative programs after the period of federal funding ends.

Criterion 4: ORGANIZATIONAL INFORMATION, RESOURCES AND CAPABILITIES (15 points) – Corresponds to Section IV’s Organizational Information, Resources and Capabilities

Your application will be evaluated on:

- The extent to which the application demonstrates you and your partners’ capacity, including your skills, knowledge, and experience, to effectively implement the proposed program and meet the program requirements.
- The extent to which the partnerships, facilities, and organizational resources of all the project’s performance sites are sufficient to implement the program and routinely assess the unique needs of target populations in the targeted Dental HPSAs.
- The extent to which the state health department plays a role in the proposed project.

Criterion 5: SUPPORT REQUESTED (15 points) – Corresponds to Section IV’s Budget Justification Narrative and SF-424 R&R budget forms

Your application will be evaluated on:

- The reasonableness of the proposed budget for each year of the four-year project period, in relation to the objectives, the complexity of the activities, and the anticipated results.
- The extent to which key personnel have reasonable and adequate time devoted to the project to achieve project objectives.
- The extent to which the budget is complete, including budgets and justifications for each year.
- The detail to which the 40 percent matching requirement is described, to include line item breakdowns.
- The extent to which time needed for hiring, awarding contracts, or making sub-awards is taken into account, if applicable.

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. In addition to the ranking based on merit criteria, HRSA approving officials may also apply other factors in award selection, (e.g., geographical distribution), if specified below in this NOFO. Specific factors may include past performance and geographic distribution. HRSA may also consider assessment of risk and the other pre-award activities described in Section 3 below.

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

In considering past performance as a predictor of future success by an applicant, HRSA staff will review the required Progress Report. More specific information can be found under Attachment 6 requirements.

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](#)).

Applications receiving a favorable objective review are reviewed for other considerations that include past performance, as applicable, cost analysis of the project/program budget, assessment of your management systems, ensuring continued applicant eligibility, and compliance with any public policy requirements, including those requiring just-in-time submissions. You may be asked 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 an award will be made. Following review of all applicable information, the HRSA's approving and business management officials will determine whether an award can be made, 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 by applicants as described in [45 CFR § 75.205 HHS Awarding Agency Review of Risk Posed by Applicants](#).

A determination that an applicant is not qualified will be reported by HRSA to FAPIIS ([45 CFR § 75.212](#)).

4. Anticipated Announcement and Award Dates

HRSA anticipates issuing/announcing awards prior to the start date of September 1, 2018.

VI. Award Administration Information

1. Award Notices

HRSA will issue the Notice of Award prior to the start date of September 1, 2018. See Section 5.4 of HRSA's [SF-424 R&R Application Guide](#) for additional information.

2. Administrative and National Policy Requirements

Temporary Reassignment of State and Local Personnel during a Public Health Emergency

Section 201 of the Pandemic and All-Hazards Preparedness Reauthorization Act of 2013 (PAHPRA), Public Law 113-5 amends section 319 of the Public Health Service (PHS) Act to provide the Secretary of the Department of Health and Human Services (HHS) with discretion to authorize the temporary reassignment of state, tribal, and local personnel during a declared federal public health emergency upon request by a state or tribal organization. The temporary reassignment provision is applicable to state, tribal, and local public health department or agency personnel whose positions are funded, in full or part, under PHS programs and allows such personnel to be reassigned on a voluntary basis to respond to the public health emergency in the affected jurisdiction. Funds provided under the award may be used to support personnel who are temporarily reassigned in accordance with section 319(e). This authority terminates September 30, 2018. Please reference detailed information available on the ASPR website via <http://www.phe.gov/Preparedness/legal/pahpa/section201/Pages/default.aspx>

See Section 2.2 of HRSA's [SF-424 R&R Application Guide](#).

3. Reporting

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

- 1) **Progress Report(s).** The recipient must submit a progress report to HRSA on an **annual** basis. HRSA will verify that approved and funded applicants' proposed objectives are accomplished during each year of the project.

The HRSA Progress Report has two parts. The first part demonstrates recipient progress on program-specific goals. Recipients will provide performance information on project objectives and accomplishments, project barriers and resolutions, and will identify any technical assistance needs.

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

Further information will be provided in the award notice.

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

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

- 3) **Final Report.** A final report is due within 90 days after the project period ends. The Final Report must be submitted online by recipients in the Electronic Handbook system at <https://grants.hrsa.gov/webexternal/home.asp>.

The Final Report is designed to provide HRSA with information required to close out a grant after completion of project activities. Recipients are required to submit a final report at the end of their project. The Final Report includes the following sections:

- Project Objectives and Accomplishments - Description of major accomplishments on project objectives.
- Project Barriers and Resolutions - Description of barriers/problems that impeded project's ability to implement the approved plan.
- Summary Information:
 - Project overview.
 - Project impact.
 - Prospects for continuing the project and/or replicating this project elsewhere.
 - Publications produced through this grant activity.
 - Changes to the objectives from the initially approved grant.

Further information will be provided in the award notice.

- 4) **Federal Financial Report.** A Federal Financial Report (SF-425) is required according to the schedule in the [SF-424 R&R Application Guide](#). The report is an accounting of expenditures under the project that year. Financial reports must

be submitted electronically through the EHB system. More specific information will be included in the award notice.

- 5) **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

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

Carolyn J. Cobb
Grants Management Specialist
HRSA Division of Grants Management Operations, OFAM
5600 Fishers Lane, Mailstop PKLN/Open Work Station
Rockville, MD 20857
Telephone: (301) 443-0829
ccobb2@hrsa.gov

Vincent Woodard
Grants Management Specialist
HRSA Division of Grants Management Operations, OFAM
5600 Fishers Lane, 10W05C
Rockville, MD 20857
Telephone: (301) 945-3938
VWoodard@hrsa.gov

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

Thomas Vallin
Project Officer, Oral Health Branch
Attn: HRSA-18-014
Bureau of Health Workforce, HRSA
5600 Fishers Lane, Room 15N144B
Rockville, MD 20857
Telephone: (301) 443-1307
Fax: (301) 443-0162
Email: TVallin@hrsa.gov

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

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

Successful applicants/recipients may need assistance when working online to submit information and reports electronically through HRSA's 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, excluding Federal holidays, at:

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

VIII. Other Information

Technical Assistance:

The following technical assistance webinar and conference call have been scheduled:

Webinar

Day and Date: Wednesday, January 24, 2018
Time: 2:00 p.m. ET
Call-In Number: 1-800-857-5126
Participant Code: 5019189
Web link: https://hrsa.connectsolutions.com/state-oral-health_nof18014/
Playback Number: 1-866-357-4204
Passcode: 5136

AND

Conference Call

Day and Date: Tuesday, February 27, 2018
Time: 2:00 p.m. ET
Conference Number: 1-800-857-5126
Participant Passcode: 5019189
Playback Number: 1-800-944-3584
Passcode: 5136

IX. Tips for Writing a Strong Application

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

Frequently Asked Questions (FAQs) can be found on the program website, and are often updated during the application process.

In addition, a number of recorded webcasts have been developed with information that may assist you in preparing a competitive application. These webcasts can be accessed at <http://www.hrsa.gov/grants/apply/write-strong/index.html>.