

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

Maternal and Child Health Bureau
Division of Services for Children with Special Health Care Needs
Genetic Services Branch

Maternal and Child Environmental Health Network

Announcement Type: New & Competing Continuation

Funding Opportunity Number: HRSA-17-081

Catalog of Federal Domestic Assistance (CFDA) No. 93.110

FUNDING OPPORTUNITY ANNOUNCEMENT

Fiscal Year 2017

Application Due Date: January 20, 2017

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

Issuance Date: October 20, 2016

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

EXECUTIVE SUMMARY

The Health Resources and Services Administration (HRSA), Maternal and Child Health Bureau (MCHB), Division of Services for Children with Special Health Needs, Genetic Services Branch is accepting applications for fiscal year (FY) 2017 for the Maternal and Child Environmental Health Network (MCEHN). The purpose of this program is to decrease maternal and child morbidity and mortality associated with pre-and post-natal environmental and other toxic exposures. One cooperative agreement will be funded to implement and support a network of national and regional teratogen information service (TIS) counseling centers. This program is intended to be a resource for women of reproductive age, their partners and health care providers, with an emphasis on vulnerable and hard-to-reach populations. For the purpose of this program, “post-natal exposure” refers to infants who are receiving breast milk.

Funding Opportunity Title:	Maternal and Child Environmental Health Network (MCEHN)
Funding Opportunity Number:	HRSA-17-081
Due Date for Applications:	January 20, 2017
Anticipated Total Annual Available Funding:	\$1,200,000
Estimated Number and Type of Award(s):	One (1) cooperative agreement
Estimated Award Amount:	Up to \$1,200,000 per year
Cost Sharing/Match Required:	No
Project Period:	September 1, 2017 through August 31, 2022 (five (5) years)
Eligible Applicants:	Per 42 CFR § 51a.3(a), any public or private entity, including an Indian tribe or tribal organization (as those terms are defined at 25 U.S.C. 450b) is eligible to apply. [See Section III-1 of this funding opportunity announcement (FOA) 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 FOA to do otherwise. A short video explaining the *Application Guide* is available at <http://www.hrsa.gov/grants/apply/applicationguide/>.

Technical Assistance

A technical assistance webinar will be held on Wednesday, November 9, 2016 to assist applicants in preparing their applications. The purpose of the webinar is to review the funding opportunity announcement (FOA), and to provide clarifying information that may be necessary. There will be a Q & A session to answer any questions.

Date: Wednesday, November 9, 2016

Time: 2:00 PM - 3:00 PM Eastern Time

Webinar Link: <https://hrsa.connectsolutions.com/mcehn-foa-webinar/>

Conference Code: 888-826-9572

Conference Passcode: 77014936

Table of Contents

I. PROGRAM FUNDING OPPORTUNITY DESCRIPTION.....	1
1. PURPOSE.....	1
2. BACKGROUND.....	3
II. AWARD INFORMATION	5
1. TYPE OF APPLICATION AND AWARD.....	5
2. SUMMARY OF FUNDING.....	7
III. ELIGIBILITY INFORMATION.....	7
1. ELIGIBLE APPLICANTS.....	7
2. COST SHARING/MATCHING	7
3. OTHER.....	8
IV. APPLICATION AND SUBMISSION INFORMATION	8
1. ADDRESS TO REQUEST APPLICATION PACKAGE	8
2. CONTENT AND FORM OF APPLICATION SUBMISSION	8
i. <i>Project Abstract</i>	9
ii. <i>Project Narrative</i>	9
iii. <i>Budget</i>	14
iv. <i>Budget Narrative</i>	15
v. <i>Program-Specific Forms</i>	15
vi. <i>Attachments</i>	15
3. DUN AND BRADSTREET DATA UNIVERSAL NUMBERING SYSTEM (DUNS) NUMBER AND SYSTEM FOR AWARD MANAGEMENT	17
4. SUBMISSION DATES AND TIMES.....	18
5. INTERGOVERNMENTAL REVIEW	18
6. FUNDING RESTRICTIONS	18
V. APPLICATION REVIEW INFORMATION	19
1. REVIEW CRITERIA	19
2. REVIEW AND SELECTION PROCESS.....	23
3. ASSESSMENT OF RISK AND OTHER PRE-AWARD ACTIVITIES	23
4. ANTICIPATED ANNOUNCEMENT AND AWARD DATES	24
VI. AWARD ADMINISTRATION INFORMATION	24
1. AWARD NOTICES.....	24
2. ADMINISTRATIVE AND NATIONAL POLICY REQUIREMENTS.....	24
3. REPORTING.....	24
VII. AGENCY CONTACTS.....	26
VIII. OTHER INFORMATION	27
IX. TIPS FOR WRITING A STRONG APPLICATION	28

I. Program Funding Opportunity Description

1. Purpose

This announcement solicits applications for the Maternal and Child Environmental Health Network. The purpose of this program is to decrease maternal and child morbidity and mortality associated with pre-and post-natal environmental exposures. One organization will be funded that will implement and support a network of national and regional teratogen information service (TIS) counseling centers. A teratogen is defined as an agent that may induce abnormal embryo or fetal development when administered during pregnancy.¹ This program is intended to be a resource for women of reproductive age, their partners and healthcare providers, with an emphasis on vulnerable and hard-to-reach populations.² For the purpose of this program, “post-natal exposure” refers to infants who are receiving breast milk.

Program Goals

- Develop and support a network that will increase awareness of and access to information about potential environmental risks during pregnancy and lactation.
- Provide teratogen information services to women, their partners, and health care providers, with an emphasis on vulnerable and hard-to-reach populations, through one-on-one risk assessment and counseling.
- Synthesize research and develop resources and strategies to advance the teratogen knowledge base.
- Coordinate systems to identify and quickly respond to emerging maternal and child environmental risk through education and outreach.
- Support state public health infrastructure to respond to environmental issues (current and emerging) and reduce morbidity and mortality associated with maternal and child environmental exposures.

Program Objectives

The awardee will be responsible for collecting data on these objectives for the purpose of monitoring and evaluating the overall effectiveness of the program.

- By August 2021, a ten percent increase in the number of informational materials created and disseminated through various formats and methods.
- By August 2021, a twenty percent increase in the number of women and providers receiving information materials through various vehicles.
- By August 2021, a ten percent increase in the number of pregnant and breastfeeding women referred to outcomes research studies.
- By August 2021, responding to a minimum of 1,800 inquiries per month.

¹ The Teratology Society. (2010). Teratology Primer 2nd ed. Retrieved from <http://www.teratology.org/primer.asp> on September 27, 2016.

² Vulnerable and hard to reach populations are defined as women living in medically underserved areas, or who are otherwise at-risk, for example, migrant workers, non-English speaking women, young women, those of lower socioeconomic status (SES) and education, or who do not have insurance.

- By August 2021, an overall 30 percent increase of all inquiries must be from women who are vulnerable or from hard-to-reach populations.

Within the first year after award, baseline values will be established for these measures.

Program Requirements

The awardee must:

1. Support national/regional TIS counseling centers through subawards to support a response to teratogen inquiries in a variety of formats (e.g., phone calls, texts, emails, etc.) from all ten (10) regions of the U.S. Department of Health and Human Services.³
2. Provide teratology information to the general public and health professionals using teratology information resources, communicating this information in a logical, concise, and understandable way. This includes participation in public and professional education efforts, lectures, research projects, etc.
3. Facilitate and support communication and collaboration among all TIS programs (both those funded by this project and others), provide access to common database information, increase visibility, and support the work of the TIS.
4. Instituting and maintaining a mechanism that will serve to educate the program staff among all TIS by providing and updating available databases of potential environmental risks to reproduction.
5. Provide ongoing professional education to all TIS.
6. Maintain a national toll-free system that allocates calls from any location in the U.S. to the TIS in closest distance, region, or the TIS most appropriate to provide the risk assessment.
7. Require all funded sub-award regional TIS to participate in ongoing data collection and research efforts coordinated by the awardee and disseminate results.
8. Coordinate annual meetings for TIS staff.
9. Develop an online resource of evidence-based information on environmental exposures for women and providers that is culturally sensitive and at the appropriate literacy level.
 - Provide a user-friendly website with easily accessible resources targeting the public and health care providers.
 - Maintain an updated teratology information resource to assist in providing timely information to users. Resources should include: scientific literature, an on-line teratology database, access to consultants in teratology-related fields such as toxicology/pharmacology, occupational health, genetics, radiation biology, infectious disease, perinatology, and epidemiology.
10. Develop and implement innovative information dissemination strategies and tools to reach at-risk women.
 - Assure innovative means of providing one-on-one consultation, such a private online chat forums, email communication, etc.
 - Use other innovative platforms for widespread dissemination of information such as social media (Facebook, Twitter, etc.).

³ For more information on the HHS Regional Offices, please visit <http://www.hhs.gov/about/agencies/regional-offices/index.html>.

11. Develop and implement outreach strategies to target vulnerable and hard-to-reach populations.
12. Develop and implement a method to monitor emerging environmental public health issues nationally, regionally, or locally with a plan of how to respond quickly through outreach and education.
13. Develop and implement a plan to identify and refer eligible pregnant and breastfeeding women for research studies to advance the knowledge in the field.
14. Provide technical assistance (TA) and/or expertise to Title V programs participating in the Maternal and Child Environmental Health Collaborative Improvement and Innovation Network (CollIN) to address environmental issues.
15. Coordinate activities with other stakeholders (e.g. the Centers for Disease Control and Prevention (CDC), the Food and Drug Administration (FDA), the Environmental Protection Agency (EPA), Pediatric Environmental Health Specialty Units (PEHSUs)⁴, federally qualified health centers (FQHCs), Healthy Start Programs, and Home Visiting Programs).
 - Partner with other organizations serving the target populations to promote use of TIS services, such as organizations participating in and supporting Text4Baby.⁵

Successful applicants must demonstrate an understanding of the national teratogen information and service needs and how regional TIS programs can address these needs; have a plan in place to identify emerging environmental public health issues and how to respond quickly; and demonstrate the ability to develop strong partnerships with teratogen information specialists, federal partners, Pediatric Environmental Health Specialty Units (PEHSUs), primary health care provider communities, and public health officials. The successful applicant must also demonstrate an understanding of resources needed by health professionals to: identify individuals with or at-risk for environmental teratogen exposure, refer eligible pregnant and breastfeeding women for medical services and research studies, and develop strategies and tools to reach at-risk women.

2. Background

This program is authorized by the Social Security Act, Title V, § 501(a)(2) (42 U.S.C. 701(a)(2)). This authority directs HRSA (through grants, contracts, or otherwise) to provide for special projects of regional and national significance, research, and training with respect to maternal and child health and children with special health care needs (including early intervention training and services development), for genetic disease testing, counseling, and information development and dissemination programs, for

⁴ Pediatric Environmental Health Specialty Units are a source of medical information and advice on environmental conditions that influence children's health. They respond to requests for information throughout North America and offer advice on prevention, diagnosis, management, and treatment of environmentally-related health effects in children. For more information please visit <http://www.pehsu.net/>.

⁵ Text4baby is a free cell phone text messaging service for pregnant women and new moms. Text messages are sent three times a week with information on how to have a healthy pregnancy and a healthy baby. The text messages are timed to the pregnant woman's due date or the baby's date of birth. For more information, please visit <https://www.text4baby.org/>.

grants relating to hemophilia without regard to age, and for the screening of newborns for sickle cell anemia, and other genetic disorders and follow-up services.

Women of child bearing age may be exposed to numerous medications and other substances. For example, the use of medications during pregnancy has increased over the past 40 years in the United States and other developed countries, with over 50% of pregnant women having taken at least one prescription drug during pregnancy.⁶ Pregnant and breastfeeding women are also exposed to over-the-counter medications, dietary supplements, herbal products, chemicals, pollutants, infections, illicit drugs, alcohol, tobacco, and other agents. There are also emerging infectious diseases and re-emerging environmental toxins that can impact pregnant and breastfeeding women. These exposures may result in increased risk for adverse pregnancy outcomes such as birth defects, preterm delivery, and poor fetal/infant growth. These outcomes represent the major contributors to mortality and morbidity of infants in the U.S. Many studies have indicated that knowledge and awareness among women and their healthcare providers regarding potentially harmful effects of teratogens is limited.^{7,8,9} Data on the safety of these exposures are often very complex to interpret and even more challenging to communicate in an understandable manner to a pregnant or breastfeeding woman. Women need access to reliable information by experts who gather, synthesize, and translate this information for consumers as well as healthcare providers to ensure that evidence-based decisions can be made about exposures that should be avoided, as well as those that need not be avoided. This information has the potential to prevent adverse pregnancy and breastfeeding outcomes such as birth defects, preterm delivery, and poor fetal/infant growth - outcomes that represent the major contributors to mortality and morbidity of infants in the U.S.

In recent decades, growing awareness of the impact of environmental and medical exposures on pregnancy outcomes highlight the need for objective, and up to date information that is easily accessible by the public and health care providers. Teratology Information Services (TIS) are resource outlets for consumers and health care providers on the safety of exposures during pregnancy and lactation. TIS counseling centers conduct risk assessments of an individual's exposure or concerns, synthesizes complex information from the medical and scientific literature, and provides information to the individual or his/her health care provider. These risk assessments utilize the most up-to-date, interdisciplinary research as compiled by trained personnel.¹⁰ Resources and information provided by TIS have resulted in numerous health benefits including preventing congenital malformation, preventing unnecessary pregnancy terminations,

⁶ Mitchell, AA, Gilboa, SM, Werler, MM, Kelley, KE, Louik, C, Hernandez-Diaz, S. (2011). Medication Use during pregnancy, with particular focus on prescription drugs: 1976-2008. *American Journal of Obstetrics and Gynecology*, 205, 51.e1-8.

⁷ Morrical-Kline, KA, Walton, AM, Guildenbecher, TM. (2011). Teratogen Use in Women of Childbearing Potential: An Intervention Study. *Journal of the American Board of Family Medicine*, 24(3), 262-271.

⁸ Eisenberg, DL, Stika, C, Desai, A, Baker, D, Yost, KJ. (2010). Providing Contraception for Women Taking Potentially Teratogenic Medications: A Survey of Internal Medicine Physicians' Knowledge, Attitudes and Barriers. *Journal of General Internal Medicine*, 25(4), 291-7.

⁹ Goyal, MK, Hersh, AL, Badolato, G, Luan, X, Trent, M, Zaoutis, T, Chamberlain, JM. Underuse of Pregnancy Testing for Women Prescribed Teratogenic Medications in the Emergency Department. (2015). *Academic Emergency Medicine*, 22, 192-196.

¹⁰ Jones, KL. Framework for provision of teratology information services. (1994). *Reproductive Toxicology*, 8(5), 439-44.c

and reducing occupation risks, as well as correcting misinformation regarding reproductive risk and disseminating evidence-based research on a widespread level.¹¹

Historically, access to such services throughout the country has been limited. In FY 2014, MCHB first funded the Reproductive Environmental Health Network (REHN) to provide teratology information as well as collect data to add to the knowledge base of environmental risks. The REHN will end in FY 2017, and this funding opportunity will continue the work it began by supporting an organization to provide a network of regional TIS counseling centers to improve access to services, support the central collection of data to improve the knowledge base, and improve access to vulnerable and hard to reach populations.

Maternal and Child Health Bureau (MCHB)

MCHB is a component of HRSA within the U.S. Department of Health and Human Services (HHS). Since its inception, maternal and child health (MCH) services awards have provided a foundation for ensuring the health of our nation's mothers and children. The mission of MCHB is to provide national leadership in partnership with key stakeholders, to reduce disparities, assure availability of quality care, and strengthen the nation's MCH/public health infrastructure in order to improve the physical and mental health, safety and well-being of the MCH population.

MCHB recently revised its national performance measure (NPM) framework that focuses on the establishment of a set of population-based measures. The 15 NPMs address key national MCH priority areas that represent the following six MCH population domains: (1) Women/Maternal Health; (2) Perinatal/Infant Health; (3) Child Health; (4) Children and Youth with Special Health Care Needs (CYSHCN); (5) Adolescent Health; and (6) Cross-cutting or Life Course. Learn more about MCHB and the six MCH population domains at <http://mchb.hrsa.gov>.

II. Award Information

1. Type of Application and Award

Types of applications sought: New and Competing Continuation

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

In addition to the usual monitoring and technical assistance provided under the cooperative agreement, **HRSA Program involvement shall include:**

- Participation in meetings conducted during the period of the cooperative agreement;

- Ongoing review and approval of activities and procedures to be established and implemented for accomplishing the scope of work;
- Review of project information prior to dissemination;
- Review of information on project activities;
- Assistance around establishing and facilitating effective collaborative relationships with federal and state agencies, MCHB award projects, other resource centers, and other entities that may be relevant to the project's mission;
- Participation in disseminating project information;
- Working with the recipient to ensure that they are compliant and not duplicating the work of other MCHB-funded projects; and
- Provision of information resources.

The cooperative agreement recipient's responsibilities shall include:

- Adhering to HRSA guidelines pertaining to acknowledgement and disclaimer on all products produced by HRSA award funds (see Acknowledgement of Federal Funding in Section 2.2 of HRSA's [SF-424 Application Guide](#));
- Meeting the deadlines for information and reports as required by the cooperative agreement;
- Communicating and collaborating on an ongoing basis with HRSA;
- Providing the federal project officer the opportunity to review project information prior to dissemination;
- Working with the federal project officer to review information on project activities as described within this award announcement;
- Establishing contacts that may be relevant to the project's mission such as federal and non-federal partners, and other MCHB funding projects that may be relevant to the project's mission;
- Collaborating with national groups, TIS and other federal agencies, in providing expert opinion and consultation that informs national planning, program, and policy development around improving maternal and neonatal health;
- Collaborating with various MCHB divisions/programs/initiatives, such as the Title V Block Grant Program, the Healthy Start and Perinatal Services Program, the Maternal, Infant, and Early Childhood Home Visiting Program, the Regional Genetics Network; the National Coordinating Center for the Regional Genetics Network; the National Genetics Education and Family Support Center, the Collaborative Improvement & Innovation Network (CoIIN) to Reduce Infant Mortality; the Maternal and Child Environmental Health CoIIN;
- Assuring that all patient and clinical consultation are confidential;
- Assuring that all consultations are available in English and Spanish, and exploring the provision availability of services in additional languages; and
- Developing a plan for project sustainability after the period of federal funding ends. Awardees are expected to sustain key elements of their funding projects as outlined below.

Data Rights

All publications the cooperative agreement recipient develops or purchases with funds awarded under this announcement must be consistent with the requirements of the program. Pursuant to 45 CFR § 75.322(b), the cooperative agreement recipient owns the copyright for materials that it develops under this cooperative agreement, and

HHS reserves a royalty-free, nonexclusive, and irrevocable right to reproduce, publish, or otherwise use those materials for federal purposes, and to authorize others to do so. In addition, pursuant to 45 CFR § 75.322(d), the Federal Government has the right to obtain, reproduce, publish, or otherwise use data produced under this cooperative agreement and has the right to authorize others to receive, reproduce, publish, or otherwise use such data for federal purposes, e.g., to make it available in government-sponsored databases for use by other researchers. The specific scope of HRSA rights with respect to a particular award-supported effort will be further addressed in the Notice of Award (NoA). Data and copyright-protected works developed by a sub-recipient also are subject to the Federal Government's license and data rights.

2. Summary of Funding

Approximately \$1,200,000 is expected to be available annually to fund one (1) recipient. You may apply for a ceiling amount of up to \$1,200,000 per year. The actual amount available for fiscal year 2017 will not be determined until enactment of the final FY 2017 federal budget. This program announcement is subject to the appropriation of funds, and is a contingency action taken to ensure that, should funds become available for this purpose, applications can be processed, and funds can be awarded in a timely manner. The project period is September 1, 2017 through August 31, 2022 (five (5) years). Funding beyond the first year is dependent on the availability of appropriated funds for the Maternal and Child Environmental Health Network in subsequent fiscal years, satisfactory recipient performance, and a decision that continued funding is in the best interest of the Federal Government.

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

III. Eligibility Information

1. Eligible Applicants

Per 42 CFR § 51a.3(a), any public or private entity, including an Indian tribe or tribal organization (as those terms are defined at 25 U.S.C. 450b) is eligible to apply.

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

2. Cost Sharing/Matching

Cost sharing/matching is not required for this program.

3. Other

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

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

NOTE: Multiple applications from an organization are not allowable.

If for any reason (including submitting to the wrong funding opportunity number or making corrections/updates), an application is submitted more than once prior to the application due date, HRSA will only accept 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.

IV. Application and Submission Information

1. Address to Request Application Package

HRSA **requires** applicants for this FOA to apply electronically through Grants.gov. You must download the SF-424 application package associated with this FOA following the directions provided at <http://www.grants.gov/applicants/apply-for-grants.html>.

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 FOA to do otherwise.

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 **80 pages** when printed by HRSA. The page limit includes the abstract, project and budget narratives, attachments, and letters of commitment and support required in the *Application Guide* and this FOA. Standard OMB-approved forms that are included in the application package are NOT included in the page limit. Indirect Cost Rate Agreement and proof of non-profit status (if applicable) will not be counted in the page limit. **We strongly urge 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 the announcement.

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) Where the prospective recipient is unable to attest to any of the statements in this certification, such prospective recipient shall attach an explanation to this proposal.

See Section 4.1 viii of HRSA's [SF-424 Application Guide](#) for additional information on this and other 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), please 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 and well organized so that reviewers can understand the proposed project.

Use the following section headers for the Narrative:

- ***INTRODUCTION -- Corresponds to Section V's Review Criterion 1 (Need)***
Briefly describe the purpose of the proposed project. You should briefly describe your appropriate expertise and understanding of the issues related to this program.
- ***NEEDS ASSESSMENT -- Corresponds to Section V's Review Criterion 1 (Need)***
The target population and its unmet health needs must be described and documented in this section. Disparities based on race, ethnicity, gender identity, sexual orientation, geography, socioeconomic status, disability status, primary language, health literacy, and other relevant dimensions should be considered. You should also consider people with disabilities; non-English speaking populations; lesbian, gay, bisexual, and transgender populations; people with limited health literacy; or populations that may otherwise be overlooked when identifying your target population. Include socio-cultural determinants of health and health disparities impacting the population or communities served and unmet. Demographic data should be used and cited whenever possible to support the information provided. Please discuss any relevant barriers in the service area that

the project hopes to overcome. This section will help reviewers understand the community and/or organization that will be served by the proposed project.

This section should help reviewers understand the national landscape regarding maternal and child environment health as well as pre-and post-natal environmental exposures.

- *METHODOLOGY -- Corresponds to Section V's Review Criterion 2 (Response)*
Propose methods that will be used to address the stated needs and meet each of the previously described program goals, requirements and objectives in this FOA. As appropriate, include development of effective tools and strategies for ongoing staff training, outreach, collaborations, clear communication, and information sharing/dissemination with efforts to involve patients, families and communities of culturally, linguistically, socio-economically and geographically diverse backgrounds if applicable. Include a plan to disseminate reports, products, and/or project outputs so project information is provided to key target audiences. Be sure to describe the following:
 - Plans for supporting an infrastructure of national and regional TIS counseling centers that can respond to teratogen inquiries in a variety of formats (e.g., phone calls, texts, emails, etc.) located across the U.S. and within all ten (10) HRSA regions.
 - Plans for establish subawards with organizations to provide services for each region that include provisions for the awardee and the sub-awardee partners to work together.
 - Plans for provide teratology information to the general public and health professionals using teratology information resources, communicating this information in a logical concise, and understandable way.
 - Methodology for facilitating and supporting communication and collaboration among all TIS programs, provide access to common database information, increase visibility, and support the work of the TIS (both those funded and not funded by the project).
 - Plans to develop and/or update available databases of potential environmental risks to reproduction.
 - Provide ongoing professional education to all TIS.
 - Plans to develop and/or maintain a national toll-free system that allocates calls from any location in the U.S. to the TIS in closest distance, region, or the TIS most appropriate to provide the risk assessment.
 - Methodology for collecting ongoing data all funded sub-awarded regional TIS, coordinate research efforts and disseminate results.
 - Plans for conducting annual meetings for TIS staff.
 - Development of an online resource of evidence-based information on environmental exposures for women and providers that is culturally sensitive and at the appropriate literacy level.
 - Development of a user-friendly website with easily accessible resources targeting the public and health care providers
 - Plans for maintaining an updated teratology information resource to assist in providing timely information to users. Resources should include: scientific

- literature, an on-line teratology database, access to consultants in teratology-related fields such as toxicology/pharmacology, occupational health, genetics, radiation biology, infectious disease, perinatology, and epidemiology.
- Plans for developing and implementing innovative information dissemination strategies and tools to reach at-risk women.
 - Plans for developing innovative strategies for providing one-on-one consultation, such as private online chat forums, email communication, etc.
 - Plans to use other innovative platforms for widespread dissemination of information such as social media (Facebook, Twitter, etc.).
 - Partnership with other organizations serving the target populations to promote use of TIS services, such as organizations participating in and supporting Text4Baby and the PEHSUs.
 - Development and implementation of outreach strategies to target vulnerable and hard-to-reach populations.
 - Plans on how teratology information will be provided to the general public and health professionals using teratology information resources, communicating this information in a logical, concise, and understandable way.
 - Plans on monitoring emerging environmental public health issues with a plan of how to respond quickly through outreach and education.
 - Plans to identify and refer eligible pregnant and breastfeeding women for research studies to advance the knowledge in the field.
 - Methodology for providing technical assistance and/or expertise to Title V programs participating in the Maternal and Child Environmental Health Collaborative Improvement and Innovation Network (CoIIN) to address environmental issues.
 - Plans to develop various products for target audiences that may include, but are not limited to background papers and briefs, written issue analyses, organizational policy statements, etc.
 - Dissemination of information to target audiences through such mechanisms such as sponsorship of training workshops and distance learning activities to assist the audiences in gaining relevant and current information and updates.
 - Assistance to professional organizations in disseminating educational materials to their membership.
 - Strategies to reach out to and provide ongoing training opportunities and support and for providers, provider membership organizations, and TIS staff.
 - Coordination of activities with other stakeholders (e.g. CDC, FDA, EPA, PEHSUs, FQHCs, Healthy Start Programs, and Home Visiting Programs).

You must also propose a plan for project sustainability after the period of federal funding ends. Recipients 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.

- *WORK PLAN -- Corresponds to Section V's Review Criteria 2 (Response) and 4 (Impact)*
Describe the activities or steps that will be used to achieve each of the activities proposed during the entire project period in the Methodology section. Use a

timeline that includes each activity and identifies responsible staff. As appropriate, identify meaningful support and collaboration with key stakeholders in planning, designing and implementing all activities, including development of the application and, further, the extent to which these contributors will assist in addressing the cultural, racial, linguistic and geographic needs of the populations and communities served.

You must submit a logic model for designing and managing the project. A logic model is a one-page diagram that presents the conceptual framework for a proposed project and explains the links among program elements. While there are many versions of logic models, for the purposes of this announcement the logic model should summarize the connections between the:

- Goals of the project (e.g., objectives, reasons for proposing the intervention, if applicable);
 - Assumptions (e.g., beliefs about how the program will work and its supporting resources. Assumptions should be based on research, best practices, and experience.);
 - Inputs (e.g., organizational profile, collaborative partners, key staff, budget, other resources);
 - Target population (e.g., the individuals to be served);
 - Activities (e.g., approach, listing key intervention, if applicable);
 - Outputs (i.e., the direct products or deliverables of program activities); and
 - Outcomes (i.e., the results of a program, typically describing a change in people or systems).
- *RESOLUTION OF CHALLENGES -- Corresponds to Section V's Review Criterion 2 (Response)*
Discuss challenges that you are likely to encounter in designing and implementing the activities described in the work plan, and approaches that will be used to resolve such challenges.
- *EVALUATION AND TECHNICAL SUPPORT CAPACITY -- Corresponds to Section V's Review Criteria 3 (Evaluative Measures) and 5 (Resources/Capabilities)*
You must describe the plan for the program performance evaluation that will contribute to continuous quality improvement. The program performance evaluation should monitor ongoing processes and the progress towards the goals and objectives of the project. Include descriptions of the inputs (e.g., organizational profile, collaborative partners, key staff, budget, and other resources), key processes, and expected outcomes of the funded activities.

You must describe the systems and processes that will support your organization's performance management requirements through effective tracking of performance outcomes, including a description of how the organization will collect and manage data (e.g., assigned skilled staff, data management software) in a way that allows for accurate and timely reporting of performance outcomes. Describe current experience, skills, and knowledge, including individuals on staff, materials published, and previous work of a similar nature. As appropriate, describe the data collection strategy to collect, analyze and track data to measure process and impact/outcomes, with different cultural groups (e.g., race, ethnicity, language) and explain how the data will be used to inform program development and service delivery. You must describe any potential obstacles for implementing the program performance evaluation and how those obstacles will be addressed.

Baseline data for the program objectives will be collected by August 2018.

TIS will be expected to provide data on how they are achieving the goals of the program, including collecting information on the following:

1. Program objectives listed under Section I.1. Purpose.
 2. Establishing operational call centers in all ten (10) HHS Regions.
 3. Providing a public online repository to provide resources on environmental risk information.
 4. Developing an outreach plan for vulnerable and hard-to-reach populations.
 5. Developing an ongoing communication plan with stakeholders.
 6. Number and type of technical assistance provided to Title V programs.
 7. Number and type of coordinated activities with stakeholders.
 8. Plans and methods to address emerging and urgent environmental public health issues.
 9. Plans and methods to track and describe response to emerging public health environmental health issues (e.g., funds/mechanisms used to develop educational information and/or provide services at local and national levels).
- *ORGANIZATIONAL INFORMATION -- Corresponds to Section V's Review Criterion 5 (Resources/Capabilities)*
Provide information on your organization's current mission and structure, scope of current activities, and an organizational chart, and describe how these all contribute to the ability of the organization to conduct the program requirements and meet program expectations. Provide information on the program's resources and capabilities to support provision of culturally and linguistically competent and health literate services. Describe how the unique needs of target populations of the communities served are routinely assessed and improved.

You should provide a description of the organizational structure, the decision-making process and approaches that will be employed to work cooperatively with the TIS centers and other partners and stakeholders. Include an effective communication plan that ensures regular communication and collaboration among and between the TIS centers. Describe responsibilities for collecting and analyzing data and how the results will be used.

Describe your expertise or understanding of the national teratogen information and service needs and how regional TIS programs can address these needs as well as your understanding of resources needed by health professionals to: identify individuals with or at-risk for environmental teratogen exposure; refer eligible pregnant and breastfeeding women for medical services (when appropriate) and research studies; and develop strategies and tools to reach at-risk women.

NARRATIVE GUIDANCE	
In order to ensure that the Review Criteria are fully addressed, this table provides a crosswalk between the narrative language and where each section falls within the review criteria.	
<u>Narrative Section</u>	<u>Review Criteria</u>
Introduction	(1) Need
Needs Assessment	(1) Need
Methodology	(2) Response
Work Plan	(2) Response and (4) Impact
Resolution of Challenges	(2) Response
Evaluation and Technical Support Capacity	(3) Evaluative Measures and (5) Resources/Capabilities
Organizational Information	(5) Resources/Capabilities
Budget and Budget Narrative	(6) Support Requested – the budget section should include sufficient justification to allow reviewers to determine the reasonableness of the support requested.

iii. Budget

See Section 4.1.iv of HRSA’s [SF-424 Application Guide](#). Please note: the directions offered in the SF-424 Application Guide may differ from those offered by Grants.gov. Please follow the instructions included in the Application Guide and, *if applicable*, the additional budget instructions provided below.

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

requirement, as applicable.

The Consolidated Appropriations Act, 2016, Division H, § 202, (P.L. 114-113) 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. Note that these or other salary limitations may apply in FY 2017, as required by law.

iv. Budget Narrative

See Section 4.1.v. of HRSA’s [SF-424 Application Guide](#).

v. Program-Specific Forms

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

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

2) Performance Measures for the Maternal and Environmental Health Network

To inform successful applicants of their reporting requirements, the listing of MCHB administrative forms and performance measures for this program can be found in Section “VI. Award Administration Information” of this FOA.

NOTE: The performance measures and data collection information is for your PLANNING USE ONLY. These forms are not to be included as part of this application.

vi. Attachments

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

Attachment 1: Work Plan

Attach the work plan for the project that includes all information detailed in Section IV. ii. Project Narrative. Include the required logic model in this attachment.

Attachment 2: Staffing Plan and Job Descriptions for Key Personnel (see Section 4.1. of HRSA's [SF-424 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 3: Biographical Sketches of Key Personnel

Include biographical sketches for persons occupying the key positions described in Attachment 2, not to exceed two pages in length per person. 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.

Attachment 4: Letters of Agreement 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 agreements should clearly describe the roles of the contractors and any deliverable. Letters of agreement must be dated.

Attachment 5: Project Organizational Chart

Provide a one-page figure that depicts the organizational structure of the project.

Attachments 6: Tables, Charts, etc.

To give further details about the proposal (e.g., Gantt or PERT charts, flow charts, etc.).

Attachment 7: For Multi-Year Budgets--Fifth Year Budget (NOT counted in page limit), if applicable

After using columns (1) through (4) of the SF-424A Section B for a five-year project period, you will need to submit the budget for the fifth year as an attachment. Use the SF-424A Section B. See Section 4.1.iv of HRSA's [SF-424 Application Guide](#).

Attachment 8: Summary Progress Report

ACCOMPLISHMENT SUMMARY (FOR COMPETING CONTINUATIONS ONLY)

A well-planned accomplishment summary can be of great value by providing a record of accomplishments. It is an important source of material for HRSA in preparing annual reports, planning programs, and communicating program-specific accomplishments. The accomplishments of competing continuation applicants are carefully considered during the review process; therefore, you are advised to include previously stated goals and objectives in your application and

emphasize the progress made in attaining these goals and objectives. Because the Accomplishment Summary is considered when applications are reviewed and scored, **competing continuation applicants who do not include an Accomplishment Summary may not receive as high a score as applicants who do.**

The accomplishment summary 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 9: Request for Funding Priority

To receive a funding priority, include a statement that you are eligible for a funding priority and identify the preference. Include documentation of this qualification. See [Section V.2](#).

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](#).

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

4. Submission Dates and Times

Application Due Date

The due date for applications under this FOA is *January 20, 2017 at 11:59 P.M. Eastern Time.*

See Section 8.2.5 – Summary of e-mails from Grants.gov of HRSA's [SF-424 Application Guide](#) for additional information.

5. Intergovernmental Review

Maternal and Child Environmental Health Network 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 Application Guide](#) for additional information.

6. Funding Restrictions

You may request funding for a project period of up to five (5) years, at no more than \$1,200,000 per year. Awards to support projects beyond the first budget year will be contingent upon Congressional appropriation, satisfactory progress in meeting the project's objectives, and a determination that continued funding would be in the best interest of the Federal Government.

- Any foreign travel (using federal award dollars or program income) must be submitted to HRSA for approval through the Electronic Hand Books (EHBs) under Prior Approval – Other.

The General Provisions in Division H of the Consolidated Appropriations Act, 2016 (P.L. 114-113) 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 FY 2017, 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 the all federal funding requirements and prohibitions such as lobbying, gun control, abortion, etc. 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.

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 the application. The entire proposal will be considered during objective review.

Review criteria are used to review and rank applications. The Maternal and Child Environmental Health Network has six (6) review criteria:

Criterion 1: NEED (5 points) – Corresponds to Section IV's Introduction and Needs Assessment

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

- The extent to which the applicant details their understanding of the purpose for the project.
- The extent to which the applicant describes the current availability of TIS services and the existing need for additional services on a geographic and population-based level, including reaching vulnerable and hard to reach populations.
- The extent to which the applicant describes the need to provide the most current information to the public and health care professionals.
- The extent to which the applicant describes the need to advance the knowledge base.

Criterion 2: RESPONSE (30 points) – Corresponds to Section IV’s Methodology, Work Plan, and Resolution of Challenges

The extent to which the proposed project responds to the “Purpose” included in the program description. The strength of the proposed goals and objectives and their relationship to the identified project. The extent to which the activities described in the application are capable of addressing the problem and attaining the project objectives.

Methodology (15 points)

- The extent to which the applicant describes plans for supporting national and regional TIS counseling centers that can respond to teratogen inquiries in a variety of formats (e.g., phone calls, texts, emails, etc.) located across the U.S. and within all ten (10) HHS regions.
- The extent to which the applicant describes plans to establish subawards with organizations to provide services for each HHS region that include provisions for the awardee and the sub-awardee partners to work together.
- The extent to which the applicant is able to provide teratology information to the general public and health professionals using teratology information resources, communicating this information in a logical concise, and understandable way.
- The extent to which the applicant clearly describes the methodology for facilitating and supporting communication and collaboration among all TIS programs, provides access to common database information, increases visibility, and supports the work of the TIS counseling centers.
- The extent to which the applicant plans to develop and/or update available databases of potential environmental risks to reproduction, and plans to maintain an updated teratology information resource to assist in providing timely information to users.
- The extent to which the applicant describes a strategy to provide ongoing professional education to all TIS counseling center staff.
- The extent to which the applicant outlines the methodology for collecting ongoing data from all funded sub-awarded regional TIS counseling centers, coordinate research efforts and disseminate results.
- The extent to which the applicant demonstrates a reasonable approach for the development of an online resource of evidence-based information on environmental exposures for women and providers that is culturally sensitive and at the appropriate literacy level, and plans to develop a user-friendly website with easily accessible resources targeting the public and health care providers;
- The extent to which the applicant describes plans for developing and implementing innovative information dissemination strategies and tools to reach at-risk women, as well as outreach strategies to target vulnerable and hard-to-reach populations.
- The extent to which the applicant demonstrates plans for developing strategies for providing one-on-one consultation, such a private online chat forums, email communication, etc., as well as plans to use other platforms for widespread dissemination of information such as social media (Facebook, Twitter, etc.);

- The extent to which the applicant describes plans for partnering with other organizations serving the target populations to promote use of TIS counseling center services
- The extent to which the applicant provides a reasonable approach for monitoring emerging environmental public health issues with a plan of how to respond quickly through outreach and education.
- The extent to which the applicant describes a plan to identify and refer eligible pregnant and breastfeeding women to medical services (if necessary and appropriate) and for research studies to advance the knowledge in the field.
- The extent to which the applicant outlines the methodology for providing technical assistance and/or expertise to Title V programs participating in the Maternal and Child Environmental Health Collaborative Improvement and Innovation Network (CoIIN) to address environmental issues.
- The extent to which the applicant demonstrates plans to develop various products for target audiences that may include, but are not limited to background papers and briefs, written issue analyses, organizational policy statements, etc.
- The extent to which the applicant describes a strategy for dissemination of information to target audiences through such mechanisms such as sponsorship of training workshops, distance learning activities, provide assistance to professional organizations in disseminating educational materials to their membership.
- The extent to which the applicant describes plans to coordinate activities with other stakeholders (e.g. the Centers for Disease Control and Prevention (CDC), the Food and Drug Administration (FDA), the Environmental Protection Agency (EPA), Pediatric Environmental Health Units (PEHSUs) federally qualified health centers (FQHCs), Healthy Start Programs, and Home Visiting Programs).

Work Plan (10 points)

- The extent to which the applicant clearly outlines the propose goals and activities and their relationship to the project.
- The extent to which the applicant relates and corresponds to the needs assessment and activities outlined in the Methodology section.
- The extent to which the applicant includes clearly written goals, objectives, time-frames, responsible staff and methods for evaluation.
 - Degree to which the objectives relate to each goal.
 - Extent to which the timeframe is reasonable for achieving project goals.
 - Extent to which the evaluative and performance measures correspond to the goals of the project.
- The extent to which the applicant includes a logic model that clearly identifies the goals, assumptions, target population, activities, outputs, outcomes, time-frames, objectives, responsible staff, and methods of evaluation.

Resolution of Challenges (5 points)

- The extent to which the applicant shows how challenges noted will be resolved.
- The extent to which proposed resolutions are feasible.

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

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

Criterion 4: IMPACT (10 points) – Corresponds to Section IV’s Work Plan

- The extent and effectiveness of plans for dissemination of project results, and the extent to which project results may be national in scope.
- The degree to which the project activities are replicable and the sustainability of the program beyond the federal funding.
- The extent to which the application describes the resources, strategy, goals, activities and the impact expected in terms of increased knowledge and use of teratogen information services among the public, providers, and vulnerable and hard-to-reach populations.
- The extent to which a competing continuation applicant met the goals and objectives of the previous grant per Summary Progress Report in Attachment 8.

Criterion 5: RESOURCES/CAPABILITIES (30 points) – Corresponds to Section IV’s Evaluation and Technical Support Capacity and Organizational Information

- The extent to which project personnel are qualified by training and/or experience to implement and carry out the project. The capabilities of the applicant organization and the quality and availability of facilities and personnel to fulfill the needs and requirements of the proposed project. For competing continuations, past performance will also be considered.
- The extent to which the applicant demonstrates experience and effectiveness in supporting national/regional TIS counseling centers, providing teratology information to the general public and health professionals, facilitating and supporting communication and collaboration among all TIS programs, instituting and maintaining a mechanism that will serve to educate the program staff among all TIS, and providing ongoing professional education to all TIS.

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

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

- The extent to which costs, as outlined in the budget and required resources sections, are reasonable given the scope of work.
- The extent to which key personnel have adequate time devoted to the project to achieve project objectives.

2. Review and Selection Process

The objective review provides advice to the individuals responsible for making award decisions. The highest ranked applications receive priority consideration for award within available funding. In addition to the ranking based on merit criteria, HRSA approving officials also may apply other factors in award selection, (e.g., geographical distribution), if specified below in this FOA. 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 Application Guide for more details](#).

Funding Priorities

This program includes a funding priority. A funding priority is defined as the favorable adjustment of combined review scores of individually approved applications when applications meet specified criteria. Prior to final funding decisions, HRSA will assess all applications within the fundable range for eligibility to receive priority points. You do not need to request a funding priority. To minimize potential award activity disruptions and maximize the effective use of federal dollars, HRSA will award priority points to competing continuation applicants according to the criteria below.

Program Compliance (5 points): HRSA will award 5 points if: 1) you are a competing continuation applicant applying to continue serving the ten (10) HRSA regions by supporting a network of national and regional teratogen information service (TIS) counseling centers; and 2) you have successfully achieved the previous award goals and objectives based on progress reports submitted during the project period and a detailed accomplishment summary (submitted with this application) describing how the objectives were implemented and achieved.

3. Assessment of Risk and Other Pre-Award Activities

The Health Resources and Services Administration may elect not to fund applicants with management or financial instability that directly relates to the organization's ability to implement statutory, regulatory or other requirements ([45 CFR § 75.205](#)).

Applications receiving a favorable objective review that HRSA is considering for funding are reviewed for other considerations. These include, as applicable, cost analysis of the project/program budget, assessment of the applicant's 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 awards 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 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 the applicant that is in the [Federal Awardee Performance and Integrity Information System \(FAPIS\)](#). An applicant may review and comment on any information about itself that a federal awarding agency previously entered. HRSA will consider any comments by the applicant, in addition to other information in [FAPIS](#) in making a judgment about the applicant's integrity, business ethics, and record of performance under federal awards when completing the review of risk posed by applicants as described in [45 CFR § 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 FAPIS ([45 CFR § 75.212](#)).

4. Anticipated Announcement and Award Dates

HRSA anticipates issuing/announcing awards prior to the start date of September 1, 2017.

VI. Award Administration Information

1. Award Notices

HRSA will issue the Notice of Award prior to the start date of September 1, 2017. See Section 5.4 of HRSA's [SF-424 Application Guide](#) for additional information.

2. Administrative and National Policy Requirements

See Section 2 of HRSA's [SF-424 Application Guide](#).

Human Subjects Protection:

Federal regulations (45 CFR part 46) require that applications and proposals involving human subjects must be evaluated with reference to the risks to the subjects, the adequacy of protection against these risks, the potential benefits of the research to the subjects and others, and the importance of the knowledge gained or to be gained. If research involving human subjects is anticipated, recipients must meet the requirements of the HHS regulations to protect human subjects from research risks as specified in the Code of Federal Regulations, Title 45 – Public Welfare, Part 46 – Protection of Human Subjects (45 CFR part 46), available online at <http://www.hhs.gov/ohrp/humansubjects/guidance/45cfr46.html>.

3. Reporting

On June 10, 2016, the Office of Management and Budget approved MCHB to collect new performance measures from recipients as part of its Discretionary Grant Information System (DGIS). The new performance measures reflect MCHB's strategic

and priority areas including financial and demographic information, health domain and program-specific measures, and program-specific measures that highlight the unique characteristics of discretionary grant/cooperative agreement projects that are not already captured. Collectively, these data communicate the MCHB “story” to a broad range of stakeholders on the role of the Bureau in addressing the needs of maternal and child health populations. These performance data will also serve several purposes, including recipient monitoring, performance reporting, MCHB program planning, and the ability to demonstrate alignment between MCHB discretionary programs and the MCH Title V Block Grant program.

The new reporting package can be reviewed at:

http://mchb.hrsa.gov/sites/default/files/mchb/Data/Discretionary_Grant_Information_System_Performance_Measure_Update.pdf.

New and continuing awards issued on or after October 1, 2016, will be required to report on the new measures. For successful competing continuation awards, recipients will report on their previous year activities (defined as those completed before October 1, 2016) using the forms and measures in DGIS as assigned in the previous FOA.

The successful applicant under this FOA must comply with Section 6 of HRSA’s [SF-424 Application Guide](#) and the following reporting and review activities:

- 1) **Progress Report(s).** The recipient must submit a progress report to HRSA on an **annual** basis. Further information will be provided in the award notice.
- 2) **Final Report Narrative.** The recipient must submit a final report narrative to HRSA after the conclusion of the project.
- 3) **Performance Reports.** HRSA has modified its reporting requirements for SPRANS projects, CISS projects, and other grant/cooperative agreement programs administered by MCHB to include national performance measures that were developed in accordance with the requirements of the Government Performance and Results Act (GPRA) of 1993 (Public Law 103-62). This Act requires the establishment of measurable goals for federal programs that can be reported as part of the budgetary process, thus linking funding decisions with performance. Performance measures for states have also been established under the Block Grant provisions of Title V of the Social Security Act, MCHB’s authorizing legislation.

a) Performance Measures and Program Data

After the Notice of Awards (NoA) is released, the Project Officer will inform recipients of the administrative forms and performances measures they must report.

b) Performance Reporting Timeline

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

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

c) Project Period End Performance Reporting

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

4) **Integrity and Performance Reporting.** The Notice of Award will contain a provision for integrity and performance reporting in [FAPIIS](#), as required in [45 CFR part 75 Appendix XII](#).

VII. Agency Contacts

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

Djuana Gibson
Grants Management Specialist
Division of Grants Management Operations, OFAM
Health Resources and Services Administration
5600 Fishers Lane
Rockville, MD 20857
Telephone: (301) 301-443-3243
Fax: (301) 443-4293
E-mail: djgibson@hrsa.gov

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

Ann Ferrero, MPH
Public Health Analyst
Division of Services for Children with Special Health Care Needs
Maternal and Child Health Bureau
ATTN: Maternal and Child Environmental Health Network
Health Resources and Services Administration
5600 Fishers Lane, Room 18N-100C
Rockville, MD 20857
Telephone: (301) 443-3999
E-mail: aferrero@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, 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
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

Logic Models:

Additional information on developing logic models can be found at the following website: <http://www.acf.hhs.gov/sites/default/files/fysb/prep-logic-model-ts.pdf>

Although there are similarities, a logic model is not a work plan. A work plan is an "action" guide with a time line used during program implementation; the work plan provides the "how to" steps. Information on how to distinguish between a logic model and work plan can be found at the following website:

<http://www.cdc.gov/healthyouth/evaluation/pdf/brief5.pdf>.

Technical Assistance:

A technical assistance webinar will be held on Wednesday, November 9, 2016 to assist applicants in preparing their applications. The purpose of the webinar is to review the funding opportunity announcement (FOA), and to provide clarifying information that may be necessary. There will be a Q & A session to answer any questions.

Date: Wednesday, November 9, 2016

Time: 2:00 PM - 3:00 PM Eastern Time

Webinar Link: <https://hrsa.connectsolutions.com/mcehn-foa-webinar/>

Conference Code: 888-826-9572

Conference Passcode: 77014936

IX. Tips for Writing a Strong Application

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