

Notice of Funding Opportunity

Application due May 6, 2024

HRSA

Health Resources & Services Administration

Bureau of Health Workforce








Division of Nursing and Public Health

Opioid-Impacted Family Support Program

Opportunity number: HRSA-24-016



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Before you begin

If you believe you are a good candidate for this funding opportunity, secure your [SAM.gov](#) and [Grants.gov](#) registrations now. If you are already registered, make sure your registration is active and up-to-date.

SAM.gov registration (this can take several weeks)

You must have an active account with SAM.gov. This includes having a Unique Entity Identifier (UEI).

[See Step 2: Get Ready to Apply](#)

Grants.gov registration (this can take several days)

You must have an active Grants.gov registration. Doing so requires a Login.gov registration as well.

[See Step 2: Get Ready to Apply](#)

Apply by May 6, 2024

Applications are due by 11:59 p.m. Eastern Time on May 6, 2024.



Step 1:

Review the Opportunity

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Basic information

Health Resources and Services Administration (HRSA)

Bureau of Health Workforce

Division of Nursing and Public Health

Support families, especially children whose parents or guardians are impacted by opioid use disorders, by increasing skills and knowledge of behavioral health specialists

Summary

This program addresses the need to support training programs that increase the skills and knowledge of peer support specialists and other behavioral health-related paraprofessionals who are prepared to provide support services to families, especially children, whose parents or guardians are impacted by opioid use disorders (OUD) and other substance use disorders (SUD). A focus is placed on supporting children who have experienced trauma or are at risk for mental health disorders.

Funding detail

Application Type: New, Competing Continuations

Expected total available funding: \$16,800,000

Expected number of awards: Approximately 28 grants

Funding range per award: Up to \$600,000

We plan to fund awards in four 12-month budget periods for a total 4-year period of performance of September 1, 2024, to August 31, 2028.



To help you find what you need, this NOFO uses internal links. In Adobe Reader, you can go back to where you were by pressing Alt + Left Arrow on your keyboard.



Have questions?
Go to [Contacts & Support](#).

Key facts

Opportunity Name:

Opioid-Impacted Family Support Program

Opportunity Number:

HRSA-24-016

Federal Assistance

Listing Number:

93.732

Statutory Authority:

42 U.S.C. § 294e-1(a)(4)
(Section 756(a)(4) of the Public Health Service (PHS) Act

Key dates

Application deadline:

May 6, 2024

NOFO issue date:

March 7, 2024

Expected award date:

by September 1, 2024

Expected start date:

September 1, 2024

Eligibility

Who can apply

Eligible applicants

We will only accept applications from state-licensed mental health nonprofit or state-licensed mental health for-profit organizations. These organizations include, but are not limited to, entities licensed or certified by an authorized political subdivision or instrumentality of a state to provide training in behavioral health. These may include academic institutions, including universities, community colleges and technical schools, which must be accredited by a nationally recognized accrediting agency, as specified by the U.S. Department of Education.

Domestic community-based organizations, public entities, tribes, and tribal organizations may apply for these funds, if otherwise eligible.

Individuals are not eligible to apply.

Only these types of domestic organizations (see note) may apply:

Institutions of higher education

- Public and private institutions of higher education, technical schools, and health professions schools/programs

Nonprofit entities

- Nonprofits having a 501(c)(3) IRS status
- Nonprofits with an IRS status other than 501(c)(3)

Private for-profit entities

- For-profit organizations
- Small businesses

Public entities

- State governments, including the District of Columbia, domestic territories, and freely associated states
- County governments
- City or township governments

- Special district governments
- Independent school districts

Tribes & tribal organizations

- Native American tribal governments
- Native American tribal organizations

“Domestic” means the 50 states, the District of Columbia, the Commonwealth of Puerto Rico, the Northern Mariana Islands, American Samoa, Guam, the U.S. Virgin Islands, the Federated States of Micronesia, the Republic of the Marshall Islands, and the Republic of Palau.

Other eligibility criteria

In addition to providing proof of eligibility ([Attachment 1](#)), your training program must be accredited by a nationally recognized accrediting agency, as specified by the U.S. Department of Education, or must be approved by a state or tribal government to provide a behavioral health-related paraprofessional certificate training program. You must provide a copy of your active accreditation or active approval from state government as [Attachment 6](#).

We will not consider any application that fails to submit Attachment 6.

Applicants must maintain their accreditation or state approval status throughout the performance period and notify us of any change in status.

Trainee eligibility

To receive support under this program, a trainee must be one of the following:

- A U.S. citizen or non-citizen national.
- An individual lawfully admitted for permanent residence to the U.S.
- A qualified alien under section 431(b) of the Personal Responsibility and Work Opportunity Reconciliation Act of 1996, Pub. L. 104-193, as amended.

Additionally:

- Level I pre-service trainees must be enrolled full-time or part-time in the school or program receiving the grant award in order to receive tuition and stipend support.
- Level II in-service trainees must have completed Level I pre-service training.

Cost sharing

This program has no cost-sharing requirement.

Program description

Purpose

This program's purpose is to support training programs that enhance and expand paraprofessionals' ^[1] knowledge and expertise, and to increase the number of peer support specialists and other behavioral health-related paraprofessionals who work on integrated, interprofessional teams in providing services to families impacted by OUD and other SUD.

A special focus is on supporting children and adolescents in high need and high demand areas who have experienced trauma and are at risk for mental health disorders.

Background

The National Center for Drug Abuse Statistics reported that since 2020, there have been 700,000 drug overdose deaths in the US, and 50 percent of people 12 years and older have used illicit drugs at least once. Drug use is highest among persons between the ages of 18-25 at 39 percent, compared to persons aged 26-29 at 34 percent. Additionally, 70 percent of users who try an illegal drug before age 13 develop a substance abuse disorder within the next 7 years, compared to 27 percent of those who try an illegal drug after age 17. 47 percent of young people use an illegal drug by the time they graduate from high school. ^[2]

Among parental substance use disorders, opioid use disorders are increasingly common. Children and adolescents who grow up in households with opioid misuse and OUDs may experience a myriad of adverse consequences, including: increased risk of mental health problems and drug use; accidental opioid poisoning; increased risk of developing a substance use disorder; and family dissolution that results from parents' incarceration, foster care placement, or loss of parent to an opioid overdose. ^[3] Family-based interventions, such as family counseling, can also be effective by helping family members understand how they can be a positive influence on recovery. ^[4]

Access to treatment for behavioral health conditions relies, in part, on the supply of available providers. ^[5] Concerns about shortages of behavioral health providers are longstanding. The increase in demand for behavioral health, mental health, and substance use disorder services in the United States is well-documented. ^[6] The health and economic effects of the COVID-19 pandemic have intensified concerns about the increasing numbers of people affected by behavioral health conditions that require treatment. ^[7]

Behavioral health-related paraprofessionals are critical to the recovery process for people with substance use disorders. Peer support workers have been especially successful at supporting the recovery of others with similar conditions. In a 2020 report, the Substance Abuse and Mental Health Services Administration (SAMHSA) projected the U.S. would need over 1.1 million peer support workers, with 70 percent focusing on mental health and 30 percent on substance use disorder to address rising behavioral health needs.^[8]

Through shared understanding, respect, and mutual empowerment, peer support workers help people become and stay engaged in the recovery process and reduce the likelihood of relapse. Peer support services and behavioral health related paraprofessional services can extend the reach of treatment beyond the clinical setting into the everyday environment of those seeking a successful, sustained recovery process.^[9]

Studies have shown that providing didactic and experiential training opportunities in underserved communities can influence providers to practice in those communities, and educating and engaging students who are from rural and underserved communities can increase the chances that they will practice in those areas.^[10]

Program definitions

To better understand this NOFO, go to the dictionary of key program-related terms at [Health Workforce Glossary](#). In addition, NOFO-specific definitions can be found in the following Program-Specific Definitions section.

Behavioral health: The scientific study of the emotions, behaviors, and biology relating to a person's mental well-being, their ability to function in everyday life, and their concept of self. Behavioral health includes promoting emotional health, preventing mental illnesses and substance-use disorders, and treatments and services for mental and substance-use disorders.

Adolescent: Adolescence begins with the onset of physiologically normal puberty and ends when an adult identity and behavior are accepted. This period of development corresponds roughly to the period between the ages of 10 and 19 years.

Certificate: A process by which an agency or organization validates, based upon predetermined standards, an individual paraprofessional's qualifications and knowledge for program completion or practice. Once trainees complete the didactic and experiential training and receive a certificate, they are known as Level I pre-service program completers.

Children: People under 18 years old.

Family member: A family member is considered someone who serves as a caregiver to children. This may include biological family (including parents with SUDs) or

temporarily and permanently court-appointed people (e.g., a foster parent, group home staff, mother, father, aunt, uncle, cousin).

High-need and high-demand areas: Sites located within a Mental Health Professional Shortage Areas (HPSAs) with a score of 16 or above, or counties that have a [drug overdose death rate](#), as calculated by the Centers for Disease Control and Prevention, higher than the national average of 32.4 per 100,000 population in 202114.

Interprofessional team: Teamwork by which different health care professionals, with diverse knowledge, skills, and talents, collaborate to achieve a common goal.

Liaison: A person that assists with communication or cooperation between groups of people. For this NOFO, the liaison will assist with communication, and data collection, sharing, and coordination between the HRSA award recipient and the apprenticeship program.

Opioid Use Disorder (OUD): Opioid misuse leading to clinically significant impairment or distress occurring within a 12-month period.

Paraprofessional: Those working in the behavioral health-related field. This term refers to an individual who is not a mental or behavioral health service professional, but who works at the first stage of contact with individuals and families who are seeking mental or behavioral health services, including substance abuse prevention and treatment services. This job classification includes occupations such as mental health worker, peer support counselor, peer support specialist, community health worker, outreach worker, social services aide, mental health worker, substance abuse/addictions worker, youth worker, promotor/a, recovery coach, recovery manager, recovery mentor, recovery support specialist, and recovery coach/guide.

Registered Apprenticeship Program: A Registered Apprenticeship Program (RAP) is a proven model of apprenticeship that has been validated by the U.S. Department of Labor or a State Apprenticeship Agency. Recipient organizations that are tribes or tribal organizations may request to use the [Indian Health Service Community Health Aide Program](#) model of apprenticeship. An apprenticeship is a proven approach for preparing workers for jobs while meeting the needs of business for a highly skilled workforce. It is an employer-driven, “learn-while-you-earn” model that combines on-the-job training, provided by the employer that hires the apprentice, with job-related instruction in curricula tied to the attainment of national skills standards.

Substance Use Disorder (SUD): A cluster of cognitive, behavioral, and physiological symptoms indicating that the individual continues using the substance despite significant substance related problems.

Support specialist: Staff responsible for providing a wide variety of services and support to the paraprofessional trainees to help them to maximize their quality of work. This staff plans, facilitates, provides care coordination, evaluation and advocacy

for options and services to meet an individual's and family's comprehensive health needs through communication and resources.

Program requirements and expectations

You must address the following in your application and meet these expectations if you receive an award.

- Facilitate a Level I, pre-service training program consisting of didactic and experiential field training for pre-service training of paraprofessional child and adolescent mental or behavioral health workers. You can find a list of occupations in the Paraprofessional definition in the Program Definition section.
- Establish or enhance the paraprofessional certificate training program(s) through curriculum development or hands-on learning in the form of experiential field placements.
- Establish or leverage partnerships with community-based, non-traditional community organizations and tribal colleges that serve high need and high demand areas and populations. These may be for recruiting trainees or identifying opportunities for trainee site placement.
- Establish a Level II component that provides “on-the-job training” through a registered apprenticeship, so trainees gain career opportunities, earn stackable credits, and enhance their skills. For this program’s purposes, this Level II In-Service training is for at least 12 months for full-time trainees or an equivalent prorated period for part-time trainees. Establishing a Level II component is a requirement of this program. Recipients may partner with a registered site or develop their own.
- Create additional training positions by approximately 10 percent or more in year one and maintain that level each year over the four-year project period. For example, a program with a baseline of 10 trainees will increase the capacity to 11, thus training at least 11 trainees annually for the four-year project period.
- Provide required support funds to both Level I pre-service and Level II in-service trainees.
- Identify experienced preceptors and mentors to support trainees.
- Measure and manage program performance by reporting data on program outputs and outcomes. Recipients must demonstrate how they use that information regularly to meet the program’s goals.
- Participate in federally-designed evaluations to assess program effectiveness and efficiency upon request.

Level I and II training

Level I, pre-service training is required and must consist of both didactic and experiential field training. These trainings can happen simultaneously or not at the same time. Once a trainee completes the didactic and experiential training and receives a certificate, these trained paraprofessionals are known as Level I, pre-service program completers.

Experiential training sites must participate in integrated, interprofessional team-based practices with a special focus on Level I pre-service training in a behavioral health-related field. You will identify these field sites and match trainees to those sites.

The training period for full-time trainees is up to 12 months. The training period for part-time trainees is up to 24 months.

A full-time trainee will receive support in the form of tuition, fees, and supplies (maximum \$4,000), in addition to a fixed stipend of \$6,000, to help cover cost of living expenses. You will determine how often the stipends will be disbursed. The fixed stipend amount is awarded to those trainees who fully complete Level I. Part-time trainees are allowed to receive a stipend prorated at one-half of the fixed amount per budget year for no more than twenty-four (24) consecutive months.

Trainees will sign a student commitment letter that describes their and your roles and responsibilities.

You will aim for at least 35 percent of those who complete the Level I pre-service program to enter a registered apprenticeship program, known as Level II, in-service training. You will serve as the conduit between the Level I step and the apprenticeship training program step.

Level II, in-service training consists of an apprenticeship with on-the-job training that happens after Level I training. This model combines on-the-job training with instruction, and emphasizes team-based practices, to attain skills that meet national standards. The model also involves progressive increases in an apprentice's wages.

You must provide a fixed stipend of \$7,500 per year for Level II in-service, full-time trainees during their apprenticeship for up to four (4) years. Part-time trainees will receive a fixed stipend of \$3,750 per year, up to a maximum of four (4) years. You will determine full-time and part-time status.

You can develop your own registered apprenticeship program or establish a partnership with an existing registered apprenticeship program that has been registered with the Department of Labor or a State Apprenticeship Agency. Tribes or tribal organizations may request to use the Indian Health Service Community Health Aide Program model of apprenticeship.

The duration of a Level II in-service training will be for a minimum of 12 months and up to a maximum of four years. You will track the apprenticeship status of the apprentice.

Within 12 months of receiving the OIFSP award, you must submit a Memorandum of Understanding/Memorandum of Agreement with the registered apprenticeship site(s) that meet the criteria in Attachment 12.

If your entity is an already established apprenticeship site, you must submit official documentation (e.g., certificate of approved registration) from the Department of Labor in Attachment 12.

To become a Registered Apprenticeship program or partner with one, please refer to the [Department of Labor's apprenticeship toolkit](#).

Funding policies & limitations

Policies

- This program depends on the appropriation of funds. If funds are appropriated for this purpose, we will move forward with the review and award process.
- Support beyond the first budget year will depend on:
 - Appropriation of funds
 - Satisfactory progress in meeting the project's objectives
 - A decision that continued funding is in the government's best interest

Maintenance of effort

Federal funds must add to any existing non-federal funds for your proposed activities. If you receive an award, you will have to spend at least as much as you spent in the last fiscal year before the award. This policy is required by 42 U.S.C. § 295n-2(b) (Section 799(b) of the Public Health Service (PHS) Act). We will enforce these statutory requirements through all available mechanisms. You must provide supporting documentation in your [Attachments](#).

Student stipends

Stipend regulations state:

- At least 50 percent of your total requested budget per year (direct and indirect costs) must be used only for trainee support (tuition/fees, supplies) and stipends for OIFSP trainees.
- All other costs must be budgeted out of the remaining 50 percent.
- Stipends are allowances for trainees/students in Level I and Level II to help with cost-of-living expenses. Stipends can be used at the discretion of the trainee/

student and are not provided as a condition of employment, or to be used for tuition, fees, or other trainee support costs.

- The stipend amounts that can be charged to the award are fixed.
- Providing stipends to trainees less than the amounts specified is unallowable but you may choose to provide higher stipend amounts (by including funds from other non-federal sources).
- Students receiving stipend support sign a student commitment letter committing the trainee to completing the experiential training (Attachment 8).
- For Level I, pre-service training (maximum \$10,000 per student/trainee):
 - You may request up to \$4,000 per trainee to cover trainee support activities (i.e., tuition/fees, supplies).
 - You must request a fixed amount of \$6,000 for stipends for the 12-month period for each full-time trainee.
 - No more than 12 consecutive months of stipend support is allowed per full-time OIFSP trainee.
 - Part-time Level I trainee support is allowed for tuition/fees, supplies and a fixed stipend prorated at one-half of the fixed amount for no more than 24 consecutive months.
 - Part-time students receive the same amount as full-time trainees, but over a longer period.
- For Level II in-service training:
 - You must request to provide trainee support (\$7,500) in the form of a stipend.
 - Each full-time trainee must receive \$7,500 per year and part-time trainees must receive \$3,750, up to a maximum of four (4) years.

See [Manage Your Grant](#) for other information on costs and financial management.

Table 1: Student stipends

Level	Part-time/ Full-time	Fixed stipend	Trainee support (tuition/fees, supplies)	Max support (stipend + trainee support)	Max eligibility for support
Level I	Part-time	\$6,000 over 24 months	Up to \$4,000 over 24 months	\$10,000 over 24 months	24 months
	Full-time	\$6,000 over 12 months	Up to \$4,000 over 12 months	\$10,000 over 12 months	12 months
Level II	Part-time	\$3,750 per year	\$0	\$3,750 per year	Up to 4 years
	Full-time	\$7,500 per year	\$0	\$7,500 per year	Up to 4 years

Note: amounts are per trainee. At least 50 percent of your total requested budget per year (direct and indirect costs) must be used only for Max Support to trainees.

Indirect costs

Indirect costs are those incurred for a common or joint purpose across more than one project and that cannot be easily separated by project (like utilities for a building that supports multiple projects). Learn more at [45 CFR 75.414](#), Indirect Costs.

Indirect costs for training awards cannot exceed 8% of modified total direct costs. To understand what is included in modified total direct costs, see [45 CFR 75.2](#).

State or local governments and federally recognized Indian tribes can charge their negotiated rate or use their state cost allocation plans. To calculate indirect costs, we do not consider state universities or hospitals as government agencies.

Program income

Program income is money earned as a result of your award-supported project activities. You will have to use those funds to add to approved project activities. For-profit organizations cannot earn profit from the federal award. See [45 CFR 75.216\(b\)](#). Find more about program income at [45 CFR 75.307](#).



Step 2:

Get Ready to Apply

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Get registered

SAM.gov

You must have an active account with SAM.gov. This includes having a Unique Entity Identifier (UEI). SAM.gov registration can take several weeks. Begin that process today.

To register, go to [SAM.gov Entity Registration](#) and click Get Started. From the same page, you can also click on the Entity Registration Checklist for the information you will need to register.

Grants.gov

You must also have an active account with [Grants.gov](#). You can see step-by-step instructions at the Grants.gov [Quick Start Guide for Applicants](#).

Need Help? See [Contacts & Support](#).

Find the application package

The application package has all the forms you need to apply. You can find it online. Go to [Grants Search at Grants.gov](#) and search for opportunity number HRSA-24-016.

After you select the opportunity, we recommend that you click the [Subscribe](#) button to get updates.

Application writing help

Visit HHS [Tips for Preparing Grant Proposals](#).

Visit [HRSA's How to Prepare Your Application](#) page for more guidance.

Join the webinar

We will hold a pre-application technical assistance (TA) webinar. The webinar will provide an overview of pertinent information in the NOFO and an opportunity for applicants to ask questions. Visit the HRSA Bureau of Health Workforce's [open opportunities](#) website to learn more about the resources available for this funding opportunity.



Step 3:

Write Your Application

In this step

Application contents & format

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Application contents & format

Applications include 5 main components. This section includes guidance on each.

There is a 55-page limit for the overall application.

Submit your information in English and express budget figures using U.S. dollars.

Make sure you include each of these:

Components	Submission Format	Included in the page limit?
Project abstract	Use the Project Abstract Summary form.	No
Project narrative	Use the Project Narrative Attachment form.	Yes
Budget narrative	Use the Budget Narrative Attachment form.	Yes
Attachments	Insert each in the Other Attachments form.	Yes, unless otherwise marked
Standard forms	Upload using each required form.	No

See the [application checklist](#) for a full list of all application requirements. See [form instructions](#) for more detail on completing each form.

Required format

You must format your narratives and attachments using our required formats for fonts, size, margins, etc. See the formatting guidelines in section 4.2 of the [Application Guide](#).

Project abstract

Complete the information in the Project Abstract Summary Form. Include a short description of your proposed project. Include the needs you plan to address, the proposed services, and the population groups you plan to serve. For more information, see section 4.1.ix of the [Application Guide](#).

Project narrative

In this section, you will describe all aspects of your project.

Use the following section headers and order.

Project activities must comply with the nondiscrimination requirements described in Section VI.

Introduction and purpose

See merit review criterion 1: [Purpose & need](#)

Briefly describe the purpose of your project.

Include the efforts you will make to address the non-academic barriers to trainees' access to education and success in your program. These barriers might include physical health, psychological health, physical environment, social environment, and economic stability. Trainees include students and program participants.

Propose an actionable framework that targets learning disparities and expands learning opportunities to support diversity, equity, and inclusion. This framework may include recruitment of students from rural and underserved areas.

Purpose & need

See merit review criterion 1: [Purpose & need](#)

- Briefly describe the behavioral health workforce needs of the local community, including the Level I pre-service and Level II in-service training sites' patient populations
- Describe the services that paraprofessional trainees will provide to address these needs.
- You must complete the BHW Program Specific Data Form located in the [Appendix](#) and include it in [Attachment 9](#).

Approach

See merit review criterion 2: [Response](#)

- Include a plan to recruit and train behavioral health-related paraprofessional trainees
- Describe how you will prepare them to work on integrated teams to provide services to children and adolescents who have experienced trauma and are at risk for mental health disorders.
- Explain how you will develop and deliver experiential and didactic coursework to develop interprofessional team competency.
- Describe and implement a disbursement plan for both Level I pre-service training and for Level II in-service training support.
- Include the disbursement schedule of that support and be consistent and clear with your institution's policies and procedures. The difference between Level I pre-service disbursement and Level II in-service disbursement should be clear.

- Discuss how you will identify registered apprenticeship sites or create new registered apprenticeship sites and place trainees in those sites.
- Discuss how you will identify preceptors or mentors to support trainees.
- Explain how you will provide “on-the-job training” through a registered apprenticeship program.
- Explain your strategies to improve trainee cultural competency to address the needs of underserved communities and increase the use of culturally and linguistically appropriate services.
 - Training for this is based on the National Standards for Culturally and Linguistically Appropriate Services (CLAS) in Health and Health Care Standards.

High-level work plan

See merit review criteria 2: [Response](#)

- Describe how you’ll achieve each objective during the performance period.
- Provide a timeline that includes each activity and identifies who is responsible for each.
 - As needed, identify how key stakeholders will help plan, design, and carry out all activities.
- Include the extent to which these stakeholders address the needs of the populations and communities served.
- Identify the number, by occupation, of full-time and part-time OIFSP trainees you expect to train in each year of the performance period.
- Identify, by occupation, where you intend to conduct community-based paraprofessional training.
- Identify how you intend to deliver the proposed training.
- Describe how you intend to support graduates in securing employment in underserved and rural communities.
- You will also include a more detailed work plan in your Standardized Work Plan (SWP). See [other required forms](#).

Resolving challenges

See merit review criterion 2: [Response](#)

- Describe plans to address challenges related to recruitment, retention, education, training, job placement, and career development of OIFSP trainees in rural and underserved areas.

- Discuss challenges identifying and collaborating with experiential and apprenticeship sites with the focus on OUD and other SUD.
- Describe potential challenges with recruitment of trainees at all levels.
- Explain approaches that you'll use to resolve these challenges.

Evaluation & technical support capacity

See merit review criteria 3: [Impact](#) & 4: [Resources & capabilities](#)

- Describe your organizational profile, budget, partners, key staffs' experience, skills, and knowledge, key processes, and expected outcomes of the funded activities.
- Describe the systems and processes that you'll use to track performance outcomes.
- Describe how you'll collect and manage data (for example, assigned skilled staff, data management software) in a way that allows for accurate and timely reporting of those outcomes.
- Document the procedure for data collection, management, storage, and reporting for individuals participating in the program.
- Describe the process to track trainees after program completion for up to 1 year.
- Describe your plan for evaluating the program, managing program performance, and using data to continuously improve program quality.
 - Document how you will monitor ongoing processes and progress towards meeting your project goals.
 - Include descriptions of the inputs (for example, organizational profile, collaborative partners, key personnel, budget, and other resources).
 - Include key processes, variables to be measured, and your expectations of the funded activities.
 - Evaluations must adhere to HHS Evaluation Policy and evaluation standards and best practices described in [OMB Memorandum M-20-12](#).
- Describe current experience, skills, and knowledge of your staff.
 - Include materials published and previous evaluation work.
- Describe potential obstacles for evaluating performance and meeting our performance measurement requirements, and your plan to address those obstacles.
- Indicate how well you will be able to disseminate and replicate the results, and the extent to which project results may be national in scope.

See [Reporting](#) for more information.

Sustainability

See merit review criteria 3: [Impact](#)

- Propose a plan for sustainability after the period of federal funding ends. You're expected to sustain the effective elements of your projects.
- Describe how you will highlight key elements of your projects, e.g., training methods or strategies.
- Describe how you will obtain future sources of potential funding.
- Provide a timetable for becoming self-sufficient.
- Discuss challenges you are likely to encounter in sustaining the program, and approaches you will use to resolve them.

Organizational information

See merit review criterion 4: [Resources & capabilities](#)

Briefly describe your mission, structure, and the scope of your current activities.

Explain how they support your ability to carry out the program requirements. Include a project organization chart.

- Discuss how you'll follow the approved plan, account for federal funds, and record all costs to avoid audit findings.
- Describe tools and strategies for ongoing staff training, outreach, collaborations, communication, and information sharing/dissemination with efforts to involve communities.
- Describe the organizations you will partner with to fulfill the program goals and meet the training objectives. Include key agreements and letters of support in [Attachment 3](#).
- Include a staffing plan and job descriptions for key faculty and staff in [Attachment 4](#).
- Include biographical sketches for key staff using the Research & Related Senior/Key Person Profile form. See [other required forms](#). There can only be one Project Director (PD). The PD must be employed by the awarded applicant organization. The PD is encouraged to dedicate approximately 20 percent of his/her time (may be in-kind or funded) to grant activities.

Budget & budget narrative

See merit review criterion 5: [Support requested](#)

The budget should follow the instructions in Section 4.1.iv Budget of the [R&R Application Guide](#) and any specific instructions listed in this section. Your budget should show a well-organized plan.

Reminder: The total project or program costs are all allowable (direct and indirect) costs used for the HRSA activity or project. This includes costs charged to the award and non-federal funds used to satisfy a matching or cost-sharing requirement (which may include MOE, if applicable)

The budget narrative supports the information you provide in Standard Form 424-A. See [other required forms](#). The merit review committee reviews both.

It includes added detail and justifies the costs you ask for. As you develop your budget, consider:

- If the costs are reasonable and consistent with your project's purpose and activities.
- The restrictions on spending funds. See [funding limitations](#).

To create your budget narrative, see detailed instructions in section 4.1.v of the [Application Guide](#).

Student/trainee support costs

You must include the following student/trainee support costs:

- Tuition, fees, health insurance, stipends, travel, and other costs. Separate these costs from others so we can identify them easily.
- Number of students/trainees.
- Include a sub-total entitled "Total Student/Trainee Support Costs" with the summary of these costs.

Consultant services

Identify each consultant, the services they will perform, the total number of days, travel costs, and the total estimated costs.

Attachments

Place your PDF attachments in order in the Other Attachments form.

Attachment 1: Proof of eligibility (required)

Counts toward page limit.

Provide documentation that your organization meets the eligibility requirements as described in the Eligible Applicant section in the Summary and on page 7.

If your organization is a nonprofit, you need to attach proof. We will accept any of the following:

- A copy of a current tax exemption certificate from the IRS.
- A letter from your state's tax department, attorney general, or another state official saying that your group is a nonprofit and that none of your net earnings go to private shareholders or others.
- A certified copy of your certificate of incorporation. This document must show that your group is a nonprofit.
- Any of the above for a parent organization. Also include a statement signed by an official of the parent group that your organization is a nonprofit affiliate.

Attachment 2: Project organizational chart (required)

Counts toward page limit.

Provide a one-page diagram that shows the full project's organizational structure. Include all aspects, not just the applicant organization.

Attachment 3: Staffing plan & job descriptions (required)

Counts toward page limit.

See Section 4.1.vi of the [Application Guide](#).

Include a staffing plan that shows the staff positions that will support the project, and key information about each. Justify your staffing choices, including education and experience qualifications and your reasons for the amount of time you request for each staff position.

For key personnel, attach a one-page job description. It must include the role, responsibilities, and qualifications.

Attachment 4: Letters of agreement & memoranda of understanding (required)

Counts toward page limit.

Provide any documents that describe working relationships between your organization and others you refer to in the proposal. Documents that confirm actual or pending contracts or agreements should clearly describe the roles of the contractors and any deliverable. Make sure you sign and date any letters of agreement.

Attachment 5: Maintenance of effort documentation (required)

Counts toward page limit.

You will include non-federal funds that support proposed activities. These include cash, in-kind, and other contributions. Do not include any federal funds. See [maintenance of effort](#) requirement.

Use the following sample format to provide the maintenance of effort documentation.

FY Before Application: Actual Non-Federal Expenditures	First FY of Award: Estimated Non-Federal Expenditures
\$	\$

Attachment 6: Documentation of accreditation of the certificate training program (required)

Does not count in the page limit.

Entities must be accredited by a nationally recognized accrediting agency, as specified by the U.S. Department of Education, or must be approved by the state or tribal government to provide a behavioral health-related paraprofessional certificate training program.

Training programs must be recognized by the state government(s) within the proposed geographic coverage of the training program. Provide documentation in the form of a letter on state government letterhead. For example, the certificate training program may be part of a career pathway with stackable credentials that leads to the attainment of the knowledge and skills required at different stages of a career. Prerequisites for certificate training programs for paraprofessionals must be at least a high school diploma or GED, and the certificate must lead to an associate and/or bachelor's degree in the future, as applicable.

Attachment 7: Experiential training site documentation (required)

Counts toward page limit.

Provide a description of the experiential training sites including the site's name and address.

Attachment 8: Student commitment letter (required)

Counts toward page limit.

Provide a copy of a student commitment letter template. At a minimum the student commitment letter must include:

- Stipend Disbursement Plan outlining amount of stipend support, frequency of disbursement, and length of time receiving support.
- Experiential training requirements/expectations (e.g., number of hours, length of time)
- Required data reporting including but not limited to demographics and one year post completion employment status.

Attachment 9: BHW program specific data form (required)

Does not count in the page limit.

The BHW Program Specific Data Form is found in the [Appendix](#). The BHW Program Specific Data Form can be found in the Related Documents tab on Grants.gov. Download and complete the form, and upload as Attachment 9.

BHW is committed to ensuring that there is a pipeline of qualified, diverse healthcare providers in rural and underserved areas. The BHW Program Specific Form collects data on students, trainees or program participants in entities applying for BHW health workforce training program grant awards.

Student enrollment and retention data provide BHW with critical information related to an applicant's commitment to diversifying the workforce and proposed program objectives. BHW is requiring applicants to provide specific data about (1) enrollment; (2) graduation/completion; (3) where graduates practice; and (4) faculty tenure (when applicable) for 3 previous consecutive program years. This data is used to help applicants develop and refine their outreach and will also be used to track programmatic impacts.

Program specific information (preceding Section A):

- All applicants must complete the first 5 questions preceding Section A on the BHW Program Specific Form.

Program specific data (Section A, and Sections C through G2b):

- Applicants with new programs, meaning less than 1 year old, only need to complete the first five questions (i.e., “Select Academic Year” through “How many years of data to report?”) and do not need to provide data for Section A or Sections C through G2b.
- New programs require you to provide a detailed synopsis of your plan to recruit and retain trainees and participants from rural and underserved areas, including your target numbers and rationale.
- Existing programs, meaning older than 1 year, must submit program data for all academic years for which data is available.
 - For example, if the applicant program is two years old, the applicant must submit data for the past two academic years in Section A and Sections C through G2b.
 - If the applicant program is five years old, the applicant must submit data for all three years requested on the form.
 - Applicants with programs over three years old do not need to submit a synopsis.

Optional Program specific data (Section B, and subsections G3 through G4d):

- Applicants have the option to complete these sections. These sections will not be used in the Merit Review.

The Merit Review Committee will use this data to aid them in assessing the feasibility of the proposed project including the number of the trainees/program participants proposed for recruitment and the applicant’s commitment to or demonstrated success in expanding the health workforce. For applicants that are new academic institutions or health workforce training programs, the Merit Review Committee must evaluate the applicant’s proposed plan to recruit and retain trainees/program participants based upon the information provided by the applicant in the Program Narrative. It is the applicant’s responsibility to ensure adequate information is provided for the Merit Review Committee to make that determination.

Attachment 10: Letters of support (as applicable)

Counts toward page limit.

Provide a letter of support for each organization or department involved in your proposed project. Letters of support must be dated and specifically indicate a commitment to the project such as in-kind services, dollars, staff, space, equipment, etc.

Attachment 11: Funding preference or priority documentation (as applicable)

Counts toward page limit.

To receive a funding priority or funding preference, include a statement that you are eligible for the funding priority or the funding preference, identify the funding priority or preference, and include documentation of this qualification. For example, the applicant may wish to submit the training curriculum showing emphasis on role of family and lived experiences or include supporting evidence in the Abstract.

See [selection process](#) for information about how these apply.

Attachment 12: Apprenticeship training site documentation (as applicable)

Counts toward page limit.

Provide a description of the apprenticeship training sites your entity is partnering with. The description should include the name of the site and site address.

Within 12 months of receiving the OIFSP award, you must submit a Memorandum of Understanding/Memorandum of Agreement with the registered apprenticeship site(s) that meet the criteria, if not already provided in your application.

If your entity is an already established apprenticeship site, you must submit official documentation (e.g., certificate of approved registration) from the Department of Labor.

Attachments 13-15: Other relevant documents

Counts toward page limit.

Include any other documents that are relevant to the application.

Other required forms

You will need to complete some standard forms. Upload the following standard forms listed at Grants.gov. You can find them in the NOFO [application package](#) or review them and any available instructions at [Grants.gov Forms](#).

Forms	Submission Requirement
SF-424 R&R (Application for Federal Assistance)	With application
Research and Related Budget Form	With application
R&R Subaward Budget Attachment(s) Form	With application
Standardized Work Plan Form	With application
Research & Related Senior/Key Person Profile form	With application
Disclosure of Lobbying Activities (SF-LLL)	If applicable, with the application or before award

Form instructions

In addition to the requirements for the [project abstract](#), [project narrative](#), and [attachments](#), following are instructions for each form required by this NOFO. See the [application checklist](#) for a full list of all application requirements.

SF-424 R&R

Does not count against the page limit

Follow the instructions in section 4.1 of the [Application Guide](#).

Research and related budget form

Only the budget narrative counts against the page limit

In addition to the requirements in the [budget and budget narrative section](#), follow these instructions:

Complete the Research and Related Budget Form. Follow the instructions in section 4.1.iv of the [Application Guide](#).

You will complete the form for each budget year for the proposed performance period. After completing the first budget period in the form, you may click “Add Period” to move to the next.

R&R subaward budget attachments form

Counts against the page limit*

You will also complete the R&R Subaward Budget Attachment form for each subaward you propose. These include subcontracts. You will do this using the R&R Subaward Budget Attachment(s) Form.

To complete the budget forms, follow the instructions in section 4.1.iv of the [Application Guide](#).

If you have more than 10 subawards, you may upload the extra budget forms in the Research and Related Other Project Information form in Block 12 “Other Attachments.”

Standardized Work Plan form

Does not count against the page limit

In addition to the requirements in [project narrative, high-level work plan](#), follow these instructions:

- Submit your work plan through the SWP Form. Provide a detailed work plan that demonstrates your experience or ability implementing a project of the proposed scope.
- Follow the instructions in the SWP Form.
- Select your organizational priorities that best fit the objective.
- Write Health Equity in the “Other Priority Linkage” if your objective or sub-objectives align with this priority.

Research & related senior/key person profile form

Counts against the page limit*

In addition to the requirements in [Project Narrative, organizational information](#), follow these instructions.

- Include biographical sketches for people who will hold the key positions.
- Try to use no more than one page per person. These sketches count toward the page limit.
- Do not include personally identifiable information.
- If you include someone you haven’t hired yet, include a letter of commitment from that person with their biographical sketch.

- Upload sketches in the Research & Related Senior/Key Person Profile form.
- Include:
 - Name and title
 - Education and training – for each entry include Institution and location, degree and date earned, if any, and field of study.
 - Section A, Personal Statement. Briefly describe why the individual’s experience and qualifications make them well-suited for their role.
 - Section B, Positions and Honors. List in chronological order previous and current positions. List any honors. Include present membership on any federal government public advisory committee.
 - Section C, Other Support. This section is optional. List selected ongoing and completed projects during the last three years. Begin with any projects relevant to the proposed project. Briefly indicate the overall goals of the projects and responsibilities of the person.
 - Other information. If they apply, include language fluency and experience working with populations that are culturally and linguistically different from their own.



Step 4:

Learn About Review & Award

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Application review

Initial review

We review each application to make sure it meets basic requirements. We will not consider an application that:

- Is from an organization that does not meet all eligibility criteria.
- Requests funding above the award ceiling shown in the [funding range](#).
- Is submitted after the [deadline](#).

Also, we will not review any pages over the 55-page limit.

Merit review

Project activities must comply with the requirements in the Non-discrimination and assurance section. A panel reviews all applications that pass the initial review. The members use the following criteria.

Criterion	Total number of points = 100
1. Purpose & need	10 points
2. Response	40 points
3. Impact	20 points
4. Resources & capabilities	20 points
5. Support requested	10 points

Criterion 1: Purpose & need

10 points

See Project Narrative [Introduction & Purpose](#), and [Purpose & Need](#) sections.

Reviewers will consider the extent to which the application:

- Describes the problem and its contributing factors, including the quality and extent to which it clearly identifies vulnerable target population(s), location/ community, and its unmet health needs, using data from reliable and recent data sources.
- Describes the efforts you will make to address the non-academic barriers to trainees' access to education and success in your program.

- These barriers might include physical health, psychological health, physical environment, social environment, and economic stability.
- Trainees include students and program participants.
- Provides a plan for implementing an actionable framework that targets learning disparities and expands learning opportunities to support diversity, equity, and inclusion. This may include recruitment of students from rural and underserved areas.

Criterion 2: Response

40 points

See Project Narrative [Approach](#), [High-level work plan](#), and [Resolving challenges](#) sections.

Approach (25 points)

- How well your proposed project responds to the program's [purpose](#).
- The strength of the proposed goals and objectives and how well they relate to the project.
- How well you explain your strategies to improve trainees' cultural competence to meet the needs of underserved communities. Include those that increase the use of culturally and linguistically appropriate services by providing training.

Work plan (10 points)

- The description should include a timeline.
- The description should include how the proposal will increase the number of behavioral health paraprofessionals trained to meet the needs of children and adolescents in high need and high demand areas.
- The description should include how you will implement field placements, interprofessional teamwork, and experiential training in community-based settings.
- The description should include how you will provide support to help graduates secure employment (including apprenticeships) in underserved and rural areas.

Resolving Challenges (5 points)

- How well you describe the obstacles and challenges you may face during project design and implementation, as well as how you may deal with them.

Criterion 3: Impact

20 points

See Project Narrative [Evaluation & technical support capacity](#) and [Sustainability](#) sections.

Evaluation (10 points)

- How effective the proposed project is likely to be.
- How strong of a public health impact it is likely to have.
- How effective plans for sharing project results are likely to be.
- How significant the likely impact will be on the community or target population.
- The scope of the project results (e.g., local, national).
- The reproducibility of the project activities.
 - How strong and effective the method is to monitor and evaluate project results.
 - How well the measures will assess that program objectives have been met and to what extent the results are because of the project.
 - The quality of the plan to collect and manage data to ensure accurate and timely performance. The narrative should include a process to collect, manage, store, and report data on participants for up to one year after program completion.
 - The strength of the plan to use collected data for continuous quality improvement and to monitor and evaluate project results.
 - How well evaluation obstacles are understood and the strength of strategies to address the obstacles.

Sustainability (10 points)

- How likely the program is to continue beyond the federal funding. The narrative should include a solid plan for project sustainability and describe likely challenges to be encountered in sustaining the program, as well as logical approaches to resolving the challenges.

Criterion 4: Resources & capabilities

20 points

See Project Narrative [Organizational Information](#) and [Evaluation & technical support capacity](#) sections.

The panel will review your application for the extent to which:

- Project staff have the training or experience to carry out the project.
- Your organization can fulfill the proposed project's needs.
- You have quality facilities available to fulfill the needs of the proposed project.

Criterion 5: Support requested

10 points

See [Budget & budget narrative](#) section.

- The panel will review your application for the extent to which the proposed budget is reasonable for each year of the period of performance.
- Costs, as outlined in the budget and required resources sections, are reasonable and align with the scope of work.
- Key staff have adequate time devoted to the project to achieve project objectives.

Risk review

Before making an award, we review the risk that you will not manage federal funds in prudent ways. We need to make sure you've handled any past federal awards well and demonstrated sound business practices. We:

- Review any applicable past performance
- Review audit reports and findings
- Analyze the cost of the budget
- Assess your management systems
- Ensure you continue to be eligible
- Make sure you comply with any public policies

We may ask you to submit additional information.

As part of this review, we use SAM.gov Entity Information [Responsibility / Qualification](#) to check your history for all awards likely to be over \$250,000. You can comment on your organization's information in SAM.gov. We'll consider your comments before deciding on your risk level.

If we find a significant risk, we may choose not to fund your application or to place specific conditions on the award.

For more details, see [45 CFR 75.205](#).

Selection process

When making funding decisions, we consider:

- Merit review results. These are key in making decisions but are not the only factor.
- The amount of available funds.
- Assessed risk.
- The following funding priorities, funding preferences, and special considerations.

We may:

- Fund out of rank order.
- Fund applications in whole or in part.
- Fund applications at a lower amount than requested.
- Decide not to allow a prime recipient to subaward if they may not be able to monitor and manage subrecipients properly.
- Choose to fund no applications under this NOFO.

Funding priorities

This program includes a funding priority. It is authorized by Section 756(d)(2) of the Public Health Service (PHS) Act, as amended (42 U.S.C. § 294e-1(d)(2)). A funding priority adds points to merit review scores if we determine that the application meets the following criteria. Qualifying for a funding priority does not guarantee that your application will be successful.

Priority 1: Role of the family and the lived experience of the consumer and family paraprofessional partnership (5 Points)

We will give you a funding priority if the program emphasizes the role of the family and the lived experience of the consumer and family-paraprofessional partnership.

Include documentation of this qualification. For example, the applicant may wish to submit the training curriculum showing emphasis on role of family and lived experiences or include supporting evidence in the Abstract.

Funding preferences

This program provides a funding preference for both new programs and existing programs that have demonstrated the ability to place trainees in medically underserved communities (MUCs), as authorized by Section 791(a) of the Public Health Service (PHS) Act, as amended (42 U.S.C. § 295j(a)). If we determine that your application qualifies for a funding preference, we will move it to a more competitive position among fundable applications. Qualifying for a funding preference does not guarantee that your application will be successful.

Qualification(s) to meet the funding preference(s): Preference shall be given to applicants with projects that meet at least one of the following:

Qualification 1: High Rate

You can request funding preference if you have a high rate for placing trainees in practice settings having the principal focus of serving residents of MUCs.

To receive funding preference under this qualification, you must demonstrate that the percentage of graduates/Level I program completers placed in practice settings serving medically underserved communities for Academic Year (AY) 2021-2022 and AY 2022-2023 is greater than or equal to 50 percent. You must submit the following documentation in Attachment 11:

Please note the calculations must be done first, then multiplied by 100.

High Rate Formula:

$$\left(\frac{\begin{array}{l} \text{\# of Graduates/Level I Completers} \\ \text{in AY 2021-2022 Employed in MUCs} \end{array} + \begin{array}{l} \text{\# of Graduates/Level I Completers} \\ \text{in AY 2022-2023 Employed in MUCs} \end{array}}{\begin{array}{l} \text{Total \# of Graduates/Level I} \\ \text{Completers in AY 2021-2022} \end{array} + \begin{array}{l} \text{Total \# of Graduates/Level I} \\ \text{Completers in AY 2022-2023} \end{array}} \right) \times 100 = \text{High Rate}$$

Graduates/ Level I Completers	Practice Setting Address	<p>Use the following link to document the federal designation(s) used to determine graduate's/Level I program completer's practice in medically underserved communities: data.hrsa.gov/</p> <p>(Indicate Federal Designations for Graduate Practice)</p> <p>Medically Underserved Communities (MUCs)</p> <p>Health Professional Shortage Area (HPSA)</p> <p>Medically Underserved Area</p> <p>Medically Underserved Population or</p> <p>Governor's Certified Shortage Area for Rural Health Clinic purposes HPSA</p>
1.		
2.		
3.		

Qualification 2: Significant Increase

You can request funding preference if from the beginning of AY 22 to end of AY 23, you achieved a significant increase in the rate of placing trainees in MUCs.

To receive funding preference under this qualification, you must demonstrate a 25 percent increase of placing graduates/Level I program completers in medically underserved communities from AY 2021-2022 and AY 2022-2023. You must submit the following documentation in Attachment 11:

Significant Increase Formula:

$$\left(\frac{\text{\# of Graduates/Level I Completers in AY 2022-2023 Employed in MUCs}}{\text{Total \# of Graduates/Level I Completers in AY 2022-2023}} - \frac{\text{\# of Graduates/Level I Completers in AY 2021-2022 Employed in MUCs}}{\text{Total \# of Graduates/Level I Completers in AY 2021-2022}} \right) \times 100 = \text{Significant Increase}$$

Graduate(s)	Practice Setting Address	<p>Use the following link to document the federal designation(s) used to determine graduate's/Level I program completer's practice in medically underserved communities: data.hrsa.gov/</p> <p>(Indicate Federal Designations for Graduate Practice) Medically Underserved Communities (MUCs)</p> <p>Health Professional Shortage Area</p> <p>Medically Underserved Area</p> <p>Medically Underserved Population or</p> <p>Governor's Certified Shortage Area for Rural Health Clinic purposes HPSA</p>
1		
2		
3		

Qualification 3: New Program

To permit new programs to compete equitably for the preference under this section, those new programs that meet at least four (4) of the criteria shall qualify for a funding preference.

New Program means any program that has graduated/completed less than three classes.

To receive funding preference under this qualification, you must submit as Attachment 11 documentation that you have graduated less than three 3 classes and meet at least 4 of the following criteria:

- The training organization's mission statement includes preparing health professionals to serve underserved populations.
- The program's curriculum includes content that will help prepare practitioners to serve underserved populations.
- Substantial clinical training in MUCs is required under the program.
- At least 20 percent of the program's clinical faculty spend at least 50 percent of their time providing or supervising care in MUCs.
- The entire program or a substantial portion of the program is physically located in a MUC.
- Trainee assistance, which is linked to service in MUCs, is available to trainees through the program.

- The program provides a placement mechanism for helping graduates find positions in MUCs.

Applicants receiving the preference will be placed in a more competitive position among applications that can be funded.

Applications that do not receive a funding preference will be given full and equitable consideration during the review process.

Special considerations

This program includes special considerations authorized by Section 756(a)(4) of the Public Health Service Act. Qualifying for special consideration does not guarantee that your application will be successful. We may provide your application with favorable consideration based on the extent it addresses the following focus areas:

- HRSA will aim to fund at least one OIFSP applicant in each of the [10 United States Department of Health and Human Services regions](#).

To achieve the distribution of awards as stated, HRSA may need to fund out of rank order.

Award notices

We issue Notices of Award (NOA) on or around the [start date](#) listed in the NOFO. See Section 5.4 of the [Application Guide](#) for more information.



Step 5: Submit Your Application

In this step

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Application submission & deadlines

See [Find the Application Package](#) to make sure you have everything you need.

Make sure you are current with SAM.gov and UEI requirements. When you register or update your SAM.gov registration, you must agree to the financial assistance general certifications and representations, specifically regarding grants. Make sure that your SAM.gov registration is accurate for both contracts and grants, as these registrations differ. See [Get registered](#). You will have to maintain your registration throughout the life of any award.

Deadlines

Application

You must submit your application by May 6, 2024, at 11:59 p.m. ET.

Grants.gov creates a date and time record when it receives the application. If you submit the same application more than once, we will accept the last on-time submission.

Submission method

Grants.gov

You must submit your application through Grants.gov. See [get registered](#).

For instructions on how to submit in Grants.gov, see [Quick Start Guide for Applicants](#). Make sure that your application passes the Grants.gov validation checks, or we may not get it. Do not encrypt, zip, or password protect any files.

See [Contacts & Support](#) if you need help.

Other submissions

Intergovernmental review

This NOFO is not subject to [Executive Order 12372](#), Intergovernmental Review of Federal Programs. No action is needed.

Mandatory disclosure

You must submit any information related to violations of federal criminal law involving fraud, bribery, or gratuity violations potentially affecting the federal award. See Mandatory Disclosures, [45 CFR 75.113](#).

Write to us (HRSA) via attachment as part of your application and send written disclosures to the U.S. Department of Health and Human Services, Office of Inspector General at grantdisclosures@oig.hhs.gov.

Application checklist

Make sure that you have everything you need to apply:

Form	See instructions	Included in page limit?
<input type="checkbox"/> Project Abstract Summary Form	Project abstract Form instructions	No
<input type="checkbox"/> Research and Related Other Project Information	Project narrative Form instructions	Only the attached project narrative
<input type="checkbox"/> Research and Related Budget Form	Budget & budget narrative Form instructions	Only the attached budget justification
<input type="checkbox"/> Attachments Form Include: <ul style="list-style-type: none"> <input type="checkbox"/> 1-Proof of eligibility <input type="checkbox"/> 2-Project organizational chart <input type="checkbox"/> 3-Staffing plan & job descriptions <input type="checkbox"/> 4-Letters of agreement & memoranda of understandings <input type="checkbox"/> 5-Maintenance of effort documentation <input type="checkbox"/> 6-Documentation of accreditation of the certificate training program <input type="checkbox"/> 7-Experiential training site documentation <input type="checkbox"/> 8-Student commitment letter <input type="checkbox"/> 9-BHW program specific data form <input type="checkbox"/> 10-Letters of support <input type="checkbox"/> 11-Funding preference or priority documentation <input type="checkbox"/> 12-Apprenticeship training site documentation <input type="checkbox"/> 13-Other relevant documents: If you have additional material to submit, such as explanations of mandatory disclosures, you can use this form. 	Attachments Form instructions	All attachments* count toward page limit apart from Attachments 6 & 9

Form	See instructions	Included in page limit?
<input type="checkbox"/> SF-424 R&R (Application for Federal Assistance)	Form instructions	No
<input type="checkbox"/> Standardized Work Plan (SWP) Form	Project narrative, high-level work plan Form instructions	No
<input type="checkbox"/> Research and Related Senior/Key Person Profile (Expanded) Form	Project narrative, organizational information Form instructions	Yes*
<input type="checkbox"/> R&R Subaward Budget Attachment(s) Form	Form instructions	Yes*
<input type="checkbox"/> Project/Performance Site Locations(s)	Form instructions	Yes*
<input type="checkbox"/> Disclosure of Lobbying Activities (SF-LLL)	Form instructions	No

* Only what you attach in these forms counts against the page limit. The form itself does not count.



Learn What Happens After Award

In this step

Post-award requirements & administration [49](#)

Post-award requirements & administration

Administrative & national policy requirements

There are important rules you need to know if you get an award. You must follow:

- All terms and conditions in the Notice of Award.
- The regulations at [45 CFR part 75](#), Uniform Administrative Requirements, Cost Principles, and Audit Requirements for HHS Awards.
- The termination provisions in 45 CFR 75.372. No other specific termination provisions apply.
- The HHS [Grants Policy Statement](#) (GPS). This document is incorporated by reference in your Notice of Award. If there are any exceptions to the GPS, they'll be listed in your Notice of Award.
- All federal statutes and regulations relevant to federal financial assistance, including those highlighted in [HHS Administrative and National Policy Requirements](#).
- See the requirements for performance management in [2 CFR 200.301](#).

Health information technology interoperability

If you receive an award, you must agree that where your activities involve implementing, acquiring, or upgrading health IT, you, and all your subrecipients will:

- Meet the standards and specifications in [45 CFR part 170, subpart B](#), if those standards support the activity.
- If the activities relate to activities of eligible clinicians in ambulatory settings or hospitals under Sections 4101, 4102, and 4201 of the HITECH Act, that you will use only health IT certified by the [ONC Health IT Certification Program](#).

If standards and implementation specifications in [45 CFR part 170, subpart B](#) cannot support the activity, we encourage you to use health IT that meets non-proprietary standards and specifications of consensus-based standards development organizations. This may include standards identified in the [ONC Interoperability Standards Advisory](#).

Nondiscrimination & assurance

If you receive an award, you must follow all applicable nondiscrimination laws. You agree to this when you register in SAM.gov. You must also submit an Assurance of Compliance ([HHS-690](#)). To learn more, see the [Laws and Regulations Enforced by the HHS Office for Civil Rights](#).

Contact the [HHS Office for Civil Rights](#) for more information about obligations and prohibitions under federal civil rights laws or call 800-368-1019 or TDD 1-800-537-7697.

The HRSA Office of Civil Rights, Diversity, and Inclusion (OCRDI) offers technical assistance, individual consultations, trainings, and plain language materials to supplement OCR guidance. Visit [OCRDI's website](#) to learn more about how federal civil rights laws and accessibility requirements apply to your programs, or contact OCRDI directly at HRSACivilRights@hrsa.gov.

Reporting

If you are successful, you will have to follow the reporting requirements Section 6 of the [Application Guide](#). The NOA will provide specific details.

You must also follow these program-specific reporting requirements:

- Submitting a Federal Financial Report SF-425, which is an accounting of expenditures under the project that year, to be submitted electronically. Visit [Reporting Requirements | HRSA](#).
- Submitting an annual progress report.
- Submitting a Quarterly Progress Update (QPU) to HRSA via the Electronic Handbooks (EHBs) at the completion of each quarter. The QPU will be automatically generated and allows recipients to document progress on activities based on the information submitted in the SWP.
- Submitting an Annual Performance Report through the Electronic Handbooks (EHBs).
 - Annual Performance Report will address all academic year activities from July 1 to June 30, and will be due to us on July 31 each year.
 - If award activity extends beyond June 30 in the final year of the performance period, we may need a Final Performance Report (FPR) to collect the remaining performance data.
 - Current required reporting forms for this grant program can be found at [Report on Your Grant](#). Performance measures and data forms are subject to change each academic year.

- Submitting a final program report, due within 90 calendar days after the performance period ends. The Final Report must be submitted online at [HRSA EHBs](#).
- 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.
- Federal Awardee and Integrity Reporting: The NOA will contain a provision for integrity and performance reporting in [FAPIIS](#), as [45 CFR part 75 Appendix I, E.3.](#) and [45 CFR part 75 Appendix XII.](#)



Contacts & Support

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Agency contacts

Program & technical assistance

Andrea Knox-Ellen

Public Health Analyst/Interim Team Lead, DNPH

Attn: OIFSP Program

Bureau of Health Workforce

Health Resources and Services Administration

Call: 301-443-4170

Email: OIFSP@hrsa.gov

Financial & budget

Tim Coyle

Grants Management Specialist

Division of Grants Management Operations, OFAM

Health Resources and Services Administration

Call: 301-443-4243

Email: TCoyle@hrsa.gov

Grants.gov

Grants.gov provides 24/7 support. You can call 800-518-4726 or email support@grants.gov. Hold on to your ticket number.

SAM.gov

If you need help, you can call 866-606-8220 or live chat with the [Federal Service Desk](#).

Helpful websites

- [HRSA How to Prepare Your Application page](#)
- [HRSA R&R Application Guide](#)
- [HRSA Grants page](#)
- [HHS Tips for Preparing Grant Proposals](#)

Appendix: Instructions to complete BHW program specific data form

- Navigate to HRSA-24-016 on [Grants.gov](https://www.grants.gov).
- Click Related Documents, then the link for Appendix to download the form.
- Complete the Appendix and upload as [Attachment 9](#).

Sample Form:



HRSA-23-014
Advanced Nursing Education Workforce (ANEW) Program
Department of Health and Human Services
Health Resources and Services Administration

Apply Subscribe

SYNOPSIS VERSION HISTORY **RELATED DOCUMENTS** PACKAGE

Print Related Documents List ?

Click on the following file link(s) to download the related document(s):

File Description	File Name	Last Updated Date/Time	File Size
Folder: Full Announcement - HRSA-23-014	HRSA-23-014-Full Announcement - HRSA-23-014.zip	Feb 14, 2023 03:01:43 PM EST	593.5 KB
HRSA-23-014 Notice of Funding Opportunity	HRSA-23-014 ANEW NOFO_FINAL.pdf	Feb 14, 2023 03:01:43 PM EST	623.5 KB
Folder: Other Supporting Documents - Forms	HRSA-23-014-Other Supporting Documents - Forms.zip	Feb 16, 2023 10:33:15 AM EST	5.4 MB
Appendix B	Appendix B.pdf	Feb 16, 2023 10:33:15 AM EST	5.6 MB

Endnotes

Select the endnote number to jump to the related section in the document.

[1] For the purpose of this NOFO, the term “paraprofessional” refers specifically to those working in the behavioral health-related field. Please see Section VIII. Other Information for full definition

[2] National Center for Drug Abuse Statistics. Drug Use Demographics available at:

<https://drugabusestatistics.org>

[3] National Library of Medicine. The Impact of the Opioid Epidemic on Children and Adolescents.

<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC7017799/>

[4] TIP 39 Substance Use Disorder Treatment and Family Therapy. Substance Abuse and Mental Health Services Administration. Available at: <https://www.samhsa.gov/resource/ebp/tip-39-substance-abuse-treatment-family-therapy>

[5] United States Government Accountability Office. Behavioral Health. Available Workforce Information and Federal Actions to Help Recruit and Retain Providers. Available at: <https://www.gao.gov/assets/gao-23-105250.pdf>

[6] Health Resources and Services Administration. Projecting Health Workforce Supply and Demand. Available at: <https://bhw.hrsa.gov/data-research/projecting-health-workforce-supply-demand>.

[7] Ibid.

[8] Workforce Development for Behavioral Health Challenges and Opportunities: Workforce Development for Behavioral Health “Peer Support Workers”. Antoinette ‘Toni’ Gingerelli (MPP 2022), Kelsey Pukelis (PhD Student in Public Policy), and Priscilla Liu (MPA 2022 & MIT Sloan MBA 2021).

[9] Peer Support Workers for those in Recovery. Substance Abuse and Mental Health Services Administration. Available at: <https://www.samhsa.gov/brss-tacs/recovery-support-tools/peers>

[10] Baum, N., King, J. (2020). The Behavioral Health Workforce in Rural America: Developing a National Recruitment Strategy, (February 2022). <https://www.behavioralhealthworkforce.org/wp-content/uploads/2020/02/Recruitment-and-Retention-of-BH-Providers-Full-Report-2.2020.pdf>