

U.S. Department of Health and Human Services

HRSA

Health Resources & Services Administration

Bureau of Health Workforce

Division of Medicine and Dentistry

Geriatrics Academic Career Awards

Funding Opportunity Number: HRSA-23-007

Funding Opportunity Type(s): New

Assistance Listings (AL/CFDA) Number: 93.250

NOTICE OF FUNDING OPPORTUNITY

Fiscal Year 2023

Application Due Date: November 3, 2022

Ensure your [SAM.gov](https://sam.gov) and [Grants.gov](https://grants.gov) registrations and passwords are current immediately!

HRSA will not approve deadline extensions for lack of registration.

Registration in all systems may take up to 1 month to complete.

Issuance Date: August 5, 2022

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See [Section VII](#) for a complete list of agency contacts.

Authority: Title VII, Section 753(b) of the Public Health Service Act (42 U.S.C. § 294c(b))

508 Compliance Disclaimer

Note: Persons using assistive technology may not be able to fully access information in this file. For assistance, please email or call one of the HRSA staff above in [Section VII. Agency Contacts](#).

EXECUTIVE SUMMARY

The Health Resources and Services Administration (HRSA) is accepting applications for the fiscal year (FY) 2023 Geriatrics Academic Career Award program. The purpose of this program is to support the career development of junior faculty as academic geriatricians or academic geriatrics specialists.

Funding Opportunity Title:	Geriatrics Academic Career Award Program
Funding Opportunity Number:	HRSA-23-007
Due Date for Applications:	November 3, 2022
Anticipated FY 2023 Total Annual Available Funding:	\$2,100,000
Estimated Number and Type of Award(s):	Up to 26 grants
Estimated Annual Award Amount:	Up to \$81,746 per award
Cost Sharing/Match Required:	No
Period of Performance:	July 1, 2023 through June 30, 2027 (4 years)

<p>Eligible Applicants:</p>	<p>Eligible applicants are:</p> <ul style="list-style-type: none"> • accredited health professions schools or graduate programs approved by the Secretary including schools of allopathic medicine, osteopathic medicine, nursing, dentistry, pharmacy, allied health, physician assistant programs, chiropractic, podiatric medicine, optometry, public health, and veterinary medicine. • accredited graduate programs in health administration and behavioral health and mental health practice including clinical psychology, clinical social work, professional counseling, and marriage and family therapy • Tribes and tribal organizations are eligible if they otherwise meet the eligibility requirements. <p>See Section III.1 of this notice of funding opportunity (NOFO) for complete eligibility information.</p>
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Application Guide

You (the applicant organization/agency) are responsible for reading and complying with the instructions included in this NOFO and in HRSA’s [HRSA’s SF-424 R&R Application Guide](#). Visit [HRSA’s How to Prepare Your Application page](#) for more information.

Technical Assistance

HRSA will hold a pre-application technical assistance (TA) webinar for applicants seeking funding through this opportunity. 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 at <https://bhw.hrsa.gov/fundingopportunities/default.aspx> to learn more about the resources available for this funding opportunity.

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I. Program Funding Opportunity Description

1. Purpose

This notice announces the opportunity to apply for funding under the Geriatrics Academic Career Award (GACA) program.

Program Purpose

The purpose of the GACA program is to support the career development of junior faculty as academic geriatricians or academic geriatrics specialists.

Program Goals

The goals of the program are for the GACA candidate to: a) develop the necessary knowledge and skills to lead health care transformation in a variety of settings, including rural and/or medically underserved settings, b) be age-friendly, and c) provide training in clinical geriatrics, including the training of interprofessional teams of healthcare professionals to provide healthcare for older adults.

Program Objectives

1. Develop junior faculty for a career as an academic geriatrician or academic geriatrics specialist to address the above program goals.
2. Educate and train the healthcare workforce, within the context of the age-friendly health systems framework, to address dementia-risk reduction, dementia across the disease trajectory including training on dementia medications as they are approved for use, health disparities and social determinants of health, and nursing home care.
3. Advance the GACA candidate's career development through participation in leadership positions in professional organizations.

[For more details, see Program Requirements and Expectations.](#)

General Emergency Preparedness Statement

Eligible entities must be ready to continue programmatic activities in the event of a public health emergency – both those that are expected and unexpected. A training-focused emergency preparedness plan is critical for HRSA-funded projects and helps ensure that recipients are able to continue programmatic activities, can coordinate effectively, and can implement recovery plans when emergencies disrupt project activities. You must develop and maintain a flexible training-focused emergency preparedness plan in case of public health emergencies to ensure continuation of programmatic and training activities, including but not limited to GACA training.

2. Background

The program is authorized by Title VII, Section 753(b) of the Public Health Service Act (42 U.S.C. § 294c(b)). The focus of this subsection is to support the career development of individual junior faculty in geriatrics at accredited health professions schools and

programs. This GACA Notice of Funding Opportunity (NOFO) seeks to address the continuing shortages of academic geriatrics specialists.

The United States Census Bureau reports¹ the United States will reach a new milestone in 2034, people age 65 and over are expected to outnumber children under age 18 (77 million vs 76.5 million), a demographic already reached in other countries. Starting in 2030, when those born in America between 1946 and 1964, referred to as ‘boomers’, will be older than 65, the number of people older than 65 will make up 21 percent of the population, the number of people 85 and older 85-plus will triple, and the country will add a half million centenarians.² The Alzheimer’s Association projects growing numbers of Americans with Alzheimer’s or other dementias will escalate rapidly in coming years and projects this group to grow from 58 million in 2021 to 88 million by 2050.³ More deaths due to Alzheimer’s disease occur at home, making it critical for families and caregivers to develop the knowledge and skills to care for persons living with dementia. Using the Age-Friendly Health System framework and incorporating the 4M’s [*What Matters, Medication, Mentation, and Mobility*] into primary care, where the interprofessional team learns to first ask *what matters to the patient and* provides the platform to discuss home, family and lifestyle and helps provider and patient plan and prepare to maximize health outcomes.

The size of the healthcare workforce is currently inadequate to meet the increased healthcare and psychosocial needs of older adults. The *National and Regional Projections of Supply and Demand for Geriatricians: 2013-2025* report projected the demand for geriatricians will exceed supply, resulting in a national shortage of 26,980 full time equivalent positions in 2025.⁴ Furthermore, the education and training of the national healthcare workforce are hampered by a lack of well-trained geriatrics faculty. The purpose of the GACA program is to promote the career development of junior faculty as academic geriatricians and academic geriatrics specialists to address the shortage of geriatrics faculty. A four-year project period for the GACA program is proposed to allow adequate time to implement career development, establish training and curricular activities, and develop a nationwide network with GACA recipients to serve as a continuing resource for sharing updates on caring for older adults and address the chronic gap of trained geriatrics specialists.

¹ Vespa, J., *The U.S. Joins Other Countries With Large Aging Populations*, Retrieved May 18, 2022 from <https://www.census.gov/library/stories/2018/03/graying-america.html>.

² Ibid.

³ Alzheimer’s Association. 2021 Alzheimer’s disease Facts and Figures. *Alzheimers Dement* 2021; 17(3).

⁴U.S. Department of Health and Human Services, Health Resources and Services Administration, National Center for Health Workforce Analysis. 2017. *National and Regional Projections of Supply and Demand for Geriatricians: 2013-2025*. Rockville, Maryland. Retrieved on June 3, 2022 from <https://bhw.hrsa.gov/sites/default/files/bureau-health-workforce/data-research/geriatrics-report-51817.pdf>.

Program Definitions

A glossary containing general definitions for terms used throughout the Bureau of Health Workforce NOFOs can be located at the HRSA [Health Workforce Glossary](#). In addition, the following definitions apply to the GACA program for Fiscal Year 2023:

Age Friendly Health System means a healthcare system that improves the quality of care for older adults and optimizes value for health systems by providing older adults with the best care possible; reducing healthcare related harms to older adults to close to zero; satisfying older adults with their care; and optimizing value for individuals including patients, families, caregivers, direct care workers, healthcare providers, and health professions students, residents, fellows, and faculty, and health systems. The essential elements of age-friendly health systems are a) What Matters (to the older adult); b) Medication; c) Mentation; and d) Mobility.⁵

Allied Health Professionals means a health professional (other than a registered nurse or physician assistant)—(A) who has received a certificate, an associate’s degree, a bachelor’s degree, a master’s degree, a doctoral degree, or postbaccalaureate training, in a science relating to health care; (B) who shares in the responsibility for the delivery of health care services or related services, including— (i) services relating to the identification, evaluation, and prevention of disease and disorders; (ii) dietary and nutrition services; (iii) health promotion services; those who have received a certificate, an associate’s degree, a bachelor’s degree, a master’s degree, a doctoral degree, or post baccalaureate training, in a science relating to health care. For Title VII Programs, allied health professionals do not include: registered nurses, physician assistants, doctors of medicine, doctors of osteopathy, dentists, veterinarians, optometrists, podiatrists, pharmacists, individuals with graduate degrees in public health, health administration, or other equivalent degrees, chiropractors, clinical psychologists, social workers, or individuals with a degree in counseling or an equivalent degree.⁶

Full-Time Junior Faculty refers to a full-time academic rank of instructor or assistant professor.

Value-based care refers to reimbursement that ties payments for care delivery to quality of care provided and supports better care for individuals, better health for populations, and lower costs.⁷

Primary Mentor advises and provides guidance and supervision to the GACA candidate regarding planning, directing, executing, and evaluating the proposed activities in the GACA candidate’s career development plan. The mentor(s) must have expertise in the area of the GACA candidate’s proposed career development plan, be

⁵ The John.A. Hartford Foundation & The Institute for Healthcare Improvement. (2018). Age-Friendly Health Systems. Retrieved from: <https://www.johnahartford.org/grants-strategy/current-strategies/age-friendly-hospitals/>

⁶ Public Health Service Act-Title VII (Health Professions Education) [As Amended Through P.L. 116–260, Enacted December 27, 2020].

⁷ Retrieved from <https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/Value-Based-Programs/Value-Based-Programs.html>

committed both to the GACA candidate's career development and to the direct supervision of the GACA' candidate's project. The primary mentor must be of the same discipline as the GACA candidate.

II. Award Information

1. Type of Application and Award

Type of applications sought: New

HRSA will provide funding in the form of a grant.

2. Summary of Funding

HRSA estimates approximately \$2,100,000 to be available annually to fund 26 recipients. The actual amount available will not be determined until enactment of the final FY 2023 federal appropriation. The award amount is \$81,746 total cost (includes both direct and indirect (facilities and administrative costs)) per year.

The period of performance is July 1, 2023 through June 30, 2027 (4 years). Funding beyond the first year is subject to the availability of appropriated funds for GACA in subsequent fiscal years, satisfactory progress, and a decision that continued funding is in the best interest of the Federal Government.

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

Limitations on Indirect Cost Rates

Indirect costs under training awards to organizations other than state or local governments or federally recognized Indian tribes, will be budgeted and reimbursed at 8 percent of modified total direct costs rather than on the basis of a negotiated rate agreement, and are not subject to upward or downward adjustment. Direct cost amounts for equipment, tuition and fees, as otherwise allowable, and subawards and subcontracts in excess of \$25,000 are excluded from the direct cost base for purposes of this calculation.

III. Eligibility Information

1. Eligible Applicants

Eligible applicants per Section 753(b)(2) provides that eligible entities are those described in paragraph (1), (3), or (4) of section 799B or section 801(2) or "another accredited health professions school or graduate program approved by the Secretary."

The legislative authority includes the following:

- accredited health professions schools or graduate programs approved by the Secretary including schools of allopathic medicine, osteopathic medicine, nursing, dentistry, pharmacy, allied health, physician assistant programs, chiropractic, podiatric medicine, optometry, public health, and veterinary medicine.
- accredited graduate programs in health administration and behavioral health and mental health practice including clinical psychology, clinical social work, professional counseling, and marriage and family therapy
- Tribes and tribal organizations are eligible if they otherwise meet the eligibility requirements.

Eligible individuals (GACA candidates) must:

1. Be board certified or board eligible in internal medicine, family practice, psychiatry, or licensed dentistry, or have completed any required training in a discipline and be employed in an accredited health professions school or graduate program or an program that is approved by the Secretary; and
2. Have completed an approved fellowship program in geriatrics or have completed specialty training in geriatrics as required by the discipline; and for disciplines that do not have specialty training in geriatrics, the GACA candidate must have completed an accredited graduate level certificate program in geriatrics within the past three years; and
3. Have a full-time junior, nontenured, faculty appointment in an accredited health professions school or graduate program in geriatrics or a geriatrics health profession.

If an eligible individual is promoted during the period of an award under this program and thereby no longer meets the criteria listed above, the individual shall continue to be treated as an eligible individual through the term of the award.

2. Cost Sharing/Matching

Cost sharing/matching is not required for this program.

3. Other

HRSA may not consider an application for funding if it contains any of the non-responsive criteria below:

- Exceeds the ceiling amount \$81,746.00 total cost per year
- Fails to satisfy the deadline requirements referenced in [Section IV.4](#)

Accreditation

Applicants must provide documentation of accreditation for the health professions school or program where the GACA candidate has a full time junior faculty appointment must be submitted as **Attachment 1**. The full letter of accreditation is not required.

Maintenance of Effort

The recipient must agree to maintain non-federal funding for award activities at a level that is not less than expenditures for such activities maintained by the entity for the fiscal year preceding the fiscal year for which the entity receives the award, as required by 42 U.S.C. § 295n-2. Such federal funds are intended to supplement, not supplant, existing non-federal expenditures for such activities. Complete the Maintenance of Effort (MOE) information and submit as **Attachment 6**.

HRSA will enforce statutory MOE requirements through all available mechanisms.

NOTE: Multiple applications from an organization with the same [Unique Entity Identifier](#) (UEI) are allowable if the applications propose separate and distinct projects. An organization is defined as a single campus for a division of a university that has its own grounds, buildings, and faculty. Please note: while an eligible entity can submit multiple applications, each application must be submitted on behalf of unique junior faculty and no more than two awards will be made per organization. If two awards are made to an organization, they will be from different disciplines.

HRSA will only accept your **last** validated electronic submission, under the correct funding opportunity number, before the Grants.gov application due date as the final and only acceptable application.

Failure to include all required documents as part of the application may result in an application being considered incomplete or non-responsive. **Applications received without the appropriate tables will be deemed non-responsive to the NOFO and will not be considered for funding under this notice.**

Beneficiary Eligibility

A GACA candidate receiving support from grant funds must be a citizen, national, or permanent resident of the United States.

Current and former GACA recipients are not eligible individuals for this GACA funding opportunity.

Adjunct and associate professor positions are not eligible faculty appointments for this award.

IV. Application and Submission Information

1. Address to Request Application Package

HRSA **requires** you to apply electronically. HRSA encourages you to apply through [Grants.gov](#) using the SF-424 Research and Related (R&R) workspace application

package associated with this notice of funding opportunity (NOFO) following the directions provided at [Grants.gov: HOW TO APPLY FOR GRANTS](#). If you use an alternative electronic submission, see [Grants.gov: APPLICANT SYSTEM-TO-SYSTEM](#).

Form Alert: For the [Project Abstract Summary](#), applicants using the SF-424 R&R Application Package are encountering a “Cross-Form Error” associated with the Project Summary/Abstract field in the “Research and Related Other Project Information” form, Box 7. To avoid the “Cross-Form Error,” you must attach a blank document in Box 7 of the “Research and Related Other Project Information” form, and use the Project Abstract Summary Form in workspace to complete the Project Abstract Summary. See Section IV.2.i [Project Abstract](#) for content information.

The NOFO is also known as “Instructions” on Grants.gov. You must select “Subscribe” and provide your email address for HRSA-23-007 in order to receive notifications including modifications, clarifications, and/or republications of the NOFO on Grants.gov. You will also receive notifications of documents placed in the RELATED DOCUMENTS tab on Grants.gov that may affect the NOFO and your application. *You are ultimately responsible for reviewing the [For Applicants](#) page for all information relevant to this NOFO.*

2. Content and Form of Application Submission

Application Format Requirements

Section 4 of HRSA’s [SF-424 R&R Application Guide](#) provides general instructions for the budget, budget justification, staffing plan and personnel requirements, assurances, and certifications. You must submit the information outlined in the HRSA [SF-424 R&R Application Guide](#) in addition to the program-specific information below. You are responsible for reading and complying with the instructions included in this NOFO and HRSA’s [SF-424 R&R Application Guide](#). You must submit the application in the English language and in the terms of U.S. dollars (45 CFR § 75.111(a)).

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

Application Page Limit

The total of uploaded attachment pages that count against the page limit shall be no more than the equivalent of **70 pages** when printed by HRSA. Standard OMB-approved forms included in the workspace application package do not count in the page limit. The abstract is the standard form (SF) “Project_Abstract Summary.” If there are other attachments that do not count against the page limit, this will be clearly denoted in Section IV.2.vi Attachments.

The abstract is no longer an attachment that counts in the page limit. Additionally, Indirect Cost Rate Agreement and proof of non-profit status (if applicable) do not count in the page limit. However, if you use an OMB-approved form that is not included in the workspace application package for HRSA-23-007 it will count against the page limit.

Therefore, we strongly recommend you only use Grants.gov workspace forms associated with this NOFO to avoid exceeding the page limit.

It is important to take appropriate measures to ensure your application does not exceed the specified page limit. Any application exceeding the page limit will not be read, evaluated, or considered for funding.

Applications must be complete, within the maximum specified page limit, and validated by Grants.gov under HRSA-23-007 prior to the deadline.

Debarment, Suspension, Ineligibility, and Voluntary Exclusion Certification

- 1) You certify on behalf of the applicant organization, by submission of your proposal, that neither you nor your principals are presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from participation in this transaction by any federal department or agency.
- 2) Failure to make required disclosures can result in any of the remedies described in [45 CFR § 75.371](#), including suspension or debarment. (See also 2 CFR parts 180 and 376, and 31 U.S.C. § 3354).
- 3) If you are unable to attest to the statements in this certification, you must include an explanation in *Attachments 10-15: Other Relevant Documents*.

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

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

Section 319(e) of the Public Health Service (PHS) Act provides the Secretary of the Department of Health and Human Services (HHS) with discretion upon request by a state or tribal organization to authorize the temporary reassignment of state, tribal, and local personnel during a declared federal public health emergency. The temporary reassignment provision is applicable to state, tribal, and local public health department or agency personnel whose positions are funded, in full or part, under PHS programs and allows such personnel to immediately respond to the public health emergency in the affected jurisdiction. Funds provided under the award may be used to support personnel who are temporarily reassigned in accordance with § 319(e), which sunsets / terminates on September 30, 2023. Please reference detailed information available on the [HHS Office of the Assistant Secretary for Preparedness and Response \(ASPR\) website](#).

Program Requirements and Expectations

The GACA candidate must:

1. Describe the methodological framework that guides the GACA candidate's career development.
2. Develop the necessary knowledge and skills for career development as an academic geriatrician or academic geriatrics specialists.

3. Spend at least 75 percent of the GACA candidate's time per the statutory service requirement providing training in clinical geriatrics, including the training of interprofessional teams of healthcare professionals.
4. Identify and work with a primary mentor within the institution who has had a faculty appointment teaching geriatrics and will advise and provide guidance and supervision regarding planning, directing, executing, and evaluating the proposed activities in the GACA candidate's Faculty Career Development Plan.

i. Project Abstract

Use the Standard OMB-approved Project Abstract Summary Form 2.0 that is included in the workspace application package. Do not upload the abstract as an attachment or it will count toward the page limitation. For information required in the Project Abstract Summary Form, see Section 4.1.ix of HRSA's [SF-424 R&R Application Guide](#).

The Abstract must include:

1. Name of the project director who is the GACA candidate and the specific discipline;
2. A brief overview of the GACA candidate's project including a description of the GACA candidate's faculty development plan, how the GACA candidate will meet the statutory service requirement that 75 percent of the GACA candidate's time will be devoted to the training of clinical geriatrics including the training of interprofessional teams, and the role of the GACA candidate's mentor;
3. Specific, measurable objectives that the project will accomplish;
4. HHS and HRSA clinical priorities (i.e., behavioral health, community health, COVID-19, health equity, resilience of the workforce and strengthening healthcare access through telehealth), that will be addressed by the project, if applicable; and
5. How the proposed project for which funding is requested will be accomplished, i.e., the "who, what, when, where, why, and how" of a project.

NARRATIVE GUIDANCE

To ensure that you fully address the review criteria, the table below provides a crosswalk between the narrative language and where each section falls within the review criteria. Any forms or attachments referenced in a narrative section may be considered during the objective review.

<u>Narrative Section</u>	<u>Review Criteria</u>
Purpose and Need	(1) Purpose and Need

<u>Narrative Section</u>	<u>Review Criteria</u>
Response to Program Purpose: (a) Work Plan (b) Methodology/Approach (c) Resolution of Challenges	(2) Response to Program Purpose (a) Work Plan (b) Methodology/Approach (c) Resolution of Challenges
Impact: (a) Evaluation and Technical Support Capacity (b) Project Sustainability	(3) Impact: (a) Evaluation and Technical Support Capacity (b) Project Sustainability
Organizational Information, Resources, and Capabilities	(4) Organizational Information, Resources, and Capabilities
Budget and Budget Justification Narrative	(5) Support Requested

ii. *Project Narrative*

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

Use the following section headers for the narrative:

- **PURPOSE AND NEED** -- [Corresponds to Section V's Review Criterion # 1](#)

This section will help reviewers understand the organization and the role of a junior faculty GACA candidate, and the community that will benefit from the GACA candidate's activities.

1. Describe the purpose of the GACA candidate's proposed project.
2. Outline the need for faculty with geriatrics expertise and interprofessional geriatrics education and training at the GACA candidate's institution.
3. Describe the GACA candidate's prior training, teaching experience, and academic career. Include a description of the GACA candidate's primary duties and professional responsibilities at their institution, any publications related to the proposed project, and other relevant experience.
4. Describe the GACA candidate's commitment to a career in interprofessional geriatrics clinical education and describe how the GACA candidate is expected to advance his/her academic career.
5. Provide evidence of the GACA candidate's potential to develop into a clinician educator/faculty leader to transform health systems, including

nursing homes and health systems in rural and/or medically underserved areas, to be age-friendly.

6. Provide evidence of the GACA candidate's potential to develop into a clinician educator/faculty leader to strengthen healthcare access through telehealth.
 7. Describe the socio-cultural determinants of health and health disparities that the GACA candidate will be addressing in their training, within the context of the age-friendly health systems framework, to address dementia-risk reduction, dementia across the disease trajectory including training on dementia medications as they are approved for use in nursing homes and any rural and/or medically underserved population(s)/community(ies) served.
 8. Identify the targeted learners and their health professions/disciplines that the GACA candidate's will be training (their training needs, and the population(s)/community(ies) served, including in nursing homes and any rural and/or medically underserved population(s)/community(ies).
 9. Use and cite demographic data whenever possible to support the information provided.
- *RESPONSE TO PROGRAM PURPOSE -- This section includes three sub-sections — (a) Work Plan; (b) Methodology/Approach; and (c) Resolution of Challenges—all of which correspond to Section V's Review Criteria 2 (a), (b), and (c).*
 - (a) **WORK PLAN** -- [Corresponds to Section V's Review Criterion 2 \(a\)](#)
Provide a detailed work plan that demonstrates the GACA candidate's experience implementing a project of the proposed scope. The GACA candidate's work plan must be submitted through the Standardized Work Plan (SWP) Form located in the Grants.gov workspace. The SWP form is organized by budget period and must include all activities and deliverables for each objective and program goal. **The program goals for this NOFO must be entered in the Program Goals section of the SWP form.** For example, Goal 1 in the Purpose section of the NOFO will need to be entered as Goal 1 in the SWP form. Objectives and sub-objectives can be tailored to the GACA candidate's project needs. Objectives may be tagged with organizational priorities by selecting applicable priorities on the SWP form. For the purpose of this NOFO, please write in COVID-19 or Health Equity in the "Other Priority Linkage" if the GACA candidate's objective or sub-objectives align with those priorities. Form instructions are provided along with the SWP form, and are included in the application package found on Grants.gov.

You must complete the SWP mandatory form in the Application Package.

1. Describe the activities or steps you will use to achieve each of the objectives proposed during the entire period of performance identified in the Methodology section.
2. Describe the timeframes, deliverables, and key partners required during the period of performance to address each of the needs described in the

Purpose and Need section including the Age-Friendly Health Systems Framework and telehealth.

3. Explain how the work plan is appropriate for the program design and how the targets fit into the overall timeline of the four-year period of performance.
4. Identify meaningful support and collaboration with the GACA candidate's mentor in planning, designing, and implementing all activities, including development of the application, and the extent to which the GACA candidate's faculty development plan addresses the educational needs of the healthcare professionals to be trained and the populations and communities they serve, including any rural and/or medically underserved populations. The GACA candidate's primary mentor must be an academic geriatrician or an academic geriatrics and have a faculty appointment at the GACA candidate's institution.

▪ (b) *METHODOLOGY/APPROACH* -- [Corresponds to Section V's Review Criterion 2 \(b\)](#)

Describe the GACA candidate's objectives and proposed activities and provide evidence for how they link to the project purpose and stated needs. Propose methods that you will use to address the program requirements and expectations in this NOFO.

1. Describe the GACA candidate's faculty career development plan and how the GACA candidate's plan is designed to help develop the necessary knowledge and skills as a clinician educator in geriatrics to transform and lead Age-Friendly Health Systems and strengthen healthcare access through telehealth.
2. Describe the GACA candidate's proposed interprofessional training activities and how you will meet the statutory service requirement.
3. Describe the activities you will use to become a successful clinician educator, including, but not limited to, how you will:
 - Obtain the necessary pedagogical experience to facilitate development as an academician;
 - Develop effective culturally and linguistically competent interprofessional curricula, tools, and training materials that address the social determinants of health and health disparities of the targeted population(s)/community(ies), including in any rural and/or medically underserved population(s)/community(ies);
 - Provide interprofessional geriatrics education and training to health professions students, faculty, providers, direct care workers, patients, families, and caregivers, as appropriate, to practice in Age-Friendly Health Systems; to include dementia-risk reduction, dementia across the disease trajectory including training on dementia medications as they are approved for use,
 - Transform clinical training environments to be age-friendly;

- Interact and learn from other clinician educators as well as other program participants at both the local and national levels;
 - Publish educational outcomes; and
 - Actively participate in national professional societies.
4. Describe the targeted learners and population(s)/community(ies) that the GACA candidate's will train including nursing homes that will benefit from the project, including any rural and/or medically underserved population(s)/community(ies). Describe how GACA candidate's experiences will be enhanced, and how the proposed activities are expected to improve access, quality, and cost of care for patients.
 5. Include a plan to disseminate reports, products, and/or project outputs so project information is provided to key target audiences.
 6. Explain how the GACA candidate's faculty career development plan is innovative in educating and training interprofessional teams.
- *(c) RESOLUTION OF CHALLENGES* -- [Corresponds to Section V's Review Criterion 2 \(c\)](#)
Discuss challenges that the GACA candidate are likely to encounter in designing and implementing the GACA activities described in the work plan, and approaches that the GACA candidate will use to resolve such challenges.
 1. Describe the challenges the GACA candidate's may encounter in achieving the program specific requirements.
 2. Describe challenges related to achievement of project objectives, carrying out the work plan according to the proposed timetable, and project implementation.
 3. Describe proposed solutions to the challenges that are identified.
 - *IMPACT* -- *This section includes two sub-sections— (a) Evaluation and Technical Support Capacity; and (b) Project Sustainability—both of which correspond to Section V's Review Criteria 3 (a) and (b).*
 - *(a) EVALUATION AND TECHNICAL SUPPORT CAPACITY* -- [Corresponds to Section V's Review Criterion\) 3 \(a\)](#)
 1. Describe the plan for the program performance evaluation that will contribute to value-based care and continuous quality improvement. The program performance evaluation must monitor ongoing processes and the progress towards meeting the goals and objectives of the project. Include descriptions of the inputs (e.g., key evaluation staff (this may be the GACA candidate's and their mentor) organizational support, budget, and other resources), key processes, variables to be measured, expected outcomes, and a description of how all key evaluative measures will be reported.

2. Describe the systems and processes that will support the GACA candidate's organization's collection of HRSA'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. At the following link, you will find the performance measures and data forms required for the GACA program in Academic Year 2021-2022:
<http://bhw.hrsa.gov/grants/reporting/index.html>.

NOTE: Performance measures and data forms are subject to change each academic year.

3. Describe the data collection strategy to accurately collect, analyze and track data to measure process and impact/outcomes, and explain how the data will be used to inform program development and service delivery. Describe any potential obstacles for implementing the program performance evaluation and the GACA candidate's plan to address those obstacles.
4. Document the procedure for assuring the data collection, management, storage, and reporting of National Provider Identifier (NPI) numbers for individuals participating in the Program. The evaluation and reporting plan also should indicate the feasibility and effectiveness of plans for dissemination of project results, the extent to which project results may be national in scope, and the degree to which the project's activities are replicable.
5. Include a plan for Rapid Cycle Quality Improvement (RCQI) for the continuous monitoring of the GACA candidate's ongoing career development plan, project processes, outcomes of implemented activities, and progress toward meeting GACA goals and objectives and the implementation of necessary adjustments to planned activities to effect course corrections. Additional information on RCQI is available at the following website: https://www.healthworkforceta.org/wp-content/uploads/2016/06/RCQI_Resource_Guide.pdf.
6. Program Impact Evaluation: You must include an evaluation plan to show program impact related to the GACA candidate's clinical training in geriatrics, their interprofessional training of health care professionals, and their career development activities. The GACA candidate is encouraged to evaluate patient outcomes matched to existing measures. For example, the Institute for Healthcare Improvement suggests using the What Matters CollaboRATE tools⁸ to survey care concordance or that you develop a

⁸ Forcino, R. C., Barr, P. J., O'Malley, A. J., Arend, R., Castaldo, M. G., Ozanne, E. M., Percac-Lima, S., Stults, C. D., Tai-Seale, M., Thompson, R., & Elwyn, G. (2018). Using CollaboRATE, a brief patient-reported measure of shared decision making: Results from three clinical settings in the United States. *Health expectations: an international journal of public participation in health care and health policy*, 21(1), 82–89. Retrieved from <https://doi.org/10.1111/hex.12588>.

similar tool to measure goal concordant care in an Age-Friendly Framework.⁹

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

Propose a plan for project sustainability after the period of federal funding ends, including a description of specific actions you will take to (a) highlight key elements of the GACA candidate's grant projects, e.g., training methods or strategies, which have been effective in improving practices; (b) obtain future sources of potential funding; as well as (c) provide a timetable for becoming self-sufficient. 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. Discuss challenges that are likely to be encountered in sustaining the program and approaches that will be used to resolve such challenges.

▪ *ORGANIZATIONAL INFORMATION, RESOURCES, AND CAPABILITIES* -- [Corresponds to Section V's Review Criterion\(a\) 4](#)

1. Succinctly describe the organizational structure of the career development plan (not the applicant organization) (requested in Section IV.2.v./ **Attachment 7**).
2. Discuss how the organization will follow the approved plan, as outlined in the application, properly account for the federal funds, and document all costs to avoid audit findings. Describe how you will routinely assess and improve the unique needs of target populations of the communities served.
3. Identify and describe the primary mentor who will advise and provide guidance and supervision regarding planning, directing, executing, and evaluating the proposed activities in the GACA candidate's career development plan. Mentors must have expertise in the area of the GACA candidate's proposed career development plan be committed to both the GACA candidate career development and the direct supervision of their program. Primary mentors must have a faculty appointment at the same institution as the GACA candidate.
4. Describe the expertise and role of the primary mentor in the development of the GACA candidate's career development and provide a letter of support from the primary mentor (**Attachment 4**). The primary mentor must document a strong commitment to the GACA candidate's career development and must:
 - Demonstrate expertise in the area of the GACA candidate's proposed faculty career development plan and a commitment to

⁹ Institute for Healthcare Improvement. 2020. Guide to Using the 4Ms in the Care of Older Adults. Retrieved from http://www.ihl.org/Engage/Initiatives/Age-Friendly-Health-Systems/Documents/IHIAgeFriendlyHealthSystems_GuidetoUsing4MsCare.pdf

both the GACA candidate's career development and the direct supervision of the GACA candidate's within the context of their career development plan;

- Demonstrate how the award will enhance the development of the GACA candidate's academic/clinical career in geriatrics;
 - Document that they have a full-time academic appointment located at the same institution as you;
 - Attest that the GACA candidate has the necessary resources to implement the faculty development plan, meet the statutory service requirement, and spend 75 percent of the GACA candidate's time that is supported by the award on teaching and developing skills in interdisciplinary education in geriatrics; and
 - Commit to providing an annual evaluation of the GACA candidate's progress.
5. Document the applicant organization in a letter of commitment (**Attachment 4**), has a strong, well-established career development program related to the GACA candidate's area of interest, including:
- Assurances that the GACA candidate has a full-time faculty appointment in an accredited health professions school and that the institution has a documented commitment to spend 75 percent of the trainee's total time on teaching and developing skills in interprofessional geriatrics education;
 - Resources and facilities that will be available to the GACA candidate, to include appropriate office space, equipment, and other resources and facilities, including access to clinical populations, necessary to carry-out the proposed career development plan.
 - How the organization will follow the approved plan, as outlined in the application, properly account for the federal funds, and document all costs so as to avoid audit findings.
 - Document the date of the GACA candidate's junior faculty appointment and anticipated month and year of promotion.

Biographical sketches for the GACA candidate, Primary Mentor, Department Chairperson, and other key personnel, such as Secondary Mentor(s) and consultants not exceeding two pages per person must be uploaded in the SF-424 RESEARCH & RELATED Senior-Key Person Profile form, should include the following information:

- Senior/key personnel name
- Position Title

- Education/Training - beginning with baccalaureate or other initial professional education, such as nursing, including postdoctoral training and residency training if applicable:
 - Institution and location
 - Degree (if applicable)
 - Date of degree (MM/YY)
 - Field of study
- Section A (*required*) **Personal Statement**. Briefly describe why the individual's experience and qualifications make them particularly well-suited for their role (e.g., PD/PI) in the project that is the subject of the award.
- Section B (*required*) **Positions and Honors**. List in chronological order previous positions, concluding with the present position. List any honors. Include present membership on any Federal Government public advisory committee.
- Section C (*optional*) **Peer-reviewed publications or manuscripts in press (in chronological order)**. You are encouraged to limit the list of selected peer-reviewed publications or manuscripts in press to no more than 15. Do not include manuscripts submitted or in preparation. The individual may choose to include selected publications based on date, importance to the field, and/or relevance to the proposed research. Citations that are publicly available in a free, online format may include URLs along with the full reference (note that copies of publicly available publications are not acceptable as appendix material).
- Section D (*optional*) **Other Support**. List both selected ongoing and completed (during the last 3 years) projects (federal or non-federal support). Begin with any projects relevant to the project proposed in this application. Briefly indicate the overall goals of the projects and responsibilities of the Senior/Key Person identified on the Biographical Sketch.

iii. **Budget**

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

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

As required by the Consolidated Appropriations Act, 2022 (P.L. 117-103), “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.” See Section 4.1.iv Budget – Salary Limitation of HRSA's [SF-424 R&R Application Guide](#) for additional information. Note that these or other salary limitations may apply in the following fiscal years, as required by law.

Indirect costs under training awards to organizations other than state or local governments, or federally recognized Indian tribes, will be budgeted and reimbursed at 8 percent of modified total direct costs rather than on the basis of a negotiated rate agreement, and are not subject to upward or downward adjustment. Direct cost amounts for equipment, tuition and fees, and subawards and subcontracts in excess of \$25,000 are excluded from the direct cost base for purposes of this calculation.

iv. **Budget Justification Narrative**

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

The budget justification narrative must describe all line-item federal funds (including subawards), proposed for this project. Please note: all budget justification narratives count against the page limit.

In addition, the GACA program requires the following:

GACA Candidate Training Costs: Include all annual support for the GACA candidate's training needs, including but not limited to attendance at seminars, professional conferences, classes, and education materials.

Travel: Include travel support for you and the Primary Mentor to attend one grantee meeting to be held annually over 2 days in the Washington, D.C. area over the four-year period of performance.

Consultant Services: If you are using consultant services, list the total costs for all consultant services. In the budget justification, identify each consultant, the services

they will perform, the total number of days, travel costs, and the total estimated costs.

v. **Standardized Work Plan (SWP) Form**

As part of the application submitted through Grants.gov, you must complete and electronically submit the SWP Form by the application due date. Work Plan -- [Corresponds to Section V's Review Criterion 2 \(a\)](#).

The SWP Form is part of the electronic Grants.gov application package and must be completed online as a part of the Grants.gov application package. Ensure it includes all the information detailed in Section IV.2.ii. Project Narrative.

vi. **Attachments**

Provide the following items in the order specified below to complete the content of the application. **Unless otherwise noted, attachments count toward the application page limitation.** The applicant organization's indirect cost rate agreement and proof of non-profit status (if applicable) will not count toward the page limitation. **Clearly label each attachment.** You must upload attachments into the application. Any hyperlinked attachments will not be reviewed/opened by HRSA.

Attachment 1: Accreditation Documentation of Health Professional School – (Required)

Accreditation documentation for the health professional school where the GACA candidate has a full time junior faculty appointment must be submitted. The full letter of accreditation is not required. In the event of any change in the status of accreditation, you must immediately inform the HRSA project officer. The document must provide:

- a statement that the health professions school holds continuing accreditation from the relevant accrediting body and is not on probation,
- the name of the accrediting body;
- the date of initial accreditation, or provisional accreditation or evidence; that the applicant organization has started the accreditation process from the accreditation agency; and
- the date of the next expected accrediting body review (or expiration date of current accreditation).

Attachment 2: Board Certification, Certificate or Letter of Board Eligibility– (Required)

Provide board certification documentation in internal medicine, family practice, psychiatry, or licensed dentistry, or documentation demonstrating completion of any geriatrics training in a discipline. For disciplines that do not have specialty training in geriatrics, the GACA candidate must provide documentation of having completed an accredited graduate level certificate program in geriatrics within the past three years.

Certificates in nursing home administration, clinical geropsychology, clinical social work-gerontology, clinical geriatrics pharmacy, clinical geriatrics physical therapy, clinical geriatrics occupational therapy, clinical geriatrics nutrition, and clinical mental health counselling specialist in geriatrics counseling, should be submitted.

Board eligible individuals from internal medicine, family practice, or psychiatry for allopathic and osteopathic physicians, or licensed dentistry for dentists, or geriatric optometry, must submit a letter from the GACA candidate's Department Chairperson stating when the GACA candidate will be board eligible and when you will be taking the board examination.

Attachment 3: Certificate of Completion of an Approved Fellowship Program in Geriatrics or Certificate of Completion in Specialty Training in Geriatrics as Required by the Discipline, and Any Other Additional Geriatrics Training–(Required)

Submit documentation indicating completion of the relevant programs or trainings.

Attachment 4: Letter of Commitment from the Primary Mentor–(Required)

The letter of commitment from the primary mentor should include acknowledgement of their profession, roles, responsibilities, and commitment to support the GACA candidate's career development and advancement in academic geriatrics. Indicate that they are employed by the applicant's institution and qualified through past education and experience.

Attachment 5: Letter of Agreement from the Applicant Organization: The GACA Candidate's Health Professions School –(Required)

The letter of agreement must include a signed and dated:

- Certificate of Faculty Appointment from the GACA candidate's health professions school and must include that the GACA Candidate have a full-time junior faculty appointment from July 1, 2023 through June 30, 2027 and anticipated month and year of promotion; and
- Certificate of Service Requirement is to document the institutional commitment for you to spend 75 percent of the GACA candidate's total time on teaching and developing skills in interprofessional geriatrics education.

Attachment 6: Maintenance of Effort Documentation- (Required)

Applicants must provide a baseline aggregate expenditure for the prior fiscal year and an estimate for the next fiscal year using a chart similar to the one below. HRSA will enforce statutory MOE requirements through all available mechanisms.

NON-FEDERAL EXPENDITURES	
FY2022 (Actual) Actual FY2022 non-federal funds, including in-kind, expended for activities proposed in this application. Amount: \$ _____	Current FY2023 (Estimated) Estimated FY2023 non-federal funds, including in-kind, designated for activities proposed in this application. Amount: \$ _____

Attachment 7: Project Organizational Chart- (Required)

Provide a one-page figure that depicts the organizational structure of the project (not the applicant organization).

Attachment 8: Documentation of Applicant Organization Address in a Rural or Medically Underserved Area - (Required)

Provides documentation of the applicant organization's address in a rural or medically underserved area (MUA) using the [Rural Health Grants Eligibility Analyzer](#) or the [HRSA Find Shortage Areas](#). If the applicant is not located in a rural or medically underserved area, indicate not applicable on this attachment.

Attachments 9-15: Other Relevant Documents

Include here any other documents that are relevant to the application.

3. Unique Entity Identifier (UEI) and System for Award Management (SAM)

The UEI (SAM), a new, non-proprietary identifier assigned by SAM, has replaced the UEI Data Universal Numbering System (DUNS) number.

Effective April 4, 2022:

- Register in SAM.gov and you will be assigned your UEI (SAM) within SAM.gov.
- You will no longer use a UEI (DUNS) and that number will not be maintained in any Integrated Award Environment (IAE) systems (SAM.gov, CPARS, FAPIIS, eSRS, FSRS, FPDS-NG). For more details, visit the following webpages: [Planned UEI Updates in Grant Application Forms](#) and [General Service Administration's UEI Update](#).

You must register with SAM and continue to maintain active SAM registration with current information at all times when you have: an active federal award, or an active application, or an active plan under consideration by an agency (unless you are an individual or federal agency that is exempted from those requirements under 2 CFR

§ 25.110(b) or (c), or you have an exception approved by the agency under 2 CFR § 25.110(d)). For your SAM.gov registration, you must submit a [notarized letter](#) appointing the authorized Entity Administrator.

If you are chosen as a recipient, HRSA will not make an award until you have complied with all applicable SAM requirements. If you have not fully complied with the requirements by the time HRSA is ready to make an award, you may be deemed not qualified to receive an award, and HRSA may 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 two separate systems:

- System for Award Management (SAM) (<https://sam.gov/content/home> | [SAM.gov Knowledge Base](#))
- Grants.gov (<https://www.grants.gov/>)

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

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

4. Submission Dates and Times

Application Due Date

The due date for applications under this NOFO is *November 3, 2022 at 11:59 p.m.ET*. HRSA suggests you submit your application to Grants.gov at least **3 calendar days before the deadline** to allow for any unforeseen circumstances. See Section 8.2.5 – Summary of emails from Grants.gov in HRSA's [SF-424 R&R Application Guide](#) for additional information. Intergovernmental Review

The GACA program is not subject to the provisions of Executive Order 12372, as implemented by 45 CFR part 100.

See Section 4.1 ii of HRSA's SF-424 R&R Application Guide for additional information.

5. Intergovernmental Review

The GACA program is not subject to the provisions of Executive Order 12372, as implemented by 45 CFR part 100.

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

6. Funding Restrictions

You may request funding for a period of performance of up to 4 years, at no more than \$81,746 per year (inclusive of direct **and** indirect costs). The annual award amount will be subject to change per the cost of living adjustment. Awards to support projects beyond the first budget year will be contingent upon Congressional appropriation, satisfactory progress in meeting the project's objectives, and a determination that continued funding would be in the best interest of the Federal government.

The General Provisions in Division H of the Consolidated Appropriations Act, 2022 (P.L. 117-103) apply to this program. See Section 4.1 of HRSA's [SF-424 R&R Application Guide](#) for additional information. Note that these and other restrictions will apply in the following fiscal years, as required by law.

NOTE: You cannot use funds under this notice for international travel or construction.

You are required to have the necessary policies, procedures, and financial controls in place to ensure that your organization complies with all legal requirements and restrictions applicable to the receipt of federal funding including statutory restrictions on specific uses of funding. It is imperative that you review and adhere to the list of statutory restrictions on the use of funds detailed in Section 4.1 of HRSA's SF-424 R&R Application Guide. Like all other applicable grants requirements, the effectiveness of these policies, procedures, and controls is subject to audit.

Be aware of the requirements for HRSA recipients and subrecipients at 2 CFR § 200.216 regarding prohibition on certain telecommunications and video surveillance services or equipment. For details, see the [HRSA Grants Policy Bulletin Number: 2021-01E](#).

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

V. Application Review Information Review Criteria

1. Review Criteria

HRSA has procedures for assessing the technical merit of applications to provide for an objective review and to assist you in understanding the standards against which your application will be reviewed. HRSA has indicators for each review criterion to assist you in presenting pertinent information related to that criterion and to provide the reviewer with a standard for evaluation.

Reviewers will evaluate and score the merit of your application based upon these criteria.

Five review criteria are used to review and rank GACA program applications. Below are descriptions of the review criteria and their scoring points.

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

The extent to which the application demonstrates the problem and associated contributing factors to the problem, including the quality and extent to which it addresses:

1. The GACA candidate's prior training, background, or other evidence that is supportive of his or her potential to develop into a clinician educator and faculty leader to lead and transform age-friendly health systems and strengthen healthcare access through telehealth.
2. The GACA candidate's commitment to a career in interprofessional geriatrics education and training.
3. The need for the GACA candidate's career development to lead and transform clinical training environments to be age-friendly, including for any rural and/or medically underserved populations or communities.
4. The need for interprofessional geriatrics education and training by the targeted learners (health professions/disciplines) that the GACA candidate will provide, and the population(s)/community(ies) served, including for any rural and/or medically underserved population(s)/community(ies).
5. The socio-cultural determinants of health and health disparities to be addressed in the GACA candidate's training, within the context of the age-friendly health systems framework, and address dementia-risk reduction, dementia across the disease trajectory including training on dementia medications as they are approved for use in nursing homes and any rural and/or medically underserved population(s)/community(ies) served.

Criterion 2: RESPONSE TO PROGRAM PURPOSE (40 points) – Corresponds to Section IV's *Response to Program Purpose Sub-section (a) Methodology/Approach, Sub-section (b) Work Plan and Sub-section (c) Resolution of Challenges*

Criterion 2 (a): WORK PLAN (15 points) – [Corresponds to Section IV's Response to Program Purpose Sub-section \(a\) Work Plan](#)

The application will be evaluated on the extent to which:

1. The GACA candidate provides a clear, comprehensive, and specific set of goals and objectives and concrete steps that will be used to achieve those goal and objectives. The application should include timelines, stakeholders, and a description of the educational needs of the healthcare professionals to be trained and the populations and communities they serve, including for any rural and/or medically underserved populations or communities.

2. The GACA candidate's career development plan addresses the needs of the targeted learners and population(s)/community(ies), including nursing homes and any rural and/or medically underserved populations or communities served.
3. The work plan addresses strengthening access to healthcare through telehealth and uses the age-friendly health systems platform to transform healthcare.
4. The objectives are specific, measurable, attainable, reasonable, and time-bound within the four-year period of performance.
5. The proposed activities and timelines, including the evaluation plan are feasible.
6. The work plan is clear, complete, and allows tracking of project progress.

Criterion 2 (b): METHODOLOGY/APPROACH (20 points) – [Corresponds to Section IV's Response to Program Purpose Sub-section \(b\) Methodology/Approach](#)

The application will be evaluated on the extent to which it demonstrates:

1. The GACA candidate's career development plan is matched to the needs of the individual and likely to provide the necessary knowledge, skills, and experience needed for the candidate to advance in an academic career.
2. The proposed faculty career development plan responds to the requirements and expectations of the program and addresses the needs highlighted in the Purpose and Need sections.
3. The proposed goals and objectives support the proposed career development plan.
4. The activities described in the application are capable of attaining the project objectives. This includes describing, as appropriate, tools and strategies for meeting stated needs.
5. The GACA candidate provides a logical description of proposed activities and describes how the project is innovative.
6. The GACA candidate's career development plan addresses the statutory service requirement to spend at least 75 percent of his/her total GACA protected time on teaching clinical geriatrics, including the training of interprofessional teams of health care professionals.
7. The interprofessional education impacts improvement in the knowledge and skills of the workforce in clinical geriatrics and improves the health of the target population(s) including nursing home residents, and including any rural and/or medically underserved populations.
8. The targeted learners and population(s)/community(ies) benefit from the project, how their experiences will be enhanced, and how the proposed activities are expected to improve access, quality, and cost of care for patients.

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

The extent to which the GACA candidate:

1. Demonstrates an understanding of risk factors, such as social determinants of health, potential obstacles and challenges during the design and implementation of the project.
2. Develops a plan for dealing with identified contingencies that may arise.

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

Criterion 3(a): EVALUATION AND TECHNICAL SUPPORT CAPACITY (25 points) – [Corresponds to Section IV's Impact Sub-section \(a\) Evaluation and Technical Support Capacity](#)

The application will be evaluated on the extent to which it demonstrates:

1. The GACA candidate's proposed career development plan will be effective in meeting career development needs, the education and training of health care professionals and the population(s)/community(ies) they serve, including for any rural and/or medically underserved population(s)/community(ies).
2. The ability to collect data and report on all measures that may be included in HRSA's annual performance reports and final performance reports.
3. The evaluation plan includes necessary components (descriptions of the inputs, key processes, variables to be measured, expected outcomes of the funded activities, and how key measures will be reported), as well as a description of how data will be collected and managed data in such a way that allows for accurate and timely reporting of performance outcomes.
4. The GACA candidate anticipates challenges to the evaluation and proposes how to address them.
5. The GACA candidate describes the feasibility and effectiveness of plans for dissemination of project results.
6. The 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.

Criterion 3 (b): PROJECT SUSTAINABILITY (5 points) – [Corresponds to Section IV's Impact Sub-section \(b\) Project Sustainability](#)

The application will be evaluated on:

1. The extent to which the application describes a solid plan for project sustainability after the period of federal funding ends.

2. The extent to which it clearly articulates likely challenges to be encountered in sustaining the program, and describes logical approaches to resolving such challenges.

Criterion 4: ORGANIZATIONAL INFORMATION/RESOURCES/CAPABILITIES (15 points) – [Corresponds to Section IV's Organizational Information, Resources, and Capabilities](#)

The application will be evaluated on the extent to which:

1. Project personnel are qualified by training and/or experience to implement and carry out the project; this will be evaluated both through the project narrative, as well as through the attachments.
2. The applicant organization can effectively manage the programmatic, fiscal, and administrative aspects of the proposed GACA award.
3. The primary mentor, through a letter of commitment (**Attachment 4**), demonstrates that he/she is qualified through past education and experience to fully support the GACA candidate's career development plan and is committed to the candidate's career development plan.
4. The applicant organization, through a letter of agreement from the applicant organization (**Attachment 5**); demonstrates a commitment to the GACA candidate's career development plan. This includes assurances that the GACA candidate has a documented commitment to spend 75 percent of their total time on teaching and developing skills in interprofessional geriatrics education and has a full-time faculty appointment.
5. The unique needs of the targeted health professions/disciplines and target populations(s)/community(ies) served are routinely assessed and improved, including any rural and/or medically underserved population(s)/community(ies).

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

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

1. The extent to which costs, as outlined in the budget and required resources sections, demonstrate the costs are clearly justified by a narrative description, includes an itemized cost breakdown, including the allowable indirect cost, and are reasonable given the scope of work.
2. The extent to which key personnel have adequate time devoted to the project to achieve project objectives.

3. The completeness of the SF-424 R&R, and responsiveness to the budget information requested within this NOFO and SF-424 R&R Application Guide.
4. The extent to which the applicant provides an SF 424 R&R line item budget form for each 12 month period of performance with a corresponding budget narrative justification.

2. Review and Selection Process

The objective review process provides an objective evaluation of applications to the individuals responsible for making award decisions. The highest ranked applications receive consideration for award within available funding ranges. HRSA may also consider assessment of risk and the other pre-award activities described in Section 3 below. See Section 5.3 of HRSA's [SF-424 R&R Application Guide](#) for more details. In addition to the ranking based on merit criteria, HRSA approving officials will apply other factors (e.g., geographical distribution) described below in selecting applications for award.

Funding Priorities

The GACA program does not have funding priorities.

Funding Preferences

The GACA program does not have a funding preference.

Funding Special Considerations and Other Factors

In making final award decisions, HRSA anticipates funding at least one awardee in each of the ten geographical [HHS regions](#), including in rural and/or medically underserved areas.

HRSA also will aim for a proportionate distribution of awards across the health professional disciplines based on the number of eligible applications received and recommended for funding by the Objective Review Committee.

While you can submit multiple applications, no more than two awards will be made per institution. If two awards are made to an institution, they will be in different disciplines.

NOTE: In order to achieve the distribution of awards as stated above, HRSA may need to fund out of rank order.

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

3. Assessment of Risk

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

HRSA reviews applications receiving a favorable objective review for other considerations that include past performance, as applicable; cost analysis of the

project/program budget; assessment of the applicant organization's management systems, ensuring continued applicant eligibility; and compliance with any public policy requirements, including those requiring just-in-time submissions. HRSA may ask you to submit additional programmatic or administrative information (such as an updated budget or "other support" information) or to undertake certain activities (such as negotiation of an indirect cost rate) in anticipation of an award. However, even at this point in the process, such requests do not guarantee that HRSA will make an award. Following review of all applicable information, HRSA's approving and business management officials will determine whether HRSA can make an award, if special conditions are required, and what level of funding is appropriate.

Award decisions are discretionary and are not subject to appeal to any HRSA or HHS official or board.

HRSA is required to review and consider any information about your organization that is in the [Federal Awardee Performance and Integrity Information System \(FAPIIS\)](#). You may review and comment on any information about your organization that a federal awarding agency previously entered. HRSA will consider your comments, in addition to other information in [FAPIIS](#) in making a judgment about your organization's integrity, business ethics, and record of performance under federal awards when completing the review of risk as described in [45 CFR § 75.205 HHS Awarding Agency Review of Risk Posed by Applicants](#).

HRSA will report to FAPIIS a determination that an applicant is not qualified ([45 CFR § 75.212](#)).

VI. Award Administration Information

1. Award Notices

HRSA will release the Notice of Award (NOA) on or around the start date of July 1, 2023. See Section 5.4 of HRSA's [SF-424 R&R Application Guide](#) for additional information.

2. Administrative and National Policy Requirements

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

If you are successful and receive a NOA, in accepting the award, you agree that the award and any activities thereunder are subject to:

- all provisions of 45 CFR part 75, currently in effect or implemented during the period of the award,
- other federal regulations and HHS policies in effect at the time of the award or implemented during the period of award, and
- applicable statutory provisions.

Accessibility Provisions and Non-Discrimination Requirements

Should you successfully compete for an award, recipients of federal financial assistance (FFA) from HHS must administer your programs in compliance with federal civil rights laws that prohibit discrimination on the basis of race, color, national origin, disability, age and, in some circumstances, religion, conscience, and sex (including gender identity, sexual orientation, and pregnancy). This includes ensuring programs are accessible to persons with limited English proficiency and persons with disabilities. The HHS Office for Civil Rights (OCR) provides guidance on complying with civil rights laws enforced by HHS. See [Providers of Health Care and Social Services](#) and [HHS Nondiscrimination Notice](#).

1. Recipients of FFA must ensure that their programs are accessible to persons with limited English proficiency. For guidance on meeting your legal obligation to take reasonable steps to ensure meaningful access to your programs or activities by limited English proficient individuals, see [Fact Sheet on the Revised HHS LEP Guidance](#) and [Limited English Proficiency](#).
2. For information on your specific legal obligations for serving qualified individuals with disabilities, including reasonable modifications and making services accessible to them, see [Discrimination on the Basis of Disability](#).
3. HHS-funded health and education programs must be administered in an environment free of sexual harassment. See [Discrimination on the Basis of Sex](#).
4. For guidance on administering your program in compliance with applicable federal religious nondiscrimination laws and applicable federal conscience protection and associated anti-discrimination laws, see [Conscience Protections for Health Care Providers](#) and [Religious Freedom](#).

Please contact the [HHS Office for Civil Rights](#) for more information about obligations and prohibitions under federal civil rights laws or call 1-800-368-1019 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 and assist HRSA recipients in meeting their civil rights obligations. 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.

Executive Order on Worker Organizing and Empowerment

Pursuant to the Executive Order on Worker Organizing and Empowerment, (E.O. 14025), HRSA strongly encourages applicants to support worker organizing and collective bargaining and to promote equality of bargaining power between employers and employees. This may include the development of policies and practices that could be used to promote worker power. Applicants can describe their plans and specific activities to promote this activity in the application narrative.

Requirements of Subawards

The terms and conditions in the NOA apply directly to the recipient of HRSA funds. The recipient is accountable for the performance of the project, program, or activity; the appropriate expenditure of funds under the award by all parties; and all other obligations of the recipient, as cited in the NOA. In general, the requirements that apply to the recipient, including public policy requirements, also apply to subrecipients under awards, and it is the recipient's responsibility to monitor the compliance of all funded subrecipients. See [45 CFR § 75.101 Applicability](#) for more details.

Data Rights

All publications developed or purchased with funds awarded under this notice must be consistent with the requirements of the program. Pursuant to [45 CFR § 75.322\(b\)](#), the recipient owns the copyright for materials that it develops under an award issued pursuant to this notice, 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 award 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 others. If applicable, the specific scope of HRSA rights with respect to a particular grant-supported effort will be addressed in the NOA. Data and copyright-protected works developed by a subrecipient also are subject to the Federal Government's copyright license and data rights.

3. Reporting

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

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

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

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

In addition, you must submit 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 their activities based on the information submitted in the SWP.

More information will be available in the NOA Performance Reports.

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

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

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

The Final Report is designed to provide HRSA with information required to close out a grant after completion of project activities. Recipients are

required to submit a final report at the end of their project. The Final Report includes the following sections:

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

Further information will be provided in the NOA.

- 4) **Federal Financial Report.** A Federal Financial Report (SF-425) is required according to the schedule in the [SF-424 R&R Application Guide](#). The report is an accounting of expenditures under the project that year. More specific information will be included in the NoA.
- 5) **Integrity and Performance Reporting.** The NOA 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 request additional information and/or technical assistance regarding business, administrative, or fiscal issues related to this NOFO by contacting:

Denis Nikiema
Grants Management Specialist
Division of Grants Management Operations, OFAM
Health Resources and Services Administration
5600 Fishers Lane, Mailstop 10N168B
Rockville, MD 20857
Telephone: (301) 443-8007

Email: DNikiema@hrsa.gov You may request additional information regarding the overall program issues and/or technical assistance related to this NOFO by contacting:

Jacqueline Friedman Kreinik, MS, RN

Project Officer
Attn: Funding Program Geriatric Academic Career Award Program
Bureau of Health Workforce
Health Resources and Services Administration
5600 Fishers Lane, Room 15N128A
Rockville, MD 20857
Telephone: (301) 945-9839
Email: GACAProgram@hrsa.gov

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

Grants.gov Contact Center
Telephone: 1-800-518-4726 (International callers dial 606-545-5035)
Email: support@grants.gov

[Self-Service Knowledge Base: https://grants-portal.psc.gov/Welcome.aspx?pt=Grants](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 \(EHBs\)](#). Always obtain a case number when calling for support. For assistance with submitting in the EHBs, contact the HRSA Contact Center, Monday–Friday, 7 a.m. to 8 p.m. ET, excluding federal holidays at:

HRSA Contact Center
Telephone: (877) 464-4772 / (877) Go4-HRSA
TTY: (877) 897-9910
Web: <http://www.hrsa.gov/about/contact/ehbhelp.aspx>

VIII. Other Information

Technical Assistance

HRSA will hold a pre-application technical assistance (TA) webinar for applicants seeking funding through this opportunity. 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 at <https://bhw.hrsa.gov/fundingopportunities/> to learn more about the resources available for this funding opportunity.

Tips for Writing a Strong Application

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

Technical Assistance

See [TA details](#) in Executive Summary.

Tips for Writing a Strong Application

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

508 Compliance Disclaimer

Note: Persons using assistive technology may not be able to fully access information in this file. For assistance, please email or call one of the HRSA staff above in [Section VII. Agency Contacts](#).